COVID-19 Pandemic
Operational Guidance for the 2020 Hurricane Season

May 2020

FEMA
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Executive Summary

On March 13, 2020, President Donald J. Trump declared the ongoing novel coronavirus (COVID-19) pandemic to be of sufficient severity and magnitude to warrant a nationwide emergency declaration for all states, tribes, territories, and the District of Columbia pursuant to Section 501(b) of the Stafford Act. In response to COVID-19, the entire Nation, including every level of government—federal, state, tribal, territorial, and local—has been engaged in efforts to slow and stop the spread of COVID-19 through a multitude of initiatives including stay-at-home orders, travel restrictions, use of Personal Protective Equipment (PPE), and adherence to Centers for Disease Control and Prevention (CDC) guidelines.

As a result of the COVID-19 pandemic, the Nation is facing unprecedented challenges as we respond to additional disasters, anticipate emergent incidents, and prepare for the 2020 hurricane season. Although the operating environment has changed, the Federal Emergency Management Agency’s (FEMA) mission of helping people before, during, and after disasters remains the same. Federal, state, local, tribal, and territorial (SLTT) officials, along with the private sector and non-governmental organizations (NGO), must partner together to fulfill their respective missions and help disaster survivors. As the Nation continues to respond to and recover from COVID-19 while posturing for the coming hurricane season, emergency managers must continue to operate under a framework of a locally executed, state managed, and federally supported approach to incident stabilization.

To help SLTT emergency managers and public health officials respond to incidents during the 2020 hurricane season amid the COVID-19 pandemic, FEMA is releasing the COVID-19 Pandemic Operational Guidance for the 2020 Hurricane Season. This document will:

- Describe anticipated challenges to disaster operations posed by COVID-19 and describe planning considerations for emergency managers in light of these challenges;
- Outline how FEMA plans to adapt response and recovery operations to the realities and risks of COVID-19 to:
  - Ensure prioritization for life safety, life sustainment, and workforce protection, and
  - Maintain the delivery of FEMA’s programs and help to solve complex problems by using whole-of-community disaster assistance to the highest level possible;
- Allow SLTT emergency managers to prepare and plan accordingly based on FEMA’s operational posture and create a shared understanding of expectations between FEMA and SLTTs prior to hurricane season; and
- Provide guidance, checklists, and resources to enable emergency managers to best adapt response and recovery plans.

This document is comprised of two main sections: response planning and recovery planning. Throughout each section, emergency managers will find detailed information on FEMA’s operating posture and guidance for SLTT governments. In the appendixes, emergency managers will find checklists and resources on FEMA operations and additional COVID-19 related guidance. While SLTT emergency managers are the primary audience for this document, this guidance can also be used by Emergency Support Function (ESF) and Recovery Support Function (RSF) partners as these departments and agencies plan and posture for the 2020 hurricane season.
Purpose

In preparing for the 2020 hurricane season, this document provides actionable guidance to SLTT officials to prepare for response and recovery operations and encourages personal preparedness measures amidst the ongoing COVID-19 pandemic. While this document focuses on hurricane season preparedness, most planning considerations can also be applied to any disaster operation in the COVID-19 environment, including no-notice incidents, spring flooding and wildfire seasons, and typhoon response.

Information presented in this document regarding FEMA’s operating posture should serve as a baseline for SLTT partners. For specific disaster response and recovery operations, FEMA will continue to work directly with federal and SLTT partners and may adjust this guidance based on the requirements of the incident, the operating environment and phased reopening as directed by SLTT officials, and any updates to existing guidance at the time of the incident.

While much of the SLTT considerations and planning guidance is specific to the public sector, NGOs and the private sector can utilize these factors for planning and preparedness. This document can be used to gain a better understanding of governmental posture, planning, and readiness efforts and how NGOs and the private sector play critical roles in response and recovery operations.

Questions, comments, and feedback from non-FEMA emergency management readers should be directed to the appropriate FEMA Regional Office. Questions, comments, and feedback from FEMA personnel and stakeholders regarding this document should be directed to the Office of Response and Recovery at FEMA Headquarters.
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Introduction

Emergency managers should anticipate the added complexities of conducting response and recovery operations while taking preventative measures to protect the health and safety of disaster survivors\(^1\) and the disaster workforce. By creating a shared understanding of expectations among FEMA and SLTT partners in anticipation of emergent incidents, emergency managers at all levels will be better positioned to successfully deliver the mission and achieve operational outcomes in disaster response and recovery this season. FEMA will continue to coordinate closely with jurisdictions and align or adjust disaster operations based on SLTT guidance, the best available health information, and in alignment with the White House Guidelines for Opening Up America Again (Guidelines).\(^2\)

As SLTT partners continue to prepare for hurricane season and other emergent incidents, emergency managers should review and adjust existing plans, including continuity of operations (COOP) plans, to account for the realities and risks of COVID-19 in their prioritization of life-saving and life-sustaining efforts. All reviews and adjustments to plans should factor-in FEMA’s planned operational posture, social distancing measures, CDC guidance, and SLTT public health guidance. Additionally, SLTTs should begin preparing and distributing communication materials that address preparedness while under the threat of COVID-19 for use in local communities as soon as possible.

Adapting to the COVID-19 Operating Environment

FEMA is prepared to support SLTT entities in accordance with the National Incident Management System, National Response Framework (NRF), National Disaster Recovery Framework (NDRF), Response Federal Interagency Operational Plan (FIOP), Recovery FIOP, and Comprehensive Preparedness Guide 101. There will be adaptations at all levels of emergency management in the COVID-19 environment, but to the greatest extent possible, the foundational concepts will remain intact. Preparedness, response, recovery planning, and COOP at all levels of government must:

- Be built upon scalable, flexible, and adaptable coordination;
- Align key roles and responsibilities across the Nation;
- Ensure successful incident stabilization of community lifelines;
- Provide programs and services to disaster survivors; and
- Ensure successful restoration of the health, social, economic, natural, and environmental fabric of the community.

Response Planning for 2020 Hurricane Season

Emergency managers should anticipate evolving and emergent incidents throughout the 2020 hurricane season that may require response operations with life-saving and life-sustaining efforts. SLTTs should be prepared to lead scalable and flexible response operations and adapt to adjustments in how FEMA implements disaster assistance and delivers programs. Since many aspects of disaster response may be conducted remotely this year, SLTTs should be prepared to coordinate through virtual

\(^1\) Disaster survivors include people with civil rights protections, such as persons with disabilities, older adults, individuals with limited English proficiency, and others with civil rights protections.

\(^2\) All references in the document are included in Appendix A: Additional Resources.
communications and ensure the public is aware that the FEMA application process may be virtual and not in-person due to health and safety considerations.

**FEMA’s Current Posture**

FEMA has ongoing disaster operations in all 10 regions, with personnel supporting at the National Response Coordination Center (NRCC), Regional Response Coordination Centers (RRCC), Joint Field Offices (JFO), and other field locations and fixed facilities. Personnel who are currently deployed will be prepared to pivot to support emergent needs. FEMA regions will continue to provide technical assistance and coordination for a range of program areas with their respective SLTT partners. FEMA is also well-positioned with thousands of personnel in the field supporting existing operations, thousands more available national assets ready to support emergent disaster operations, and more personnel joining the Agency through virtual onboarding every two weeks. In order to better adapt plans in this environment and support SLTT partners, FEMA programs will continue to provide assistance to survivors, but many programs may require online or phone registration processes (in lieu of in-person), remote assessments or inspections, and adapted program delivery within impacted areas experiencing localized outbreaks or periods of peak COVID-19 activity. However, when and if SLTT partners are overwhelmed, FEMA is prepared and postured to provide program support, regardless of delivery method.

**Operational Coordination**

In response to the COVID-19 national emergency declarations, the NRCC, all 10 RRCCs, all state and territorial emergency operations centers (EOC), and several tribal EOCs were activated. FEMA field leaders and regions are developing response plans and reviewing stabilization considerations for the seven community lifelines with a focus on areas that may already be impacted by COVID-19 operations.
FEMA expects to maintain some level of activation into the 2020 hurricane season in order to best support SLTT operations. To ensure that operational decisions are made at the lowest level possible, consistent with the NRF, FEMA is organizing to prioritize resources and adjudicate accordingly, if needed:

- At the incident level, Federal Coordinating Officers (FCO), in consultation with Regional Administrators, will work to address incident requirements using available resources. FCOs will proactively manage and identify risks and communicate new requirements to the RRCCs as they arise.

- At the regional level, the RRCCs will coordinate with FEMA personnel deployed to SLTT EOCs and adjudicate resource requests until operational control is ready to be transitioned to the FCO at the incident level, when designated, and will adjudicate resources within their area of operation and coordinate with other RRCCs and the NRCC as required.

- At the national level, the NRCC will coordinate with the regions on requirements and adjudicate resources to address national priorities.

FEMA routinely responds to multiple incidents simultaneously and will continue to posture support for stabilization of community lifelines. The NRCC is structured, designed, and staffed to support concurrent operations; however, due to the nationwide response efforts supporting COVID-19, FEMA is preparing additional personnel and physical space to meet expanded NRCC incident support requirements. Training and mobilizing additional personnel will provide a more flexible and scalable workforce that can expand the capacity and capability of the existing structure in the event of additional concurrent incidents. Additionally, FEMA regions are also planning for contingencies to handle multiple operations concurrent with the ongoing COVID-19 response.

**FEMA Personnel and Augmentation**

FEMA’s national personnel assets remain prioritized and ready for deployments for life-saving and life-sustaining response operations. In addition to FEMA personnel, FEMA will work with federal partners to provide capabilities for community lifeline stabilization through ESF support and mission assignments.
National Incident Management Assistance Teams

National Incident Management Assistance Teams (NIMAT) are on standby to support any disaster operation and are modifying equipment caches to ensure self-sufficiency. Planning factors for deploying a NIMAT in a COVID-19 environment include:

- The ability of the Regional Incident Management Assistance Teams (IMAT) to support the incident;
- Whether the disaster response has an inherently large-scale life-saving mission; and/or
- The disaster response appears to be extraordinarily complex.

In order to maintain posture for emergent incidents, NIMAT will plan for transition and team demobilization after lifelines are stabilized or stability is imminent, initial mitigation efforts are in place to protect property and the environment, and Regional IMAT or other personnel are in place and able to assume operational control. In addition to full team demobilization, specific team members may be demobilized early to minimize exposure if a suitable replacement is on site and able to properly support existing and future operations.

Urban Search and Rescue Teams

FEMA is actively monitoring the availability of all internal resources to support National Urban Search and Rescue (US&R) teams and is conducting contingency planning for both traditional and non-traditional models to meet potential operational needs. The National US&R Response System has established procedures, which will be temporarily expanded to enable greater operational capacity during the COVID-19 pandemic. FEMA is prepared to increase capacity by using all levels of potential additional resources (e.g., military, state/local search and rescue resources, first responders) to include the ability to deliver training and deployment of smaller Type III assets in lieu of Type I teams.

Disaster Emergency Communications

FEMA's Disaster Emergency Communications (DEC), being a primary contributor to support restoration of communication infrastructure, is postured to deploy Mobile Emergency Response Support detachments, Mobile Communications Office Vehicles (MCOV), and DEC personnel in a COVID-19 environment. Increased requirements for and use of Mobile Emergency Operations Vehicles, Emergency Operations Vehicles, Incident Response Vehicles, and MCOVs are anticipated to help FEMA personnel manage social distancing requirements, including to support personnel working from outside state EOC facilities. FEMA will also support requirements for cloth face coverings and increased hand hygiene for all employees operating within mobile vehicle platforms.

Personnel Augmentation

As always, FEMA intends to leverage local hire support for any emergent disaster operations. If the Department of Homeland Security (DHS) activates the Surge Capacity Force (SCF), deployment assignments will follow CDC guidance and maintain FEMA's posture to minimize travel and direct contact, and potentially increase telework flexibilities. FEMA is also developing virtual training and skill set assessments for existing SCF members in order to rapidly and efficiently align the thousands of available SCF members to meet operational needs.
Contract and Commodity Readiness

FEMA has prepared for hurricane season and other emergent incidents by aligning resources, awarding contracts, and readying Logistics personnel for rapid response operations. In addition to owning and purchasing resources, FEMA also has multiple partnerships with other federal agencies such as the U.S. Army Corps of Engineers, the Defense Logistics Agency, and NGOs such as the American Red Cross.

FEMA continues to ensure Distribution Centers maintain commodity levels at, or near, pre-COVID-19 status. FEMA is focusing on rapidly replenishing commodities used in support of COVID-19 pandemic operations. Based on refined requirements implemented following the 2017 hurricane season, FEMA has increased its storage space both inside and outside of the contiguous United States; trailer fleets have been increased and modernized; and staging and distribution plans have been enhanced to increase strategic stockpiling, prepositioning, and expedited transportation of commodities to the field.

Remote Disaster Operations

While COVID-19 morbidity and mortality persist, FEMA will generally minimize the number of personnel deploying to disaster-impacted areas and minimize the number of new field deployments by using personnel already deployed to the impacted region, including FEMA Integration Team (FIT) members or other FEMA personnel already working at EOCs, deploying locally-available personnel, and leveraging remote disaster support. FEMA Regional Administrators, in partnership with FEMA Headquarters (HQ), will evaluate risk in their regions and determine the most appropriate approach to deployments while considering the guidance and direction of public health officials and the factors established in the White House Guidelines.

To support virtual deployments and remote disaster operations, FEMA is planning to:

- Increase communications to the public through social media platforms, virtual townhalls, and coordinated messaging to survivors from FEMA officials and SLTT leadership, and ensure that all communications are provided in ways that are accessible to individuals with disabilities and limited English proficiency;
- Ensure remote disaster personnel have the most up-to-date policies and procedures, training needs are met, and supervisors have the tools needed to appropriately manage employees;
- Increase availability and deployment options for FEMA personnel to make informed decisions on how to support disaster operations while protecting the health and safety of the workforce;
• Continue use of virtual personnel mobilization center process to facilitate rapid deployment of personnel and ensure that deployed personnel receive information technology services as needed to prepare them to directly support impacted areas; and

• Increase information technology support for remote disaster operations, including, but not limited to, remote inspection processes, remote preliminary damage assessments, and working with partners to pre-identify accessible technology platforms that can support virtual meetings with interagency, private sector, NGOs, and SLTT partners.

Disaster Facilities

While FEMA will generally minimize deployments, some emergent incidents may still require disaster facilities and a limited field presence. Field leaders, in consultation with FEMA regional offices, will consider additional safety requirements in accordance with SLTT public health guidance and phased reopening when planning for new FEMA disaster facilities. When considering new facility floorplans and leases, field leaders, in coordination with the Unified Coordination Group (UCG), FEMA safety and security personnel, and CDC and SLTT public health officials, will develop localized mitigation strategies, including temperature and health screenings, increased cleaning and disinfection requirements, and reduced personnel footprints for social distancing, to ensure the safety and security of FEMA personnel and partners. When feasible, FEMA will employ engineering and administrative controls, such as the use of transparent barriers as appropriate and labeling interior floor areas in appropriate areas to encourage proper social distancing.

Field leaders will use modified personnel plans to assess how many personnel will be deployed to field operations and ensure that facility layouts can accommodate CDC guidance and social distancing recommendations. FEMA, in coordination with SLTT officials, will provide PPE and/or cloth face coverings and other supplies (e.g., hand sanitizer, cleaning wipes) for personnel to use in disaster facilities and implement other protective measures, based on the Department of Health and Human Services, CDC, and Occupational Safety and Health Administration guidance and exposure risk levels.

Additionally, FEMA will adjust Incident Support Base operations to appropriately minimize large numbers of personnel and truck operators on site. FEMA will use smaller staging teams, additional workspace and facilities to accommodate needed personnel, PPE and/or cloth face coverings, social distancing, and other mitigation strategies.

Guidelines for Opening up America Again

The White House’s Guidelines provide critical considerations for FEMA and SLTTs planning for disaster operations. Depending on the Guideline phase of a disaster-affected jurisdiction (as determined by the Governor, tribal, or local leadership), FEMA will work with SLTT leadership to determine the most appropriate operational posture to protect impacted communities and deployed personnel. FEMA may adopt a more conservative posture than a jurisdiction, but will generally not adopt a more relaxed posture.

FEMA has developed a Reconstitution Exercise Starter Kit with sample documents that SLTT departments, agencies, or organizations can use to conduct planning workshops on returning to full operations. Suggested discussion questions build upon reconstitution planning principles and the White House’s Guidelines.
distancing guidance, additional procedures to control entry into staging sites, and incorporate new documentation requirement processes as needed to minimize exposure.

To ensure workforce safety, FEMA will work with SLTT partners to address:

- Facility specifications, which shall include the requirement for a co-location of organizational elements across a sufficient space capable of allowing for social distancing of six feet (as appropriate);
- Instruction on the use of cloth face coverings to personnel delivering to or working in any operational disaster facilities;
- Policy modifications that may be needed to accommodate employees with disabilities in accordance with Equal Employment Opportunity Commission guidance;
- Guidance for individuals instructed not to enter FEMA facilities (e.g., persons tested positive for COVID-19 or symptomatic and not cleared to return to work);
- Temperature and health screening procedures prior to entry at all facilities or sites;
- Cleaning and disinfection procedures, including high touch areas such as computer equipment, telephones, clipboards, paperwork, door handles, and bathrooms; and
- Safe movement of personnel in potentially high physical transfer areas, such as distribution centers, fueling stations, high density office areas, enclosed spaces, congregate housing, hospitals, and public areas.

**SLTT Response Planning**

The Nation’s emergency management system is most successful when it is locally executed, state managed, and federally supported. Jurisdictions across the country are responsible for leading efforts to stabilize community lifelines, distributing commodities and resources to meet the needs of an emergency, and supporting program delivery. FEMA continues to support these efforts. Emergency managers should begin reviewing existing response plans and guidance to align, link, and synchronize community response actions with federal planning efforts like those described in this document and prepare protective measures for their disaster workforce and survivors. SLTTs should consider adopting COOP strategies and prepare for a variety of potential conditions to account for localized outbreaks, periods of peak COVID-19
activity, or phased reopening. SLTTs should exercise updated plans via virtual tabletop exercises. FEMA programs can provide additional support for training, drills, or products for exercise plans.

Response Considerations Checklist

- Do you have a plan to respond if your emergency management agency/department has reduced staffing due to COVID-19?
- Have you reviewed and updated your COOP plans to continue essential functions and tasks with little to no interruption?
- Do you have a plan to prioritize resources to stabilize the communication lifeline?
- Do you have a plan to determine which personnel must be physically deployed to the field and how they will be protected?
- Does your emergency management agency/department have an established senior liaison with the senior public health officer for your jurisdiction to ensure current, timely public health advice?
- Have you implemented CDC’s Strategies to Optimize the Supply of PPE?
- Have you purchased and stockpiled medical-grade PPE for those who need it according to CDC guidelines?
- Have you purchased and stockpiled cloth face coverings?
- Do hospitals in evacuation zones have a plan to not only evacuate patients, but also ventilators, dialysis machines, and stockpiled PPE?
- Do you have a plan for a high-risk population (e.g., nursing home residents, people with disabilities, people requiring evaluation assistance, people experiencing homelessness) that has an ongoing outbreak and needs to be evacuated?
- Do you have a system that can collect and share data to support decision-making around community lifelines?
- Have you developed communication materials accessible to people with access and functional needs (e.g., deaf or hard of hearing, blind or have low vision, people with an intellectual disability, people with low literacy, limited English proficient persons, older adults) that address hurricane preparedness while under the threat of COVID-19 in your communities?
- Have you considered the extra time it may take to evacuate given the need for social distancing for increased mass transit modes (e.g., buses) may require?

See Appendix B and Appendix C for additional Preparedness and Response checklist considerations

Operational Coordination and Communications

SLTTs should review existing response operations plans and consider:

- Leveraging efforts underway for COVID-19 response, including maintaining current command and control roles and responsibilities.
- Expanding UCG membership beyond senior leaders to ensure appropriate coordination among private sector and public health or medical leadership for the scope and nature of the incident, and better enable jurisdictions to jointly manage and direct incident activities through establishment of common incident objectives, strategies, and a single incident action plan.

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• Emphasizing stabilization of the communication lifeline as operational adaptations include or may rely heavily on virtual coordination, including the ability to work directly with FEMA’s virtually deployed personnel.

• Preparing for COVID-19 impacts to community lifeline stabilization and the interdependencies between lifelines, especially those that may already be significantly impacted, like the health and medical lifeline.

• Utilizing EMPG-S funding to strengthen decision-support capabilities through the collection, analysis, and sharing of data.

• Preparing for an increased need for accessible and multi-lingual messaging and communications through available media, wireless emergency communications, and use of virtual townhalls for coordinated communications to survivors from SLTT leadership, FEMA officials, and others.

• Reviewing and updating existing Orders of Succession and Delegations of Authority for key leadership and personnel.

• Preparing state national guard forces and associated resources for potential deployment to support during disaster operations while in a COVID-19 environment.

• Engaging community-based partners that support and serve persons with disabilities, limited English proficient persons, low income communities, communities of color, and houses of worship to formalize partnerships to meet the needs among these populations and ensure the equitable and impartial delivery of disaster assistance.

Commodities and Points of Distribution

Point of Distribution (POD) operations will continue to be state, territory, and/or tribal-led and operated with federal support where required. SLTTs should review existing plans and consider:

• Utilizing EMPG-S funding to strengthen contracts, if needed, to provide medical-grade PPE, cloth face coverings, and necessary commodities during disaster operations, especially if available resources have been allocated to COVID-19 response.

• Determining alternate options for locating and procuring critical resources if traditional methods for procurement of needed response and recovery supplies may not be feasible.

• Reinforcing the supply chain through preservation, expansion of warehouse footprints, and stockpiling mission-critical materials.

• Adjusting planned POD sites to accommodate operational adaptations for the COVID-19 environment, including considerations for significantly increased demand, social distancing, and regulated traffic flow.

• Reviewing and evaluating current mutual aid agreements and Emergency Management Assistance Compact (EMAC) mission-ready packages to assess if available resources may be limited due to COVID-19 operations and consider virtual EMAC agreements when possible.

• Reviewing alternative commodity distribution sites that can be used to limit direct contact between personnel and survivors, and ensuring commodity distribution sites have plans in place to provide services to people with disabilities.
• Incorporating federal POD Monitor to assist with burn rate management and resupply efforts that may also be impacted.

• Altering plans to limit physical points where communities will congregate and preparing for restricted/diminished support from NGOs for commodity distribution.

Staffing and Workforce Protection Planning

SLTTs should review existing plans for workforce protective measures to support personnel who will be deployed to the field and associated disaster facilities and consider:

• Increasing membership of Community Emergency Response Teams (CERT) and Medical Reserve Corps (MRC), and conducting associated volunteer training virtually, as necessary, to ensure the health and safety of its members.

• Reviewing the readiness of typical disaster support personnel (e.g., first responders, logistical personnel, health and medical personnel) who may already be deployed to ongoing operations.

• Procuring and distributing PPE and workforce protective measures for personnel required to be in the field, including first responders, search and rescue teams, logistics support, and health and medical professionals.

• Implementing safety measures at disaster facilities to include temperature and health screenings, facility cleaning and disinfection measures, and social distancing requirements for on-site personnel.

• Ensuring personnel can continue to respond if the emergency management agency or department has reduced staffing due to COVID-19.

• Providing additional telework flexibilities and remote disaster support strategies that can be integrated with FEMA remote disaster operations, if needed, and plan to minimize disaster facility personnel.

• Planning for virtual coordination with federal partners, bolstering communications and information technology support for remote operations, and pre-identifying approved technology platforms that can be used for increased virtual meeting capabilities among SLTTs, FEMA officials, federal interagency partners, volunteer organizations, and the private sector.

Evacuation Planning

SLTTs should review evacuation plans and consider:

• Assessing community demographics and identifying areas facing high risk, including considerations for those under stay-at-home orders, at higher risk of serious complications from COVID-19, individuals with disabilities, and others with access and functional needs.

• Reviewing clearance times and decision timelines, with COVID-19 planning considerations, such as mass care and sheltering plans.

• Considering impacts of business closures/restrictions along evacuation routes; limited restaurant/lodging availability will place extra stress on state and local officials and may require unprecedented assistance to travelers.
• Maintaining availability of mass transit and paratransit services that provide a transportation option for those individuals who are unable to use the fixed-route bus or rail system for evacuation of people with disabilities in accordance with CDC guidance and social distancing requirements.

• Using EMPG-S funding to modify evacuation plans to account for limited travel options and increased time needed for evacuation of health care facilities.

• Targeting evacuation orders and communication messages to reduce the number of people voluntarily evacuating from areas outside a declared evacuation area.

• Developing communication plans for communities likely impacted by hurricane season or other emergent incidents for any updates or alterations to evacuation strategies, and ensuring communications are provided in a way that is accessible to people with disabilities and limited English proficiency.

• Reviewing available alternate care sites and federal medical stations as potential evacuation sites or longer-term solution for hospitals and medical facilities, if needed, and considering staffing needed to support facilities.

• Determining logistics and resource requirements to support government-assisted evacuations.

• Reviewing, expanding, and/or establishing agreements with NGOs, agencies, volunteers, and private sector vendors that will be needed for evacuee support and ensuring partners are prepared to deliver services in a COVID-19 environment.

• Engaging with neighboring states and jurisdictions to coordinate cross-border movement of evacuees in large-scale evacuations.

• Developing host jurisdiction sheltering agreements.

Recovery Planning for 2020 Hurricane Season

Given the complexity of operations in a COVID-19 environment, some aspects of recovery planning and posture will change to ensure the safety of disaster survivors and emergency managers. SLTTs should be prepared to lead flexible recovery operations based on FEMA’s adapted posture and procedures for implementing disaster assistance and program delivery. Given the increased use of remote processes for recovery operations, SLTTs should also be prepared to coordinate through virtual communications, anticipate alternative methods to verify applicant eligibility, and ensure the public is aware of these modifications. Successful recovery will require that FEMA, SLTTs, NGOs, and private sector partners coordinate planning efforts to adapt standard processes and procedures for synchronized recovery.
FEMA’s Current Recovery Posture

FEMA will continue to coordinate technical assistance and recovery operations through FEMA regions in partnership with SLTTs, NGOs, and the private sector, including Voluntary Agency Coordination support to non-governmental, faith-based, non-profit, humanitarian, philanthropic, and community-based organizations that provide the wrap-around and social services necessary for effective SLTT response and recovery. While the level of technical assistance will remain the same, SLTTs should be prepared to adapt to remote coordination. For operations in a COVID-19 environment, FEMA will adapt its traditional field operations and program delivery models to expedite services, support, and assistance to SLTT partners.

Mass Care/Emergency Assistance

The operational realities of the COVID-19 environment will require adaptations to many aspects of the Mass Care and Emergency Assistance service areas, particularly all stages of sheltering assistance. Due to the risks associated with COVID-19 and congregate sheltering, including standards for occupancy rates, equipment requirements, and assessment of at-risk or vulnerable populations, this approach will be adjusted. Recognizing some congregate sheltering will still be necessary in many hurricane scenarios, FEMA will support SLTT partners and NGOs to mitigate risks and support efforts consistent with public health guidance.

Given the changes to non-congregate shelter support this hurricane season, FEMA regions

Use of Non-Congregate Shelters in 2020 Hurricane Season

In an emergency or major disaster declaration that authorizes Public Assistance (PA), Category B, Emergency Protective Measures, FEMA will adjust policies to allow SLTTs to execute non-congregate sheltering in the initial days of an incident. Non-congregate shelters include, but are not limited to, hotels, motels, and dormitories. FEMA Regional Administrators will have delegated authority to approve requests for non-congregate sheltering for hurricane-specific disasters for the 2020 season.

While not a single solution, this funding will assist with sheltering operations in the short-term. SLTTs will need to work with FEMA and NGO partners to determine how non-congregate options can be incorporated into larger sheltering plans.

SLTTs should coordinate with FEMA regions to:

- Ensure adequate sheltering plans are in place and coordinated, including consideration of contractual agreements and federal funds (if required) in accordance with federal procurement standards.
- Plan for appropriate scope and duration for sheltering resources based on anticipated needs.
- Ensure that data, documentation, and tracking mechanisms are in place.
- Plan appropriate accessibility considerations for people with disabilities, and those with functions and access needs, and ensure adequate availability of such resources.

As part of the sheltering plan, SLTTs should outline a transition from non-congregate sheltering to alternate options, including Transitional Sheltering Assistance (TSA) for eligible applicants if a major disaster declaration is approved, or for a timely termination when non-congregate sheltering is no longer needed.
will assist in planning and providing additional technical assistance. Recognizing the timing and potentially greater need for non-congregate sheltering, FEMA will work with SLTT partners to provide greater flexibility for the eligibility of both congregate and non-congregate options for reimbursement under the PA program.

In addition, FEMA, along with federal partners and National Voluntary Organizations Active in Disaster partners will continue to provide mass care technical support to SLTTs for the following:

- Planning for protective measures for all mass care personnel and survivors;
- Planning for additional needs at shelters for supplies and material for cleaning, disinfection, and social distancing;
- Developing strategies for how shelf-stable meals and other feeding commodities can be used to supplement initial primary feeding requirements and/or serve as primary feeding options;
- Planning for resource requirements for individuals and households who arrive at shelters without medical equipment, medical prescriptions and/or supplies, personal assistance services (caregivers), and cloth face coverings;
- Developing strategies to address health screening criteria (e.g., positive, presumptive positive, symptomatic, known exposure) upon arrival at a congregate shelter and procedures if a case is identified;
- Planning for protective measures at sheltering locations, to include health screening, social distancing requirements, cleaning and disinfection, and quarantine or isolation areas, as needed;
- Considerations for shelter staffing options outside of volunteers, as resources may not be available;
- Planning for feeding strategies for survivors sheltering in place and those located in non-congregate shelters in accordance with CDC guidance and social distancing requirements;
- Planning for timely demobilization of sheltering resources when they are no longer needed based on the impact or forecasted impact of an incident;
- Planning for necessary information collection and tracking; and
- Planning for possible modifications to how federal mass care personnel support evacuees, including, but not limited to:
  - Transportation to evacuation points/congregate/non-congregate shelters;
  - Supporting health screenings of staff and clients entering facilities;
  - Supporting COVID-19 isolation/medical care shelters;
  - Triage of vulnerable populations processed into non-congregate options;
  - Coordination of workforce lodging across agencies and responder organizations to prioritize hotel access for non-congregate sheltering; and
  - Pet sheltering.
Virtual Preliminary Damage Assessments

To ensure workforce protection, FEMA regions may elect to utilize virtual or desktop Preliminary Damage Assessment (PDA) options. Virtual PDAs may include use of aerial imagery (as appropriate), Hazus, resident or SLTT submitted data, documentation, photos, and local emergency manager detailed and verified statements to document damages as accurately as possible as opposed to conducting physical, in-person assessments to validate cost, work, facility, and applicant eligibility. Regions will work with SLTTs to determine the appropriate type of PDA process given the level of public health emergency, which may vary across counties based on localized hotspots. If personnel deploy to the field, FEMA will use as few personnel as possible to ensure social distancing and may rely on windshield assessments to complete the PDA process in a timely manner.

Disaster Survivor Assistance and Disaster Recovery Centers

FEMA, in coordination with SLTT partners, will determine the use of Disaster Recovery Centers (DRC) or Disaster Survivor Assistance (DSA) teams according to the phased reopening of an impacted area. In areas with limited field presence, FEMA will use online and phone registration and virtual assessments to ensure program delivery. If phone lines are down, FEMA will prioritize stabilizing the communication lifeline in order to restore networks and support registration processes. FEMA will also coordinate with federal and voluntary agency partners

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3 Hazus is a nationally applicable standardized methodology that contains models for estimating potential losses from earthquakes, floods, and hurricanes. Hazus uses Geographic Information Systems (GIS) technology to assist government planners and emergency managers in estimating physical, economic, and social impacts of disasters.
to promote digitally available disaster recovery resources, support, and referral services, as well as to ensure service delivery methods are accessible and widely promoted for individuals with disabilities.

If DRCs and DSA team support are requested by the state, territory, or tribal nation, and FEMA determines it is consistent with phased reopening guidelines, FEMA will consult with SLTT public health officials on local requirements. In DRCs, FEMA will implement additional health and safety measures based on current CDC guidance, such as requiring cloth face coverings (if appropriate), hand hygiene, and social distancing measures.

**Individual and Households Programs and Direct Housing**

FEMA does not anticipate major changes in program eligibility, timeliness of grant awards, or the level of assistance provided under the Individual and Households Program. However, the delivery mechanisms of certain aspects of the program will be modified.

FEMA will utilize remote inspections and field work to evaluate damage as much as possible, with the goal of expediting the delivery of recovery assistance. FEMA will only conduct remote inspections on homes where occupants have indicated a certain degree of damage upon registration. For applicants who self-report minor damage and can remain in the home, FEMA will determine whether an inspection is necessary, enabling FEMA to focus its limited resources on those with the greatest need.

These remote inspections and field work, consistent with eligibility, will support numerous programs including Rental Assistance, Home Repair Assistance, Replacement Assistance, Other Needs Assistance for Personal Property, and Assistance for Miscellaneous Items. Types of Other Needs Assistance that do not require an inspection, including childcare, transportation, medical and dental, funeral expenses, moving and storage, and procurement of Group Flood Insurance Policies, will be administered as normal. Clean and Removal Assistance will not be authorized in disasters that utilize remote inspections.

**Direct Housing**

FEMA does not anticipate changing the criteria necessary for approving a request for Direct Housing. However, given the challenges associated with implementing some forms of Direct Housing in a COVID-19 environment, FEMA may rely more on certain forms of temporary housing (i.e., rental assistance) and non-congregate sheltering. For new disasters that are approved for Direct Housing, FEMA will prioritize the placement of Transportable Temporary Housing Units on private sites and the use of Direct Lease.

**Community Services Programs**

Request processes and the criteria for Community Services Programs (Crisis Counseling, Disaster Unemployment, Disaster Case Management, and Disaster Legal Services) remain unchanged. The
delivery of these programs will be remote as much as possible. This includes the use of crisis counseling hotlines; socializing information through various forms of media; delivering leaflets, brochures, or other educational materials to disaster survivors; and providing all services and communications in an accessible manner for individuals with disabilities.

Public Assistance

The basic principles, application procedures, eligibility, and award mechanisms of the PA program will remain unchanged. However, most PA work will be conducted virtually. Recipients should be prepared to conduct virtual applicant briefings, with virtual participation by FEMA. The Recovery Scoping Meeting to develop the Program Delivery Plan and discuss damage inventory will also be conducted remotely. Recipients and subrecipients should be prepared for virtual applicant engagement to work through program delivery, formulate projects, and upload documentation.

FEMA will conduct inspections remotely whenever possible. While remote inspections may not be possible for all applicants, the dual use of remote and in-person inspections expedites the delivery of recovery assistance to grant recipients and reduces the number of personnel required in the field. For some incidents, FEMA may still deploy PA personnel to perform specific activities, such as critical infrastructure stabilization coordination or just-in-time site inspections, which cannot be completed virtually. FEMA will continue to provide technical assistance to grant recipients and applicant personnel through virtual training, job aids, online how-to videos, the Grants Portal Hotline, virtual mentorships, and remote customer assistance.
Hazard Mitigation

FEMA is taking proactive steps to address the COVID-19 pandemic to help serve its National Flood Insurance Program (NFIP) customers who may be experiencing financial hardships. One example of this is extending the grace period to renew flood insurance policies from 30 to 120 days. Additionally, the NFIP has issued guidance to the Write Your Own companies and NFIP Direct on remote claims handling. FEMA is currently developing new methods to improve program delivery, including extension of application deadlines and Periods of Performance, and also granting a 12-month extension to meet the hazard mitigation plan requirements for local and tribal governments that apply for FEMA hazard mitigation assistance grants, including the Hazard Mitigation Grant Program (HMGP). FEMA regions continue to provide technical assistance to SLTTs to meet the hazard mitigation plan requirements in order to be eligible for certain FEMA assistance programs, such as HMGP, Building Resilient Infrastructure and Communities, High Hazard Potential Dams Rehabilitation Grants, and Flood Mitigation Assistance.

Though aspects of the Hazard Mitigation (HM) Program delivery are typically highly dependent on personal interaction (e.g., Community Education and Outreach), FEMA can conduct mitigation interviews with Individual Assistance (IA)-registered survivors through a dedicated phone line or use a model similar to remote flood insurance claim adjustments to continue providing services to disaster survivors. HM’s Flood Insurance personnel will also conduct virtual visits with insurance agents in disaster-impacted areas to promote the NFIP and its benefits, rather than in-person office visits. HM’s Floodplain Management personnel will also conduct virtual visits with State Floodplain Coordinators and Local Floodplain Administrators in disaster-impacted communities to provide technical assistance and ensure ordinance compliance, as needed. FEMA may deploy HM personnel to carry out infrastructure inspections, among other critical assignments. FEMA may also deploy HM or contract personnel to support local, substantial damage inspections as well as produce and share data analytics in making as many remote determinations as possible to limit the number of physical inspections required.

Environmental Planning and Historic Preservation

Many elements of an Environmental Planning and Historic Preservation (EHP) review, which are required for all proposed FEMA grants, will be conducted through desktop analysis of environmental considerations (e.g., presence/absence of historic properties or critical habitat for endangered species, project requirements associated with special flood hazard areas). However, EHP’s ability to conduct in-person site inspections will likely be limited due to COVID-19. Without the full capability to conduct site visits, EHP will rely more heavily on site-specific critical information to be provided by FEMA grant programs and applicants in order to understand the environmental and historic preservation resources present. Therefore, applicants should be prepared to provide adequate documentation to facilitate remote inspection and evaluation of proposed project sites when possible. FEMA may require in-person site visits for EHP activities, such as biological or archaeological monitoring, depending on specific conditions present at a given location, and will work with FEMA Grant Program personnel and applicants to ensure that these requirements are met safely.

Public participation requirements found in several EHP laws and regulations, sometimes in the form of public meetings, may also be modified to ensure effective public comment is facilitated safely. Additional actions may be delayed or deferred on a case-by-case basis at the discretion of the incident-
specific Regional Environmental Officer and the Director of the Office of Environmental Planning and Historic Preservation in conjunction with the State Coordinating Officer.

Interagency Recovery Coordination

Regional and national Interagency Recovery Coordination will continue to prioritize the coordination of assistance in support of SLTT recovery outcomes in the following ways:

- Ensuring clear communication and comprehensive, accessible information about available assistance leveraging existing information sharing platforms;
- Streamlining and/or simplifying the application and delivery processes;
- Aligning policies to streamline access to funding sources;
- Actively coordinating among federal partners to reduce duplication, waste, and fraud;
- Coordinating with federal partners to share information on promising practices for sequencing federal funds to maximize impacts on SLTT recovery goals and outcomes; and
- Developing and sharing SLTT recovery “self-help” tools.

FEMA will consolidate coordination and recovery management support at the regional level throughout hurricane season to better serve all disaster operations in achieving SLTT outcomes. This approach will allow partners to streamline and enhance consistent support across multiple operations. The Recovery Support Function Leadership Group is supporting the coordination of assistance among partner agencies at the national level to resolve operational and policy challenges as needed.

SLTT Recovery Planning

Based on FEMA’s planned operating posture and impacts to a community from COVID-19 prior to a follow-on incident, SLTT partners may need to consider revising recovery operational plans, long-term recovery objectives, and pre-disaster recovery plans. SLTTs should coordinate with FEMA regions if there are questions on implementing any new policies or delivery methods for FEMA recovery programs and prepare for FEMA to rely more heavily on virtually deployed personnel.

Furthermore, FEMA recommends that state, tribal, and territorial leadership establish coordination and management mechanisms that could be used across multiple incidents and that focus support on achieving state, tribal, and territorial goals and outcomes. State governors as well as tribal and territorial leaders may consider appointing a State Disaster Recovery Coordinator (SDRC) or Tribal Disaster Recovery Coordinator (TDRC) to lead recovery coordination activities for a jurisdiction. SDRCs and/or TDRCs could lead the recovery organization, recovery priority setting, and serve as the jurisdiction’s primary point of contact with the state and federal agencies to explore and resolve unmet recovery needs. If a SDRC or TDRC is currently leading the COVID-19 recovery effort, close coordination with FEMA regions will enable better assistance.
Recovery Considerations Checklist

- Do you have reopening and reconstitution criteria that support opening of businesses damaged by a hurricane and/or tropical storm that is also impacted by COVID-19 restrictions?
- Have you identified sufficient congregate shelter space to safely implement social distancing?
- Have you reviewed and incorporated CDC’s Interim Guidance for General Population Disaster Shelters During the COVID-19 Pandemic into sheltering plans and strategies?
- Do you have a plan to conduct health screenings of evacuees that may enter sheltering locations?
- Do you have a medical care plan for those evacuees that meet screening criteria (e.g., positive, presumptive positive, symptomatic, known exposure) upon arrival at a congregate shelter?
- Do you have a plan to support virtual PDAs and inspections?
- How will you manage building and housing inspections and re-occupancy procedures given the constraints and impacts of COVID-19 (e.g., social distancing)?
- How will you maximize community input and buy-in for your recovery efforts to ensure they are delivered in an equitable and impartial manner (e.g., by receiving input from members of low-income communities, members of communities of color, persons with disabilities, older adults, persons with limited English proficiency)?
- Can you hold effective public meetings while maintaining social distance? Do you have mechanisms to reach isolated or underserved communities?
- Do you have a process to determine eligibility for all relevant funding opportunities? Do you have access to associations that can support disaster-related projects?
- Does your jurisdiction’s financial practices and procedures for non-disaster projects follow the same practices and procedures for disaster-related projects?

See Appendix D for additional Recovery checklist considerations

Mass Care/Emergency Assistance Planning

The impacts of COVID-19 will require SLTTs to reassess their mass care plans and strategies. SLTTs should work with partners to reassess all aspects of their plans to ensure they can effectively execute sheltering and other mass care activities in a pandemic environment in coordination with public health officials and updated guidance. SLTT emergency managers should assess which functions they will continue to provide during sheltering operations, identify alternate options for maintaining capabilities, and determine the availability of voluntary and non-governmental organizations to support human services needs in shelters.

Important readiness measures that jurisdictions can take now include reviewing and re-validating emergency operations and sheltering plans; proactively preparing accessible and multi-lingual messaging regarding individual and family preparedness; and modifying resource acquisition and allocation plans. This should also include identifying COVID-19 high-risk populations that may require additional protective measures. SLTTs should also re-emphasize evacuation messaging to focus sheltering efforts on only those that have a need to leave their homes.

SLTTs should review mass care and sheltering plans and consider:
• Pre-identifying locations and altering sheltering strategies, to include:
  o Selecting appropriately sized shelter facilities to support CDC guidance and SLTT public health guidance, social distancing requirements, establishment of isolation areas, and cloth face covering distribution.
  o Leveraging non-congregate sheltering options and working with FEMA on solutions for providing sheltering, including considerations for survivors who need isolation but do not require hospitalization.
  o Using EMPG-S funding to identify mass care and shelter options that meet CDC guidance and mitigate risks to communities and the most vulnerable citizens, such as the elderly, those with underlying conditions, and people with disabilities.
  o Developing plans to account for the care of individuals requiring additional assistance, including vulnerable populations, older adults, individuals with disabilities, and others with access and functional needs.
  o Developing a plan to conduct health screenings of staff and evacuees for COVID-19 that may enter sheltering locations.
  o Assessing the need for PPE and planning for distribution as needed.
  o Planning for evacuees and staff that meet screening criteria (e.g., positive, presumptive positive, symptomatic, known exposure) upon arrival at a congregate shelter, including establishment of isolation areas for symptomatic survivors and others at congregate shelters.
  o Planning for support to increase pet sheltering as co-habitation may not be a viable option due to increased shelter space requirements.

• Developing accessible, timely, and actionable communication plans for conveying alterations to sheltering strategies for communities likely impacted by hurricane season, including for limited English-proficient persons and people with disabilities.

• Supporting health and medical systems that are already stressed, with an expectation that those emergency services will continue to be taxed into hurricane season, including potential exposure of disaster survivors and emergency response personnel in facilities, testing requirements, and contact tracing support.

• Assessing capabilities and available resources within Voluntary Organizations Active in Disaster, NGOs, and faith-based organizations to determine any alternative sourcing requirements.

• Attempting to fulfill resource requests and resolving logistical issues using existing local capabilities, including requesting assistance from local NGOs, local vendors (e.g., restaurant/caterer, staffing agency), or options with national-level NGOs.

Individual Assistance, Public Assistance, and Hazard Mitigation Application Processes

SLTTs should review recovery operations plans and consider:

• Revising to account for FEMA’s virtual work for IA, PA, and HM programs in a COVID-19 impacted environment.
• Ensuring familiarity with the PA process and access to the Grants Portal system.
• Ensuring familiarity with procurement and documentation requirements for PA grants and pre-positioning contracts.
• Working to provide support to applicants for new virtual application processes, particularly for communities with existing gaps in information technology resources.
• Reviewing the State-Led Public Assistance Guide and preparing to take on some or all customer service, site inspection, and scoping and costing functions.

SLTT Recovery Process

FEMA recommends that SLTT partners explore how to modify existing recovery plans and structures to not only support current COVID-19 recovery operations and outcomes, but to also accommodate potential future disasters. Modification of existing recovery plans and structures will enable SLTTs to focus coordination around clear outcomes and goals across disasters, as well as enhance SLTT leaders’ ability to pool and target resources for maximum impact.

SLTT leaders should review recovery operations plans and consider:

• Strengthening remote work and virtual inspection processes.
• Managing PA operations, customer service, and site inspections in accordance with the State-Led Public Assistance Guide.
• Establishing communication best practices, including accessible and multi-lingual messaging, and information technology solutions to better facilitate coordination between state, tribal, and territory RSF partners and their relevant federal, non-governmental, and private sector counterparts.
• Identifying or developing internal systems to proactively address federal and state procurement regulations and processes.
• Developing or modifying existing plans that include defining essential operations, building staff redundancy, and outlining devolution procedures and authorities.
• Strengthening contracts for pre-positioned resources, such as debris removal.
• Working with FEMA regions to obtain guidance in the development of a State Disaster Recovery Plan for the jurisdiction to include housing annexes.
• Accounting for increased recovery efforts to address compounded impacts from COVID-19 and a follow-on incident, to include:
  o Economic impact, including impacts to non-essential businesses and loss of livelihood in the impacted area;
  o Long-term impacts to health and social services, increased use of telemedicine providers, reduced utilization of medical services for chronic conditions, and additional need for social services and mental/behavioral health resources; and
  o Infrastructure, communication systems, and healthcare restoration given the need to build certain core capabilities back better for the future.
• Planning for increased demand for mental/behavioral health support as survivors may experience significant distress with the addition of disaster impacts on quarantined communities.

• Coordinating donation management and assistance (e.g., mapping additional funding, preventing duplication of benefits, project sequencing) and identifying overlapping recovery goals/outcomes.

• Evaluating and planning for support to local governments with reduced recovery management capacity due to budget shortfalls and reductions in personnel.

Conclusion

Given FEMA’s planning and operating posture presented here, emergency managers should review existing COOP programs and begin increasing planning and posturing with a focus on key changes necessitated by the COVID-19 environment. The requirements for social distancing and the ability to follow CDC guidance to protect the health and safety of survivors, emergency managers, and other response and recovery personnel could impact operational concepts such as sheltering plans, commodity distribution, and establishment of disaster facilities. With many FEMA personnel working remotely, SLTTs should be prepared to conduct disaster work virtually, including using available media to ensure survivors are aware of and understand the changes to the application process, holding virtual townhalls throughout response and recovery, and conducting virtual coordination meetings with volunteer organizations and the private sector. If the communications lifeline is impacted by follow-on incidents, stabilization will be even more essential to support remote work. When additional resources—personnel, commodities, contract support, mutual aid—are needed to support changes within the COVID-19 environment, SLTTs should begin increasing planning and posturing for these eventualities.

FEMA expects our SLTT partners and fellow emergency managers to problem-solve, act, and do what emergency managers do best—coordinate, communicate, and collaborate. As the Nation moves into hurricane season, emergency managers will need to lead, innovate, and be resourceful to address challenges and adapt disaster operations to meet the needs of survivors in the current environment.
Appendix A: Additional Resources

All the links referenced in the sections above are collected below for ease of reference.

Preparedness Resources

- The Federal Government’s official COVID-19 website provides information relevant to individuals, households, schools, businesses, health care professionals, health care departments, and emergency managers
  (https://www.coronavirus.gov/)
- FEMA’s pandemic resource page for SLTT partners across the emergency management community includes:
  (https://www.fema.gov/coronavirus/governments)
  - Best practices and lessons learned from communities across the Nation (NOTE: this collection is not exhaustive and is updated regularly)
    (https://www.fema.gov/coronavirus/best-practices)
  - Economic Support and Recovery to address the economic needs of American families, workers, and small businesses
    (https://www.fema.gov/coronavirus/economic)
- Other FEMA Resources include:
  - The CERT website with videos, training materials, and access to the Citizen Responder Programs Registration portal
    (https://www.ready.gov/cert)
    (https://community.fema.gov/Register)
    (https://www.fema.gov/emergency-management-performance-grant-program)
  - The Emergency Financial First Aid Kit (EFFAK) with guidance for individuals and families to strengthen financial preparedness for disasters and emergencies
    (https://www.fema.gov/media-library/assets/documents/96123)
  - Emergency Manager Best Practices
    (https://www.fema.gov/coronavirus/best-practices)
  - Healthcare Facilities and Power Outage
  - Ready.gov/Pandemic personal preparedness site
    (https://www.ready.gov/pandemic)
  - FEMA Preparedness Grants Manual
- Comprehensive Preparedness Guide 101
- Continuity Guidance Circular
  (https://www.fema.gov/media-library/assets/documents/132130)
- Planning Considerations for Organizations in Reconstituting Operations During the COVID-19 Pandemic
- Healthcare Capacity Building: Alternative Care Sites and Federal Medical Stations
- Reconstituting Operations Starter Kit
  (https://www.fema.gov/media-library/assets/documents/188077)
- The CDC’s COVID-19 website has guidance for keeping individuals, healthcare professionals and communities safe:
  - Preparing for Hurricanes During the COVID-19 Pandemic
    (https://www.cdc.gov/disasters/hurricanes/covid-19/prepare-for-hurricane.html)
  - Strategies to optimize the supply of PPE and other equipment
  - Interim guidance for businesses and employers to plan and respond to COVID-19
  - Guidance for cleaning and disinfection for households
  - Considerations for employers on cleaning and disinfecting your facility
  - What you should know about COVID-19 to protect yourself and others
  - Communication resources and guidance documents
    (https://www.cdc.gov/coronavirus/2019-ncov/communication/guidance-list.html?Sort=Date%3A%3Adesc)
- **White House Guidelines for Opening Up America Again**
  (https://www.whitehouse.gov/openingamerica/#criteria)

- **COVID-19 fact sheets and guidance** provide SLTT partners with updated information, including:
  (https://www.fema.gov/coronavirus/fact-sheets)
  - [COVID Best Practice Information for SLTT 9-1-1 Call Centers](https://www.fema.gov/media-library-data/1587583826898-7edfe29901f3025da758b9e29cb7fbb5/2020_04_21_COVID_BP_911Centers_F.pdf)

- The [EMAC website](https://www.emacweb.org/) provides information on the all-hazards national mutual aid system

**Response Resources**

- The [National Response Framework](https://www.fema.gov/media-library-data/1582825590194-2f000855d442fc3c9f18547d1468990d/NRF_FINALApproved_508_2011028v1040.pdf) is a guide to respond to all types of disasters and emergencies
  - [Response FIOP](https://www.fema.gov/media-library-data/1471452095112-507e23ad4d85449f131c2b025743101/Response_FIOP_2nd.pdf)
  - [Community Lifelines Implementation Toolkit](https://www.fema.gov/media-library/assets/documents/177222)


- **COVID-19 fact sheets and guidance** provide SLTT partners with updated information, including:
  (https://www.fema.gov/coronavirus/fact-sheets)
  - [COVID-19 supply chain guidance](https://www.fema.gov/media-library-data/158601228351-ee9dd63af03bc879168c827bf922cb90/COVID19SupplyChain.pdf)
  - [COVID-19 SLTT public information guidance](https://www.fema.gov/media-library-data/1587250289402-3e2e773531d50b09890fe071e042e3e6/2020_04_18_COVID_BP_SLTTPublicInformation.pdf)
  - [Ensuring Civil Rights During the COVID-19 Response](https://www.fema.gov/media-library-data/1586893628400-f21a380f3db223e6075eeb3be67d50a6/EnsuringCivilRightsDuringtheCOVID19Response.pdf)
COVID-19 Pandemic Operational Guidance for the 2020 Hurricane Season

COVID-19 floodplain considerations for temporary critical facilities

COVID-19 Emergency Operations Center Guidance

Other FEMA Resources include:

- The Radiological Emergency Preparedness Program
  (https://www.fema.gov/radiological-emergency-preparedness-program)
- FEMA's web-based storm tracking and decision support tool, HURREVAC assists SLTT partners with Hurricane Evacuation planning, training, and timely decision-making during response operations
  (http://hurrevac.com/)

The CDC COVID-19 website has guidance for keeping individuals, healthcare professionals, and communities safe:
- Correctional and detention facilities
- Long-term care facilities and nursing homes
- People with disabilities
- Public health communications
- Strategies to mitigate healthcare personnel staffing shortages
- Strategies to optimize the supply of PPE and other equipment

The Department of Homeland Security’s Cybersecurity and Infrastructure Security Agency (CISA) provides information on securing critical infrastructure during COVID-19
The Americans with Disabilities Act (ADA) has a list of resources useful to emergency managers regarding people with disabilities
(https://www.ada.gov/emerg_prep.html)

The Department of Labor (DOL) issued DOL COVID Workplace Guidance, in partnership with the Department of Health and Human Services, on safe work practices and appropriate PPE based on the risk level of exposure
(https://www.dol.gov/newsroom/releases/osa/osa20200309)

CISA released the CISA COVID Risk Management to help executives consider physical, supply chain, and cybersecurity issues that may arise from the spread of COVID-19

The EMAC website provides information on the all-hazards national mutual aid system
(https://www.emacweb.org/)

The National Mass Care Strategy provides COVID-19-related feeding and sheltering guidance
(https://nationalmasscarestrategy.org/category/covid-19/)

The National Weather Service (NWS) statement addresses tornado shelters during a pandemic
(https://www.wsfa.com/2020/03/22/nws-issues-statement-regarding-tornado-shelters-during-pandemic/)

**Recovery Resources**

- **National Disaster Recovery Framework**
  (https://www.fema.gov/national-disaster-recovery-framework)
  - Recovery FIOP
    (https://www.fema.gov/media-library-data/1471451918443-dbbb91fec8ffdc159fd79f02be5afddd/Recovery_FIOP_2nd.pdf)
  - Mitigation FIOP
    (https://www.fema.gov/media-library-data/1471450195109-d68f4bb054782a379b341999317bd123/Mitigation_FIOP_2nd.pdf)

Other FEMA Guidance includes:
- Resilience Analysis and Planning Tool (RAPT)
  (https://fema.maps.arcgis.com/apps/webappviewer/index.html?id=90c0c996a5e242a79345cdbc5f758fc6)
- Disaster Financial Management Guide
  (https://www.fema.gov/media-library/assets/documents/187126)
- Community Recovery Management Toolkit
  (https://www.fema.gov/community-recovery-management-toolkit)
- Continuity Resource Toolkit
  (https://www.fema.gov/continuity-resource-toolkit)
- Individual Assistance Program and Policy Guidance
  (https://www.fema.gov/media-library/assets/documents/177489)
- Mass Care/Emergency Assistance Pandemic Planning Considerations
  (https://nationalmasscarestrategy.org/covid-19-sheltering-guidelines/)
- Guidance on Planning for Personal Assistance Services in General Population Shelters
- Guidance on Planning for Integration of Functional Needs Support Services in General Population Shelters
  (https://www.fema.gov/pdf/about/odic/fnss_guidance.pdf)
- The CDC COVID-19 website has guidance for keeping individuals, healthcare professionals and communities safe:
  - Homeless service providers
  - People with disabilities
  - Public health communications
  - Guidance for General Population Sheltering
- The EMAC website provides information on the all-hazards national mutual aid system.
  (https://www.emacweb.org/)
- The Hazus website for support on all-hazards risk assessments
  (https://www.fema.gov/hazus)
- The Grants Portal System for Public Assistance grantees
  (https://grantee.fema.gov/)
- Public Assistance Program and Policy Guide
  (https://www.fema.gov/media-library-data/1525468328389-4a038bbe9081cd7efe7538e7751aa9c/PAPPG_3.1_508_FINAL_5-4-2018.pdf)
- State-Led Public Assistance Guide
The International City/County Management Association (ICMA) provides guidance, including:

- ICMA guidance on public meetings and crisis communications

- Webinar on “Managing Crisis Communications during a Pandemic”

The Procurement Disaster Assistance Team makes trainings available via webinar.
(https://www.fema.gov/procurement-disaster-assistance-team)
Appendix B: Preparedness Considerations Checklist

The following considerations are presented here for SLTTs to utilize when modifying the preparedness phase of all hazards or hurricane specific plans in the COVID-19 environment.

**Review and Modify**

- Have you reviewed and modified your emergency operations plan to align with COVID-19 guidance, to include social distancing limitations, travel restrictions, fiscal impacts, reduction of government services, and potential impacts to your supply chain?
- Have you reviewed your jurisdiction’s orders concerning any potential shelter-in-place or stay-at-home orders? Do any legal considerations require you to adjust your law enforcement, fire, Emergency Medical Services (EMS), or emergency operations?
- Are you coordinating updates to plans with the whole-community planning partners supporting your jurisdiction?
- Have you reviewed and modified your plans to include special considerations for those with access and functional needs in a COVID-19 environment?
- Have you reviewed and updated your COOP plans to continue essential functions and tasks with little to no interruption?
- Have you updated your resource management inventory to make response personnel available to support non-COVID-19 response?
- Have you identified essential personnel, based on organizational essential functions, by reviewing your existing or conducting new business process/business impact analyses to understand potential shortfalls and limitations?
- Have you identified orders of succession for key personnel and leadership? Do critical tasks and decision-making have approved delegations of authority?
- Have you identified alternate sites and capabilities to ensure COOP to include telework?
- Have you reviewed and evaluated current mutual aid agreements and EMAC agreements if available resources and/or personnel may be limited due to COVID-19 operations and considered virtual support where possible? (https://www.emacweb.org/)

**Consider and Identify**

- Do the constraints and impacts of COVID-19 within your, and neighboring, jurisdictions warrant the expansion of mutual agreements with new partners?
- Have COVID-19 response and recovery efforts identified new partners, resources, planning shortfalls, or solutions to include in emergency operations plans and annexes, including private sector partners in grocery, fuel, home mitigation supplies, and medical supplies?
- Have you considered resourcing secondary emergency management roles and responsibilities to support parallel disasters with extended timelines and limited resources?
- Have you assessed your increased personnel requirements and planned for contingency staffing?
☐ Have you determined if you can use alternate communications, information technology support, and remote operations to operate your EOC virtually?

☐ Have you explored virtual environment delivery platforms to exercise plans and overcome the challenges of limited face-to-face training, seminars, and workshops?

☐ Have you coordinated with public health officials to identify guidelines for workforce response? (NOTE: Local conditions will influence decisions that public health officials make regarding community-level strategies)

☐ Have you considered strategies to keep a disaster from overwhelming 9-1-1 centers, such as establishing alternative call lines for non-emergency queries from the public; increasing personnel capacity; and/or including the capacity to respond to calls from people who are deaf, hard of hearing, without speech, and/or have limited English proficiency?


**Message and Engage**

☐ Have you developed and disseminated accessible, multilingual, and culturally appropriate messaging to inform the public of changes in expected services or procedures (e.g., changes to shelter locations, evacuation routes, available transportation methods) due to impacts from COVID-19 and ensured the messaging is accessible and available in alternative formats for people with disabilities?

☐ Have you updated pre-scripted messages to incorporate the current recommended PPE posture for disaster survivors (e.g., recommend wearing a cloth face covering) and provide deconflicting guidance regarding any stay-at-home orders or other guidance?

☐ Are you prepared to provide accessible multilingual and culturally appropriate messaging on increased personal preparedness measures and to encourage your community to evaluate personal emergency plans and familiarize themselves with guidance from their local jurisdictions related to COVID-19?

(https://www.cdc.gov/coronavirus/2019-ncov/communication/print-resources.html?Sort=Date%3A%3Adesc)

(https://www.ready.gov/pandemic)

☐ Have you advised individuals and households to track their critical financial, medical, and household information by using the EFFAK tool as a guide?

(https://www.fema.gov/media-library/assets/documents/96123)

☐ Have you translated relevant materials and messages in languages spoken in your community?

☐ Have you engaged with public health officials to identify guidelines for workforce response in a COVID-19 environment, and to plan for public health support for evacuations and sheltering?

☐ Have you identified the essential workforce necessary for continuing critical infrastructure viability by using the CISA advisory list as a guide?

☐ Have you engaged non-profits and small businesses in your jurisdiction to discuss how you would respond and recover from a natural hazard event in a COVID-19 environment?

☐ How will you use accessible, multilingual, and culturally appropriate messaging to communicate to employees and stakeholders that normal operations are being resumed?
Appendix C: Response Considerations Checklist

The following considerations are presented here for SLTTs to utilize when modifying the response phase of all hazards or hurricane specific plans in the COVID-19 environment.

- Have you purchased and stockpiled appropriate PPE for personnel required to be in the field, including shelter management and shelter personnel?
- Have you considered updating your vendor contracts and agreements to procure and deliver supplies and equipment in case of a shortage?
- Have you confirmed your access to HURREVAC, FEMA’s web-based storm tracking and decision support tool, to view data on National Hurricane Center and NWS forecasts, including forecast tracking and arrival of tropical storm winds; storm surge modeling; and evacuation clearance times under various storm scenarios; to support operational decisions?
  (http://hurrevac.com/)
- Have you modified your evacuation plan to account for limited travel options and hotel availability, increased need for health and medical evacuations, financial limitations of the general public, and additional impacts from COVID-19?
- Have you considered the extra time it may take to evacuate given the need for social distancing for increased mass transit modes (e.g., buses) may require?
- Have you considered using geographic information system platform planning tools, to include FEMA’s RAPT, to identify population characteristics and infrastructure locations that may be impacted to help with your evacuation and shelter-in-place planning?
  (https://fema.maps.arcgis.com/apps/webappviewer/index.html?id=90c0c996a5e242a79345cdbc5f758fc6)
- Have you considered increasing the membership of CERT, MRC, and associated volunteer training? If so, do you have a mechanism to conduct remote recruiting and training?
  (https://www.ready.gov/cert)
- Have you reviewed and modified your logistics contracts to ensure you have adequate PPE and necessary commodities during response operations, especially if available resources have been allocated to COVID-19 response?
- Do your continuity plans adequately address how to respond if your agency/department or your partner agency has reduced staffing or other capabilities, such as facilities and commodities, due to COVID-19?
- Do you have a plan to integrate FEMA personnel and/or other federal partners into your response operations?
- Have you reached out to your critical infrastructure and private sector partners to assess their ability to respond to an emergency in a COVID-19 environment?
- Do you have a designated point of contact and information exchange platform to continue coordination with critical infrastructure and private sector partners?
Have you considered expanded use of aerial imagery and other remote sensing capabilities to gain and maintain situational awareness and conduct damage assessments?

Are any resources needed for a potential response currently unavailable or in short supply? Have you reached out to your EMAC or private sector partners for assistance and to discuss resource availability based on existing contracts and mutual aid agreements? (https://www.fema.gov/pdf/emergency/nrf/EMACoverviewForNRF.pdf)

Does your EOC have enough information technology personnel to support increased numbers of remote emergency responders? Are they trained to work remotely and support remote work for extended periods on multiple disasters?

Have you considered how your planning goals and objectives would be altered if resources are diverted for COVID-19?

Have you established a Business Emergency Operations Center that can coordinate and collaborate with the private sector and the National Business Emergency Operations Center?

**Safety and Security**

With the potential of decreased law enforcement availability, have you reviewed your contingency plans for on-site security?

Have you considered COOP plans and ways to deliver essential government functions in a COVID-19 environment if conditions are further degraded by another disaster event?


How will you manage re-occupancy procedures given the constraints and impacts of COVID-19 (e.g., social distancing)? What agencies will need to be involved?

Have you coordinated with neighboring jurisdictions to discuss impacts on access and re-occupancy procedures due to COVID-19?

Have you coordinated with pass-through, host, and sending jurisdictions to verify that agreements to support and execute potential evacuations to accommodate COVID-19 considerations (or made any necessary updates) are in place?

Are your special operations teams (e.g., Urban Search and Rescue, HazMat) still mission capable, and have they adopted CDC guidelines for PPE and training?

Have you identified potential sites for disaster facilities that are consistent with CDC guidance and social distancing requirements and coordinated leasing requirements if needed? (https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html)

**Food, Water, Shelter**

Have you considered how personnel shortfalls may impact your shelter operations?

How do social distancing considerations affect current shelter capacity?
Have you coordinated with public health officials in your jurisdiction regarding evacuation and shelter safety, infection control, and planning?

Do sheltering and feeding plans incorporate social distancing guidelines and PPE requirements outlined by the National Mass Care Strategy?

(https://nationalmasscarestrategy.org/category/covid-19/)

Have you confirmed that public shelters you normally rely upon will be available in the aftermath of an incident (i.e., have schools been removed from use)?

(https://www.ametsoc.org/ams/assets/File/aboutams/statements_pdf/StatementTornadoShelteringPandemics.pdf)

Have you considered identifying additional shelter locations, including in areas accessible to public transportation and/or in places accessible to low income communities, to reduce shelter density and promote social distancing?

Have you explored options such as non-congregate sheltering (e.g., dormitories, hotels)? If so, have you developed a list of participating facilities, including in areas accessible to public transportation and/or in places accessible to low income communities?

Considering current sheltering options, do individuals with access and functional needs, including individuals with disabilities, require additional sheltering resources and assistance in a COVID-19 environment?

Have you evaluated the abilities and willingness of whole-community partners to operate or support mass care/sheltering in a COVID-19 environment?

Have you coordinated with non-governmental and volunteer organizations to discuss changes in receipt, distribution, and delivery of commodities and services (e.g., food, donations, muck out) to incorporate any social distancing limitations?

Have you assessed your eligibility to apply for assistance for the purchase and distribution of food in response to COVID-19?


Are issues and status updates in supply chain and logistics of food and water identified and regularly communicated to appropriate partners for action?

Have cleaning, disinfection, and sanitizing schedules increased, and are they actively monitored by designated sheltering facility personnel?

Do your registration, health screening, and isolation care areas provide adequate physical separation (e.g., areas for potential temperature screening)?

Have you included temperature and health screening in your screening protocol for upon arrival at mass care shelters? Do you have adequate temperature screening equipment and PPE to support your health screening protocols?

Have you included COVID-19 testing in your screening protocol for mass care shelters if an evacuee meets criteria (e.g., symptoms, known exposure)? Do you have adequate PPE and testing kits to support your screening protocols?

Do you need to increase your supply of hand hygiene products (soap, paper towels, hand sanitizer, etc.) and disinfection and sanitizing products in shelters in a COVID-19 environment?

**Health and Medical**

Do you have an alternative staffing or recruitment strategy for healthcare professionals in the event of a reduction of personnel availability?


Do your healthcare, alternate care, and long-term care facilities have adequate, functional, and fueled emergency generators and a plan to keep emergency power systems operational during an emergency to reduce patient movement?


Do your triage protocols and procedures facilitate efficient patient processing to reduce person-to-person contact, increase social distancing, and reduce the amount of time patients are in the triage area?

Have you identified additional in-patient locations in the event of patient overflow to accommodate the need for physical separation in a COVID-19 environment?

Have you reviewed or updated as necessary personal, family, or staff care plans for sustained emergency response operations?

Have you coordinated with multi-disciplinary psychosocial support teams (e.g., social workers, mental health professionals, counselors, interpreters, patient service coordinators, clergy) to provide virtual support to patients, families, and medical personnel?

Do you have sufficient information technology infrastructure and support to accommodate virtual coordination and support?

Does your community have an established, streamlined process for information delivery and exchange between hospital administration, personnel, and, if required, governmental officials to facilitate situational awareness?

Can your mass casualty management plans accommodate an increased number of fatalities? Have you identified additional contingencies for mortuary affairs management in a COVID-19 environment?

Have you encouraged hospitals and other health care facilities to develop and maintain an updated inventory of PPE and other equipment? Do these facilities have a shortage-alert system with identified and well socialized triggers and associated actions to mitigate potential issues?

To ensure equal access to information and resources, are key messages presented to patients, personnel, and the public in a variety of accessible formats (e.g., audio, visual, sign language, braille, multiple languages, culturally appropriate)?


Do you have coordinated plans in place to evacuate or shelter patients in place in Federal Medical Stations and Alternate Care Sites in your jurisdiction?


**Energy (Power and Fuel)**

- Do energy sector partners have adequate staffing to generate, transmit, and distribute power and fuel to the community in the event of sick workers or family care needs? Have you identified surge support for emergency operations?
- How long would it take to restore power in a COVID-19 environment, considering the potential for reduced available staffing?
- Are damage assessments needed in this response? Can they be conducted virtually? How can your agency/jurisdiction limit personnel to allow for social distancing if damage assessments need to be done?
- Does your plan for potential emergency repairs for energy infrastructure account for COVID-19 social distancing or PPE needs?
- Has COVID-19 affected the supply of fuel in your jurisdiction (e.g., less people driving disrupting gas demand)?
- Does your jurisdiction have plans for priority power restoration for individuals with disabilities and health conditions that require power for life sustainment?
- Have changes in commercial trucking procedures affected your fuel distribution plan? Are you coordinating with representatives of the commercial trucking industry to ensure your needs are met?

**Communications**

- Have you and your response partners recently tested primary, alternate, contingency, and emergency communications capabilities?
- Have you evaluated your ability to send public announcements, and are the systems fully operational (e.g., mass notification systems, internet, radio, television, cable systems)?
- Have you verified the number of Integrated Public Alert & Warning System alerting authorities within your jurisdiction and worked to close any gaps in alerting authority coverage?
- Do you have a system to collect and share data to support decision-making and facilitate development of a common operating picture for multiple response operations?
- Have you considered converting town hall meetings and press conferences to accessible and multilingual virtual platforms, or requiring cloth face coverings (if appropriate) and social
distancing if they are conducted in person, and made provisions for accessibility for either virtual or in person meetings?

☐ Are 9-1-1 dispatch and public safety answering points available to citizens in need? Have you provided information on accessing 3-1-1, 2-1-1, mental/behavioral health hotlines, animal control, and other 24-hour community service help lines to control the flow of incoming calls?

☐ Can you implement text to 9-1-1 to improve services for people who have hearing or speech disabilities?

☐ Do you have plans to increase your 9-1-1 call center’s capacity, including to respond to people who are deaf, hard of hearing, and/or without speech, or persons with limited English proficiency, in the event of increased incoming emergency calls? Have you considered establishing a coordinated call center system to divert non-emergency calls from the 9-1-1 system?


☐ Is increased use of mobile or internet bandwidth disrupting emergency communications? Can responders receive prioritized access to dedicated bandwidth? Do responders have backup communications?

☐ Do you have accessible multilingual and culturally appropriate pre-scripted messages for communicating evacuation and shelter-in-place updates that include social distancing measures due to COVID-19 considerations?

☐ Do you have accessible, multilingual, and culturally appropriate communication materials that address hurricane, flood, tornado, or other hazards preparedness for your communities while under the threat of COVID-19?


(https://www.wsfa.com/2020/03/22/nws-issues-statement-regarding-tornado-shelters-during-pandemic/)

☐ Have you published guidance for non-essential businesses and unemployed workers on mitigating economic impacts due to COVID-19 (e.g., Small Business Administration support)?

☐ Are banking and financial services available? How long will it take to restore financial services? Is the disruption due to a lack of power/energy, overload of the system, or another factor? Is it possible to expand the bandwidth for financial service applications and technology temporarily?

**Transportation**

☐ Do you have capabilities to screen for COVID-19 on highways/roadways during an evacuation? Have you accounted for additional time needed for checkpoints during and evacuation?

☐ Do you have the resources necessary to re-establish critical mass transportation hubs (e.g., airports, train stations, local mass transit stations) under social distancing guidelines?

☐ How long after an incident can you begin maritime transportation while maintaining procedures to detect COVID-19 cases?
Do you have access to the resources to repair pipelines that impact transportation services (understanding that PPE may be in short supply due to COVID-19)?

Do you have accessible, multilingual, and culturally appropriate updated messaging to share with the public during an evacuation on social distancing to promote healthy behavior during COVID-19?

Do you have a mechanism to increase public transportation, including accessible buses, vans, etc., if economic impacts preclude citizens from self-evacuating, to include paratransit for people with disabilities?

Do your facilities and jurisdictions have adequate transportation agreements to accommodate medical evacuations within required timelines? Do they have patient tracking mechanisms to account for separations resulting from COVID-19 operations and evacuations?

**Hazardous Materials**

Have you engaged critical infrastructure and private sector partners to coordinate accessible, multilingual, and culturally appropriate messaging, either through your local emergency planning committee or directly, to confirm their hazardous materials storage facilities are secure and their response plans are updated to reflect the current COVID-19 environment?

Are your hazardous or toxic materials plans and messaging consistent with your COVID-19 procedures and messaging? Have you reviewed your messaging for a chemical, biological, radiological, or nuclear incident?

How are you ensuring meaningful involvement of minority communities and low-income populations in the development and implementation of policy decisions impacting the environment during response and recovery?

Have you reached out to the Radiological Emergency Preparedness Program or any hazardous and radiological materials groups to determine constraints and limitations from COVID-19 on facilities?

(https://www.fema.gov/radiological-emergency-preparedness-program)

Do you have the materials and resources needed for a hazardous or toxic materials incident? Have you identified any supply chain issues with procurement?

Have you considered how to conduct site assessments, especially in areas with hazardous or radiological material, given COVID-19 considerations (e.g., potential personnel limitations, social distancing)?
Appendix D: Recovery Considerations Checklist

The following considerations are presented here for SLTTs to utilize when modifying the recovery phase of all hazards or hurricane specific plans in the COVID-19 environment.

**Leadership and Authority**

☐ Who are the lead agencies and individuals managing and coordinating disaster recovery efforts? Is this the same agency in charge of COVID-19 response actions?

☐ Have Delegations of Authority and Lines of Succession been reviewed for leadership and personnel positions critical to operations?

☐ How will COVID-19 response actions and leadership intersect with disaster recovery actions and leadership? What is the coordination mechanism for ensuring both efforts are coordinated?

☐ Will the recovery unified coordination group include relevant public health and medical officials?

☐ Who has the authority to make formal decisions in your jurisdiction related to disaster recovery?

☐ Does the health department need to certify that projects or locations comply with social distancing and other public health directives before their use?

☐ Can your jurisdiction pass ordinances, waivers, and policies in absentia given the constraints of the COVID-19 environment (e.g., social distancing)?

**Staffing**

☐ Do you have adequate staffing plans to assure continuity in staffing the management and implementation of recovery efforts throughout a COVID-19 environment with municipal/jurisdictional personnel, concurrent with the disaster?

☐ How will you manage building and housing inspections and re-occupancy procedures, given the constraints and impacts of COVID-19 (e.g., social distancing)?

☐ Are human resource policies and processes consistent with public health recommendations and state and federal statutes? Do you need to establish new policies (e.g., sick leave, scheduling, control measures) or continue them after COVID-19?

☐ Do you have a prioritized order of return for personnel after COVID-19?

☐ Do your mutual aid partners have adequate personnel to support your efforts in addition to their COVID-19 response efforts? Do you have enough personnel to share personnel with other impacted jurisdictions?

☐ Have you evaluated the staffing impacts of COVID-19 and the current disaster on your mutual aid partners?

☐ How will you manage inspections and re-occupancy procedures given the constraints and impacts of COVID-19 (e.g., social distancing)? What agencies should be involved?
Communications and Engagement

☐ Have you established a process to coordinate messaging related to COVID-19 disaster recovery efforts?


☐ Do you have a process to synchronize messages between SLTT entities?

☐ Who is responsible for releasing information to the public within the jurisdiction? Is this the same individual(s) releasing information related to COVID-19?

☐ Which community organizations can help amplify important recovery information, helping to ensure whole of community recovery outcomes are realized?

☐ How will you determine critical vs. noncritical recovery functions?

☐ How will social distancing impact your recovery coordination structure? How will agencies and organizations coordinate efforts? Do you have a web platform that supports virtual coordination?

☐ Do you have any pre-positioned contracts for disaster housing-related services? Have you confirmed that these contracts are still valid and enforceable in the COVID-19 environment?

☐ What health and safety protocols can impact the return to, and occupancy of, homes and buildings? Who are the relevant agencies involved in making those determinations?

☐ How will you engage with potential PA Applicants virtually, including establishing virtual communications and information sharing platforms for Applicant Briefings and Requests for Public Assistance?

Recovery Planning

☐ Can you manage recovery functions as stipulated in your recovery plan following the constraints and impacts of COVID-19 (e.g., potential reduced staffing, budgetary shortfalls)?

☐ Do you have current and accurate information on COVID-19 cases and infection rates by census block or other scales that are most pertinent to your community?

☐ What analytic capabilities do you have to assess disaster impacts, vulnerable populations (i.e. protected populations, race, color, national origin, limited English proficiency, age, disability, sex, religion, and economic status), systemic risk, and other issues necessary for timely and data informed decision support? Have you considered using the RAPT for data-driven decision support?

(https://fema.maps.arcgis.com/apps/webappviewer/index.html?id=90c0c996a5e242a79345cdbc5f758fc6)

☐ How will you maximize community input and buy-in for your recovery efforts? Can you hold effective public meetings while maintaining social distance? Do you have mechanisms to reach isolated or underserved communities?

☐ Do you have required software licenses to conduct large-scale public engagements remotely? What is your single meeting participant capacity? Do you have trained personnel to operate these systems?
How will you provide individuals with access and functional needs, to include those with disabilities, with services in accordance with ADA and CDC guidance?

How will you provide the homeless population with services in accordance with CDC guidance, while also ensuring the health and safety of emergency responders and recovery personnel? (https://www.cdc.gov/coronavirus/2019-ncov/community/homeless-shelters/plan-prepare-respond.html)

What portion of the community has received housing assistance from COVID-19-related funding? Are these populations at increased risk from housing displacement following a natural disaster?

Financial Management

What are your jurisdiction’s existing financial management practices for disaster and recovery? What adjustments, if any, are needed to comply with procurement requirements in a COVID-19 environment? (https://www.fema.gov/media-library-data/1586815358427-cc78a4a55abb9437c487ba72b1a57e02/COVID-19-and-Disaster-Financial-Management-Guide.pdf)

Do you have access to a contingency planning fund? If not, how will you access critical recovery funding?

How can your personnel and departments access virtual training to build and sustain skills, if necessary?

What is your process to determine eligibility for all relevant funding opportunities? What access do you have to associations that can support disaster-related projects?

Do your jurisdiction’s financial practices and procedures for non-disaster projects follow the same practices and procedures for disaster-related projects?
Appendix E: Public Messaging Guidance on Hurricanes

The following contents, which have been approved by the CDC and the National Oceanic and Atmospheric Administration (NOAA), may be utilized by SLTTs to communicate hurricane preparedness actions to individual Americans and community organizations during a pandemic. All public messaging must be accessible to individuals with disabilities and individuals with limited English proficiency. This appendix also contains messaging designed specifically for youth audiences.

Be Prepared for a Hurricane

Highlight:

Threats from hurricanes include powerful winds, heavy rainfall, storm surges, coastal and inland flooding, rip currents, tornadoes, and landslides.

Definition:

A hurricane is a storm that forms over warm ocean waters and has sustained winds of 74 mph or higher. The Atlantic and Central Pacific hurricane season runs from June 1 through November 30. The East Pacific hurricane season runs from May 15 through November 30.

Quick Facts:

- Hurricanes can happen along any U.S. coast or territory in the Atlantic and Pacific Oceans or the Gulf of Mexico.
- Hurricanes can affect areas more than 100 miles inland.
- Hurricanes are most active in September.

Protect Yourself Key Messages:

- If you are under a hurricane warning, find safe shelter right away.
- Determine your best protection for high winds and flooding, as well as infectious diseases, including COVID-19. Keep in mind that your best protection from the effects of a hurricane may differ from your best protection from disease.
- Know your evacuation zone! Due to limited space as a result of COVID-19, public evacuation shelters may not be the safest choice for you and your family.
  - Unless you live in a mandatory evacuation zone, it is recommended that you make a plan to shelter-in-place in your home, if it is safe to do so.
  - If you live in a mandatory evacuation zone, make a plan with friends or family to shelter with them where you will be safer and more comfortable.
  - Only evacuate to shelters if you are unable to shelter at home or with family or friends. Note that your regular shelter may not be open this year. Check with local authorities for the latest information about public shelters.
  - If you must evacuate to a public shelter, try to bring items that can help protect you and others in the shelter from COVID-19, such as hand sanitizer, cleaning materials, and two cloth face coverings per person. Children under 2 years old, people who have trouble
breathing, and people who cannot take the cloth face covering off without help should not wear cloth face coverings.


- Pay attention to emergency information and alerts.
- Only use outdoor generators outdoor that are at least 20 feet away from your home and away from windows, doors, and vents.
- Do not walk, swim, or drive through flood waters.

**How to Stay Safe When a Hurricane Threatens**

**Prepare Now**

- Know your area’s risk of hurricanes.
- Have several ways to receive warnings and alerts from the National Weather Service and your local officials. Do not rely on a single source of weather alert information. Sign up for your community’s warning system. The Emergency Alert System (EAS) and NOAA Weather Radios also provide emergency alerts. Turn on Wireless Emergency Alerts (WEA) in your smartphone settings.
  
  (https://www.ready.gov/alerts)
- If you are at risk for flash flooding, watch for signs such as heavy rain.
- Practice going to a safe shelter, such as a FEMA safe room or International Code Council (ICC) 500 storm shelter. The next best protection is a small, interior, windowless room in a sturdy building on the lowest level that is not subject to flooding. Practice going to these places while following the latest guidelines from the CDC and your state and local authorities to prevent the spread of COVID-19.

  (https://www.fema.gov/safe-rooms)

  (https://www.fema.gov/media-library/assets/documents/110209)

- Based on your location and community plans, make your own plans for evacuation or sheltering-in-place. Due to limited space as a result of COVID-19, unless you live in a mandatory evacuation zone, it is recommended that you shelter-in-place in your home. If you live in a mandatory evacuation zone, talk with your friends and family to see if you can shelter with them. Only evacuate to shelters if you are unable to shelter at home or with family or friends. Be sure to review your previous evacuation plan and consider alternative options to maintain social and physical distancing to prevent the spread of COVID-19, and update your plan accordingly.
- Become familiar with your evacuation zone, the evacuation route, and the shelter locations. Note that your regular shelter may not be open this year because of COVID-19. Check with local authorities for the latest information about shelters. Only evacuate to shelters if you are unable to shelter at home or with family and friends.
• Once you have identified your safe location, gather needed supplies, including cleaning supplies, non-perishable foods, and water. If you are able to, set aside items like soap, hand sanitizer, disinfecting wipes, and general household cleaning supplies that you can use to disinfect surfaces you touch regularly. After a hurricane, you may not have access to these supplies for days or even weeks. Keep in mind each person’s specific needs, including medication. Do not forget the needs of pets.

• Keep important documents in a safe place or create password-protected digital copies.

• Protect your property. Declutter drains and gutters. Install check valves in plumbing to prevent backups. Consider hurricane shutters. Review insurance policies.

**Survive During**

• If you live in a mandatory evacuation zone and local authorities instruct you to evacuate, do so immediately. Do not drive around barricades or through floodwater.

• If you must evacuate, if possible, bring with you items that can help protect you and others in the shelter from COVID-19, such as hand sanitizer, cleaning materials, and two cloth face coverings per person. Children under 2 years old, people who have trouble breathing, and people who cannot take the cloth face covering off without help should not wear cloth face coverings.


• If sheltering during high winds, go to a FEMA safe room, ICC 500 storm shelter, or a small, interior, windowless room or hallway on the lowest floor that is not subject to flooding.

• If staying at a shelter or public facility, take steps to keep yourself and others safe from COVID-19. Wash your hands often, maintain a physical distance of at least six feet between you and people who are not part of your household, and avoid crowds and gathering in groups. When possible, wear a cloth face covering. Children under 2 years old, people who have trouble breathing, and people who cannot take the cloth face covering off without help should not wear cloth face coverings. If possible, wash your cloth face covering on a regular basis.

• If you are sick and need medical attention, contact your healthcare provider for further care instructions and shelter-in-place, if possible. If you are experiencing a medical emergency, call 9-1-1 and let the operator know if you have, or think you might have, COVID-19. If possible, put on a cloth face covering before help arrives. If staying at a shelter or public facility, alert shelter staff immediately so they can call a local hospital or clinic.


• If trapped in a building by flooding, go to the highest level of the building. Do not climb into a closed attic. You may become trapped by rising flood water.

• Listen for current emergency information and instructions.

• Use a generator or other gasoline-powered machinery ONLY outdoors and at least 20 feet from your home and away from windows, doors, and vents. If you are using generators near your
home, install battery-operated or battery back-up carbon monoxide (CO) detectors and check to be sure they are working properly.

(https://www.cdc.gov/co/generatorsafetyfactsheet.html)

- Do not walk, swim, or drive through flood waters. Turn Around. Do not drown. Just six inches of fast-moving water can knock you down, and one foot of moving water can sweep your vehicle away.

- Stay off bridges over fast-moving water.

Be Safe After

- Pay attention to information and special instructions from authorities.

- Be careful during clean-up. Wear protective clothing, use appropriate face coverings or masks if cleaning mold or other debris, and maintain a physical distance of at least six feet while working with someone else. People with asthma and other lung conditions and/or immune suppression should not enter buildings with indoor water leaks or mold growth that can be seen or smelled, even if they do not have an allergy to mold. Children should not take part in disaster cleanup work.

(https://www.cdc.gov/mold/cleanup-guide.html)
(https://www.cdc.gov/disasters/clinicians_asthma.html)

- Continue taking steps to protect yourself from COVID-19 and other infectious diseases, such as washing your hands often and cleaning commonly touched surfaces.

- Do not touch electrical equipment if it is wet or if you are standing in water. If it is safe to do so, turn off electricity at the main breaker or fuse box to prevent electric shock.

- Avoid wading in flood water, which can contain dangerous debris. Underground or downed power lines can also electrically charge the water.

- Save phone calls for emergencies. Phone systems are often down or busy after a disaster. Use text messages or social media to communicate with family and friends.

- Document any property damage with photographs. Contact your insurance company for assistance.

- Be available for family, friends, and neighbors who may need someone to talk to about their feelings. Helping others cope with their anxiety and stress can make your community stronger. Many people may already feel fear and anxiety about COVID-19. The threat of a hurricane can add additional stress. Follow CDC guidance for managing stress during the COVID-19 pandemic.


Take an Active Role in Your Safety

Go to ready.gov and search for “hurricane.” Download the FEMA app to get more information about preparing for a hurricane and for pandemics.
Helpful Links:

- [https://www.ready.gov/hurricanes](https://www.ready.gov/hurricanes)

Videos

- [Storm Surge Public Service Announcements](https://www.youtube.com/playlist?list=PL720Kw_OojlLoTEBMTVHJ_bDUCBYM3V4_) (FEMA) (Video)
- [Storm Surge](https://oceantoday.noaa.gov/hurricanestormsurge/) (NOAA) (Video)
- [Six Things to Know Before a Disaster](https://www.fema.gov/media-library/assets/videos/159970) (FEMA) (Video)
- [When the Waves Swell – Hurricane Animated](https://www.youtube.com/watch?v=STiMKEYZ3Q4) (FEMA) (Video)

Tip Sheets

- [Hurricane Information Sheet](https://www.ready.gov/sites/default/files/2020-03/hurricane_information-sheet.pdf) (PDF)
- [How to Prepare for a Hurricane](https://www.ready.gov/sites/default/files/2020-03/fema_how-to-prepare-for-hurricane.pdf) (PDF)
- [Prepare Your Organization for a Hurricane Playbook](http://www.fema.gov/media-library/assets/documents/98410) (PDF)

More Information

- [Coronavirus](https://www.coronavirus.gov/) (Federal Government Response) (Link)
- [Flood Map Service Center](https://msc.fema.gov/portal/search) (FEMA) (Link)
- [Floodsmart.gov](https://www.floodsmart.gov/) (FEMA) (Link)
- [National Flood Insurance Program](https://www.fema.gov/national-flood-insurance-program) (FEMA) (Link)
- [National Weather Service Hurricane Safety](https://www.weather.gov/safety/hurricane) (NWS) (Link)
- [National Storm Surge Hazard Maps](https://www.nhc.noaa.gov/nationalsurge/) (NOAA) (Link)

Information for Youth

About

Hurricanes are severe tropical storms that form in the southern Atlantic Ocean, Caribbean Sea, Gulf of Mexico, and in the eastern Pacific Ocean. They collect heat and energy through contact with warm ocean waters and then move toward land. Evaporation from the ocean water increases their power. Hurricanes rotate in a counterclockwise direction around an “eye,” which is the center of the hurricane.
Hurricanes have winds at least 74 miles per hour. When hurricanes come onto land, their heavy rain, strong winds, and large waves can damage buildings, trees, and cars. Storm surge is when rising water moves inland, or away from the coastline. It is very dangerous.

The COVID-19 pandemic will be ongoing as hurricane season and other natural disasters, such as flooding, earthquakes, and wildfires, continue to occur throughout the year. Remember to follow the latest guidelines from the CDC and your state and local authorities to protect yourself and your family from COVID-19.

Words to Know

**Evacuation:** Leaving an area that officials say is unsafe.

**Eye:** The center of the storm. Winds and rains die down, but they will start up again very quickly.

**Inland:** Away from the coastline.

**Storm Surge:** Heavy waves caused by high wind and a lot of rain.

**Tropical:** An area of the country that is closer to the equator.

**Am I at Risk?**

Hurricanes are most common from June through November. Any U.S. coast by the Atlantic or Pacific Oceans can get hit, and you can feel the effects more than 100 miles inland. People who live on the coast may experience extreme winds and flooding from rain and storm surge. People who live inland are at risk for wind, thunderstorms, and flooding.

Living through environmental disasters, like hurricanes, can be more complicated when we are also experiencing a pandemic like COVID-19. It is important to be prepared and to understand how COVID-19 might affect you and your family.

COVID-19 may affect different people in different ways. Most people who are diagnosed with COVID-19 have not been seriously sick. Those more likely to become seriously sick include adults over age 65 or those who already have other chronic conditions, like diabetes and heart disease. Based on available evidence, children do not appear to be at higher risk for COVID-19 than adults. By following the CDC’s recommendations for protecting yourself from COVID-19, you can lower your chances of getting sick, both during a hurricane and in general.


**What Can I Do?**

**Before**

- Build an emergency kit.
- Make a family communications plan. Plan how you will keep in touch with family members if you lose power or are separated.
- Help your parents bring in outdoor items like potted plants, patio furniture, decorations, and garbage cans. They can fly away in strong winds!
During

- Do not open the refrigerator or freezer. In case you lose power, you want the cold air to stay in so food will last longer!
- Stay away from windows and glass doors. They could break and hurt you.
- If you do not evacuate, stay inside a closet, hallway, or a room without windows.
- If must evacuate, ask your parent or guardian to bring supplies that can help you protect yourself and your family from COVID-19, such as hand sanitizer, cleaning products, and two cloth face coverings for each member of the family who can wear one. Children under 2 years old, people who have trouble breathing, and people who cannot take the cloth face covering off without help should not wear cloth face coverings. [https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html]
- Avoid touching your mouth, nose, and eyes, especially with unwashed hands.
- Pay attention to your parents or safety authorities for important instructions.

After

- If you and your family must stay at a shelter or public facility, take steps to protect yourself and others from COVID-19. Maintain a distance of at least six feet, or about two adult arm lengths, between you and people who are not part of your household. Do not get into crowds or groups. [https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html]
- Wear a cloth face covering while at the shelter. Do not wear a cloth face covering if you have trouble breathing or cannot take off the cloth face covering without help. Babies and kids under the age of 2 should not wear them either. If you can, wash your face cloth covering regularly. [https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html]
- Do not go outside without a grown-up.
- Do not go near any wires that are loose or dangling. They could electrocute you!
- Tell your parents if the air smells weird, it could mean that there are dangerous gasses in the air.
- Text, do not talk. Unless there is a life-threatening situation, send a text so that you do not tie up phone lines needed by emergency workers. Plus, texting may work even if cell service is down.
- Know that it is normal to feel anxious or stressed out. Everyone reacts differently to stressful situations. Take care of your body and talk with your parents or other trusted adults if you are feeling upset [https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/managing-stress-anxiety.html]

Getting Sick

- Cover your coughs and sneezes! Use a tissue or cough or sneeze into your elbow. If you do use a tissue, throw it in the trash right away.
• Wash your hands with soap and water for at least 20 seconds. Sing the “Happy Birthday”
  song twice while you wash your hands. Make sure to wash your hands after blowing your
  nose, coughing or sneezing, using the bathroom, and eating or making food.
• If you cannot find soap and water to wash your hands, use hand sanitizer.
• **Stay away from people who are coughing, sneezing, or sick.**
• Remind your parents to clean surfaces that people touch frequently, like desks, doorknobs,
  light switches, and remote controls.
• Tell your parents if you feel sick.

_Learn More_

**Did you know?**

Hurricanes can also affect areas greater than 100 miles away from the coastline. People who live
inland are also at risk for wind, thunderstorms, tornadoes, and flooding.

_Helpful Links:_

• [Ready.gov](https://www.ready.gov/hurricanes)
• [Ready Wrigley Prepares for Hurricanes](https://www.cdc.gov/cpr/readywrigley/documents/13_239066_ready_wrigley_hurricanes_508.pdf) (CDC)
• [Listo Calixto se Prepara para los Huracanes](https://www.cdc.gov/cpr/readywrigley/documents/13_239066_ready_wrigley_hurricanes_spanish_508.pdf) (CDC)
• [Prepare with Pedro Disaster Activity Book](https://www.ready.gov/kids/prepare-with-pedro)
Appendix F: Acronyms

ADA  Americans with Disabilities Act
CDC  Centers for Disease Control and Prevention
CERT  Community Emergency Response Team
CISA  Cybersecurity and Infrastructure Security Agency
CO  Carbon Monoxide
COOP  Continuity of Operations
COVID-19  Novel Coronavirus Disease 2019
DEC  Disaster Emergency Communications
DHS  Department of Homeland Security
DOL  Department of Labor
DRC  Disaster Recovery Center
DSA  Disaster Survivor Assistance
EAS  Emergency Alert System
EFFAK  Emergency Financial First Aid Kit
EHP  Environmental Planning and Historic Preservation
EMAC  Emergency Management Assistance Compact
EMPG-S  Emergency Management Performance Grant Supplemental
EMS  Emergency Medical Services
EOC  Emergency Operations Center
ESF  Emergency Support Function
FCO  Federal Coordinating Officer
FEMA  Federal Emergency Management Agency
FIOP  Federal Interagency Operational Plan
FIT  FEMA Integration Team
FY  Fiscal Year
HM  Hazard Mitigation
HMGP  Hazard Mitigation Grant Program
IA  Individual Assistance
ICC  International Code Council
ICMA  International City/County Management Association
IMAT  Incident Management Assistance Team
JFO  Joint Field Office
<table>
<thead>
<tr>
<th>Acronym</th>
<th>Full Form</th>
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<tbody>
<tr>
<td>MCOV</td>
<td>Mobile Communications Office Vehicle</td>
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<tr>
<td>MRC</td>
<td>Medical Reserve Corps</td>
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<tr>
<td>NDRF</td>
<td>National Disaster Recovery Framework</td>
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<tr>
<td>NFIP</td>
<td>National Flood Insurance Program</td>
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<tr>
<td>NGO</td>
<td>Non-Governmental Organization</td>
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<tr>
<td>NIMAT</td>
<td>National Incident Management Assistance Team</td>
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<tr>
<td>NOAA</td>
<td>National Oceanic and Atmospheric Administration</td>
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<tr>
<td>NRCC</td>
<td>National Response Coordination Center</td>
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<tr>
<td>NRF</td>
<td>National Response Framework</td>
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<tr>
<td>NWS</td>
<td>National Weather Service</td>
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<tr>
<td>PA</td>
<td>Public Assistance</td>
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<tr>
<td>PDA</td>
<td>Preliminary Damage Assessment</td>
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<tr>
<td>POD</td>
<td>Point of Distribution</td>
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<tr>
<td>PPE</td>
<td>Personal Protective Equipment</td>
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<tr>
<td>RAPT</td>
<td>Resilience Analysis and Planning Tool</td>
</tr>
<tr>
<td>RRCC</td>
<td>Regional Response Coordination Center</td>
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<tr>
<td>RSF</td>
<td>Recovery Support Function</td>
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<td>SCF</td>
<td>Surge Capacity Force</td>
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<tr>
<td>SDRC</td>
<td>State Disaster Recovery Coordinator</td>
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<tr>
<td>SLTT</td>
<td>State, Local, Tribal, and Territorial</td>
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<tr>
<td>TDRC</td>
<td>Tribal Disaster Recovery Coordinator</td>
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<tr>
<td>TSA</td>
<td>Transitional Sheltering Assistance</td>
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<tr>
<td>UCG</td>
<td>Unified Coordination Group</td>
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<tr>
<td>US&amp;R</td>
<td>Urban Search and Rescue</td>
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<tr>
<td>WEA</td>
<td>Wireless Emergency Alert</td>
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