

## **OBJECTIVE 19: CONGREGATE CARE**

### **OBJECTIVE**

Demonstrate the adequacy of facilities, equipment, supplies, personnel, and procedures for congregate care of evacuees.

### **INTENT**

This objective is derived from NUREG-0654 which provides that OROs should demonstrate the capability to establish relocation centers in host areas at least five miles, and preferably 10 miles, beyond the boundaries of the emergency planning zone. (EPZ) (See evaluation criteria from Planning Standards J. and N.)

Congregate care is normally provided in support of OROs by the American Red Cross (ARC) under existing letters of agreement. Congregate care centers are generally located in schools, churches, or other institutional buildings. In many instances, multiple facilities are designated for use as congregate care centers. In some cases these centers may be co-located with reception centers in facilities known as relocation centers.

This objective addresses basic necessities such as shelter, food, sanitary and personal hygiene facilities, medical care, and first aid to evacuees. Provision of these necessities and services is referred to as congregate care.

### **DEMONSTRATION CRITERIA**

#### NUREG

#### CRITERION

**J.10.d.,h.,12. 1.      Emergency operations center personnel determine the need to activate congregate care centers on the basis of scenario events and exercise play requirements. Providers of congregate care capable of meeting those needs are identified and contacted.**

### **Explanation**

Responsible OROs should demonstrate the capability to determine which congregate care centers to activate on the basis of the needs of the population being evacuated and the proximity and accessibility of centers to area(s) being evacuated. In addition, OROs should demonstrate the capability to contact organizations responsible for activation of these centers.

OROs should demonstrate the capability to identify the congregate care needs of special population groups on the basis of protective action measures taken for such groups. OROs should contact organizations responsible for providing congregate care to affected special population groups.

### **Extent of Play**

Under this criterion, all activities should be completed as they would be in an actual emergency.

The identity of facilities to be activated by the emergency operations center staff should be determined during the exercise in response to scenario events and on the basis of locations of the centers in relation to the area(s) and population being evacuated. The EOC staff should actually contact those organizations responsible for activation of the particular centers identified for activation.

### NUREG

### CRITERION

**J.10.h.,12.**

- 2. Managers of congregate care facilities demonstrate that the centers have resources to provide services and accommodations consistent with American Red Cross planning guidelines. Managers demonstrate the procedures to assure that evacuees have been monitored for contamination and are uncontaminated prior to entering congregate care facilities.**

### **Explanation**

Managers of congregate care centers should demonstrate the capability to provide a variety of essential services to evacuees. Managers of congregate care centers should provide shelter, food, sanitation services, family assistance, child care, medical care, and first aid. They should demonstrate that food services at the centers conform, as closely as possible, to the ARC planning guidelines of two hot meals a day and a mid-day lunch for: children, the aged, expectant and nursing mothers, and individuals doing heavy work.

Responsible OROs should demonstrate that they have allocated space in the centers to support emergency medical care, registration, serving of meals, storage of food and supplies, storage of evacuee belongings, child care, and rest rooms. They should demonstrate the availability of the following recommended ARC resources: one toilet per 40 individuals; 40 to 60 square feet of sleeping space per individual; at least one quart of drinking water a day, per individual; five gallons of all-purpose water per individual, per day; and 2,500 calories or approximately three and one-half pounds of unprepared food a day,

per individual.

In addition, OROs should demonstrate the capability to provide the following in the facilities: a variety of paper products, including napkins, towels, sanitary napkins, and diapers; cleaning supplies; toiletry items or ARC comfort kits; fuel for cooking and transportation; registration supplies; toilets; water tankers; food preparation equipment; and heaters or fans.

Managers of congregate care centers should demonstrate the means for:

- o assuring that evacuees have been monitored for contamination and are uncontaminated before being allowed into the center and
- o registering and tracking of evacuees.

Managers of congregate care facilities should demonstrate the capability for providing at least minimal first aid and social services to evacuees. Personnel should know where to refer individuals for additional or specialized medical care. If an institution evacuates medically-dependent individuals to a reception center, the institution should provide medical care for these individuals. The ARC will provide care for medically-dependent individuals evacuated from their homes. Provisions should be made for child care for unaccompanied children.

For this demonstration criterion, it is not necessary that the managers of these facilities demonstrate absolute adherence to the letter of guidelines. They should demonstrate that they understand the importance of managing the available resources to meet as many of the guidelines as possible.

Managers of activated centers with responsibility for services to any special population groups, such as the mobility-impaired, should demonstrate the capability to deal with the special needs of individuals at the congregate care centers.

OROs should demonstrate the capability to staff facilities with managerial personnel, nurses, registration clerks, cooks, kitchen helpers, servers, building maintenance and security personnel, sanitation personnel, crisis counselors, social workers, child care personnel, and interviewers to assess needs of evacuees and make appropriate assistance referrals.

### **Extent of Play**

Under this criterion, demonstration of congregate care centers may be conducted out of

sequence with the exercise scenario. This should be arranged with the FEMA Regional Assistance Committee (RAC) Chair. Capabilities may be simulated. The evaluator should conduct a walk-through of the center to determine, through observation and inquiries, the adequacy of physical facilities, equipment, personnel, supplies, and procedures for the acquisition and management of supplies. In this simulation, it is not necessary to set up operations as they would be in an actual emergency. Alternatively, capabilities may be demonstrated by setting up stations for various services and providing those services to simulated evacuees. Given the substantial differences between demonstration and simulation of this objective, exercise demonstration expectations should be clearly specified in extent-of-play agreements.

Congregate care staff should also demonstrate the capability to ensure that evacuees have been monitored for contamination and are uncontaminated before entering the facility. All evacuees entering the center should be registered.

If operations at the center are demonstrated, material that would be difficult or expensive to transport (e.g., cots, blankets, sundries, and large-scale food supplies) need not be presented. However, availability of such items should be demonstrated by presentation of a list of sources with locations and estimates of quantities.

A selection procedure may be used to evaluate only a representative number of centers in each exercise if specified in the extent-of-play agreement. However, each center designated to serve the population in the plume pathway EPZ should be demonstrated at least once every six years. Centers activated for Demonstration Criterion 2 need not be the same ones contacted by the ORO in Demonstration Criterion 1 (i.e, the activated facilities do not have to be the contacted facilities.)

Capability to staff a center may be demonstrated by presentation of a current staff roster by the center manager.

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CRITERION

- N.1.a.            3.        All activities described in the demonstration criteria for this objective are carried out in accordance with the plan, unless deviations are provided for in the extent-of-play agreement.**

**Explanation**

Responsible OROs should demonstrate the capability to follow policies, implement procedures, and utilize equipment and facilities contained in their plans and procedures. OROs should demonstrate that they can follow sequences outlined in the various

procedures and perform specified activities, as necessary.

### **Extent of Play**

Under this criterion, all activities should be carried out as specified in the plan, unless deviation from the plan is provided for in the extent-of-play agreement.

### **CLARIFICATION OF TERMS**

**Activation** refers to a process by which a facility is brought up to emergency mode from a normal mode of operation. Activation is completed when the facility is ready to carry out full emergency operations.

**Congregate care** refers to the provision of temporary housing and basic necessities for evacuees.

**Congregate care center** refers to a facility for temporary housing, care, and feeding of evacuees.

**Emergency operations center** refers to a facility that is the primary base of emergency operations for an ORO in a radiological emergency.

**Facility** refers to any building, center, room(s), or mobile unit(s) designed and equipped to support emergency operations.

**Host area** refers to a geographical area outside the plume pathway emergency planning zones in which functions such as congregate care, radiological monitoring, decontamination, and registration are carried out.

**Monitoring** refers to checking radiation levels, usually by counting ambient radiation.

**Reception center** refers to a facility where monitoring, decontamination, and registration of evacuees is conducted.

**Relocation** refers to a protective action, taken in the post-emergency phase, through which individuals not evacuated during the emergency phase are asked to vacate a contaminated area to avoid chronic radiation exposure from deposited radioactive material.

**Relocation center** refers to a facility where monitoring, decontamination, registration, and congregate care of evacuees is conducted.

**Schools** are primarily intended to refer to public schools. However, because of the interest of private schools, kindergartens, and day care centers in participating in Radiological Emergency Preparedness exercises, this term may be expanded to include these groups.

**Special populations** are groups of individuals with physical or mental handicaps that need assistance when protective actions are implemented.

**Transportation-dependent individuals** refers to those individuals who do not have their own transportation and must depend on other individuals, taxis, or public transportation.

**Walk-through** refers to a type of evaluation in which evaluators inspect the physical layout of a facility or area including equipment, attendant resources, and procedures to determine conformity with specific ORO plans.