

***NEW YORK STATE
COMPREHENSIVE EMERGENCY MANAGEMENT PLAN***

**HUMAN SERVICES BRANCH ANNEX
MASS CARE SUPPORT
APPENDIX**



**Disaster Preparedness
Commission**

**PREPARED BY THE NEW YORK STATE
DISASTER PREPAREDNESS COMMISSION
HUMAN SERVICES BRANCH**

March 2016

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1. Executive Summary

Within New York State (NYS) planning for sheltering mass care begins locally. As such, NYS Executive Law Article 2-B establishes the responsibility of the local Chief Presiding Officer (CPO) to determine the roles and responsibilities of each local agency for all sheltering activities (e.g. planning, response and recovery). At the State level, agency roles and planning directives are determined by the Disaster Preparedness Commission (DPC) under the coordination of the Division of Homeland Security and Emergency Services (DHSES) and the State Office of Emergency Management (State OEM). The DPC, through the use of focused planning groups such as the State Human Services Committee (HSC) has implemented a directive to support local planning and response activities in sheltering and human needs related issues through the State Mass Care Support Group (MCSG).

In 2015 the State Mass Care Support Plan, an Appendix to the Human Services Annex, was updated in accordance with two key Federal Emergency Management Agency (FEMA) guidance documents, *“Integration of Functional Needs Support Services (FNSS) into General Shelters,”*¹ and *Whole Community Approach to Emergency Management: Principles, Themes, and Pathways for Action.*² These documents provide guidance for States and local jurisdictions to develop sheltering plans and methodologies that better accommodate individuals with access and functional support needs, in all sheltering environments. In addition, *Whole Community Approach to Emergency Management* establishes a renewed focus on individual preparedness and community engagement to enhance community resiliency and security.

The 2015 State Mass Care Support Plan integrated the policies and best practices presented in the FEMA FNSS Guidance Document and incorporated a more logical alignment of the State’s Human Services plans with Federal *Emergency Support Function (ESF) 6: Mass Care*. It also replaced the former General Population Temporary Emergency Shelter, Functional Medical Needs Shelter, and Emergency Food Appendices. This updated Appendix (herein referred to as “the Plan”) will be co-managed under the leadership of the New York State Department of Health (NYSDOH), the State Office of Mental Health (OMH), and the American Red Cross (ARC). The planning work group and operational partners will be comprised of the existing appendix membership including both Federal and State partners, Non-Governmental Organizations (NGO), statewide associations and constituency groups.

The plan is intended to be a dynamic document that will require periodic updating and is written to supplement, not supersede, local and facility based planning where appropriate by addressing the similar planning elements in an effort to ensure consistency and collaboration across all levels of emergency preparedness and response. It is not intended to be rigid; rather it should be regarded as a guide and a resource.

¹ www.fema.gov/pdf/about/odc/fnss_guidance.pdf

² <http://www.fema.gov/library/viewRecord.do?id=4941>

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3. Introduction

3.1 Introduction

The State Mass Care Support (MSCP) Plan (herein referred to as “the Plan”) serves as an appendix to the Human Services Annex, and provides the basis for supporting local jurisdictions with Federal, State and NGO resources for the implementation and sustainment of emergency mass care operations for all populations immediately before, during, and following a disaster. The Plan will be a co-managed under the leadership of NYSDOH, OMH, and ARC. The planning work group and operational partners will be comprised of the existing appendix membership including both Federal and State partners, NGOs, statewide associations and constituency groups.

The Plan cannot provide prescriptive instructions for all disasters and emergencies. Rather it offers information, guidance, and a process for coordinating with the State Mass Care Support Group (MCSG) to obtain available Federal, State and NGO resources for supporting local sheltering and feeding operations; which, when combined with the details of a given event, as well as local expertise and experience, provides an objective framework for addressing a variety of needs that local jurisdictions will be faced with during emergencies.

3.2 Purpose

The intent of the Plan is to define the organization, operational concepts, responsibilities, and procedures of the MCSG for supporting local jurisdictions, as well as to assist in coordinating efforts to provide services and resource support to local mass care operations for populations who are effected by an emergency or disaster, or are seeking protection from an imminent or actual hazardous event or condition.

3.3 Scope

The Plan serves as a framework for outlining the types of State and Federal support and coordination available to local and regional emergency mass care operations for all populations. It provides basic planning assumptions, which should be considered by emergency managers and community decision makers who are obligated under Article 2-B of the State Executive Law to create, obtain and maintain safe and secure temporary emergency shelter and mass care support for residents.

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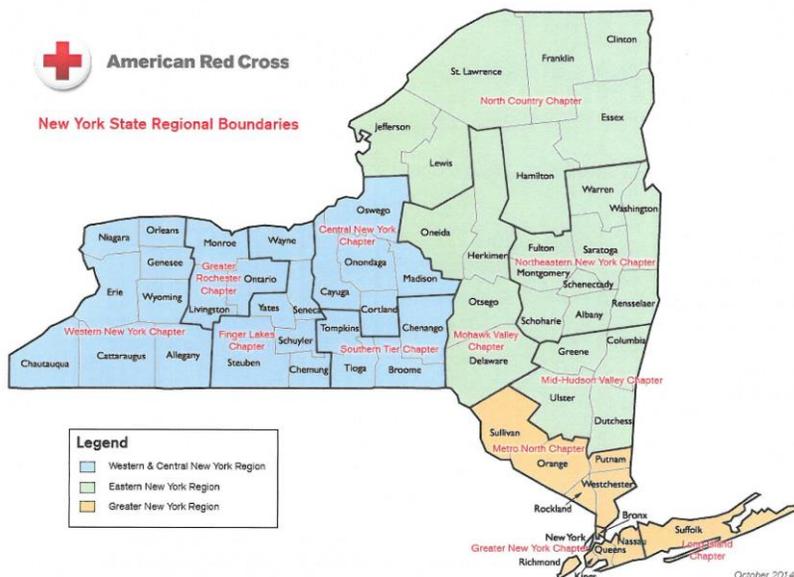
The Plan will serve as guidance for pre-disaster planning, as well as during the response and initial recovery phases of a disaster.

3.4 Administration and Authority

3.4.1 Finance & Related Documentation

- 3.4.1.1 Any and all assets facilitated by the MCSG will be properly documented.
- 3.4.1.2 All documentation will be posted to the original local request in the NYS Responds emergency management system.
- 3.4.1.3 All Federal Assets requiring any state fiscal support or endorsement will be approved ONLY by State OEM or designated Governor’s Authorized Representative (GAR).
- 3.4.1.4 Any and all compensatory or billing issues related to any state assets provided to support a local request will ultimately be approved through the appropriate State OEM command entity (management, logistics, operations) and will be the responsibility of State OEM finance and logistics branches.

3.4.2 Plan Administration – MCSG Coordination



Administration of the State Mass Care Support (MSCP) is provided through the Mass Care Support Group’s (MCSG) Agency Leadership (ARC/NYSDOH/OMH). The MCSG Leaders will maintain this document and its supporting documentation. As the document is updated for any reason, the group leadership will provide updated documentation to State Office for Emergency Management (State OEM), planning group members, as well as Federal partners.

3.4.2.1 American Red Cross (ARC)

ARC (statewide) will provide for individual, family and mass care services for survivors of disaster and also for emergency workers in disaster affected areas. Sheltering may include congregate sheltering or

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depending on the size and scope of the incident, the use of commercial facilities, such as motels and hotels, as shelters for individuals or families.

(The American Red Cross Regional Structure [January 2013])

- *The ARC Regional structure in NYS is broken into three (3) regions which support 12 local chapters. These three (3) regions are supported by the Northeast Division Tea, Disaster Response Management Team and National Red Cross' Operations in Washington D.C.*
- *In the event of a disaster that is greater than the capacity of the region(s) a Disaster Relief Operation (DRO) may be assigned to the event and the Disaster Response Management Team may be deployed. Once a DRO is assigned, it is at this point that national assets including but not limited to personnel and contracts can be used to provide services to clients.*

3.4.2.2

New York State Department of Health (NYSDOH)

NYSDOH is responsible for public health within NYS and derives public health authority through State Public Health Law. NYSDOH, is led by the State Commissioner of Health, and is ultimately responsible for safeguarding the public's health and implementing the State's response to a health emergency.

- *NYSDOH facilitates service delivery in collaboration with local health departments (LHDs), through its Centers, Regional and District Offices.*
- *In the event of a State declared disaster emergency, as outlined in the NYS CEMP, NYSDOH is responsible for the management, coordination, and prioritization of health services and resources to support the health and medical needs of impacted areas and critical infrastructure personnel (e.g. State government, response agencies).*
- *NYSDOH maintains preparedness and response plans designed to supplement and coordinate with existing planning and response efforts of Federal and State emergency planning and response partners*

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- *The agency’s preparedness and response roles are coordinated by Office of Health Emergency Preparedness (OHEP). OHEP manages the traditional functions of ICS (Command, Planning, Operations, Logistics and Finance & Administration) within the Department’s existing system of Offices, Centers, Divisions, Bureaus and other programmatic areas to ensure an integrated and comprehensive response during normal and emergency operations.*

3.4.2.3 Office of Mental Health (OMH)

The Office of Mental Health operates and oversees an extensive network of mental health services and supports that comprise NYS’ public mental health system which serves more than 700,000 New Yorkers annually. This system consists of state-operated services, including: a network of 24 psychiatric hospitals; emergency services; residential services; other support services; and, treatment programs for sexual offenders. OMH also regulates, certifies, and oversees more than 4,500 mental health programs, operated by local governments and nonprofit agencies.

In the event of a State declared disaster emergency OMH supports the DHSES mission through any or all of the following functions:

- *Assess the psychological state of the general population*
- *Providing mental health assistance for survivors and responders.*
- *Support the providers of mental health services to ensure the continuity of care for the mentally ill.*
- *Assist with Crisis and Emergency Risk communication Strategies to reduce anxiety and promote recovery.*
- *Provide facility and/or material assistance.*

3.4.3 Legal Authorities – See Attachment 7.4

3.4.4 Additional Resources

3.4.4.1 Homeland Security Presidential Directive (HSPD) 5, establishing the National Incident Management System (NIMS). See <http://training.fema.gov/EMIWeb/IS/ICSResource/assets/HSPD-5.pdf>

3.4.4.2 **American Red Cross Concept Operations Program Essentials and associated Standards and Procedures.**

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– *American Red Cross New York State Disaster Response Plan 2010*

– *ARC FNSS integration -*

<http://www.dhss.ny.gov/oem/planning/documents/ARC-FNSS.pdf>

3.4.4.3 **The Sandy Recovery Improvement Act of 2013**

A Chief Executive of a federally recognized Tribal Nation may “make a direct request to the President for a major disaster or emergency declaration. The amendment provides that Tribes may elect to receive assistance under a State’s declaration, provided that the President does not make a declaration for the Tribe for the same incident.”

3.4.4.4 **FEMA – Emergency Support Function (ESF) #6 – Mass Care, Emergency Assistance, Housing and Human Services**

“...coordinates the delivery of Federal mass care, emergency assistance, housing, and human services when local, tribal, and State response and recovery needs exceed their capabilities.”

See www.fema.gov/pdf/emergency/nrf/nrf-esf-06.pdf

3.4.4.5 **FEMA - ESF #8 – Public Health and Medical Services**

“... provides the mechanism for coordinated Federal assistance to supplement State, tribal, and local resources in response to a public health and medical disaster, potential or actual incidents requiring a coordinated Federal response, and/or during a developing potential health and medical emergency. The phrase “medical needs” is used throughout this annex. Public Health and Medical Services include responding to medical needs associated with mental health, behavioral health, and substance abuse considerations of incident survivors and response workers. Services also cover the medical needs of members of the “at risk” or “special needs” population described in the Pandemic and All-Hazards Preparedness Act and in the National Response Framework (NRF) Glossary, respectively. It includes a population whose members may have medical and other functional needs before, during, and after an incident.”

See www.fema.gov/pdf/emergency/nrf/nrf-esf-08.pdf

3.4.4.6 **FEMA - ESF #11 – Agriculture and Natural Resources Annex**

“Provides State requested supplemental nutrition assistance through USDA Foods for congregate feeding and for a disaster household distribution and/or Disaster Supplemental Nutrition Assistance Program (DSNAP) ... and provides technical expertise in support of animal and agricultural emergency.

See www.fema.gov/pdf/emergency/nrf/nrf-esf-11.pdf

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- 3.4.4.7 **Americans with Disabilities Act of 1990 (ADA)**
Making community emergency preparedness and response programs accessible to people with disabilities. See <http://www.ada.gov/index.html>
<http://www.ada.gov/emereprepguideprt.pdf>
<http://www.ada.gov/pcatoolkit/chap7shelterchk.pdf>
- 3.4.4.8 **Guidance on Planning for Integration of Functional Needs Support Services (FNSS) into General Shelters**
(FEMA, November 2010).
See www.fema.gov/pdf/about/oddc/fnss_guidance.pdf
- 3.4.4.9 **“Disaster Leave Law”**
Section 82-b of the New York State Civil Service Law provides up to 20 workdays of paid leave without charge to leave credits per calendar year for employees who are certified by the American Red Cross (ARC) as disaster volunteers to participate in specialized disaster relief operations. Requests for the services of such volunteers are made in writing by the ARC to the appointing authority and are subject to the approval of the appointing authority. See <http://www.nysenate.gov/legislation/laws/CSV/82-B>
– *Memorandum of Understanding between the State of New York and the ARC, April 21, 2010 (“in carrying out their assigned responsibilities in the event of a natural or man-made disaster or enemy attack”).*
- 3.4.4.10 **A Whole Community Approach to Emergency Management: Principles, Themes, and Pathways for Action**
(FEMA, 2011)
See www.fema.gov/library/viewRecord.do?id=4941
- 3.4.4.11 **National Mass Care Strategy**, see <http://nationalmasscarestrategy.org/>
<http://nationalmasscarestrategy.files.wordpress.com/2012/10/national-mass-care-strategy-september-2012-final4.pdf>
- 3.4.4.12 **Multi-Agency Feeding Plan Template (MAFPT)**
http://www.fns.usda.gov/sites/default/files/final_multi-agency_feeding_plan_template_april_2010.pdf
- 3.4.4.13 **Pets Evacuation and Transportation Standards Act (PETS)**
This legislation amends the Robert T. Stafford Disaster Relief and Emergency Assistance Act. The amendments specified in the PETS Act are intended to ensure that state and local emergency preparedness operational planning addresses the needs of

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individuals with household pets and service animals following a major disaster or emergency. See <https://www.govtrack.us/congress/bills/109/hr3858/text>

3.4.5 Training and Exercises

3.4.5.6 Recruitment and Training Plan - Additional member agencies and NGOs will be recruited and added to MCSG as needed. This may be identified via after action items, agency change or restructure, and administrative request.

3.4.5.7 In addition to the training recommendations listed in the NYS Human Services Annex in Section 6.7, the following are recommended by the member agencies in the Plan:

- *State Emergency Operations Center Course*
- *NY Responds Incident Management System Training*
- *<http://www.dhSES.ny.gov/training/calendar/>*
- *ADA National Network – Information, Guidance, and Training on Americans with Disabilities Act* See: <https://adata.org/ada-training>

Additional FEMA Independent Study Courses that may be applicable based on role: <http://www.training.fema.gov/emi.aspx>

- *IS-368: Including People with Disabilities and Others with Access and Functional Needs in Disaster Operations*
- *IS-288: The Role of Voluntary Organizations in Emergency Management*
- *IS-403 Introduction to Individual Assistance (IA)*
- *IS-420 Implementing the Emergency Food and Shelter National Board Program*
- *IS-10.a Animals in Disasters: Awareness and Preparedness*
- *IS-11.a Animals in Disasters: Community Planning*
- *IS-366 Planning for the Needs of Children in Disasters*
- *IS-26 Guide to Points of Distribution (POD)*
- *Disaster Resistant Communities Group – JITT – FNSS Sheltering Operations, <http://www.drc-group.com/project/jitt-fnss.html>*

Specific additional training needed for teams and other resources are outlined in the Agency Resource tables later in this plan.

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- 3.4.5.8 All members recruited for MCSG will receive a Plan primer and orientation to appropriate roles and just in time training (JITT) as needed.
- 3.4.5.9 Exercises - The Plan will be periodically exercised as part of a real event, table top or workshop. Individual components may be exercised during regional or statewide events or exercises as requested and scenario dictates.
- *After Action Reports (AAR) will be developed and Improvement Plans (IP) generated. The Plan, resources, and supporting documentation will be revised as needed and reviewed annually.*
- 3.4.5.10 After Action Reporting (AAR) and Improvement Planning (IP)
- *Specific after action improvement efforts as they relate to the Human Services functional branch are outlined in the NYS Human Services Annex.*
 - *Following activations and exercises a formal AAR and Improvement Plan (IP) will be developed by State OEM. If additional specific IP items need to be addressed the MCSG or HSC will designate items and establish an appropriate action plan.*
 - *Modifications will be made as required in accordance with Homeland Security Exercise and Evaluation Program (HSEEP) improvement recommendations established by real events or exercises and drills.*

3.5 Plan Maintenance & Updates

- 3.5.1 The membership will be convened to review and update the plan as follows:
- 3.5.1.1 MCSG Meetings – membership will meet at least annually to discuss agency planning, local planning of support needs, operational projects and strategies, and any issues/opportunities for growth.
- 3.5.1.2 Formal Annual Review – the Plan leadership will convene a review meeting annually (by April 1st) to conduct a brief review of the document for policy changes and/or planning gaps. Inquiries, updates or additional contributions will be assessed and vetted through the Plan membership. If moderate changes are required a timeline for completion and assignments will be established. An annual update will be provided to OEM by no later than January 31.
- 3.5.1.3 New Planning/Operational Directives - If additional planning requirements are directed by State or Federal constituents, full membership or subject appropriate members will be reconvened

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into a planning work group, and a timeline for completion will be established. At such time that new changes are completed, the overall planning group will be reconvened, provided a briefing, and asked to provide comment and changes as needed.

3.5.1.4

Plan Certification - All membership agencies, partnership organizations and associations are responsible for reviewing internal plans and procedures to assure that roles and responsibilities within the Plan align with agency capabilities to provide support and response.

3.5.2 Record of Change – See Attachment 8-1

4. Situation and Assumptions

4.1 Situation Assessment

4.1.1 State Demographics

The demographic statistics provided in this section are based on a summary collection of statistics, and intended to provide high level context for determining where there may be planning and response challenges and are not to be considered absolute factual references. These statistics will be updated as new census data and additional data sources provide updated information.

4.1.1.1 NYS is the third most populous state in the U.S.³

4.1.1.2 New York City (NYC), with a population of 8,491,079 people,⁴ is the most populous city in the U.S.

4.1.1.3 NYS is the only state that touches both the Great Lakes and the Atlantic Ocean. New York's borders touch (clockwise from the west) two (2) Great Lakes (Erie and Ontario, which are connected by the Niagara River); the Canadian Provinces of Ontario and Quebec; Lake Champlain; three (3) New England states (Vermont [VT], Massachusetts [MA], and Connecticut [CT]); the Atlantic Ocean, and two [2] Mid-Atlantic States-New Jersey [NJ] and Pennsylvania [PA]. In addition, Rhode Island (RI) shares a water border with New York.

4.1.1.4 NYS covers 54,556 square miles (land plus water) and ranks as the 27th largest state by size.

4.1.1.5 The Great Appalachian Valley dominates the eastern part of the State; Lake Champlain is the chief northern feature of the valley, which also includes the Hudson River flowing southward to the Atlantic Ocean. The Adirondack Mountains lie west of the valley.

4.1.1.6 General Demographic Overview⁵Statewide population estimate: 19,746, 2276, with a median age of 38.2 years.⁷

– Median income^{8,9}:

³ <http://quickfacts.census.gov/qfd/states/36000.html>

⁴ <http://www.nyc.gov/html/dcp/html/census/popcur.shtml>

⁵ Information from the 2010 Census is currently being compiled for New York State, the information presented here are based on estimates provided at Census.gov.

⁶ [Source: U.S. Census Bureau, 2009 Population Estimates, Census 2000, 1990 Census](#)

⁷ <http://quickfacts.census.gov/qfd/states/36000.html>

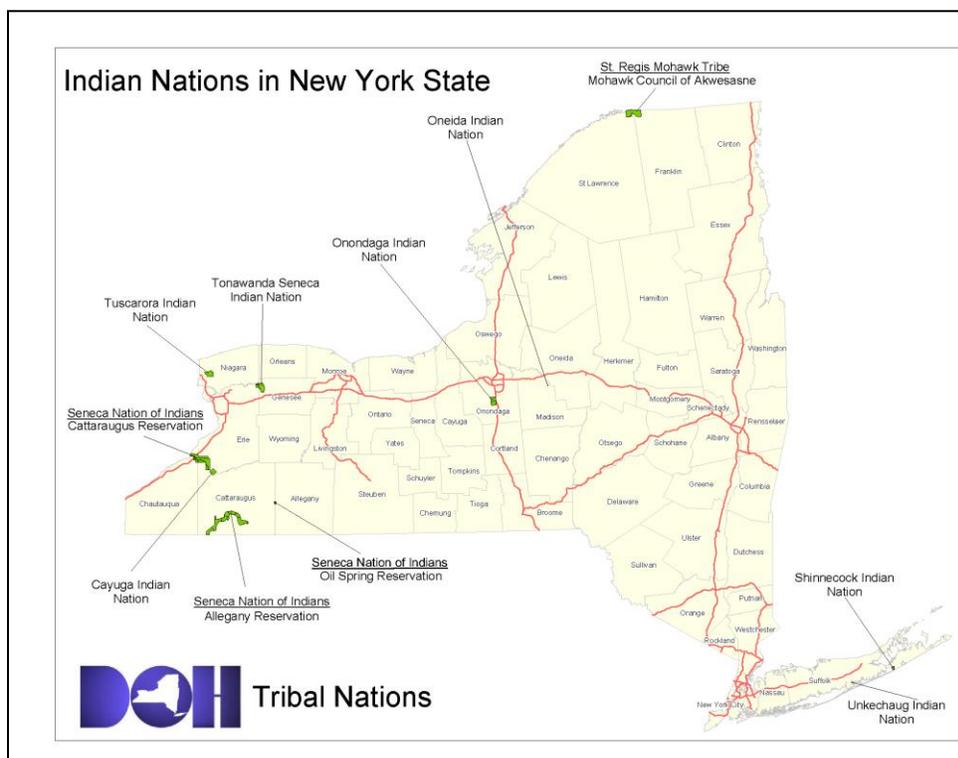
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- Household (2009-2013): \$58,003
- Families: \$69, 052; Non-family households: \$47,790

4.1.1.7

Race/Ethnicity breakdown¹⁰

- *Caucasian: 70.4%; African American: 17.6% ; Asian: 8.5% ; American Indian/Alaska Native: 1.0% ; Native Hawaiian and Other Pacific Islander: 0.1%; Hispanic or Latino 18.6%*
- *Tribal Nations¹¹ – Currently there are eight (8) federally recognized Tribal Nations within NYS:*
 - *Cayuga Nation*
 - *Oneida Nation; Onondaga Nation*
 - *Saint Regis Mohawk Tribe*
 - *Seneca Nation*
 - *Shinnecock Indian Nation*
 - *Tonawanda Band of Seneca Indians;*
 - *Tuscarora Nation*
- *NYS recognized tribe:*
 - *Unkechaug Nation (Not Federally recognized)*



⁸ http://www.justice.gov/ust/eo/bapcpa/20130501/bci_data/median_income_table.htm

⁹ <http://quickfacts.census.gov/qfd/states/36000.html>

¹⁰ <http://quickfacts.census.gov/qfd/states/36000.html>

¹¹ Courtesy of The National Conference of State Legislatures (NCSL) - <http://www.ncsl.org/research/state-tribal-institute/list-of-federal-and-state-recognized-tribes.aspx#s-ny>

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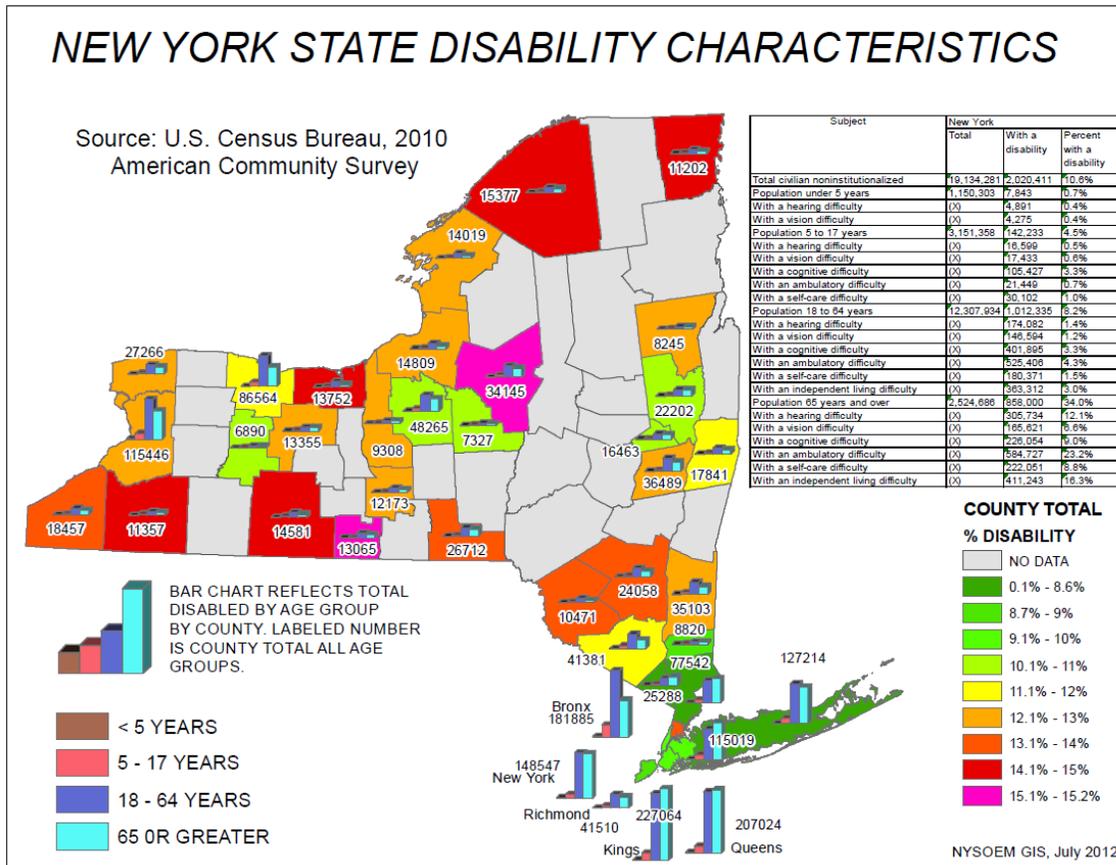
4.1.1.8 Disability Characteristics¹²

Total	Population	Percent of population
Total civilian population	19,316,728	100%
Estimate with a disability	2,099,458	10.9%
Population with disability 5 to 17 years	145,123	4.7%
With a hearing difficulty	15,268	0.5%
With a vision difficulty	18,673	0.6%
With a cognitive difficulty	109,496	3.5%
With an ambulatory difficulty	18,549	0.6%
With a self-care difficulty	28,969	0.9%
Population with disability 18 to 64 years	1,043,603	8.4%
With a hearing difficulty	185,731	1.5%
With a vision difficulty	172,292	1.4%
With a cognitive difficulty	420,953	3.4%
With an ambulatory difficulty	543,684	4.4%
With a self-care difficulty	189,646	1.5%
With an independent living difficulty	370,959	3.0%
Population with disability 65 years and over	900,473	33.8%
With a hearing difficulty	312,478	11.7%
With a vision difficulty	161,706	6.1%
With a cognitive difficulty	232,410	8.7%
With an ambulatory difficulty	613,547	23.1%
With a self-care difficulty	245,282	9.2%
With an independent living difficulty	437,172	16.4%
Annual household income of persons with disability		
<\$15,000		37.5
\$15,000-\$24,999		26.1
\$25,000-\$34,999		24.3
\$35,000-\$49,999		17.9
\$50,000-\$74,999		15.7
≥\$75,000		13.1

¹² http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?_afpt=table

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NYS Disability Characteristics (Chart/Graph provided by State OEM – Last updated July 2012)



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- 4.1.2 **Statewide Sheltering** - Within New York State the ultimate responsibility for planning for temporary emergency sheltering lies with the local jurisdiction and local response partners. As such, New York State has not established a state wide sheltering tracking system. As a lead agency for the Plan, the ARC serves as the primary point of contact for State emergency operations for shelter statistics and information.
- 4.1.2.1 Shelter operations status reports may be requested by County and/or State OEM to assess shelter population needs, as well as for decisions related to shelter consolidation and closure. The frequency of reporting will be based on the magnitude and impact of the emergency. The MCSG will collaborate with partners on any specific reporting needs regarding local sheltering.
- 4.1.2.2 The ***Red Cross National Shelter System (NSS)*** (<https://nss.communityos.org/cms/>) contains information for over 56,000 potential temporary emergency shelter facilities and is used to track and report shelter information during disasters. This powerful tool enables emergency managers and disaster workers to identify the location, managing agency, capacity, current population, and other relevant information of all shelters operated in response to disasters. The NSS information assists the Red Cross, FEMA, State and local emergency management, and NGOs in developing strategies to ensure prompt and effective mass care services.
- 4.1.2.3 New York City (NYC)¹³ is a uniquely large local jurisdiction within NYS, and as is the case with the other jurisdictions, NYC is legally responsible for assuring that its residents have adequate emergency shelter and mass care support. While NYC is typically self-sufficient in its planning, the city may have requests to supplement its response capabilities. NYC conducts robust community education and engagement campaigns to identify and inform residents about emergency and evacuation, this information can be found: <http://www1.nyc.gov/site/em/index.page>

¹³ <http://quickfacts.census.gov/qfd/states/36/3651000.html>

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4.1.3 **Statewide Congregate and Mobile Feeding Capability**

The MCSG – Food Support Unit (FSU) will leverage the use of state agency provided food assets, as well as provide the appropriate subject matter expertise (SME) to advise State OEM regarding the appropriateness and safety of strategic congregate and mobile feeding sites. The FSU is also available to supplement local/county resources when local resources are exhausted and State support is requested.

4.1.3.1 **State Cook-Chill Facilities:**

Office of Mental Health (OMH):

OMH, through its Cook Chill Production Center, can provide ready-to-serve food, typically available in 12 pound units.

Upon notification, various wholesome one-dish meals such as salads, stews and soups can be delivered utilizing its own State trucks. This facility has inventory readily available. If needed OMH Cook Chill Production Center could request support for specialized transportation vehicles through State OEM.

Cook Chill Production Center location:

145 Old Orangeburg Road Orangeburg, NY 10962

<https://www.omh.ny.gov/omhweb/cookchill/>

NYS Department of Correctional and Community Supervision (DOCCS):

– The Cook-Chill program is run by the DOCCS’ Food Production Office of Nutritional Services Food Production Center. DOCCS currently serves approximately 58,000 inmates at 58 State prisons. The Food Production Center has the capacity to prepare 80,000 meals and can prepare a significant amount of ready-to-serve food with little notice.

- Mohawk Correctional Facility – located 6514 Route 26, Rome, NY 13440

Office of General Services Commodity Foods:

- The Office of General Services (OGS) Division of Food Distribution and warehousing orders, receives, stores, allocates, distributes, and monitors all USDA foods received by NYS.
- Use of USDA foods from school resources requires coordination with NYS Education Department.

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- To request the USDA Foods in the warehouses, the State Mass Care Coordinator can work with the State Distributing Agency (SDA), which in NYS is the Office of General Services (OGS). If additional USDA Foods are needed from outside NYS, the SDA can work within ESF11 to request needed items.

4.1.3.2

Voluntary Organizations Fixed & Mobile Disaster Related Feeding Capacity (Voluntary & Federal)¹⁴

Several organizations provide emergency mobile feeding and mobile kitchens and contractible catering services.

- *Primary partners at both the state and federal levels include the following:*
 - American Red Cross
 - The Salvation Army
 - Southern Baptist Disaster Relief
 - Feeding America
 - NYS Regional Food Banks
- *These services will vary based on the disaster scenario and which local partners are engaged in the relief effort. These may include (but are not limited to):*
 - ARC Emergency Response Vehicles (ERVs)
 - The Salvation Army Disaster Response Units (DRUs).
 - Some catering companies and job-site feeding trucks also have mobile delivery vehicles, which should be explored as an option.
- *The MCSG recognizes that there will be local/community based organizations that will initiate independent congregate or mobile feeding and distribution sites. The MCSG will work with local emergency management partners to integrate state level support if requested through the State EOC or the established multi-agency feeding task force.*
- *Mobile Kitchens are vehicles with self-contained kitchen capability including cooking apparatus and can feed independent of other resources.*
 - The Salvation Army canteen
- *Fixed Feeding Sites offer food service delivered from a stationary location which may be permanent facility*

¹⁴ Multi-Agency Feeding Plan Template (4/9/2010) <https://nmcs.communityos.org/cms/files///Final%20Multi-Agency%20Feeding%20Plan%20Template%2041910%20final.pdf>

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(such as a House of Worship or school) or from a mobile kitchen that is both providing meals but also supplying meals to mobile canteens or ERVS, etc.

- *Field Kitchens are tractor trailers or tented (enclosed) kitchens capable of mass food production, they are stationary.*
 - Southern Baptist Disaster Relief Field Kitchens
 - ARC Emergency Response Vehicles (ERVs)
 - The Salvation Army Canteen
 - Feeding America
 - NYS Regional Food Banks

4.1.4 Preparedness and Mitigation

- 4.1.4.1 Preparedness and Mitigation - All levels of Government are responsible for implementing a dynamic community outreach (e.g. media and public information coordination release) campaign prior to and during emergency situations. Materials may include information such as (but not limited to): personal/home and pet preparedness; safety kits; safety tips; emergency communications; maps; emergency telephone contacts; and potential shelter locations and their ability to handle persons with disabilities, functional and cognitive impairments.
- 4.1.4.2 Specific preparedness and mitigation efforts as they relate to the Human Services Functional Branch are outlined in the NYS Human Services Annex. Additionally, extensive mitigation plans for various natural, man-made, technological, and biological events/incidents are outlined in the NYS Comprehensive Emergency Management Plan (CEMP).
- 4.1.4.3 In an effort to mitigate the impact of events/incidents as they relate to mass care the HSC has invested stockpiles of mass care related equipment, durable medical goods, and other resources vital to mass care response.
- 4.1.4.4 Planning - Specific planning efforts as they relate to the Human Services Functional Branch are outlined in the NYS Human Services Annex.
 - *Member agencies included in mass care planning meet and collaborate on a regular basis.*

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4.2 Planning Assumptions

- 4.2.1 “Home Rule” - all disaster response and short-term recovery activities begin and end at the local government level.
- 4.2.2 Local jurisdictions will coordinate initial preparedness and response actions and asset allocation at the local level through the County Emergency Operations Center with local and/or regional partners such as contiguous counties, ARC, and municipal offices.
- 4.2.3 Should pre-designated local disaster shelter sites be destroyed or become inoperable by the disaster, alternate shelter sites will be identified.
- 4.2.4 Shelters are dynamic environments and individuals may transition to different types of shelters during a disaster, depending on individual needs or conditions directly associated with the event.
- 4.2.5 During an emergency, spontaneous unanticipated shelters may open. Spontaneous shelters may not have adequate resources to sustain operations and may need to be assisted with county or State resources.
- 4.2.6 County government has the general responsibility for the provision of security/law enforcement personnel to ensure the safety of the shelter. If the disaster situation is such that the county is unable to meet this responsibility, State and other local resources may be requested and deployed to assist. (See Law Enforcement Group).
- 4.2.7 At such time that a local, city or other municipal official activates or learns of a community-sponsored or other non-ARC temporary emergency shelter, this information should be communicated to County Emergency Management offices. This includes spontaneous unanticipated shelters.
- 4.2.8 Based on the severity of the emergency or event, delays may occur at all levels of government in obtaining resources and supplies to support local sheltering operations.
- 4.2.9 The ARC Chapters in NYS maintain pre-existing shelter and feeding agreements with various public and private building owners throughout the State for use as shelters. The majority of these facilities are public school buildings that are most readily accessible to populations within those communities. Facilities designated as shelters may or may not be equipped with an emergency generator to provide power to critical building systems.
- 4.2.10 If a disaster or emergency exhausts local and State ARC resources, National American Red Cross will deploy support teams through its Volunteer Connection Network as well as activate national agreements for mass care support.

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- 4.2.11 Unaccompanied minors may arrive at shelters. A family reunification process will need to be coordinated in conjunction with local/county social service agencies and/or NGOs.
- 4.2.12 Persons arriving at shelters may arrive with their service animals and/or domestic/companion pets. County government has the general responsibility for developing the capacity to provide appropriate veterinary/companion animal sheltering services during an emergency situation (See Temporary Emergency Animal Sheltering (TEAS) Appendix and the Animal Protection Group).
- 4.2.13 Service animals are not pets; they perform some of the functions that people with disabilities cannot do for themselves. Pursuant to the ADA, a service animal is any guide dog, signal dog, or other animal individually trained to provide assistance to an individual with a disability. While domestic pets are not allowed in ARC operated shelters, service animals are always permitted. Domestic/companion pet rules may vary in non-ARC shelters.
- 4.2.14 Temporary emergency shelters may close in their function as shelters and remain operational as feeding sites.
- 4.2.15 Local and State agencies will work in partnership to conduct comprehensive outreach to affected populations regarding shelter and emergency service locations, as well as restoration of local infrastructure and services. Outreach messages/materials may need to be translated into languages other than English or accessible alternate formats (e.g. Braille, large print, and audible messages, etc.) to ensure the message is understood by the community's population. Consideration will be given to assess the ability of shelters to house individuals that are disabled, have functional or cognitive impairments.
- 4.2.16 Counties are responsible for implementing local chemical, biological, radiological, nuclear explosive (CBRNE) event plans to facilitate assessment, triage and any necessary decontamination/treatment of individuals and pets prior to transport to/or entrance into emergency sheltering or temporary sheltering environment. This includes Community Reception Centers [CRC], temporary warming/cooling centers and feeding sites. If at such time that the County determines there is no appropriate agency to conduct such efforts, State OEM Regional staff will assist in facilitating the appropriate resource requests.
- 4.2.17 Community partners who already support individuals considered at risk, vulnerable, or who have functional or access needs with feeding and other social supports will be included in response operations to assure the needs of these groups are appropriately incorporated. Consideration will be given regarding at-risk individuals due to functional or cognitive impairment. Community partners should be assumed to have capacity to screen individuals in a there shelter if an individual presents with functional impairments that might present challenges to their ability to return to their homes and safely address issues that might arise.

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- 4.2.18 All response efforts will be made to assure that people with access or functional support needs have equal opportunity to receive shelter and feeding services, financial support and information.
- 4.2.19 People with disabilities may require the provision of services within facilities that are accessible under ADA standards¹⁵, including those that have accessible restroom facilities. Service locations should be chosen in consideration of accessible public transportation options. Public information about services should highlight their accessibility.
- 4.2.20 County Government has the general responsibility for the pre-identification of local resources that can provide additional supports at service locations, such as assistance with shelter, facility compliance, food related activities, completing paperwork, and anything else that is required to assure services are inclusive.
- 4.2.21 Individuals and families may have specific needs, as well as other limitations that require additional support, including disabilities, functional and cognitive impairments and dietary needs, which may not be apparent or recognized by the individual at the time of crisis.
- 4.2.22 Pre-disaster homeless individuals may be among those receiving temporary emergency sheltering and feeding services and should be identified (as is possible) and referred to local agencies for additional community support services.
- 4.2.23 Within the disaster area the pre-disaster food processing and distribution capabilities may not exist.
- 4.2.24 During an emergency, spontaneous unanticipated congregate feeding sites may open. Spontaneous feeding operations may not have adequate resources to sustain operations and maintain food safety. These sites may need to be assessed and/or assisted with State, Federal, or NGO resources.
- 4.2.25 Adequate power, water or sewer systems and emergency supplies might not be available, the existing conditions of infrastructure will determine what state assets are allocated to local requests.
- 4.2.26 Food/Feeding missions' requirements will specify availability/delivery/consumption method. (E.g. ready-to-eat prepared food, bulk packaged food to be prepared/consumed onsite, or off site for home consumption).
- 4.2.27 Any feeding missions that are forwarded to the food unit are assumed to be vetted by State OEM Logistics and Operations Branches and approved by State OEM for fulfillment.

¹⁵ ADA "standards" here refers to some situations that may exist that require the modification of a non-ADA compliant structure to meet ADA compliance (based on needs) for use during an emergency event, (e.g. installation of a ramp to make a building more accessible).

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4.2.28 This plan may provide guidance as to state roles and responsibilities in providing resources to local mass care operations; however it does not provide the necessary guidance and/or identified resources for events that are catastrophic in nature. (see NYS Catastrophic Plan- to be developed)

4.3 Definitions

4.3.1 The term “Mass Care” refers to the implementation of sheltering, feeding operations, emergency first aid, bulk distribution of emergency items, and collecting and providing information on survivors to family members.

4.3.2 For the purpose of the Plan, the terms, “shelter” and “disaster/ emergency sheltering” refers to the capacity to provide people affected by a disaster with a safe, temporary place to be housed immediately prior to, during, and after a disaster until they can safely return to their homes, be relocated to long-term sheltering, or permanent housing facilities.

4.3.3 American Red Cross shelter definitions or shelter models.

ROLES AND RESPONSIBILITIES				
	MODEL 1	MODEL 2	MODEL 3	MODEL 4
	Red Cross Shelters	Red Cross / Partner Shelters	Red Cross Supported Shelters	Independently Managed Shelters
Administrative Control	Red Cross	Red Cross	Community Agency	Community Agency
Shelter Operations Expenses	Red Cross	Red Cross	Red Cross Assisted	Community Agency
Adheres to Disaster Code of Conduct	Yes	Yes	Yes	No
Red Cross Branding	Red Cross Only	Co-logo: "In Cooperation with"	"Supported by Red Cross"	None
Liability	Shared	Shared	Shared	Community Agency
Reporting and Communication	Yes	Yes	Yes	No
Agreement to Use	Standard Red Cross Shelter Agreement*	1) Welcome Letter of Agreement 2) Standard Red Cross Shelter Agreement*	Shelter Support Services Agreement for Community Agencies	None

* The standard Red Cross shelter agreement is entitled *Agreement to Permit the Use of a Facility as a Red Cross Emergency Shelter*.

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- 4.3.4 FEMA NIMS typing for Shelters is based on duration required for sheltering¹⁶
- 4.3.4.1 Type I (long-term or mega shelter used for durations typically longer than 2 weeks)
 - 4.3.4.2 Type II (standard short-term shelter used for durations typically not to exceed 2 weeks)
 - 4.3.4.3 Type III (emergency evacuation shelter used for durations typically not to exceed 72 hours)
 - 4.3.4.4 Type IV (temporary evacuation points used for durations typically of several hours)
- 4.3.5 For the purpose of the Plan, the terms,
- 4.3.5.1 **“Feeding” and “congregate” and “mobile”** feeding operations refers to the capacity to provide people affected by a disaster with the goal of providing a safe nutritional, culturally or dietetically appropriate foods immediately prior to, during, and after a disaster until they can safely return to their homes, be relocated to long-term or permanent accommodations.
 - 4.3.5.2 **“Food bank”** refers to an organization that distributes food and grocery products from various sources. A food bank may purchase food from funds provided by government agencies or grants, or it may receive food donated by manufacturers, retailers, or individuals. The food bank is responsible for ensuring that all food and grocery products that it receives and distributes comply with industry and regulatory standards. These products are distributed to charitable human service agencies, which provide the products directly to clients.
 - 4.3.5.3 **“Food pantry”** refers to a nonprofit organization such as a houses of worship or social service agency that receives donated food items that distributes packages of groceries to food insecure people.
 - **“Mobile food pantry”** refers to any program distributing packages of groceries to food insecure individual from a mobile location (vehicle).

¹⁶ http://www.fema.gov/media-library-data/20130726-1853-25045-0284/nic_508_9_draftsheltermanagementteam_20120628.pdf

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- 4.3.5.4 **“Congregate meal site”** refers to any program where a prepared meal is provided in a group setting, such as a soup kitchen or shelter.
- 4.3.5.5 **“Community feeding site” (AKA – “soup kitchen”)** refers to any nonprofit organization such as a houses of worship or social service agency that receives donated food items and provides prepared meals served in a local agency kitchen for food insecure people.
– **“Mobile community feeding” (AKA – “Mobile soup kitchen”)** refers to any program serving prepared meals for individuals experiencing food insecurity from a mobile location (vehicle).
- 4.6.6 Additional definitions related to requests for food or feeding assets
- 4.3.6.1 **Multi-Agency Feed Task Force (MAFTF or FTF)/Group** – is typically convened as a coordinating body to manage Federal and National NGO feeding resources. At such time that a response requires this higher level of coordination, the Food Support Unit (FSU) will provide leadership and facilitation. Coordination protocols and contacts will be established based on the event and will be created and provided as appropriate at such time.
- 4.3.6.2 **Family Pack** - food pack equipped to feed a family of four, will require some assembly and/or preparation.
- 4.3.6.3 **Home Delivered Meals (AKA Meals on Wheels)** - Individually designed service which provides meals to participants who cannot prepare or obtain nutritionally adequate meals for themselves, or when the provision of such meals will decrease the need for more costly supports to provide in-home meal preparation. These meals assist the participant to maintain a nutritious diet but do not constitute a full nutritional regimen. Therefore the maximum number of meals the participant may receive per day is two (2).
- 4.3.6.4 **Meals Ready to Eat (MRE)** – *also referred to as “Shelf Stable Meals* - meal requiring little to no preparation prior to being eaten, similar to Heater Meals.
- 4.3.6.5 **Special Dietary Needs** - any individual with distinct dietary requirements that must be met for health purposes. Examples: renal diet, low sodium diet, soft diet, food allergies etc..
- 4.3.6.6 **Cultural** - people sharing a common and distinctive racial, national, religious, linguistic, or cultural heritage that

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necessitates distinct or unique dietary needs. Examples:
kosher, vegetarian, etc.

4.3.6.7 **In-Home Delivery** - food delivered directly to homes of
those otherwise unable to obtain food.

4.3.6.8 **Fast Food** - inexpensive food prepared and served quickly.
As prepared by McDonalds, Burger King, etc..

5. Concept of Operations (ConOps)

5.1 Command & Coordination

All disaster response and short-term recovery activities begin and end at the local government level. Local governments are responsible for coordinating and managing all response and short-term recovery activities and services, and will utilize all available local resources to accomplish this mission. County and local government emergency management plans, also developed pursuant to Article 2-B of the State Executive Law, coordinate the local government's response within its borders to ensure that all local resources are fully committed prior to requesting assistance from the State. Depending on the nature of an emergency or disaster situation, the activation of the State CEMP may occur at any of the following times:

- Pre-disaster/Pre-event: In anticipation of a response to an impending natural, manmade, or technological disaster; response to a local emergency; or the absence of a State Gubernatorial Declaration.
- Non-declared emergency event: Should an isolated event occur, which is beyond the local capabilities for an adequate response and does not require State intervention, but may trigger some level of ARC and/or individual State agency intervention.
- State Disaster Declaration: The Governor issues a State disaster emergency declaration, which makes the full resources of State agencies available to assist local governments in response and recovery operations.
- Federal Disaster Declaration: The President of the United States issues an "emergency" declaration or a "major disaster" declaration, under Title V of the Stafford Act.

The identification, activation, and operation of temporary emergency shelters in response to an emergency or disaster are primarily the responsibility of county and local officials working in partnership with the ARC.

The MCSG works collaboratively with those agencies or planning groups that provide supplemental support services (e.g. Temporary Emergency Animal Sheltering (TEAS), NYS Department of Agriculture and Markets, Mental Health [OMH], Long Term Housing [HCR], and Disaster Assistance Service Centers/Recovery Centers [OTDA/OCFS]) through the HSC Leadership.

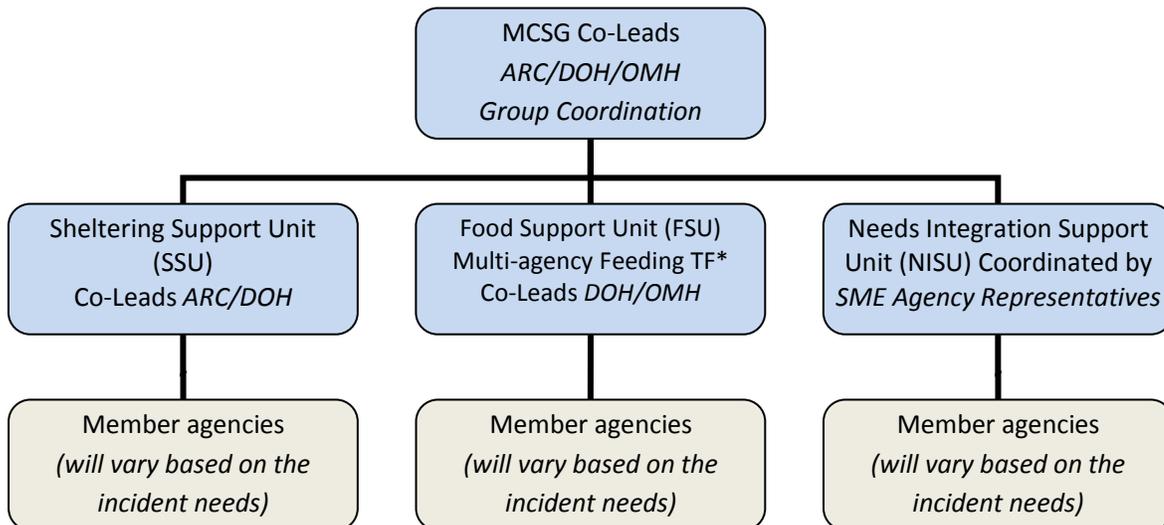
The MCSG works in partnership with the appropriate State OEM Command Staff and sections to validate and facilitate local jurisdiction requests for assistance.

The agencies identified in this plan consist of NYS government personnel and resources as well as NGOs. Each member agency is responsible for developing and maintaining their own internal operational plans, which specify how they will

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carry out their requisite tasks and duties required to meet their obligations under this plan.

5.2 Lead Agency Roles, Responsibilities & Expectations



5.2.1 MMSG Co-Leads – ARC, NYSDOH, OMH

- 5.2.1.1 All co-leads will collaborate with both State OEM and HSC Leadership on any and all actions through all phases of the event.
- 5.2.1.2 ARC and NYSDOH will maintain all group planning materials and inform the MMSG, State OEM and HSC Leadership of any changes to the Plan and/or Plan membership.
- 5.2.1.3 ARC and NYSDOH will initiate any and all notifications to additional members of the MMSG leadership group and membership roster.
- 5.2.1.4 All co-leads will facilitate communications with planning partners such as other State and Federal agencies, NYSVOAD, NGOs, HSC Leadership and State OEM.
- 5.2.1.5 All co-leads will interchangeably function in a leadership capacity as the State Mass Care Coordinator (a recognized NIMS role) for the duration of an event that requires MMSG activation.
- 5.2.1.6 All co-leads will initiate response and demobilization actions in coordination with State OEM and HSC Leadership.
- 5.2.1.7 Depending on the size of the disaster event, a Multi-Agency Feeding Task Force (MAFTF) may be convened and will be comprised of contributing partners to this plan as well as local stakeholders, NGOs, and other voluntary agencies.

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5.2.1.8 All co-leads will coordinate appropriate Federal actions and resources with FEMA personnel deployed to the State EOC and affected local jurisdictions.

5.2.2 MCSG Sub-Unit - Agency Roles, Responsibilities & Expectations

5.2.2.1 **Sheltering Support Unit (SSU)**

The SSU as a sub-group to the MCSG and will be coordinated by ARC and NYSDOH agency representatives to provide the necessary support to affected jurisdictions. This may include (but is not limited to):

- *Working with State OEM Logistics and Operations Branches with the vetting and validating of local requests for support;*
- *Coordinate and implement strategic recommendations for efficient use of partner state, federal and voluntary agency based resources ;*
- *Identify and collaborate with state and federal subject matter experts (SMEs) to provide issue based strategies for interim and longer term support needs;*
- *Work with long term recovery and housing partners to ensure transition of temporary emergency sheltering to interim and long term local, state and federal programs.*
- *Contributing Partners: **see Table 1** - In addition to MCSG Leadership, the SSU member organizations identified below are subject to change based on the size, type and scope of the emergency as well as the existence of state and federal declarations:*

Table 1 - Agency Name	Task/Resource	SME
Agriculture & Markets (NYS DAM)	Pet Sheltering	X
DOCCS	Shelter Assets / Cook Chill	
NYS Justice Center	FNSS / Advocacy & Referral	X
Office for the Aging (SOFA)	FNSS / Food Distribution	X
Office of General Services (OGS)	Shelter Assets / Transportation	
Office of People w. Developmental Disabilities (OPWDD)	FNSS / Facilities	X
Save the Children	Child Care / Pediatric supplies	X
NYSDOH Regional & District Offices	FNSS / EH Assessment Nursing Staff	X
Region II/HQ ESF #6 & 8	Shelter Assets Federal Medical Support Assets Resource Request Form (RRF)	X
State Education Dept. (SED)	Facilities	X
State OEM	Command Branches / (Finance/Logs/Ops) Regional OEM	

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	PIO	
State University of NY	Large Facilities	X
Federal/State VOAD	Service Provision / Feeding	X

5.2.2.2 Food Support Unit (FSU)

The FSU is a sub-group to the MCSG and will be coordinated by NYSDOH and

OMH agency representatives to provide emergency food and support for emergency feeding operations (fixed & mobile) to affected jurisdictions.

This

may include (but is not limited to):

- *Working with State OEM Logistics and Operations Branches with the vetting and validating of local requests for support;*
- *Identify available and most appropriate food assets for local and regional requests; and as necessary (dependent on event size) convene a *Multi-Agency Feeding Task Force¹⁷ and facilitate requests for assets;*
- *Coordinate and implement strategic recommendations for efficient use of partner state, federal and voluntary agency based resources;*
- *Identify and collaborate with state and federal subject matter experts (SMEs) to provide issue based strategies for interim and longer term support needs.*
- *Contributing Partners: Table 2 - FSU member organizations identified below are subject to change based on the size, type and scope of the emergency as well as the existence of state and federal declarations:*

Table 2 - Agency Name	Task/Resource	SME
NYSDAM	Pet Sheltering	X
DOCCS	Cook Chill	
NYS Justice Center	FNSS	X
SOFA	Home Delivered Meals Food Distribution	X
OGS	USDA Foods Transportation	
OPWDD	FNSS	X

¹⁷ *At such time that a Multi-Agency Feeding Group/Task Force must be convened, this will be managed and facilitated by the FSU, supporting state, local, regional and Federal agencies (as applicable) will be encouraged to participate.*

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Region II/HQ ESF #6,8 &11	Food Assets* Resource Request Form (RRF)	X
NYS Food Industry Alliance	Private Vendors	X
State OEM	Command Branches / (Finance/Logs/Ops) Regional OEM PIO	
NYS Food Bank Association	Food Distribution	X
Federal/State VOAD	Fixed/Mobile Feeding Outreach	X

*USDA Food Assets do not require a RRF

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5.2.2.3 Needs Integration Support Unit (NISU)

The NISU as a sub-group to the MCSG and will be coordinated by Subject Matter Expert (SME) State Agency Representatives to provide the necessary support to affected jurisdictions. This may include (but is not limited to):

- *Working with MCSG SSU to vet and validate FNSS or medical assets/expertise requests from local jurisdictions;*
- *Create strategic recommendations for efficient use of agency based resources;*
- *Identify and collaborate with State and Federal SMEs to provide issue based strategies for interim and longer term support needs;*
- *Ensure transitions and need-assessment screenings for individuals with functional and cognitive impairments are carried out appropriately;*
- *Coordinate asset needs and fulfillment with state, federal and voluntary agency partners;*
- *Work state and local SME/program and service providers to ensure transition of temporary emergency sheltering to interim and long term state and federal programs.*
- *Contributing Partners: See Table 3 –NISU member organizations identified below are subject to change based on the size, type and scope of the emergency as well as the existence of state and federal declarations:*

Table 3 - Agency Name	Task/Resource	SME
OTDA	Disaster Case Management Local DSS	X
OMH	Crisis Counseling Program / Local Services	X
NYS Justice Center	FNSS	X
SOFA	FNSS / Local Services	X
OCFS – Commission for the Blind	Visually Impaired / Child Care	X
OPWDD	FNSS / Local Services	X
Region II/HQ ESF #6 & 8	Medical Assets / Medical Personnel Resource Request Form (RRF)	X
NY Medical Equipment Providers Association	Durable Medical Equipment Local Service State Level	X
NYS Independent Living Council (NYSILC)	Regional Centers / Staff	X
Healthcare Association of NYS	Local Providers	X
State OEM	Command Branches / (Finance/Logs/Ops) Regional OEM PIO	
Health & Human Services (HHS) – ESF 8	Federal Medical Support Assets	X

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	RRF	
Home Care Association (HCS)	Local Providers	X
Federal/State VOAD	Fixed/Mobile Feeding Outreach	X
NYS Department of Agriculture and Markets (NYSDAM)	Support for Service Animals State Level	X

6. Response

6.1 Notifications for Group Activation

6.1.1 ARC State Relations Disaster Liaison (SRDL)

The ARC maintains a State Relations Disaster Liaison (SDRL) on site at State OEM and this individual as a lead member of the MCSG will also serve as the first and primary contact for activating the group leadership and membership as directed and in close coordination with State OEM and HSB Leadership.

6.1.2 Back-up/Secondary Notifications for Group Activation:

NYSDOH maintains two (2) staff that serve as the department’s Human Services Coordinators, who are also members of the NYSDOH OHEP program.

If the ARC SRDL is unavailable to issue group activation the NYSDOH Human Services Coordinator(s) will initiate notifications to the MCSG group as directed and in close coordination with State OEM and HSC Leadership.

6.1.3 HSB Leadership

The HSB chair or designee may also initiate notifications for activation of any and all HSB groups.

This may occur for information sharing or in the case of a “notice” event.

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6.2 General Activation Sequence: State EOC Activation Levels and MCSG Operational Timeline:

Level 3	Level 2	Level 1	Demobilization
OEM staffing 8A to 8P w/potential to transition to a 24HR staffing pattern. All DPC agencies are alerted, appropriate agency liaisons may staff a Situation Room. OEM staff will work closely with DPC agencies develop a state of situational awareness and establish a ready posture	State EOC staffed by State OEM 24/7 (8A to 8P/8P to 8A). DPC agencies are required to staff the State EOC; all agencies present are able to assist with requests for technical support and resource assistance. <i>Note: Potential branch or group activation depending on the scenario</i>	State EOC staffed by State OEM 24/7 (8A to 8P/8P to 8A). DPC agencies are required to staff the State EOC; all agencies present are able to assist with requests for technical support and resource assistance. Information is gathered for submission to FEMA for possible federal assistance, or mobilization of Federal resources. Federal elements may also be co-located within the State EOC. Decision-level OEM staff is available at the State EOC at all times.	As conditions improve, the emergency activation status shall be reduced accordingly until normal operations return.

6.2.1 General Initial Actions:

- 6.2.1.1 Notify MCSG membership
- 6.2.1.2 Establish request for agency staffing and/or support
- 6.2.1.3 Establish daily/periodic MCSG communications and reporting w/HSB, state, and local partners
- 6.2.1.4 If a federal declaration is pending or exists – establish communication parameters with federal and other national partners

6.2.2 General Ongoing Actions

- 6.2.2.1 Maintain appropriate agency staffing and/or support
- 6.2.2.2 Maintain daily/periodic MCSG communications and reporting w/HSB, state, and local partners

6.2.3 Identify opportunities for demobilization of state and federal assets

6.2.4 Work with interim and long term housing and individual recovery agencies (Homes Renewal, OTDA, Office of Children and Family Services [OCFS]) to transition into long term recovery

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6.3 “Notice” Events - by State EOC Activation Level

Level 3	Level 2	Level 1	Demobilization
<p>Command/Control:</p> <ul style="list-style-type: none"> - MCSP Leads initiate MTG/ Con Call - Create EOC Staffing and Group Comm. Plan, distribute <p>OPS:</p> <ul style="list-style-type: none"> - County Con. Call - Review SOEM managed assets w/Logs - Request SOEM Region Reps to facilitate contact with counties to establish HS/Mass Care Contacts 	<p>Participate MCSP Group MTG</p> <p>Update staffing/comm. plan</p> <p>Participate in County Call (assess anticipated needs)</p> <ul style="list-style-type: none"> - Con. Call w/FEMA & ARC DRO - ESF 6/8 – identify resources for Fed. RRF <p>Requests</p> <ul style="list-style-type: none"> - Begin coordination w. SOEM - Logs & ARC DRO (NY Responds) <p>Develop recommendations for contract use/Fed requests Continue coordination of request w. Logs & ARC DRO (NY Responds)</p> <p>Evaluate need for Multi-Agency Feeding Task Force (MAFTF)</p>	<p>← In addition to Level 2 activities, these additional actions may be implemented or occur:</p> <p>SSU/FSU and NISU (units) – Begin OPS</p> <p>Initiate daily MSCP Group Meeting (1/day) Group and/or conduct daily con. call by OP period</p> <p>Food (F) Leads – Begin OPS - Initiate Multi-Agency Feeding Task Force</p> <p>Frequency change (1/OP Shift)</p> <p>Meet (con. call) with ESF/DRO reps</p> <p>Begin to vet additional requests from counties</p> <p>Integrate daily communication into group conference calls by OP and as needed.</p> <p>Activate MAFTF</p>	<p>At such time that the State EOC deactivates or the HSB or MCSG are notified that the incident events have slowed, the group will release from duty any agency members</p>

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6.4 “No Notice” Events - by State EOC Activation Level

Level 3	Level 2	Level 1	Demobilization
<p>Command/Control: - MCSP Leads initiate MTG/ Con Call - Create EOC Staffing and Group Comm. Plan, distribute</p> <p>OPS: - County Con. Call - Review SOEM managed assets w/Logs</p> <p>- Request SOEM Region Reps to facilitate contact with counties to establish HS/Mass Care Contacts</p>	<p>Convene immediate MCSP Group MTG</p> <p>Create and distribute staffing/comm. plan</p> <p>Participate in County Call (assess anticipated needs) - Con. Call w/FEMA & ARC DRO - ESF 6/8 – identify contracts for Fed. ARF</p> <p>Requests - Begin coordination w. SOEM - Logs & ARC DRO (NY Responds) Develop recommendations for contract use/Fed requests Continue coordination of request w. Logs & ARC DRO (NY Responds)</p> <p>Evaluate the need for the Multi-Agency Feeding Task Force, initiate if needed.</p>	<p>← In addition to Level 2 activities, these additional actions may be implemented or occur:</p> <p>Sheltering (S)& FNSS Leads – Begin OPS</p> <p>Initiate daily MSCP Group Meeting (as needed) Group and/or conduct daily con. call by OP period</p> <p>Food (F) Leads – Begin OPS - Initiate Multi-Agency Feeding Task Force</p> <p>Frequency change (1/OP Shift)</p> <p>Meet (con. call) with ESF/DRO reps</p> <p>Begin to vet additional requests from counties</p> <p>Integrate daily communication into group conference calls by OP and as needed.</p>	<p>At such time that the State EOC deactivates or the HSB or MCSG are notified that the incident events have slowed, the group will release from duty any agency members</p>

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6.5 Coastal Storm/Hurricane Season Operational Timeline – (also available as separate attachment)

COASTAL STORM/HURRICANE SEASON –NYS MASS CARE SUPPORT OPERATIONAL TIMELINE **UPDATED DEC. 2013**

State EOC Activation Levels								
Level 3		Level 2			Level 1			
144-120 HRS → Ongoing monitoring - Executive decision activate to Level 3. - 1st IOC Group meeting - Decision to implement Level 3 EOC Activation by 120 Hours (HRS)		IOC Group will continue to meet → Locals Con. Calls initiated → Pre-Landfall Dec –Executive			IOC Group will continue to meet → Principals meetings continue → Local Conference Calls continue DAILY			
NLT 120 HRS → - Agencies/Branch Leads@ SEOC, Days/12-hour - Initial Principals Mtg/Executive discussion.		NLT 96 HRS → - SEOC@12 or 24-hour Ops. - All Branches fully staffed; - Preposition supplies; - Assemble/deploy teams			NLT 72 HRS → - SEOC @ 24/7 Op: ALL Branches/DESKS - Last chance to preposition and deploy. - Provisions to implement a JIC.		48 HRS → - Executive decision (Declaration) - Transportation assessment/dialogue. - Pre-deployed resources arrive @local - Assess/assemble/push EMAC requests.	
144 → 120 HRS		120 → 96 HRS			72 → 48 HRS		48 → 36 → 24 HRS	
County Activities	144 HRS → New York City/Nassau/Suffolk/ Westchester Standard contact and coord. w/State and neighboring OEMs. NWS Upton weather call.	NYC	Monitor	Activate special needs shelters.	SOE Declared, evacuation order,	ALL LOCAL SOE'S Declared	Targeted evacuation Ops. (FDNY).	Evac and sheltering of gen. pop for surge zones, secure shelters
		Nassau	Monitor	initial mass care provisions	contact schools.		SOE declared, evac order for sp. Needs	complete evac operations
		Suffolk	Monitor	Monitoring, alerts, briefings.	ARC- shelters; Fire Is. Evac.		SOE declared, Gen pop evac of remaining areas.	
		West.	Monitor; begin evacuation if Cat 3	Begin mass care prep	Mass care readiness,		SOE declared, evac for sp. needs.	
Statewide and National Red Cross Activities:								
Red Cross Activities	Alert all impacted chapters. Contact local/State OEM Call down of human resources Inventory of equipment and assets	-Statewide coordination call. -Call to National Red Cross Disaster Operations Center. -Request a National Disaster Relief Operation (DRO)#/Ldrshp Team -Start the request process to fill gaps w/Natl assets -Reach out to local/State OEM -Staff EOC's as they open.	-Requests for pre-landfall assets COMPLETE -DRO Leadership Team arrives -Test Generators -Activate COOP(s). -Continue coordination w/OEM and staff EOCs.	-Full integration of State Coord. Team into the National DRO Ldrshp Team. -W/County OEM to activate shelters, feeding plans, agreements. -Coordinate with local community partners and collaborate with State Partners.	-Continue response activities: Sheltering, Feeding, EOC staffing. -Continue to deploy incoming staff to assigned regional locations. -Begin discussion of resources needed for post landfall service delivery.	-Continue response activities with limited staff movement. -Ensure resources/preparations are in place to continue/begin mass care immediately post landfall. -Continue coordination/collaboration with partners.		
Mass Care Support Group actions: (upon notification and activation by either Function Branch Lead Agency or State OEM)								
Command/Control:	- MCSP Leads initiate MTG - Create EOC Staffing and Group Comm. Plan, distribute	- MCSP Group MTG - Update Staffing/Comm. Plan →	→	Sheltering (S) & FNSS Leads – Begin OPS - Daily MSCP Group Meeting (1/day) →	-Food (F) Leads – Begin OPS → continue as needed →	- F& S Groups Continue OPS (24/7_) → Frequency change (1/OP Shift) →		
OPS:	- County Con. Call - Review SOEM managed assets w/Logs - Request SOEM Region Reps to facilitate contact with counties to establish HS/Mass Care Contacts	→ Participate in County Call (assess anticipated needs) - Con. Call w/FEMA & ARC DRO - ESF 6/8 – identify contracts for Fed. Requests - Begin coordination w. SOEM Logs & ARC DRO (NY Responds)	→ assess anticipated needs → continue as needed - Develop recommendations for contract use/Fed requests - Continue coordination of request w. Logs & ARC DRO (NY Responds)	→ assess ongoing needs - Meet (con. call) with ESF/DRO reps - Begin to vet additional requests from counties	→ Group Con. Call by OP period → assess ongoing needs → Integrate daily communication into group con. calls by OP and as needed. → Vet requests as needed	→ and as needed to deal with issues → assess ongoing needs → continue as needed → Vet requests as needed		

ACRONYMS→(Con. Call) Conference Call; (Comm) Communications; (Dec) Declaration; (DRO) American Red Cross Disaster Relief Operations; (ESF) Emergency Support Functions [Federal]; (F) Congregate & Mobile Feeding Ops; (FNSS) Functional Needs Support Services Ops; (HRS) Hours; (HS) Human Services; (IOCG) Interagency Operations Coordination Group; (JIC) Joint Information Center; (MCSP) Mass Care Support Group [AKA “us”]; (MTG) Meeting; (NLT) No Later Than; (NRCC) National Response Coordination Center; (OPS) Operations; (RACES) Radio Amateur Civil Emergency Services; (RRCC) Regional Response Coordination Center [Federal]; (S) Sheltering Ops; (SEOC) State EOC; (SOE) State of Emergency [can be Local or State].

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6.6 Local/Regional Requests for Mass Care Support

6.6.1 During a State EOC activation requiring mass care support the MCSG will serve as the designated “State Mass Care Coordinator.”

6.6.1.1 If possible, a daily point of contact will be established for each operational period.

6.6.2 The MCSG/State Mass Care Coordinator will request a local point of contact from the State or Local Office of Emergency Management(OEM)) to act as primary Local Mass Care point(s) of contact.

6.6.2.1 Based on the locally established roles and responsibilities, local point(s) of contact should be pre-identified. The following agencies are commonly used in mass care related activities, however this may change based on region, scope of the disaster, or type of scenario:

- *Local Office of Emergency Management (OEM)*
- *American Red Cross Region*
- *Department of Social Services (DSS)*
- *Local Department of Health (LHD)*
- *Local VOAD*
- *Or other agency as designated by the county*

6.6.2.2 ARC will directly coordinate with local entities through their system of ARC Regional Emergency Services Directors and State Mass Care Leads

6.6.3 Management of Local Requests

6.6.3.1 Routine types of assistance requests:

- *Emergency food or feeding assets to support local feeding operations.*
- *Emergency shelter assets such as cots (regular, medical, or special needs), blankets, bedding, assistive devices (walkers, wheelchairs, communications), personnel, medical and nursing volunteer staff.*
- *Emergency food or shelter assets for state/local critical staff.*

6.6.3.2 Accepted avenues for requests:

- *A request from County to State EOC through State OEM NY Responds.*
- *A request from State OEM to support other State response actions.*

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- *Any request received through any other means or communications will be re-directed to the appropriate County/local EOC for proper facilitation*
- *At such time that a local request for assistance requires additional clarification or broader coordination with multiple agencies, a member of the MCSG (SSU, FSU, NISU) may reach out to the requestor to clarify any additional information required.*

6.6.3.3 The MCSG coordinates support for local operations in close coordination with other State functional groups and branches, most commonly:

- **Mental health** support services are included in all ARC shelter operations, if additional services are requested by a county; the SSU will collaborate with the HSB Mental Health Group through the Human Services Mental Health Appendix.
- **Local companion animal and pet sheltering** is supported in whole or in part by local county resources, if at such time a county requires additional state support, these requests should be coordinated by the NYS Department of Agriculture and Markets through the State CEMP Animal Protection Annex -Temporary Emergency Animal Sheltering (TEAS) Appendix.
- **Medical Shelters/Alternate Care Facilities** are implemented locally, if at such time counties require state or federal assets to support medical sheltering or alternate care sites/facilities, these requests will be coordinated by the State DOH through the *State CEMP Public Health and Medical Annex*.

6.6.3.4 To ensure that needs are met and coordination is well collaborated, the MCSG may:

- *Request assistance of State OEM Regional offices to facilitate communications or coordination with local entities*
- *Request assistance through contributing partner agencies local points of contact*

6.6.3.5 Large and/or long term requests may require multiple resources and require multi-agency coordination.

6.6.4 State Assets

6.6.4.1 All appropriate DPC agencies and supporting partnerships will be surveyed for the availability of assets to support local requests.

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- 6.6.4.2 DOCCS/OGS/OMH – are key partners in securing sheltering and feeding and other material and transportation assets.
- 6.6.4.3 **SSU** – additional resources that may be provided to support local operations – upon local request and approval by HSB and State OEM Logistics staff: (includes but is not limited to)
- *HSB manages mobile trailers that house a stockpile of key human services resources, which can be pre-staged or deployed at the request of a county. These trailers include:*
 - *Medical and Functional Needs Cots*
 - *Durable Medical Equipment such as wheelchairs, and walkers*
 - *Kits for creating child-friendly spaces*
 - *Privacy equipment*
 - *DOH/ServNY – is a volunteer management system capable of surveying registered volunteers and deployment of medical and non-medical staff to support sheltering efforts and other local health response (as appropriate for licensure).*
 - *DOH Regional and District Office Staff can assist local jurisdictions with conducting medical needs and environmental health assessments.*
 - *ARC will coordinate national volunteers, equipment and support services*
 - *MSCG will coordinate with the Temporary Emergency Animal Sheltering Task Force regarding care and support of companion and service animals*
- 6.6.4.4 **FSU**
- *Feeding Support Needs Assessment (Att. 7.6 also excel spreadsheet) will be used to coordinate large or regional feeding needs. The template is based on the severity of the emergency, the census data in the affected area, and provides a basis for securing assets.*
- 6.6.4.5 **NISU**
- *The NISU will coordinate with statewide and local partners to facilitate resources to match local requests for support and subject matter expertise.*
 - *The NISU may also provide assistance with triaging acute situations and issues that require multi-agency assistance.*

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6.6.5 Federal Support (ESF#6/#8/#11) for State/local requests¹⁸:

- 6.6.5.1 At such time that Federal Resources are requested and become available, all local requests will be analyzed and vetted with the appropriate State partners. Proposed solutions will only be communicated in State/FEMA partnership to local entities to ensure continuity for future replenishment, demobilization, and continuity of State operations into the recovery phase.
- 6.6.5.2 FEMA Operations/Recovery groups will provide appropriate liaisons to the MSCG and units to assist with the coordination and identification of any Federal Assets to support local requests.
- *This may include (but is not limited to):*
 - *ESF #6-Mass Care Specialist/Liaison;*
 - *ESF #8-Public Health & Medical Liaison;*
 - *FEMA Voluntary Agency Liaison (VAL);*
 - *Transitional Sheltering Assistance Program/Liaison;*
 - *Individual Federal/NGO Asset Representatives (ESF#11 Agriculture and Natural Resources, U.S. Health & Human Services-ACF, Feeding America, etc.);*
 - *FEMA Logistics/Operations – Points of Dispensing (POD) coordinator or program representative.*
 - *These FEMA & Agency liaisons will ensure that all FEMA Division/ Branch field information is communicated to the MCSG and unit leads.*
- 6.6.5.3 FEMA Volunteer Agency Liaisons (VAL) can assist in the coordination and communication of NGOs included in the current response and recovery efforts, including but not limited to feeding and sheltering operations.
- 6.6.5.4 The State can request FEMA Individual Assistance – Technical Assistance Contracts (IA-TAC) to deploy and provide a variety of mass care assets that are fully customizable depending on the needs of the local jurisdiction, examples:

¹⁸ Federal support will only be available when requested by the State and approved via a Presidential Major Disaster Declaration; at such time that resources have been approved the State will request resources, Federal and NGO participation as required by the Event.

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- *FEMA Logistics Commodity list - distribution of emergency supplies (including but not limited to inventories of water, shelf-stable meals, blankets and Infant and Toddler Kits.*
- *Soft-Sided Sheltering: provides for “turn-key” contractor established and operated shelter facilities for up to 5,000 per facility.*
- *Mass Care Support Cell: provides for “turn-key” contractor established and operated bulk distribution & feeding delivery in a “drive-thru” setting for up to 5,000 people per facility.*
- *Shelter Staffing Support: provides for the rapid recruitment, training and deployment of contract staff to augment existing shelter operations.*
- *Warehouse Support – Shelters: provides for “turn-key” contractor established and operated field warehouse to receive, store, inventory and re-distribute emergency commodities to shelters operating in the affected area.*
- *Warehouse Support – Kitchens: provides for “turn-key” contractor established and operated field warehouse to receive, store, inventory and re-distribute food items to third-party kitchens (i.e., VOAD) operating in the affected area. Also provides for “wrap-around” services such as bulk water delivery, waste-water disposal, sanitation facilities, fuel and other logistical support items.*

6.6.6 Coordination with Tribal Nations

- 6.6.6.1 During an emergency event or disaster that affects a Tribal Nation located in NYS, the Tribal Nation’s Emergency Management Program will direct and coordinate disaster operations and enact response policies and procedures.
- 6.6.6.2 The Nation will respond to extraordinary events or disasters from preparation through recovery. Large scale emergency situations may exceed the capacity of the Nation’s resources, or require an extended commitment of personnel and assets.
- 6.6.6.3 Tribal Nations may need to request assistance or from outside agencies and jurisdictions, such as Federal, State, County, or non-government (NGOs) entities, as well as enact previously established Mutual Aid Agreements (MAAs) and/or Understanding (MOUs).

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- 6.6.6.4 During an emergency event, a Tribal Nation may consider it necessary to coordinate with multiple agencies for a variety of needs. *See also Table 4 – next page.*

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Table 4 - Triaging guidance for working with the Tribal Nations:

During an emergency event or disaster a Tribal Nation may....	
Nation's Action	How Mass Care can best support Tribal Nations
Reach out at a Federal level to request an Emergency Declaration* under the Stafford Act	Work with State OEM Regional Emergency Services Directors for Tribal communications and situational awareness. Request support from FEMA for a Federal Tribal Liaison
Request assistance from New York State, in accordance with a government-to-government relationship. The request could go directly to the Governor's office, to the State OEM headquarters (Albany, NY), or through the regional offices).	State OEM should inform Human Services Branch and/or Office of Health Emergency Preparedness (OHEP), Border Health Coordinator, who may work with state and federal partners to complete an assessment of need in order to determine what assets will best fit the needs of the Nation.
Contact the Emergency Management Director in the contiguous counties to request assistance.	Establish a line of communication with counties to assess if Human Services Branch or OHEP Border Health Coordinator could play a role in the Tribal Nations requests for assistance. Be aware that State and county are not overlapping in efforts to assist, unless redundancy is needed.
Enact previously established Mutual Aid Agreements (MAA) and Memorandums of Understanding (MOU).	These may be set up with adjacent counties or non-government agencies. Though these circumstances are not common they could happen and could require some legal review to enact the agreements.
Reach out to local NGOs, (ex: ARC chapters to set up their own shelters).	Support ARC or NGO needs through coordination with State and Federal VOAD and the ARC Disaster Recovery Operation (DRO).

7. Recovery

7.1 Emergency Shelter and Feeding Transition to Interim and Long Term Recovery Resources

7.1.1 All efforts will be made to transition from the state's support to shelters and feeding operations back to local and county emergency response partners and/or work to merge spontaneous shelter operations with pre-identified shelter locations. This will improve efficiency in providing services, communications, and conditions.

7.1.2 The MCSG will work closely with the following State Human Services and local recovery groups:

- 7.1.2.1 State/Federal Disaster Recovery Center (DRC)/Disaster Assistance Service Center (DASC) group
 – *Provide center location and FEMA registration information*

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- *FEMA shelter registration teams*
- *Identify acute issues that may require specific or additional assistance*

7.1.2.2 Interim/Long Term Housing

- Work with FEMA to ensure a successful transition into short term interim housing programs such as the FEMA Transitional Sheltering Assistance (TSA)
http://www.in.gov/dhs/files/dad_trans_sheltering_asst.pdf
- Consideration should be given to the development of a screening process for individuals who may be at risk due to functional or cognitive impairments, to determine if they require extra assistance to return safely home.

7.1.3 Work with NYS Homes and Community Renewal (HCR) to ensure that individuals in shelters receive information and are able to register or apply for individual funding resources.

- 7.1.3.1 Disaster Case Management (DCM) & Crisis Counseling Programs (CCP)- working closing with State OEM, OTDA and OMH, the MCSG will ensure appropriate information and resource availability will be shared with local sheltering partners to provide to affected individuals and families.
- Consideration should be given to the development of a screening process for individuals who may be at risk due to functional or cognitive impairments, to determine if they require extra assistance to return safely home.

8. Attachments

Attachment 8-1	Record of Change
Attachment 8-2	Acronyms
Attachment 8-3	Reserved for Membership Contact Roster
Attachment 8-4	Legal Authorities
Attachment 8-5	Vulnerable, At Risk, Functional or Access need based support for Local Mass Care Operations
Attachment 8-6	FSU Standing Operating Procedure (SOP) A.) Pre-disaster State Feeding Resources B.) USDA Commodity Foods Letter C.) Ordering Protocols D.) ARC Standard Serving Sizes E.) Kosher/Special Dietary Needs & MRE Vendors F.) MCSP Feeding Support Needs Assessment Template
Attachment 8-7	Points of Distribution (PODs) Locations Summary Template
Attachment 8-8	Glossary of Member Agencies

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Attachment 8.1 – Record of Change

Nature of Change	Date of Change	Page(s)	Changes made by:
Updated cover dates	1/12/16	Cover	DOH
Updated executive summary to remove outdated language	1/12/16	2	DOH
Updated TOC to reflect internal changes	3/28/16	3	DOH
Reordered content to better reflect standard planning format and alignment with Human Services Annex	3/28/16	Throughout	DOH
Updated links in Additional Resources and Training sections	1/12/16	7-11	DOH
Updated demographics in Situation and Assumptions	1/12/16	12-15	DOH
Updated language throughout based on partner reviews. Changes provide clarity but do not change content	3/26/16		DOH
Added content from <i>NYS Planning Guidance for Integrating Access and Functional Needs</i> to previously undescribed Access and Functional Needs section. Text was approved by OEM / DHSES in August 2016 as part of an AFN training sponsored by OEM.	3/28/16	52-65	DOH

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Attachment 8.2 – Acronyms

Agency acronyms are not included; see Attachment 8.8 – Glossary of Member Agencies

Acronym	Long Form
AAR	After Action Report
ADA	Americans with Disabilities Act
CBRNE	Chemical, Biological, Radiological, Nuclear Explosive (event)
CCP	Crisis Counseling Program
CEMP	Comprehensive Emergency Management Plan (State/Local)
CMS	Consumable Medical Supplies
CPO	Chief Presiding Officer
CRC	Community Reception Centers
DCM	Disaster Case Management
DHS	Department of Homeland Security (Federal)
DHSES	Division of Homeland Security and Emergency Services
DMAT	Disaster Medical Assistance Team
DME	Durable Medical Equipment
DOC	Disaster Operations Center (ARC)
DPC	Disaster Preparedness Commission
DRO	Disaster Relief Operation (ARC Designation)
DRU	Disaster Response Units (Salvation Army)
DSNAP	Disaster Supplemental Nutrition Assistance Program
EMAC	Emergency Management Assistance Compact
EOC	Emergency Operations Center
ERV	Emergency Response Vehicle (ARC)
ESF	Emergency Support Function (Federal)
FEMA	Federal Emergency Management Agency
FMS	Federal Medical Station
FNSS	Functional Needs Support Services
FSU	Food Support Unit (State MCSP)
FTF	Feeding Task Force
GAR	Governor’s Authorized Representative
HHS	Health and Human Services
HSB	Human Services Branch (State)
HSC	Human Services Committee (State)
HSEEP	Homeland Security Exercise and Evaluation Program
IA	Individual Assistance
ICS	Incident Command System
IP	Improvement Plan
JITT	Just in Time Training
LTR	Long Term Recovery
MAA	Mutual Aid Assistance
MAFTF	Multi-agency Feeding Task Force
MCSG	Mass Care Support Group (State)

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Acronym	Long Form
MCSP	Mass Care Support (State Plan)
MERC	Medical Emergency Response Cache (State-NYSDOH)
MOU	Memorandum of Understand
MRC	Medical Reserve Corps
NGO	Non-Governmental Organizations
IMS	National Incident Management System
NISU	Needs Integration Support Unit (State MCSP)
NRF	National Response Framework (Federal) National Recovery Framework (Federal) National Reunification Framework (Federal)
NSS	National Sheltering System
NYC	New York City
NYS	New York State
OEM	Office of Emergency Management (State/Local)
OP	Operational Period
OPS	Operations
PA	Public Assistance
PAS	Personal Assistance Services (FEMA Resource)
PHS	Public Health Service
POD	Points of Distribution (FEMA/State/Local)
ROC	Regional Operations Center
SRDL	State Disaster Relations Liaison (ARC)
ServNY	NYS Volunteer Management System (managed by NYSDOH)
SME	Subject Matter Expert
SOE	State of Emergency (Local/State)
SOU	Statement of Understand
SOW	Scope of Work
SSU	Shelter Support Unit (State MCSP)
TEAS	Temporary Emergency Animal Sheltering (State)
TSA	Transitional Sheltering Assistance (FEMA Program)
VAL	Voluntary Agency Liaison (FEMA)
VOAD	Voluntary Organizations Active in Disaster

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Attachment 8.4 – Legal Authorities

See also NYS Human Services Annex – 1.3 Authorities, References, and Guidance

Authority	Description
New York State Executive Law – Article 2-B	State and Local Natural and Man-Made Disaster Preparedness - Article 2-B establishes the State Disaster Preparedness Commission (DPC) and governs State and local natural and man-made disaster preparedness. It affirmatively establishes the State’s policy that local government and local emergency service organizations must serve as the first line of defense in times of disaster.
Exec. Law § 24	In the event of a disaster, the chief executive of a municipality is authorized to proclaim a “local state of emergency.” The chief executive may then promulgate local emergency orders to protect life and property. Such orders may include, but are not limited to: i. Establishment of curfews; ii. Designation of specific zones within which the occupancy and use of buildings may be prohibited or regulated; and iii. Establishment or designation of emergency shelters and emergency medical shelters.
Exec. Law § 28	If the Governor finds that "local governments are unable to respond adequately" to a disaster, the Governor may declare a State "disaster emergency" by executive order.

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Authority	Description
<p>Exec. Law § 29</p>	<p>Upon the declaration of a State disaster emergency, the Governor may direct any and all State agencies to provide assistance under the coordination of the DPC. Such assistance may include:</p> <ul style="list-style-type: none"> i. Utilizing, lending, or giving to political subdivisions, with or without compensation, equipment, supplies, facilities, services or State personnel, and other resources, other than the extension of credit; ii. Distributing medicine, medical supplies, food and other consumable supplies through any public or private agency authorized to distribute such items; iii. Performing on public or private lands temporary emergency work essential for the protection of public health and safety (e.g., clearing debris and wreckage); and iv. Making such other use of their facilities, equipment, supplies and personnel as may be necessary to assist in coping with the disaster or any resulting emergency.
<p>Exec. Law § 29-a</p>	<p>The Governor may temporarily suspend or modify specific provisions of any statute, local law, ordinance, or orders, rules or regulations, or parts thereof, of any agency during a State disaster emergency, if compliance with such provisions would prevent, hinder, or delay action necessary to cope with the disaster. The authority to suspend laws remains subject to Federal and State constitutional requirements (and Federal laws). In addition, any suspension order must:</p> <ul style="list-style-type: none"> i. Safeguard the health and welfare of the public; ii. Specify the affected statute, ordinance, local law, regulation, rule or ordinance; and iii. Provide for the minimum deviation from the original statute, law, ordinance or regulation. No suspension may be made for longer than 30 days; however, the governor may extend the suspension for additional subsequent periods of not more than 30 days each.

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Authority	Description
<p>NYS Disaster Leave Law</p>	<p>The Red Cross disaster leave proposal was signed into law on September 25, 2001. Passage of this legislation (Chapter 358 of the Laws of 2001) had been a priority of the Red Cross in New York and throughout the nation for many years.</p> <p>Section 82-b of the Civil Service Law provides up to 20 workdays of paid leave without charge to leave credits per calendar year for employees who are certified by the American Red Cross as disaster volunteers to participate in specialized relief operations. Requests for the services of such volunteers are made in writing by the Red Cross to the appointing authority and are subject to the approval of the appointing authority. Chapter 505 of the Laws of 2002 expands disaster leave to include employees of school districts.</p>
<p>Civil Service Law § 82-b.</p>	<p>Emergency service volunteers; paid leave. Notwithstanding any other provisions of law to the contrary, public officers and employees of the state who are certified by the American Red Cross as disaster volunteers shall be granted leave from work with pay to participate in specialized disaster relief operations upon written request for such services by the American Red Cross and upon the approval of the chief administrative officer of the state agency, department or bureau for which the public officer or employee serves. The public officer or employee shall be compensated at his or her regular rate of pay for those regular work hours during which the public officer or employee is absent from work while participating in authorized specialized disaster relief operations. Such leave shall be provided without loss of seniority, compensation, sick leave, vacation leave or other overtime compensation to which the volunteer is otherwise entitled and shall not exceed twenty days in any calendar year.</p>
<p>General Municipal Law § 92-c.</p>	<p>Emergency service volunteer; paid leave. Notwithstanding any provisions of law to the contrary, public officers and employees of municipal corporations and school districts who are certified by the American Red Cross as disaster volunteers shall be granted leave from work with pay to participate in specialized disaster relief operations upon written request for such services by the American Red Cross and upon the approval of the chief executive of the municipal corporation for which the public officer or employee serves or upon the approval of the superintendent of the school district for which the employee serves. The public officer or employee shall be compensated at his or her regular rate of pay for those regular work hours during which the public officer or employee is absent from work while participating in authorized specialized disaster relief operations. Such leave shall be provided without loss of seniority, compensation, sick leave, vacation leave or other overtime compensation to which the volunteer is otherwise entitled and shall not exceed twenty days in any calendar year.</p>

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Authority	Description
<p>The National Emergencies Act/the Stafford Act/and Section 1135 of the Social Security Act</p>	<p>The National Emergencies Act authorizes the President to declare a “national emergency.” Under the Stafford Act , the President may also (or alternatively) declare a “major disaster.” Section 319 of the Public Health Service Act authorizes the Secretary of the Department of Health and Human Services (HHS) to declare a “public health emergency.”</p> <p>If the President declares either a of national emergency under the National Emergencies Act or s major disaster under the Stafford Act and the Secretary of HHS also declares a public health emergency, Section 1135 of the Social Security Act permits the Secretary HHS to waive or modify certain regulatory requirements for healthcare facilities in response to emergencies . In other words, a Section 1135 waiver requires a declaration from both the President and the Secretary of HHS.</p> <p>Requirements that may be waived include those related to Medicare, Medicaid or the Children’s Health Insurance Program (CHIP), the Emergency Medical Treatment and Active Labor Act (EMTALA), and the Health Insurance Portability and Accountability Act (HIPAA). Waivers are permitted only to the extent they ensure that sufficient health care items and services are available to meet the needs of Medicare, Medicaid, and CHIP beneficiaries in the emergency area during the emergency period.</p>

NOTE: The legislature may, at any time, terminate such an executive order by concurrent resolution.

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Attachment 8.5

NYS Planning Guidance for Integrating Access and Functional Needs

For Local Emergency Planners and Key Stakeholders

Prepared by NYS DPC HSB

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I. Driving Forces

A. Legal Foundation – State

1. NYS Executive Law - Article 2B – continued § 23

- (6) a plan for coordination evacuation procedures including the establishment of temporary housing and other necessary facilities;
- (12) utilization and coordination of programs to assist victims of disasters, with particular attention to the needs of the poor, the elderly, individuals with disabilities and other groups which may be especially affected;
- (14) arrangements to administer state and federal disaster assistance;
- (18) utilization and coordination of programs to assist individuals with household pets and service animals following a disaster, with particular attention to means of evacuation, shelter and transportation options;

2. NYS Executive Order 26: Statewide Language Access Policy

<http://www.governor.ny.gov/news/no-26-statewide-language-access-policy>

B. Legal Foundation - Federal

1. Robert T. Stafford Disaster Relief and Emergency Assistance Act (“Stafford Act”) <http://www.fema.gov/robert-t-stafford-disaster-relief-and-emergency-assistance-act-public-law-93-288-amended>.

2. Post-Katrina Emergency Management Reform Act (PKEMRA) – 2006

- a. PKEMRA gave FEMA the authority needed to lean forward and leverage the entire emergency management team in response and recovery efforts.
- b. This team includes not only government, but also private, non-profit, and citizen partners—the Whole Community.
<https://emilms.fema.gov/IS230c/FEM0101200.htm>

3. The Americans with Disabilities Act of 1990 (ADA)

- a. The ADA requires people with disabilities to be accommodated in the most integrated setting appropriate to their needs, and the disability-related needs of people who are not medically fragile can typically be met in a mass care shelter. For this reason, people with disabilities should generally be housed with their families, friends, and neighbors in mass care shelters and not be diverted to special needs or medical shelters. http://www.ada.gov/2010_regs.htm.

4. The Rehabilitation Act of 1973 (RA), and the Fair Housing Act (FHA)

<http://www.ada.gov/cguide.htm#anchor65610>.

5. Civil Rights Act of 1964 -Title VI No person in the United States shall, on ground of race, color or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance. “...failure to ensure that persons with limited English proficiency (LEP) can effectively participate in or benefit from federally assisted programs and activities may violate the prohibition under Title VI...against national origin discrimination.”

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6. Older Americans Act of 1965 - The OAA recognizes the importance of disaster planning and preparedness at both the State (OAA SEC 307 [a] [29]) and local (OAA SEC 306 [a] [17]) level emphasizing the value of collaboration and coordination of disaster planning activities with, local and State emergency response agencies, relief organizations, local and State governments, and any other entities that have responsibility for disaster relief service delivery.
<http://www.globalaging.org/elderrights/us/2006/olderamericanact1965.pdf>
7. Pets Evacuation and Transportation Standards (PETS) Act 2006 - amendment to Stafford Act.
 - a. Requires State and Local emergency preparedness operational plans take into account the needs of individuals with household pets and service animals before, during and after a disaster.
 - b. FEMA may make financial contributions to the state and local authorities for animal emergency preparedness purposes;
 - c. Allows FEMA the authority to provide essential assistance to individuals with pets and service animals — for the provision of care, rescue, sheltering and essential needs to such pets and animals.

II. Definitions

- A. A Person with a Disability: Is a person who has physical or mental limitations that substantially impact such activities as:
 1. Activities of Daily Living (ADL): mobility, eating, transfers and toileting;
 2. Walking (mobility);
 3. Seeing (visual);
 4. Hearing (auditory);
 5. Intellectual processing (psychiatric, developmental, situational) has a record of such limitation or is regarded as having a disability
- B. A Person with an Access and/or Functional Need (AFN)
 1. Is a person (or individuals) that may have additional needs before during and after an incident in functional areas:
 2. Maintenance independence;
 3. Communication;
 4. Personal care activities of daily living;
 5. Supervision;
 6. Medical Care
- C. Access and Functional Needs (AFN) may include:
 1. Additional response assistance may include those who have disabilities;
 2. Individuals who live in institutionalized settings;
 3. Applies to all ages – infants to elderly;
 4. People from diverse cultures;
 5. Individuals who have limited English proficiency or are non-English speaking;
 6. Individuals who are transportation disadvantaged.

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- D. Functional Needs Support Services (FNSS) are:
1. Individuals with AFN may need Functional Needs Support Services (FNSS) to assist with any physical, sensory, mental health, and cognitive and/or intellectual disabilities, and persons with dementia affecting their ability to function independently without assistance.
- E. Examples of support services include:
1. Durable medical equipment (DME);
 2. Wheelchairs, walkers, canes;
 3. Assistive Technology (AT);
 4. Communications devices, text to speech software;
 5. Consumable medical supplies (CMS);
 6. Medications (i.e. insulin), specialized bandages;
 7. Personal assistance services (PAS);
 8. Communications support, personal care giver;
 9. Others who may benefit from FNSS include women in the late stages of pregnancy, seniors, and people whose body mass requires special equipment.
 10. Bariatric cots, or customized wheelchairs

III. State, Federal and Local Resources for Local Planners

- A. Individuals with Visual Impairments
1. NYS Commission for the Blind (NYSCB)
 - a. Serves legally blind New Yorkers from birth to end of life
 - b. Programs serve: children age 3-22, adults, and older blind (over 55)
 - c. Serve individuals with blindness as well as other disabilities including people with physical, sensory and emotional disabilities.
 - d. Services also include people with medical complications resulting in their blindness including Diabetes.
 - e. 1-866-871-3000
 - f. Ways that NYSCB can be helpful...
 - g. Assistance with designing policies and procedures to accommodate people with visual impairments...
 - h. Assistance with Alternative formats such as Braille, Large print or Audio
 - i. Employment and Training
 - j. Technical Assistance
 - k. Staff training
 2. New York Vision Rehabilitation Association - www.nyvra.org
 3. American Council for the Blind of New York, Inc. - <http://www.acbny.org>.
 4. National Federation of the Blind - <http://www.nfbny.org>
 5. New York Council for Independent Living <http://www.nysilc.org/index.php/ilc-directory>.

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6. New York Association of Independent Living - www.ilnys.org.
 7. Private agencies for the blind-statewide resources - <http://ocfs.ny.gov/main/cb/>.
- B. Individuals Who Are Deaf or Hard of Hearing
1. NYS Education Department ACCES-VR 1-800-222-5627; People with hearing disabilities use NYS Relay 7-1-1.
 - a. Email acesweb@nysed.gov.
 2. NYS Commission for the Blind for Assistance with Individuals Who Are Deaf-Blind 1- 866-871-3000 or 1-866-871-6000 (TTY).
 3. New York Council for Independent Living www.nysilc.org or call 1-877-397-4126; People with hearing disabilities use NYS Relay 7-1-1
 4. Empire State Association for the Deaf - www.esad.org.
 5. NYS Justice Center - Information and Referral Program - <http://www.justicecenter.ny.gov/> 1-800-624-4143; NYS Relay 7-1-1.
 - a. Email infoassistance@justicecenter.ny.gov.
 6. Hearing Loss Association of America – NYS Chapters - http://www.hearingloss.org/support_resources/find-local-hlaa-chapter#newyork.
 7. NY Association of Independent Living - www.ilny.org.
 8. NY Rehabilitation Association - www.nyrehab.org.
- C. Individuals with Cognitive/Intellectual Disabilities
1. NYS Office for People with Developmental Disabilities - www.opwdd.ny.gov 1-866-946-9733; NYS Relay 7-1-1.
 2. NYS Justice Center - Information and Referral Program - <http://www.justicecenter.ny.gov/> 1-800-624-4143; NYS Relay 7-1-1.
 - a. Email infoassistance@justicecenter.ny.gov.
 3. NYS Developmental Disabilities Planning Council - www.ddpc.ny.gov.
 - a. Email: ddpc.sm.pio@ddpc.ny.gov.
 - b. 1-800-395-3372; NYS Relay 7-1-1.
 4. NYSARC www.nysarc.org/members
 5. Learning Disabled Association of NYS www.ldanys.org.
 6. Self-Advocacy Association of NYS (SANYS) www.sanys.org info@sanys.org.
- D. Individuals with Physical Disabilities or Limitations
1. NYS Justice Center - Information and Referral Program - <http://www.justicecenter.ny.gov/>.
 - a. Email infoassistance@justicecenter.ny.gov
 2. Office of People with Developmental Disabilities (OPWDD) – www.opwdd.gov.
 3. NYS Dept. of Health Disability and Health Program <https://www.health.ny.gov/community/disability/>.
 4. NYS Independent Living Council <http://www.nysilc.org/index.php/ilc-directory>.
 5. NY Association of Independent Living - www.ilny.org.

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6. NY Rehabilitation Association - www.nyrehab.org.
 7. Consumer Directed Personal Assistance Association of NYS (CDPAANYS)
<http://cdpaanys.org>.
- E. Individuals who are dependent upon program based support services, medical care, equipment, and/or medications.
1. NYS Justice Center - Information and Referral Program -
<http://www.justicecenter.ny.gov/>.
 - a. Email infoassistance@justicecenter.ny.gov.
 2. NYS Dept. of Health Disability and Health Program
<https://www.health.ny.gov/community/disability/>.
 3. NYS Independent Living Council <http://www.nysilc.org/index.php/ilc-directory>.
 4. NY Association of Independent Living - www.ilny.org.
 5. NY Rehabilitation Association - www.nyrehab.org.
 6. Consumer Directed Personal Assistance Association of NYS (CDPAANYS)
<http://cdpaanys.org>.
 7. Home Care Association of New York State www.hcanys.org.
 - a. Email: info@hcanys.org.
- F. Older Adults
1. Additional Planning Considerations:
 - a. Among older adults, falls are the leading cause of both fatal and nonfatal injuries. Reduce risk of falls in shelter environment by encouraging use of proper footwear and assistive devices (glasses, canes, walkers), reducing tripping hazards, improved lighting, available grab bars, railings, utilization of call bell, bed rails, bed alarms, and chair alarms for those at greatest risk.
 - b. CDC-Older Adults and Falls Get the Facts
<http://www.cdc.gov/homeandrecreationalafety/falls/adultfalls.html>.
 2. Persons Living with Alzheimer's Disease and other forms of Dementia
 - a. 380,000 people in NYS are living with Dementia this number is expected to increase by 21.1% by 2025.
 - b. 60% of people living with dementia will wander.
 - c. In 2014 caregivers provided an average of 22 hours per week of unpaid care. 85% of all unpaid care to those with dementia comes from family members.
 - d. Establish ongoing collaborations with regional Alzheimer's Association and other community based resources for specialized training and disaster planning activities including:
 - e. Training for emergency responders, staff and volunteers regarding working with individuals living with dementia.

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- f. Establish a volunteer force of professional and individuals with specialized training on dementia and emergency preparedness and response.
 - g. Creation of dementia friendly shelter environment.
 - h. Outreach and education to caregivers regarding disaster preparedness including enrollment in programs such as Alzheimer's Association Safe Return or Project Lifesaver.
3. Socioeconomic Considerations
- a. May have lower literacy levels than the general adult population, which can present difficulties in understanding directions and can complicate or slow communications.
 - b. Possible limited English proficiency
 - c. Live alone. As age increases and widowhood rates rise, the percentage of the population living alone increases steeply.
 - d. Live in rural areas, especially persons age 75 or older. Persons living in remote rural areas may experience prolonged isolation after flooding or other disasters.
 - e. Rely on informal caregivers, such as family and friends, for assistance with tasks of daily living.
 - f. "Digital Divide" - May be less connected to diverse media outlets
 - g. Medical and Health Related Concerns:
 - High prevalence of chronic conditions including mobility and/or physical disabilities, cognitive impairment and other functional limitations.
 - Disruption of treatment and management of medical conditions.
 - Unfamiliar environments and schedules may cause disorientation and may worsen cognitive impairments, increase risk for falls, depression and anxiety.
 - Sensory and physiological changes associated with aging (i.e. vision and hearing loss).
 - May use or need access to low or high tech assistive devices.
 - h. Sheltering-in-Place, and social distancing events
 - Isolation from formal and informal supports as well as community-based activities (i.e. Congregate meals, Social Adult Day Programs).
 - Disruptions of essential home-based services that assist with Activities of Daily Living (Home delivered meals, home care workers).
 - Disruption of routine medical care for managing chronic conditions (medical home care, medication management).
 - Increased risk of injury.

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- i. Nutritional needs
 - Older adults face health risks from inadequate nutrition and food-borne illness in the aftermath of a disaster.
 - Chronic conditions may be exacerbated because of specific dietary and nutritional needs.
 - Plan for providing shelf-stable emergency food instead of Meals-Ready-to-Eat (MRE's) to older adults.
 - The MRE's packages that are often provided following a disaster contain too much sodium, fat, and calories for many older adults.
4. All 59 AAAs are engaged in on-going efforts and local activities, to develop, maintain and implement disaster preparedness plans for assisting persons 60+ as mandated by the Older Americans Act.
 - a. AAAs across the state join local emergency preparedness response agencies, relief organizations, and local government in preparation and in response to emergencies and disasters.
 - b. 50 AAAs report registries available for vulnerable individuals aged 60+ through direct maintenance by an AAA or in collaboration with another entity.
5. Central Kitchens – local resource for making food; distribution point
6. Senior Centers – access to programs & information for older residents (trusted place for older adults to gather).
7. Congregate meal sites – ready group feeding locations; centrally located (estimated 336 can serve as emergency feeding centers).
8. Home Delivered Meal Routes – distribution routes for food delivery.
9. Assessments are required for clients receiving long-term care services; COMPASS tool has detailed information on clients we serve.
10. Transportation – many of our AAAs have transport vans and access to medical transport systems that could be utilized in emergencies.
11. Medicare/Insurance Counselors – the AAA network has well-trained counselors in the HIICAP Program that can provide information on Medicare, Medicaid, Part D (Rx information) and other insurance services needed during a disaster, at 384 sites.
12. Strong Volunteer base – many of the programs and services provided by the AAA are arranged and delivered by volunteers, who could be trained in Disaster Planning.
13. 1,191 Health Insurance Counseling and Long Term Care Ombudsman Volunteers
14. Some Senior Centers now have generators –
15. Best Practice: Fort Plain Senior Center in Montgomery County has a new generator – which will allow the site to be used in disaster situations if needed.
16. New York State Office for the Aging
 - a. 1,200 contractors

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- b. 543 senior centers
 - c. 721 congregate meals sites
 - d. 284 central kitchens
 - e. 1,871 Home Delivered Meals routes
 - f. Personal Care/Home Health Aide
 - g. Consumer Directed In-home care
 - h. Adult Day Services
 - i. Home Delivered Meals- 58,665 people receiving 12,762,485 meals
 - j. Case Management- 56,523 people receiving 722,686 hours of service
 - k. Congregate Meals- 534 meal sites serving 157,371 people; 9,769,148 meals
 - l. Nutrition Counseling
 - m. Assisted Transportation (escorted)
 - n. Transportation
 - o. Legal Assistance
 - p. Information & Assistance
 - q. Outreach
 - r. In-home Contact & Support
 - s. Senior Center Recreation & Education
 - t. Personal Emergency Responses
 - u. Caregivers Services
 - v. Nutrition Education
 - w. Residential Repair
 - x. Health Insurance Counseling
 - y. Senior Employment
 - z. Annually NYS Office of the Aging (NYSOFA) collects from county Area Agencies on Aging (AAA) what procedures are in place to anticipate and meet the needs of older adults with functional and access needs, including individuals with disabilities and individuals with dementia, during a disaster.
 - List of AAAs
<http://www.aging.ny.gov/NYSOFA/LocalOffices.cfm>
 - NYS Office for the Aging - <http://www.aging.ny.gov/>
 - Research, reports and data -
<http://www.aging.ny.gov/ReportsAndData/Index.cfm>
 - <http://www.aging.ny.gov/index.cfm>
17. NY Connects <https://ny.getcare.com/nyprovider/consumer/indexNY.do>
18. Administration on Aging-Disaster Preparedness for People with Dementia and their Caregivers-A Toolkit
- a. http://www.aoa.gov/AoA_Programs/HPW/Alz_Grants/docs/Toolkit2_DisasterPreparedness.pdf
19. Alzheimer's Association - <http://www.alz.org/>.

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- a. Provides online training for first responders
 20. Ready.gov <http://www.ready.gov/individuals-access-functional-needs>
 21. Center for Disease Control-Disaster Preparedness for Older Adults - <http://www.cdc.gov/aging/emergency/>.
 22. Dementia Friendly America - <http://www.dfamerica.org/>
 23. U.S. Health and Human Services (HHS): Office of Minority Health-Culturally Competency Curriculum for Disaster Preparedness and Crisis Response <https://cccdpcr.thinkculturalhealth.hhs.gov/>.
- G. Mental Health -Individuals with Psychiatric Disability or Mental Illness**
1. In New York State over 300,000 individuals received services in 2013, with 280,000 of them in an outpatient program and more than 33,000 in residential programs.
 - a. These individuals may be living independently, may be in residential homes, or may be living with family, and their disaster related needs will vary widely based on their living situation and support network.
 - b. Residential program include:
 - Permanent housing
 - Transient housing
 - Supported housing
 2. New York State Office of Mental Health
 - a. New York State has a, multi-faceted mental health system that serves more than 700,000 individuals each year. The OMH operates psychiatric centers across the State, and also regulates more than 4,500 programs, which are operated by local governments and nonprofit agencies.
 - b. Local mental health programs include inpatient and outpatient programs, emergency, community support, residential and family care programs.
 - c. OMH Bureau of Emergency Preparedness and Response (BEPR).
 - As the public mental health authority for New York, OMH has the responsibility to ensure that both the needs of individuals with mental illness and those confronted by mental health challenges as a consequence of disaster are adequately addressed.
 - BEPR staff is trained in emergency preparedness and planning, response, and recovery and are charged with organizing and facilitating the emergency planning and response responsibilities for the agency.
 - d. Directors of Community Services (DCS)/Mental Health Commissioners.

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- County DCSs and Commissioners have the responsibility for oversight and management of the local mental hygiene system to meet the needs of individuals and families affected by mental illness, substance use disorder and/or developmental disability in their communities.
 - The DCS also contracts with a broad range of service providers and maintains partnerships with community partners to connect the pieces of the local system including the following.
 - Mental health, substance abuse and developmental disability service providers.
 - State operated psychiatric centers (PCs) and addiction treatment centers (ATCs).
 - Social Service (DSS) and Public Health Departments
 - Housing and shelter services.
 - Criminal Justice (prisons, jails, probation/parole, police, sheriffs, family and criminal courts).
 - Hospitals (Emergency Departments and CPEPs) and primary care and providers.
3. New York Association of Psychiatric Rehabilitation Services
<http://www.nyaprs.org>
 4. Mental Health Association of New York State <http://www.mhanys.org>
info@mhanys.org
 5. County Mental Health Departments
 6. NAMI-NYS (National Alliance on Mental Illness-NYS)
<http://www.naminy.org/nys/mental-health-advocacy/>
 7. The Supportive Housing Network of New York <http://shnny.org/budget-policy/state/advocacy-materials/>
 8. Association for Community Living <http://aclnys.org/>.
- H. Individuals with Chemical Dependence
1. Office of Alcoholism and Substance Abuse Services (OASAS) provides drug treatment services to an average of 100,000 New Yorkers on any given day. <https://www.oasas.ny.gov/>.
 2. These services are provided in a variety of settings: residential, outpatient, and medication-assisted (e.g., methadone) by a vast network of not-for-profit providers.
 3. These programs are located statewide, with a huge presence in NYC and Long Island.
 4. Patients can access service on a 24/7 basis (residential) or day time (outpatient), or intermittently (medication-assisted).
 5. Many OASAS Patients are dually diagnosed – substance abuse/mental illness.

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IV. Service Animals & Companion Animals

- A. Empire State Animal Response Team <http://www.empiresart.com/>.
- B. E-learning: <http://www.empiresart.com/elearning.html>
- C. NYS Independent Living Council <http://www.nysilc.org/index.php/ilc-directory>.
- D. NYS Association of Independent Living - www.ilny.org.
- E. NYS Office of the Attorney General – Civil Rights Bureau
https://www.ag.ny.gov/sites/default/files/pdfs/publications/service_animals_brochure.pdf
- F. American Red Cross <http://www.redcross.org/prepare/disaster/pet-safety>.
- G. Ready.gov
 - 1. <http://www.ready.gov/caring-animals>
 - 2. <http://www.ready.gov/sites/default/files/documents/files/FEMAPetShelteringbestpractices2007.pdf>.
- H. The Humane Society
 - 1. http://www.humanesociety.org/issues/animal_rescue/tips/pets-disaster.html.

V. NYS Human Services Resources for Local Planners

- A. Mass Care & Sheltering
 - 1. The Mass Care Support Group
<http://www.dhSES.ny.gov/planning/documents/HS-Mass-Care-Support-Plan-2015.pdf>
 - 2. Provides subject matter expertise and support for local jurisdictions in planning and response for
 - 3. Sheltering – both Red Cross and community sponsored
 - 4. Food and mobile feeding
 - a. Including Food Banks, Soup Kitchens, Salvation Army, and other feeding partners
 - 5. Access and Functional Needs support
 - 6. SMEs, Equipment, and identification of additional resources
 - a. Mass Care Trailers:
 - Mobile trailers that can be pre-staged or deployed at the request of the County
 - Contains supplemental equipment for individuals with disabilities, access or functional needs:
 - Special Needs Cots with linens
 - 18”and 22” Wheelchairs
 - Walkers
 - Rolling Trauma Kit
 - Pack n’ Plays
 - Bariatric Dual Release Walker
 - 7. Regional Catastrophic Planning Grant Program
 - a. RCPGP AFN Work Book

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- b. RCPGP AFN Promising Practices Guidebook
 8. FEMA - Guidance on Planning for Integration of Functional Needs Support Services in General Population Shelters
http://www.fema.gov/pdf/about/oddc/fnss_guidance.pdf
 - a. <http://www.dhss.ny.gov/oem/planning/documents/NYS-FNSS-Overview.pdf>
 9. FEMA – A Whole Community Approach to Emergency Management: Principles, Themes, and Pathways for Action
 - a. <https://www.fema.gov/media-library/assets/documents/23781>
- B. Disaster Assistance Centers/Disaster Recovery Centers
 1. State DRC Trailers:
 - a. 2 Dedicated Trailers for DRC Use/ Deployment
 - b. Warehoused DRC Supplies
 - c. Office Supplies/ Communication Tools (Screens, whiteboards, signage)
 - d. 16
 - e. Equipment (Projectors, Laptops, IPADS, Televisions, Printers, etc.)
 - f. Furnishings (tables, chairs, etc.)
 - g. Environmental Controls (Fans, Portable AC Units, etc. Tents)
 - h. Child Friendly Spaces (Tables, Chairs, Mats, Changing Tables, Pack and Play, etc.)
 - i. Disability Integration Items (Magnifiers, Raised Toilet Seats, Pocket Talkers, Ramps, etc.)
 2. State Training Products
 - a. New York State DRC Training Program
 - DRC Overview
 - DRCs for Local Jurisdictions
 - DRCs for Service Providers
 - DRC Site Management
 - b. Disability Integration Kits
 - c. Child Friendly Space Kits
 3. Federal Training Products
 - a. Federal Emergency Management Agency
 - Preparing Makes Sense for People with Disabilities and Other Access and Functional Needs (Source: FEMA)
<http://www.fema.gov/media-library/assets/videos/78827>
 - Disaster Recovery Center Video (source: FEMA)
<http://www.fema.gov/media-library/assets/videos/79681>
 - Disability Tools in a DRC (Source: FEMA)
<http://www.fema.gov/media-library/assets/videos/78931>
 - Disability Integration (Source: FEMA)
<http://www.fema.gov/media-library/assets/videos/81644>

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VI. Additional Resources for Local Planners

- A. NYS Justice Center for the Protection of People with Special Needs - Information and Referral Program.
 - 1. Responds to calls and e-mail inquiries regarding disability-related issues
 - 2. Connects individuals with information, technical assistance and/or referral to programs or services, including interpreter referral sources
 - 3. Guides callers & helps them understand questions to ask; ways to engage other entities when seeking information, services or resolution of issues
 - 4. Call 1.800.624.4143 (voice) toll-free statewide; People with hearing disabilities use NYS Relay 7-1-1
 - a. Email infoassistance@justicecenter.ny.gov.
- B. NYS Justice Center - Technology Related Assistance for Individuals with Disabilities (TRAID) Program.
 - 1. <http://www.justicecenter.ny.gov/services-supports/assistive-technology-traid>
 - 2. Established in 1990. Federally funded U.S. Department of Health and Human Services Administration on Community Living (ACL)
 - 3. Coordinates statewide activities to increase access to and acquisition of assistive technology (AT) in the areas of education, employment, community living and information technology /telecommunications.
 - 4. Supports 12 Regional TRAIID Centers which provide information, training, device demonstration, re-use, exchange and loans; they also provide technical assistance and advocacy on how to obtain and use AT services and devices; work collaboratively to provide needed devices from other parts of the state for loans in emergencies.
 - 5. Collaborates with several NYS agencies for device demonstration and loans.
 - 6. getATstuff:
 - a. An electric matching program that connects individuals who need assistive technology devices with people who are selling or donating devices they no longer need.
 - b. Users can log on www.getatstuff.com to create an account to request equipment or list equipment for sale or donation.
 - c. The site enables users to search for items within a seven state area, including New York.
- C. Office of Temporary Disability Assistance (OTDA)
 - 1. Estimate of Number and Poverty Status of Youth Age 14 to 20 - 2013 Total Population, 2011 ACS 5-Year
 - 2. Disaster Supplemental Nutrition Assistance Program Plan 2014-2015
 - 3. Employment & Training Contractor Listing by County
 - 4. How to Make Ends Meet- My Benefits (YouTube)
 - 5. Economic Supports for Struggling New Yorkers (YouTube)
 - 6. Serving Those who Served (YouTube)
 - 7. Bureau of Refugee and Immigrant Assistance Provider Directory
- D. New York Public Welfare Association (NYPWA) Directory

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1. <http://otda.state.ny.net/about/contacts/NYPWADirectory.pdf>.
- E. 2-1-1 New York - <http://www.uwnys.org>.
 1. Operated by United Way of New York State - 5 call centers and 2 partner sites serve over 93% of the state's population.
- F. New York State Independent Living Council (NYSILC) - This is a statewide council that addresses significant issues affecting New Yorkers with disabilities. This includes an active emergency preparedness committee that addresses the needs of people with disabilities during and after a disaster www.nysilc.org/.
- G. Independent Living Centers - Consumer-directed, cross-disability advocacy and service organizations, dedicated to enhancing the quality of life for persons with disabilities. <http://www.access.ny.gov/vr/lsn/ilc/locations.htm>.
- H. Niagara University First Responder Disability Awareness Training – Provides disability awareness training to first responders and other emergency personnel- frdat.niagara.edu.
 1. Northeast ADA Center – a federally funded regional center that provides information, referrals resources and training on equal opportunities for individuals with disabilities and on the Americans with Disabilities Act <http://www.northeastada.org/> 1-800-949-4232 NYS Relay 7-1-1 E-Mail address: northeastada@cornell.edu.
- J. “People First” language
 1. Communicating with and about Persons with Disabilities - <http://www.health.ny.gov/publications/0951.pdf>.

Attachment 8.6 – Food/Feeding Support Unit (FSU) Standing Operating
Procedure

- A) Pre-disaster State Feeding Resources
- B) USDA Commodity Foods Letter
- C) Ordering Protocols
- D) ARC Standard Serving Sizes
- E) Kosher/Special Dietary Needs & MRE Vendors
- F) MCSP Feeding Support Needs Assessment

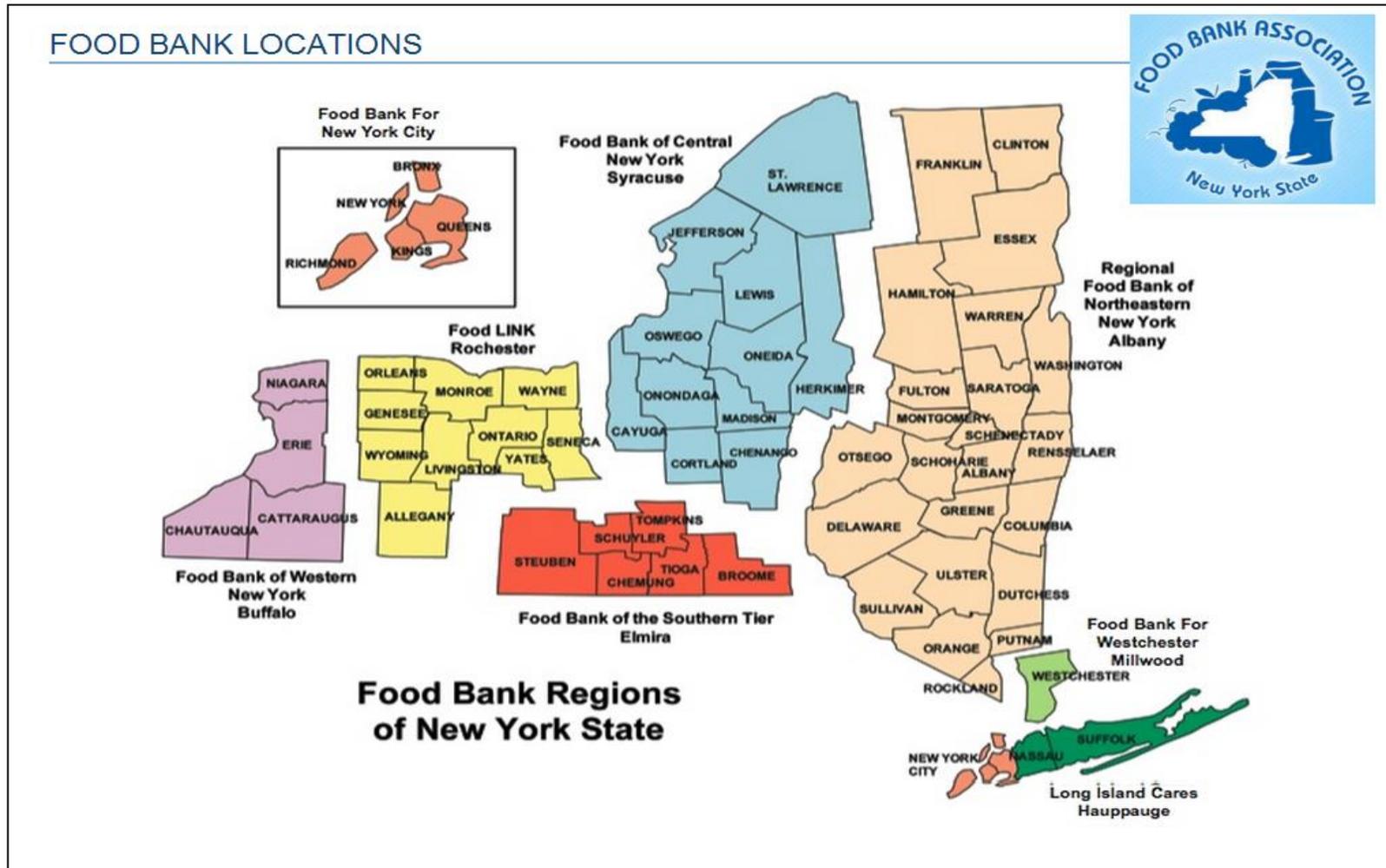
Template

A) Pre-Disaster State Feeding Resources - Non-Disaster Fixed Feeding & Mobile Feeding Programs & Capacity

Map Food Banks and Pantry's

<http://www.foodbankassocnys.org/find-food-bank.cfm>

http://www.foodpantries.org/st/new_york



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Congregate Feeding & Food Preparation Sites –

A list for all State Office for Aging Senior Nutrition Sites is available by request from the NYSDOH Bureau of Community Environmental Health and Food Protection (518-402-7600)

Home Delivered Meal Programs – County Offices for the Aging

Listing of County Offices of the Aging

Albany County 162 Washington Avenue, 6th Floor, Albany, NY 12210, 518-447-7179	Cortland County, County Office Building, 60 Central Avenue, Cortland, NY 13045-2746 607-753-5060	Lewis County County Office Bldg, 5274 Outer Stowe St., P.O. Box 408, Lowville, NY 13367, 315-376-5313	Ontario County 3010 County Complex Drive., Canandaigua, NY 14424-9502, 585-396-4040	Saratoga County 152 West High St., Ballston Spa, NY 12020, 518-884-4100	Tompkins County 320 North Tioga Street, Ithaca, NY 14850-4210, 607-274-5482
Allegany County 17 Court Street, Belmont, NY 14813 585-268-9390	Delaware County 6 Court Street, Delhi, NY 13753-1066 607-746-6333	Livingston County Livingston Co. Campus, Building 8, Mt. Morris, NY 14510-1601, 585-243-7520	Orange County 18 Seward Avenue, Middletown, NY 10940, 845-615-3700	Schenectady County, 107 Nott Terrace, Schaffer Heights, Suite 202, Schenectady, NY 12308-3170, 518-382-8481	Ulster County 1003 Development Court, Kingston, NY 12401 845-340-3456
Broome County 44 Hawley Street, P.O. Box 1766, 4th Floor, Binghamton, NY 13902-1766, 607-778-2411	Dutchess County 27 High Street, Poughkeepsie, NY 12601-1962, 845-486-2555	Madison County 138 Dominick Bruno Blvd., Canastota, NY 13032-3528, 315-697-5700	Orleans County Administration Bldg., 14016 Route 31 West, Abion, NY 14411 585-589-3191	Schoharie County 113 Park Place, Suite 3, Schoharie, NY 12157, 518-295-2001	Warren/Hamilton County 333 Glen Street, 3rd fl. Suite 306, Glen Falls, NY 12801, 518-761-6347
Cattaraugus County One Leo Moss Drive, Suite 7610, Olean, NY 14760-1101, 716-373-8032	Erie County 95 Franklin Street, Room 1329, Buffalo, NY 14202-3985, 716-858-8526	Monroe County 111 Westfall Road, Room 652, Rochester, NY 14620, 585-753-6280	Oswego County P.O. Box 3080, County Office Complex, 70 Bunner St., Oswego, NY 13126, 315-349-3484	Schuyler County 323 Owego Street, Unit 7, Montour Falls, NY 14865, 607-535-7108	Washington County, Co. Mun. Center, Suite B10, 383 Broadway, Fort Edward, NY 12828 518-746-2420

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Cayuga County 160 Genesee Street, Auburn, NY 13021-3483, 315-253-1226	Essex County P.O. Box 217, 100 Court Street, Elizabethtown, NY 12932-0217, 518-873-3695	Montgomery County P.O. Box 52, 380 Guy Park Avenue, Amsterdam, NY 12010-0052, 518-843-2300	Otsego County Meadows Office Complex, Suite 5, 140 Co Hwy 33W, Cooperstown, NY 13226, 607-547-5232	Seneca County 1 DiPronio Drive, Waterloo, NY 13165, 315-539-1765	Wayne County 1519 Nye Road, Suite 300, Lyons, NY 14489, 315-946-5624
Chautauqua County 7 North Erie Street, Mayville, NY 14757-1027, 716-753-4471	Franklin County 355 West Main Street, Suite 447, Malone, NY 12953-1826, 518-481-1526	Nassau County 60 Charles Lindbergh Blvd., Suite 260, Uniondale, NY 11553-3691, 516-227-8900	Putnam County 110 Old Route 6, Building 1, Carmel, NY 10512-2196, 845-225-1034	Seneca Nation of Indians 28 Thomas Indian School Drive, Irving, NY 14081, 716-532-5778	Westchester County 9 South First Avenue, 10th Floor, Mt. Vernon, NY 10550-3414, 914-813-6400
Chemung County 425 Pennsylvania Avenue, Elmira, NY 14902-0588, 607-737-5520	Fulton County 19 North William Street, Johnstown, NY 12095-2534, 518-736-5650	New York City 2 Lafayette Street, New York, NY 10007-1392, 212-442-1000	Rockland County Yeager Health Center, 50 Sanatorium Rd., Bldg B, Pomona, NY 10970-0350 845-364-2110	Steuben County 3 East Pultney Square, Bath, NY 14810-1510, 607-776-7813	Wyoming County 8 Perry Avenue, Warsaw, NY 14569-1220, 585-786-8833
Chenango County County Office Building, 5 Court Street, Norwich, NY 13815-1794, 607-337-1770	Genesee County Batavia-Genesee Senior Center, 2 Bank Street, Batavia, NY 14020-2299, 585-343-1611	Niagara County 111 Main Street, Suite 101, Lockport, NY 14094-3718, 716-438-020	Rensselaer County 1600 Seventh Avenue, Troy, NY 12180-3798, 518-270-2730	Suffolk County P.O. Box 6100, H. Dennison Bldg, 3rd Fl., 100 Veterans Mem Hwy., Hauppauge, NY 11788, 631-853-8200	Yates County 417 Liberty Street, Suite 1116, Penn Yan, NY 14527- 1100, 315-536-5515
Clinton County 135 Margaret Street, Suite 105, Plattsburgh, NY 12901- 2966, 518-565-4620	Herkimer County 109 Mary Street, Suite 1101, Herkimer, NY 13350-2924, 315-867-1121	Oneida County 235 Elizabeth Street, Utica, NY 13501, 315-798-5456	St. Lawrence County 80 State Hwy 310, Suite 7, Canton, NY 13617-1497, 315-386-4730	Sullivan County Sullivan Co. Government Ctr., 100 North St., P.O. Box 5012, Monticello, NY 12701, 845-794-3000	

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Columbia County 325 Columbia Street, Hudson, NY 12534-1905, 518-828-4258	Jefferson County County Office Building, 250 Arsenal Street, Watertown, NY 13601-2546, 315-785-319	Onondaga County 421 Montgomery St., Civic Center 13th Fl., Syracuse, NY 13202-2923, 315-435-2362	St. Regis-Mohawk County 29 Business Park Rd., Hogansburg, NY 13655, 518-358-2963	Tioga County Countryside Comm Center, 9 Sheldon Guile Blvd, Owego, NY 13827, 607-687-4120	
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OGS Food Warehouses Facilities and counties served

Holley Cold Storage, 16677 State Highway 31, Holley, NY 14470, (585) 638-6393, <i>Services recipient agencies Allegany, Genesee, Livingston, Monroe, Niagara, Orleans, Steuben, Wyoming</i>	Conn's Freezer Warehouse, 1666 Rte 9W Milton, NY 12547, (845) 795-2170, <i>Services recipient agencies in the following counties: Dutchess, Ulster, Sullivan, Orange, Rockland, Putnam, Westchester</i>
ECS Warehouse, 2381 Fillmore Ave Buffalo, NY 1421, (716) 833-7380, www.ecswarehouse.com , <i>Services recipient agencies in the following counties: Allegany, Cattaraugus, Chautauqua, Erie, Genesee, Niagara, Orleans</i>	Sysco Food Services of Albany, 1 Liebich Lane Clifton Park, NY 12065, (518) 877-3200 <i>Services recipient agencies in the following counties: Albany, Columbia, Fulton, Greene, Montgomery, Rensselaer, Saratoga, Schenectady, Schoharie, Warren, Washington</i>
Broome County Cold Storage, 2 Grant Ave Binghamton, NY 1390 , (607) 722-4271, broomecountycoldstorage.com <i>Services recipient agencies in the following counties: Broome, Chemung, Chenango, Delaware, Otsego, Schuylar, Tioga, Tompkins</i>	Downstate Distribution Center, 350 Carleton Ave Central Islip NY, 11722, (631) 243-6790, <i>Services recipient agencies in the following counties: Nassau, Suffolk, Bronx, Kings, Queens, New York, Richmond</i>
Arctic Frozen Foods LLC, 4981 Commercial Dr, Yorkville, NY 13495, (315) 736-3026, <i>Services recipient agencies in the following counties: Hamilton, Herkimer, Jefferson, Lewis, Madison, Oneida, Oswego</i>	Palmer Distributing, 320 Hoffman St, Newark, NY 14513, (315) 331-0926 <i>Services recipient agencies in the following counties: Cayuga, Onondaga, Ontario, Seneca, Wayne, Yates</i>
McKee Warehouse, 26 Railroad St, Malone, NY 1295, (518) 483-4340, <i>Services recipient agencies in the following counties: Clinton, Essex, Franklin, St. Lawrence</i>	

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B) USDA Commodity Foods Letter - *March 1, 2005*



MEMORANDUM

TO: Chief School Officers
School Lunch Directors

March 1, 2005

FROM: Tom Osterhout, New York State Office of General Services
Fran O'Donnell, New York State Education Department
Gary Striar, American Red Cross

RE: Using Government Food Commodities during an Emergency

A number of questions have arisen concerning the process for using government food commodities during a community emergency or disaster incident. There have also been questions concerning how the pre-existing agreement with the American Red Cross, for United States Department of Agriculture (USDA) commodity food usage, is to be activated and processed.

Understanding the process, for both the American Red Cross and New York State school districts, is a critical step to ensuring the swift and appropriate provision of food to your community in time of disaster.

Typically, the American Red Cross would activate the facility agreement for your building for use as a shelter and, for smaller, more localized disaster incidents, would bring in food to be served. However in larger disaster incidents such as a Presidential declaration or State declaration of emergency, and/or in certain types of smaller incidents such as localized flooding where access to food supplies might be more difficult, or when an imminent disaster causes the need for evacuation shelters to be opened, the American Red Cross could make a request to utilize the USDA commodities stored in your facility. A verbal request should be made to Tom Osterhout of the Office of General Services at (518) 474-5122, for approval of the release/usage of government commodities. If this communication is not possible, then you should use good judgment in making both your commercial and government foods available for use during the disaster/emergency.

The process for the Red Cross activation of the agreement is stipulated in USDA regulations. Schools that maintain an inventory of USDA food commodities are

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authorized to release them to “recognized disaster agencies” such as the American Red Cross when a disaster occurs.

The American Red Cross may only use these USDA food commodities for the purpose of congregate/mass feeding (preparing and serving) and not for individual or family bulk distribution. Any distribution to households would have to be expressly approved by the USDA.

In all instances, your facility should be sure to keep specific documentation including a description of the disaster, the number of people requiring feeding, and the types and quantities of commodities used. This information is to be forwarded to OGS Food Distribution and Warehousing after the emergency situation has ended.

The American Red Cross will be following up with their local chapters to ensure they fully understand of the specific guidelines that must be adhered to regarding the use of government commodities during a disaster/emergency. Chapters will be reminded that after the mass feeding is completed, the chapter will be advised of what information is required to enable the facility and the state to report on foods used for disaster relief, including certification that all food products were used in accordance with existing regulations for mass feeding. Each New York State Chapter of the American Red Cross will receive an updated document providing a checklist for activation of the USDA food commodities as well as for the completion of the reporting process. This is currently under revision and will be shared within the next month. At that time, it will also be shared with each of you as well.

If you should have any additional questions regarding the proper use of government commodities, please feel free to contact Tom Osterhout at the OGS Division of Food Distribution and Warehousing in Albany at (518) 474-5122.

cc: All OGS Field Inspectors

Steve Stathopoulos, USDA

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U.S. Department of Agriculture (USDA) Foods

The USDA can provide USDA Foods for incorporation into menus for mass feeding as well as infant formula and infant foods through a request from the State Distributing Agency. The American Red Cross, The Salvation Army and other disaster relief organizations that are equipped to prepare or serve meals to people displaced by disasters are eligible to receive USDA Foods free of charge.

USDA's Food and Nutrition Service (FNS) may legally respond to: 1) Presidentially declared disasters and 2) situations of distress.

1) Presidentially Declared Disasters: FNS is designated to provide food assistance under Emergency Support Function (ESF) #11 (ESF #11) as outlined in the National Response Framework. Disaster relief organizations may be eligible to receive USDA Foods for congregate meal service or household distribution in accordance with food distribution program regulations at 7 CFR 250.43 and 250.44, respectively. As outlined in Federal regulations, State Distributing Agencies have the authority to release USDA Foods for congregate feeding for as long as they are needed and FNS guarantees replacement of USDA Foods used. Release of household size USDA Foods for direct distribution to families requires FNS approval.

2) Situations of Distress: FNS uses the term "situation of distress" when a natural catastrophe or other event has not been declared by the President to be a disaster but which, in the judgment of the State Distributing Agency or FNS, warrants the use of USDA-donated foods for congregate feeding or household distribution. The situation may be due to acts of nature or intentional acts that, in the judgment of FNS may warrant the use of donated foods. FNS has the authority to release donated foods for both congregate feeding and household distribution. FNS will replace USDA Foods from State Distributing Agency and local recipient agency inventories that are used to assist in situations of distress, to the extent that funds for replacement are available.

The specific FNS program from which USDA Foods are taken will depend on the needs of the disaster organization, the scale of the disaster, accessible inventories and available funding. If available, State Distributing Agencies should try to use USDA Foods provided through the National School Lunch Program whenever possible. These are easier for disaster feeding organizations to use in preparing congregate meals, and they are easier for FNS to replace or reimburse.

Local inventories are usually the first sources that disaster organizations turn to when they want donations of USDA foods. Inventories from school kitchens and school district warehouses located close to the emergency are most often used for congregate feeding. State Inventories can be utilized when sufficient food is not available locally. If the State Distributing Agency does not have adequate inventories, it may request USDA foods from other States' inventories. When two of the State agencies are involved within the same FNS Region, the Regional Office acts as the liaison between the two States. If food must be transported between States in different FNS Regions, then the FNS Regional Office in which the emergency occurred, or FNS Headquarters, may act as liaison.

Federal (USDA) inventories of foods placed in Federal storage for later distribution may be immediately available for disaster feeding depending on inventory levels and program needs.

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The Federal government may also make emergency procurements of product when existing commodity inventories at the Federal, State or local level are inadequate. Emergency purchases are most often made when infant formula or infant foods are needed. FNS authorizes the Agricultural Marketing Service or the Farm Service Agency (the two agencies responsible for procuring all of FNS' commodities on an ongoing basis) to make disaster food purchases.

The initial application by a disaster relief organization for the receipt and use of USDA foods for congregate feeding is submitted to the State Distributing Agency in writing if circumstances permit or, if not, confirmed in writing in a timely manner. Applications must, to the extent possible, include the following:

- A description of the disaster or situation of distress.
- The number of people requiring meals.
- The period of time for which meals are being requested
- The quantity and types of food needed.

Additional guidance on use of USDA foods in disasters can be found at <http://www.fns.usda.gov/fdd/programs/fd-disasters/CommodityDisasterManual.pdf>.

Disaster Supplemental Nutrition Assistance Program (DSNAP) - SNAP is the new name of the Federal Food Stamp Program as of October 1, 2008. The new name, mandated by Congress, reflects changes that the USDA has made to meet the needs of our clients, including a focus on nutrition and improvements in accessibility. SNAP is the Federal name for the program. Some States may use a different name for the Program.

- **The Disaster Food Stamp Program is now known as D-SNAP.** Federal D-SNAP policy has not changed because of the name change.
- ***D-SNAP is still the primary nutrition assistance response in the disaster recovery phase:*** States can request approval to operate D-SNAP once disaster survivors have returned to their homes, their utilities are restored and commercial food supply channels such as grocery stores have reopened. States operate D-SNAP as the final disaster nutrition intervention, typically after the immediate post-disaster nutrition assistance from congregate feeding, mobile kitchens or distribution of meals-ready-to-eat.
- ***State Social or Human Services Agencies still deliver D-SNAP:*** Some States may use a name other than D-SNAP for their Program. States still write their own D-SNAP plans, in accordance with D-SNAP Guidance, which can be accessed at http://www.fns.usda.gov/disasters/response/DFSP_Handbook/guide.htm.
- ***D-SNAP still requires Federal approval and partnership for effective delivery:*** States must request FNS approval to operate D-SNAP in areas that have received a Presidential Major Disaster Declaration with Individual Assistance in order to authorize deployment of D-SNAP for affected areas.

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States may continue to coordinate services by setting up D-SNAP application sites at FEMA Disaster Recovery Centers.

For more information about SNAP and D-SNAP, please visit <http://www.fns.usda.gov/snap/>.

C) Food Supply Ordering Protocols

For the purposes of this plan, upon activation of the Task Force, the following protocols will be utilized Task Force operations. The Task Force will work in close coordination with the State Emergency Coordination Center, State OEM Operations, Logistics, and Human Services Branches. State OEM Operations/Logistics and the scale of the disaster/emergency will determine any and all requests assigned to the Task Force.

Member agency personnel may utilize the "Request Checklist" form to process supply, food and/or water requests from affected counties.

If at such time that certain requested assets are unavailable or there is an inadequate supply, State OEM Logistics and the Task Force will prioritize and fill requests to the extent possible. Once a request is processed and filled, it is considered "Complete," additional assets or those not provided due to lack of supply will have to either be fulfilled locally or a new request made.

All requests will be carefully considered and possibly acquired if the asset is available and falls within the needs of the response/recovery effort. The distribution of said asset will be dependent upon the scope and severity of the emergency and availability of resources from either county, local or State partners to support said distribution.

The following is a list of **Standard Definitions** for assets that may be requested:

Family Pack: Food pack equipped to feed a family of four will require some assembly and/or preparation.

Home Delivered Meals: Individually designed service which provides meals to participants who cannot prepare or obtain nutritionally adequate meals for themselves, or when the provision of such meals will decrease the need for more costly supports to provide in-home meal preparation. These meals assist the participant to maintain a nutritious diet but do not constitute a full nutritional regimen. Therefore the maximum number of meals the participant may receive per day is two (2).

Meals Ready to Eat (MRE): Meal requiring little to no preparation prior to being eaten. Similar to Heater Meals.

Special Dietary Needs: Any individual with distinct dietary requirements that must be met for health purposes. Examples: renal diet, low sodium diet, soft diet, food allergies, diabetic, etc..

Cultural: People sharing a common and distinctive racial, national, religious, linguistic, or cultural heritage that necessitates distinct or unique dietary needs. Examples: kosher, vegetarian, etc..

In-Home Delivery: Food delivered directly to homes of those otherwise unable to obtain food.

Fast Food: Inexpensive food prepared and served quickly. As prepared by McDonalds, Burger King, etc..

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D) ARC Standard Serving Sizes

American Red Cross standard serving sizes (by volume not weight) for meals on disaster relief operations are:

- Entrees: 8 oz. or 1 cup
- Side Dishes: 6 oz. or ¾ cup
- Desserts: 6 oz. or ¾ cup

These sizes are averages. For entrees, this size refers to items such as stews, soups, chili, casseroles or hot dishes. A number of exceptions are listed below. Final determinations should be made at the kitchen site using the above portion sizes as a guide.

- Spaghetti/Stroganoff – 4 oz. noodles, 4 oz. meat sauce/gravy
- Chicken nuggets – 4-6 nuggets (based on the 8 oz. serving size)
- Chicken Breasts – 1 breast
- Sliced Meats – 1-2 slices (based on the 8 oz. serving size)

There is a form called “Sample Menus” located on the DROMIS computers that describes sample menus. It is the basis for the initial food order and should be shared and discussed with the Blue Hat or Kitchen Site Manager at the beginning of the cooking operation. Portions are reproduced here to illustrate possibilities.

Menu	Entrée	Vegetable	Dessert
1	Spaghetti	Salad	Peaches
2	Chicken & Dumplings	Peas	Chocolate Pudding
3	Ravioli	Green Beans	Fruit Cocktail
4	Beef Stew	Corn	Banana Pudding
5	Sausage & Shells	Mixed Vegetables	Chocolate Pudding
6	Chicken & Rice	Carrots	Chocolate Pudding
7	Chicken a la King	Mixed Vegetables	Peaches
8	Ham & Pineapple	Green Beans w/potatoes	Butterscotch Pudding
9	Chili Pie	Mexican Corn	Pears
10	Salisbury Steak	Green Beans w/potatoes	Vanilla Pudding
11	Chicken Kiev	Carrots	Apricots
12	Fish	Carrots	Pears
13	Franks & Beans	Corn	Chocolate Pudding
14	Mac & Cheese w/ham	Green Beans	Fruit Cocktail
15	Red/black Beans w/rice	Corn	Chocolate

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			Pudding
16	Meatloaf	Potatoes, New	Pistachio Pudding
17	Sandwiches	Chips	Fresh Fruit

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Generic

East Asian

18	Beef & Broccoli	Corn	Fruit Cocktail
19	Oriental Chicken	Carrots	Lemon Pudding
20	Sweet & Sour Pork	Carrots	Apricots
21	Hearty Noodle Soup	Rice	Fresh Fruit
22	Stir Fry or BBQ Pork	Rice	Fresh Fruit
23	BBQ or Simmered Fish	Rice	Fresh Fruit

Latino/Hispanic

24	Beans w/rice or Ham	Corn	Peaches
25	Enchiladas	Refried Beans	Peaches
26	Nachos	Refried Beans	Fruit Cocktail
27	Quesadillas	Mexican Rice	Fruit Cocktail
28	Tacos	Mexican Corn	Fruit Cocktail
29	Burritos	Mexican Rice	Cinnamon Apples

Vegetarian

30	Rice	Stir-fry Vegetables	Jell-O
31	Potatoes, Mashed/new	Beans, any type	Yogurt
32	Tossed Salad	Dressing/cottage cheese	Fresh Fruit
33	Macaroni	Wheat Biscuits	Fresh Fruit
34	Spaghetti	Meat-free Sauce	Yogurt
35	3-bean Salad	Raisin/banana Bread	Jell-O
36	Hearty Oriental Soup	Rice w/gravy	Oat Bread w/honey
37	Noodles & Rice	Steamed Vegetables	Jell-O
38	Cornbread w/gravy	Red or Refried Beans	Fresh fruit

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E) Kosher/Special Dietary Needs & MRE Vendors

Last updated 01-2012 / 01-2016

Company	Point of Contact Name	Website	Phone/Email	Notes
Alle Processing		www.alleprocessing.com	718-894-2000	
Empire Kosher		www.empirekosher.com	717-436-7055	
Manischewitz		www.manischewitz.com	201-553-1100 x 2505	
La Briute	Abe (V.P.)	www.labriutemeals.com	732-905-1555 Abe (VP): 732-908-1555 (cell) 908-670-2204	GLAAT Kosher Multiple types of MREs
As of 2016				
Wegmans			1-800-WEGMANS (934-6267; 934-7738) (Security, 24/7) 585-429-3030	
My Own Meal		http://www.myownmeals.com/mres-rations/	Telephone: 847-948-1118 Fax: 847-948-0468 sales@myownmeals.com myownmeals@sbcglobal.net	GLAAT Kosher Meals Ready to Eat
Defense Logistics Agency		https://www.troopsupport.dla.mil/subs/rations/programs/index.asp	COM: 215-737-3688 • DSN: 444-3688	

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F) MCSP Feeding Support Needs Assessment Template (p.1) (also separate Excel workbook)

Estimated populations					
		Low End #	Middle #	High End #	
Meals - 3 days Total	Meals - 3 days Total (3 meals/day)	3*(insert #*3)	3*(insert #*3)	3*(insert #*3)	Formula =
	80%				"3" meals/day per 3 days
<i>Note - low/middle/high end #s are derived from total census data - Ask State OEM for GIS based census data (see example at end of document)</i>	50%				
	20%				
	10%				
	Meals - 3 days Total (2 meals/day)	2*(insert #*3)	2*(insert #*3)	2*(insert #*3)	"2" meals/day per 3 days
	80%				
	50%				
	20%				
	10%				
Water - per individual	1 gallon per person/day				
Current Identified Feeding Assets (State/FEMA)		Food/Meals	Water		
DOCS Cook Chill			-----		
OMH Cook Chill					
State Food Assets*				Total State/Federal Agency Assets	
<i>List open staging sites---></i>	Republic Airport				
	Binghamton				
	Oriskany				
	Bel Aire				
FEMA Food Assets					
<i>List open staging sites---></i>	Republic Airport				
	Binghamton				
	Oriskany				
	Bel Aire				

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MCSP Feeding Support Needs Assessment Template (p.2) (also separate Excel workbook)

VOAD Potentials						
ARC						
<i>List locations/mobile ERV routes (or group by city)---></i>						
Southern Baptist Kitchens						
<i>List locations/# meals per day---></i>						
Salvation Army						
<i>List locations/mobile ERV routes (or group by city)---></i>						
Local Food Distribution		<i>(Food Banks, Kitchens, other local distribitons e.g. Meals on Wheels)</i>				

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MCSP Feeding Support Needs Assessment Template (p.4) (also separate Excel workbook)

See DHSES Geographic Information System (GIS) for census data.

Sample stats - Insert census data for the affected area						
County	City/Town	Population	10%	25%	50%	75%
New York city		8,175,133	817,513	2,043,783	4,087,567	6,131,350
	Bronx	1,385,108	138,511	346,277	692,554	1,038,831
	Kings	2,504,700	250,470	626,175	1,252,350	1,878,525
	New York	1,585,873	158,587	396,468	792,937	1,189,405
	Queens	2,230,722	223,072	557,681	1,115,361	1,673,042
	Richmond	468,730	46,873	117,183	234,365	351,548
Nassau County		1,339,532	133,953	334,883	669,766	1,004,649
	Glen Cove city	26,964	2,696	6,741	13,482	20,223
	Hempstead town	759,757	75,976	189,939	379,879	569,818
	Long Beach city	33,275	3,328	8,319	16,638	24,956
	North Hempstead town	226,322	22,632	56,581	113,161	169,742
	Oyster Bay town	293,214	29,321	73,304	146,607	219,911
Suffolk County		1,493,350	149,335	373,338	746,675	1,120,013

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Attachment 8.7 – Points of Distribution (POD) Locations Summary Template

(also separate Excel workbook which can be tabulated by Agency)

County Org
 Albany

OPEN PODS TOTALS (Summary)

FEMA DR ##### - New York POD Locations as of <DATE & TIME>											
#	Organization	County	Name	Address	City	Status (OPEN/CLSD)	FEMA Branch	FEMA Division	Hours of Op	POC	Comments
1	FEMA	County				Op/Clsd					
2	ARC	County									
3	SA	County									
4	STATE	County									
5	Local EM	County									
6	Local NGO	County									
7	Org Type	County									
8	Org Type	County									
9	Org Type	County									
10	Org Type	County									
11	Org Type	County									
12	Org Type	County									
13	Org Type	County									
14	Org Type	County									
15	Org Type	County									
16	Org Type	County									
17	Org Type	County									
18	Org Type	County									
19	Org Type	County									
20	Org Type	County									

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Attachment 8.8 – Glossary of Member Agencies

Acronym	Agency Name	Agency Description/Mission
→ → → →	Save the Children	<p>Save the Children is the world's leading independent organization for children. Our vision is a world in which every child attains the right to survival, protection, development and participation. Our mission is to inspire breakthroughs in the way the world treats children and to achieve immediate and lasting change in their lives.</p> <p>Save the Children responds to three basic types of emergencies — sudden-onset, slow-onset and complex emergencies. Save the Children develops and maintains local and international partnerships to meet the challenges posed by disasters and crises in high risk communities worldwide.</p> <p>http://www.savethechildren.org/site/c.8rKLIXMGIpI4E/b.6206917/k.5BEF/Responding_to_Emergencies.htm</p>
→ → → →	Food Bank Association of NY	<p>Has 8 regional member Food Banks covering all catchment areas of NYS. Provides surge capacity, distribution network, may receive donations, and can provide regional warehousing refrigeration and distribution. Can also provide intelligence on community need and recovery. Food Banks routinely provide food to 2 million in need citizens annually through soup kitchens, day cares, senior centers, and food pantries.</p>
ARC	American Red Cross	<p>ARC (statewide) will provide for individual, family and mass care services for survivors of disaster and also for emergency workers in disaster affected areas. Sheltering may include congregate sheltering or depending on the size and scope of the incident, the use of commercial facilities, such as motels and hotels, as shelters for individuals or families.</p>
DHSES	Division of Homeland Security and Emergency Services	<p>Created in 2010, DHSES and its five offices -- Counter Terrorism, Cyber Security, Emergency Management, Fire Prevention and Control, and Interoperable and Emergency Communications -- provide leadership, coordination and support for efforts to prevent, protect against, prepare for, respond to, and recover from terrorism and other man-made and natural disasters, threats, fires and other emergencies.</p>
DOCCS	Department of Corrections	<p>The New York State Department of Correctional Services, through its Cook Chill Production Center located at Oneida Correctional Facility, can prepare a significant amount of ready-to-serve food with little notice. DOCCS maintains 65,000 portions in inventory at all times. Most food items are cook chill and come pre-packaged in 6 quart bags, which require heating. A significant amount of ready-to-serve food can be produced without impacting DOCCS facilities</p>
FEMA	Federal Emergency Management Agency	<p>FEMA's mission is to support our citizens and first responders to ensure that as a nation we work together to build, sustain and improve our capability to prepare for, protect against, respond to, recover from and mitigate all hazards.</p> <p>New York State is covered by FEMA Region II: NJ, NY, PR, VI</p>

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Acronym	Agency Name	Agency Description/Mission
FIANY	Food Industry Alliance	The Food Industry Alliance (FIA) of New York State is the only statewide trade association in New York representing the full spectrum of the grocery industry. FIA's 850 corporate members include independents, supermarket chains, convenience stores, wholesalers, co-operatives and through its active Trade Relations program- manufacturers/suppliers.
HANYS	Healthcare Association of New York State	HANYS' Mission: To advance the health of individuals and communities by providing leadership, representation, and service to health care providers and systems across the entire continuum of care. During an emergency event in New York State or elsewhere, HANYS is prepared to work with response agencies to provide information to our members and coordination of resources.
HCA	Homecare Association of New York State	The mission of the HCA is to promote and enhance the quality, accessibility and availability of home care by enabling its members to meet the needs of the individuals and communities they serve. Home Care's first priority during emergency situations is to provide continuity of care for its existing residents, however home care providers will provide assistance in meeting surge capacity and shelter medical care needs to the extent determined possible by each individual provider. http://www.homecareprepare.org/
NYMEP	New York State Medical Equipment Providers Association	The New York Medical Equipment Providers Association (NYMEP) was organized in 1991 as a statewide professional association for providers, manufacturers and distributors of home medical equipment. The Association represents over 160 companies throughout New York State and is committed to provide timely information, communication and education on Medicare and Medicaid reimbursement, state and federal regulations and legislation affecting the HME industry. NYMEP is the ONLY statewide HME association in New York State. NYMEP continues to provide a strong, unified voice for its members in an effort to affect adverse regulatory and legislative issues at both the federal and state level. NYMEP's mission is to advance the success of the home medical equipment providers through excellence, advocacy and improved patient outcomes. • http://www.nymep.org/index.php
NYS DAM	New York State Department of Agriculture & Markets	The New York State Department of Agriculture and Markets will monitor the safety of food at the wholesale and retail food level throughout transportation, preparation, storage and sale; and conduct food safety assessments as needed. NYS DAM is also the Lead Agency for assisting jurisdictions with animal or pet sheltering the Temporary Emergency Animal Sheltering Annex.

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Acronym	Agency Name	Agency Description/Mission
NYSDOH	New York State Department of Health	<p>NYSDOH is responsible for public health within NYS and derives public health authority through State Public Health Law. NYSDOH, is led by the State Commissioner of Health, and is ultimately responsible for safeguarding the public’s health and implementing the State’s response to a health emergency.</p> <ul style="list-style-type: none"> • NYSDOH Structure: NYSDOH facilitates service delivery in collaboration with local health departments (LHDs), through its Centers, 3 Regional and 7 District Offices.
NYSILC	New York State Independent Living Council, Inc.	<p>The New York State Independent Living Council (NYSILC) is a not-for-profit, non-governmental, consumer controlled organization. The council is composed of 27 appointees from around the state, a majority of whom have disabilities, representing diverse cultures and needs in the state. NYSILC is responsible for the development, implementation and monitoring of the 3-year Statewide Plan for Independent Living (SPIL). The council is jointly responsible for the SPIL with its state plan partners: New York State Education Department/Office of Vocational and Educational Services for Individuals with Disabilities (VESID) and the Office of Children and Family Services/Commission for the Blind and Visually Handicapped (CBVH)</p> <p>NYSILC provides support and technical assistance to 37 independent living centers-community-based organizations directed by and for people with disabilities. Finally, NYSILC assists in the drafting of disability legislation, promotes selected research projects and coordinates the collection of polling data.</p> <p>Statewide Independent Living Councils (SILCs) established under Title VII of the Rehabilitation Act of 1973, as amended, are state appointed councils which coordinate the functions related to the planning, monitoring and evaluation of the SPIL.</p>

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Acronym	Agency Name	Agency Description/Mission
NYSJC	New York State Justice Center	<p>The Justice Center was created in legislation known as the “Protection of People with Special Needs Act” to establish the strongest standards and practices in the nation for protecting people with special needs. It serves both as a law enforcement agency and as an advocate for people with special needs. The Justice Center’s responsibilities include:</p> <ul style="list-style-type: none"> • Advocating on behalf of people with special needs and overseeing the quality of care they receive; • Ensuring that all allegations of abuse and neglect are fully investigated. The Justice Center has legal authority to investigate all significant incidents involving people with special needs. Its Special Prosecutor/Inspector General has the authority to prosecute allegations that rise to the level of criminal offenses; • Operating a 24/7 Hotline which receives reports of allegations of abuse, neglect and significant incidents. Reports are made by service providers and others who are “mandated reporters” as well as by any individual who witnesses or suspects the abuse or neglect of a person with special needs; • Maintaining a comprehensive statewide database that tracks cases until they are resolved and allows the Justice Center to monitor trends and develop abuse prevention initiatives; and • Maintaining a “Staff Exclusion List” of individuals found responsible for the serious abuse or neglect of a person with special needs. Anyone entered into this statewide register is prohibited from ever working again with people with special needs in New York.
NYSOFA	New York State Office for the Aging	<p>New York State Office for the Aging (NYSOFA)- provides for comprehensive planning, coordination, and provision of services for older adults by, distributing both federal and state funds to 59 county Area Agencies on Aging (AAAs). The mission of NYSOFA is to help older New Yorkers live independently as long as possible through advocacy, development and delivery of person-centered, consumer-oriented, and cost-effective policies, programs and services which support and empower older adults and their families, in partnership with the network of public and private organizations which serve them. NYSOFA does not provide direct service to older adults or their families, but oversees and supports the AAAs, and the AAA network of over 1400 subcontractors which offer a wide range of direct services such as case management, information about long term care services and supports, and respite and caregivers services. As part of its overall mission, NYSOFA and the AAAs will aid in disseminating information to residents prior to, during and post disaster.</p>

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Acronym	Agency Name	Agency Description/Mission
NYSVOAD	New York State Voluntary Agencies Active in Disaster	<p>NYSVOAD coordinates planning among the Statewide voluntary agencies that have a role in disasters, providing more effective service with less duplication when a disaster strikes. It partners with the National VOAD (NVOAD), regional and local VOADs, private sector industries, as well as SOEM throughout the cycle of emergency management – preparedness, response, recovery, and mitigation. In response to disasters it convenes its members and other agencies to discuss how they will work together cooperatively in the crisis. NYSVOAD maintains individuals trained to staff the SEOC. NYSVOAD does not deliver services, rather its members independently meet relief and recovery needs. The NYSVOAD is also committed to education in the form of training and increasing awareness and preparedness in each member organization, as well as encouraging public outreach. NYSVOAD will assist with the implementation of this plan and will provide support as requested</p>
OGS	Office of General Services	<p>The Office of General Services has State office facilities, leased facilities and surplus properties that can be made available for temporary use during times of emergency. OGS also provides a procurement services group that has emergency contracts for services, supplies and the ability to create such contracts for unforeseen events. In addition, OGS provides emergency feeding and contractual assistance through a food distribution and warehousing group. OGS can provide design and engineering support and related emergency contracts when needed. Where OGS lacks such resources or has insufficient accommodations, OGS can reach out to other state agencies that provide similar arrangements.</p> <p>OGS can:</p> <ul style="list-style-type: none"> • Request the authorized release of government food commodities from the USDA; • Facilitate the delivery/pick-up of government food commodities to relief sites; • Assist in the use of State contracts for the acquisition of needed supplies.
OMH	Office of Mental Health	<p>New York State has a large, multi-faceted mental health system which serves over 500,000 individuals each year. OMH operates psychiatric centers across the state, and also regulates, certifies and oversees more than 2,500 programs which are operated by local governments and nonprofit agencies. These programs include various in resident and out resident programs, emergency, community support, residential and family care programs. OMH may provide</p> <ul style="list-style-type: none"> • Providing mental health assistance for survivors and responders. • Assessing the psychological state of the general population. • Assisting with communications to calm the public and alleviate panic. • Providing facility and material assistance.

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Acronym	Agency Name	Agency Description/Mission
OPWDD	Office of People with Developmental Disabilities	<p>Office for People with Developmental Disabilities (OPWDD) - OPWDD provides services to individuals with mental retardation and developmental disabilities through a partnership consisting of services to individuals provided directly by the state and by not-for-profit agencies and other providers located in all areas of the state. OPWDD's first priority is to provide for the individuals directly under its care. Once all of those individuals are accommodated, OPWDD will then, through its local offices, provide assistance to not-for-profit agencies and other providers with the resources necessary to cope with the needs of individuals with mental retardation and developmental disabilities under their care. Only after OPWDD has satisfied those requirements can OPWDD provide resources to other state agencies and the general public.</p>
OTDA	Office of Temporary Disability Assistance	<p>The mission of the New York State Office of Temporary and Disability Assistance (OTDA) is to promote greater self-sufficiency of the State's residents through the efficient delivery of temporary and transitional assistance, disability assistance, and the collection of child support. OTDA, in partnership with other human service agencies, must ensure the range of quality services and programs that will accomplish the following goals:</p> <ul style="list-style-type: none"> • To enhance the economic security of low-income working families, • To assist work-capable public assistance recipients in achieving entry into the workforce • To assist individuals with priority needs other than work-readiness in accessing appropriate benefits and services • To enhance Child Support Enforcement and reduce child poverty • OTDA oversees a range of the State's most important programs for its low-income residents, with a focus on employment wherever possible, and to provide leadership, guidance and support to local departments of social services in the administration of those programs. <p>As the chair agency of the Human Services Committee, OTDA will provide direction to the sub-committee and / or task force.</p>

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Acronym	Agency Name	Agency Description/Mission
SED	State Education Department	<p>The New York State Education Department is part of the University of the State of New York (USNY), one of the most complete, interconnected systems of educational services in the United States. The State Education Commissioner serves as the President of USNY. USNY includes (but is not limited too):</p> <ul style="list-style-type: none"> • More than 7,000 public and private elementary and secondary schools; • 248 public and private colleges and universities; • 251 proprietary (for-profit) schools; • Vocational rehabilitation and other services for adults with disabilities; • Special education services for pre-school and school-age children and teenagers; • (2) School for the Blind (1); School for the Deaf (1). <p>Most pre-designated emergency shelters throughout the State are located in USNY facilities. SED shall provide coordination and facilitation of services through the SEOC in support of temporary general shelter needs</p>
State OEM	New York State Office of Emergency Services	<p>SOEM is responsible for coordinating the resources of State agencies during a disaster response. SOEM provides coordination and management for the acquisition of goods and services required to support the disaster response. This includes community outreach, community notification regarding the emergency situation and response activities and the acquisition of supplies and various types of equipment to support sheltering operations, buildings for shelters, and medical staff.</p>
SUNY	State University of New York	<p>SUNY is comprised of sixty-four institutions that include everything from world-renowned community colleges such as the Fashion Institute of Technology, to first-rate graduate schools that include the nation’s top veterinary school. The System’s highly regarded doctoral degree granting universities boast top research programs and attract experts in a variety of fields. SUNY has expanded to include more than 413,000 students enrolled in 6,688 programs of study. SUNY has also created the SUNY Learning Network, one of the nation’s largest distance learning programs which provides educational opportunities to more than 70,000 students through 4,000 courses and offers sixty degree and certificate programs.</p>

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Acronym	Agency Name	Agency Description/Mission
USDA-APHIS USDA-FNS	United States Department of Agriculture <ul style="list-style-type: none"> • Animal and Plant Health Inspection Services (APHIS) • Food & Nutrition Services (FNS) 	<p>Under ESF11, USDA and the U.S. Department of the Interior (DOI) address the protection of agricultural and natural resources in a national emergency. Specifically, ESF11 responsibilities include:</p> <ul style="list-style-type: none"> • Monitoring for and responding to animal/plant pest and disease situations; • Providing for the safety and well-being of household pets; • Offering nutrition assistance; • Ensuring the safety and security of the Nation's commercially produced meat, poultry, and egg products; and, • Protecting natural and cultural resources and historic properties. <p>• Emergency Support Function 11 Brochure</p> <p>APHIS: http://www.aphis.usda.gov/animal_welfare/ep/index.shtml APHIS' Animal Care program is charged with providing technical assistance and subject matter expertise on the safety and well-being of household pets during disasters. In advance of an emergency, this means facilitating household pet emergency management discussions among Federal, State, and local governments, as well as non-governmental organizations, as they develop and test disaster response plans. During a disaster, Animal Care can provide support to States to ensure the safe evacuation, transportation, shelter, and veterinary care of household pets and service animals.</p> <p>FNS: The Food and Nutrition Service (FNS) coordinates with State, local and voluntary organizations to:</p> <ul style="list-style-type: none"> • Provide food for shelters and other mass feeding sites. • Distribute food packages directly to households in need in limited situations. • Issue Disaster Supplemental Nutrition Assistance Program (D-SNAP) benefits. <p>FNS provides nutrition assistance to those most affected by a disaster or emergency. When State agencies notify USDA of the types and quantities of food that relief organizations need for emergency feeding operations, FNS supplies food to disaster relief organizations such as the Red Cross and the Salvation Army for mass feeding or household distribution. FNS also authorizes States to provide D-SNAP benefits.</p> <ul style="list-style-type: none"> • http://www.fns.usda.gov/disasters/response/D-SNAP_Handbook/guide.htm • http://www.fns.usda.gov/fdd/programs/fd-disasters/default.htm • http://www.fns.usda.gov/cnd/governance/Policy-Memos/2012/SP25_CACFP12_SFSP10-2012os.pdf • http://www.fns.usda.gov/wic/disasterresponse.htm