


Shelter Planning Essentials:


Perspectives on Managing Expectations
After COVID

Presenters:


- **Chris Baker** – Volunteer Agency Liaison and Mass Care Specialist, FEMA Region 4
- **Dawn Brantley** – Acting Director, Massachusetts Emergency Management Agency; Vice President, International Association of Mass Care Professionals
- **Sandra Bridges** – Human Services Branch Manager, North Carolina Emergency Management
- **Bruce Cuber** – Division Disaster State Relations Director (AL/MS/TN), American Red Cross
- **Alan Harris** – Chief Administrator, Seminole County Emergency Management
- **Steven Lerner** – Senior Planner, Seminole County Emergency Management
- **Rebecca Pittman** – Division Disaster State Relations Director (GA/NC/SC), American Red Cross



How did COVID alter
expectations for shelters?



What permanent and temporary strategies were taken from COVID?



How do we manage partner and stakeholder expectations for response capabilities?

Types of Shelters*

Evacuation

- Accessible
- Immediate, life safety – no more than 72 hours
- Cots not recommended
- Snacks and water, meals when feasible
- Limited staffing ratios
- Limited wraparound services

Post-impact

- Accessible
- No more than 2 weeks
- Cots, more space per person
- 2-3 meals per day, plus snacks and water
- Expanded staffing ratios
- Expanded wraparound services

Long-term

- Accessible
- Longer than 2 weeks
- Cots, more space per person
- 2-3 meals per day, plus snacks and water
- Similar staffing to Post-impact
- Wraparound services based on remaining population, including transition teams/services

* This presentation focuses only on general population shelters.

Post-COVID Sheltering

- Congregate
 - Red Cross will continue to follow CDC guidance, plans to resume normal congregate sheltering for Hurricane Season 2022
 - Mask and sanitation availability at all shelter sites
 - Will be responsive if a variant emerges
- Non-congregate sheltering – preauthorization required
- Increased need for medical staffing, but decreased availability
- Increased hesitance of public to go to shelters due to public health concerns
- Ongoing need for quarantine/isolation areas and testing
- Increased need for epidemiological surveillance

Staffing

- Ideal numbers vs. Recommended vs. Reality
 - Fewer volunteers
 - Decreased willingness to staff post-COVID
- Virtual staffing support
- Red Cross Supportive Communities as a model

Community and Wraparound Services

- No-contact and Community Drive through Feeding
- Distribution of Grocery Gift Cards
- Virtual Health and Mental Health Support
- Hybrid Functional Assessment Support Teams (FAST)
- Hybrid Multi-Agency Shelter Transition Teams (MASTT)
- Working with homeless providers
- Adjusted transportation plans
- More frequent cleaning of showers, laundry trailers, etc.

Supply Chain

- COVID impacted nearly all shelter supplies
 - Difficulty getting PPE
 - Shortages in Durable Medical Equipment
- Stockpile now if you can – but develop plan for product rotation
- Make requests earlier!

Facilities

- Facility owner expectations of EM
- Cleaning
- Quarantine and isolation areas
 - Pipe and drape
 - CO₂ detectors
- Memory care areas – larger spacing requirements
- Updated Red Cross guidelines

Non-Congregate Sheltering(NCS): It's not going away!

- What is it?
- What's the current posture?
- Challenges
 - Cost
 - Availability
 - Determining who is assigned to NCS vs. congregate
 - Eviction laws and business licensures
- NCS vs. Transitional Sheltering Assistance
- What is the balance between NCS and congregate sheltering?

Accessibility and Equity

- Increased awareness of expectations for language and communication access planning
- Lessons learned on accessibility in NCS and feeding
 - Personal Care Assistants/Services
 - Supervision and security needs for the safety of individuals with cognitive and behavioral health disabilities
 - Communication
 - Behavioral and mental health
 - Addiction recovery
 - Using social vulnerability metrics to determine locations

Feel free to reach out!

- **Chris Baker:** christopher.baker@fema.dhs.gov
- **Dawn Brantley:** dawn.brantley@state.ma.us
- **Sandra Bridges:** sandra.bridges@ncdps.gov
- **Bruce Cuber:** bruce.cuber@redcross.org
- **Alan Harris:** aharris@seminolecountyfl.gov
- **Steven Lerner:** slerner@seminolecountyfl.gov
- **Rebecca Pittman:** rebecca.pittman@redcross.org



Questions?



INTRODUCING

IAMCP

INTERNATIONAL ASSOCIATION OF MASS CARE
PROFESSIONALS

Our mission.

The International Association of Mass Care Professionals brings together emergency management professionals and practitioners to improve and strengthen mass care through research, collaboration, education, training, and the development of tools and guidance.

Our vision.

The IAMCP vision is a strong and diverse cadre of professionals and practitioners who are effective operators and leaders in mass care who come together under the umbrella of the IAMCP to provide each other fellowship, guidance, and leadership.



BECAUSE PEOPLE MATTER.

masscare.community

Membership Types

The Association provides a variety of memberships including honorary. The list to the right describes each member category and the annual membership dues. Our goal with due was to keep costs to the individual low while still ensuring the Association is able to operate effectively.



Individual Member:

Individual membership is open to any person professionally engaged or interested in the advancement of disaster mass care.

DUES: \$100 per year

Life Member:

Life membership shall be conferred to Individual Members who have been members in good standing for fifteen (15) years and individuals who retire while they are individual members in good standing.

DUES: \$40 per year

Honorary Member:

Honorary membership in the Association is available to any person awarded honorary membership status by a majority vote of the Board of Directors for outstanding contributions towards the advancement of disaster mass care.

DUES: Complimentary for life

Student Member:

Student membership is open to any individual who is currently enrolled at least half time in an accredited college with an interest in disaster mass care. Individuals applying for Student Membership must provide the required information to validate their status as a student. The Student Membership is available only while an individual is enrolled in courses and for up to six (6) continuous years.

DUES: \$40 per year

**It's time to focus
on mass care.**