COVID-19 Pandemic Operational Guidance

All-Hazards Incident Response and Recovery

May 2021

FEMA
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Note from the Administrator

For the past year, the emergency management community at all levels of government—federal, state, local, tribal, and territorial—has faced historic challenges as we adapted to performing our critical missions in the novel coronavirus (COVID-19) pandemic environment. From strained supply chains to the day-to-day challenges of working to protect the workforce from illness, the Nation’s emergency managers have experienced their most challenging year in memory. As a former local emergency manager, I know first-hand how challenging delivering our mission is in a COVID-19 environment.

Today, the Nation’s emergency management community is in a different place than it was when the pandemic began. The problems that we now face in 2021 are—in many ways—different than those in 2020. Addressing critical personal protective equipment (PPE) shortfalls has now largely given way to ensuring that anyone who wants a vaccine can receive a vaccine safely, effectively, and equitably, especially for underserved and historically marginalized communities who have been disproportionately impacted by COVID-19. As we approach hurricane and peak wildfire seasons, the Federal Emergency Management Agency (FEMA) and its state, local, tribal, and territorial (SLTT) partners are focused on the immediate actions necessary to administer vaccines while continuing to protect communities and prepare for emerging disasters. The Nation’s success in the vaccination mission—the most effective protective measure against COVID-19—is critical to ensuring a return to a more typical operational environment in the future.

SLTT partners have worked tirelessly over the past year to prepare their communities for disasters, update response and recovery plans, and lead operations to care for survivors in the wake of record-breaking hurricane and peak wildfire seasons. At the same time, FEMA has developed new ways to support its SLTT partners by modifying and adapting existing programs and processes and increasing its focus on ensuring the equitable delivery of disaster assistance. The emergency management community has learned key lessons about how we can operate effectively in a pandemic environment. By sharing best practices, we can keep the public and our teams safe and meet our mission in the COVID-19 environment. It is critical FEMA and its SLTT partners continue to share findings and—even more importantly—make improvements based on this experience.

FEMA is pleased to release the updated “COVID-19 Pandemic Operational Guidance: All-Hazards Incident Response and Recovery” to help our SLTT partners prepare to conduct disaster operations amid the COVID-19 pandemic. This document outlines how FEMA has adapted response and recovery operations to the realities and risks of COVID-19 in 2021, including ensuring equity in this new environment, and enable SLTT emergency managers to better prepare and plan accordingly. By doing so, better enable us all to help people before, during, and after disasters.

Sincerely,

Deanne Criswell
Administrator
Overview

The "COVID-19 Pandemic Operational Guidance: All-Hazards Incident Response and Recovery" provides actionable guidance for SLTT officials to prepare for response and recovery operations amidst the COVID-19 pandemic. While FEMA is releasing this in advance of the 2021 Atlantic and Pacific hurricane seasons and the peak Western wildfire season, the planning considerations outlined here are applicable to any disaster operation in the COVID-19 environment, including no-notice incidents, spring flooding, tropical cyclones, severe weather, and other all-hazard incidents. This document highlights how FEMA has adapted to operating in the COVID-19 pandemic environment, but to the greatest extent possible, the foundational emergency management concepts remain unchanged.

The emergency management community has operated in a pandemic environment for over a year. During that time, FEMA emphasized the importance of continuous improvement and strongly recommended that all SLTT jurisdictions apply lessons learned from 2020 as they prepare for operations in 2021. This document serves as a tool for SLTT partners, outlining not only new guidance based on lessons learned, but also guidance related to new priorities that have arisen in recent months such as focusing on the equitable delivery of disaster assistance. This document builds upon the guidance released last year¹, and will:

- Describe continued challenges to disaster operations posed by COVID-19 and planning considerations for emergency managers that are based on science and the best available data;
- Outline considerations for SLTT jurisdictions related to planning COVID-19 testing and vaccination operations. This includes providing an overview of how FEMA supports SLTT partners in establishing and operating testing facilities and vaccination sites that ensure the fair and equitable distribution of vaccines to all individuals;
- Provide up-to-date resources (e.g., checklists, reports)—reflecting current lessons learned for operating in a pandemic environment—to enable emergency managers to best adapt response and recovery plans; and
- Outline how FEMA plans to continue to adapt response and recovery operations to ensure prioritization for life safety, life sustainment, and workforce protection, and to maintain the delivery of FEMA programs in a pandemic environment.

The FEMA incident leadership can also use this document as a starting point for engagement with SLTT partners throughout 2021. By doing so, they can lay the foundation for more detailed discussions about the support FEMA can provide in a pandemic environment, based on their specific

requirements. FEMA will continue to support SLTT objectives and will adapt as necessary to ensure the most effective and timely support. For specific disaster response and recovery operations, FEMA will continue to work directly with federal and SLTT partners to support based on incident requirements, public health guidance, and other considerations.

As the past year demonstrated, the COVID-19 pandemic and its effects continue to be dynamic and ever-evolving. Throughout 2021, jurisdictions nationwide will be at different stages of pandemic recovery. Therefore, this document emphasizes the importance of flexibility and provides SLTT partners with guidance that they can tailor based on their specific needs and capacity.
Introduction

The COVID-19 pandemic required unprecedented, whole-of-government response. While the country has made significant progress, the pandemic is not over. FEMA encourages emergency managers to apply lessons learned from the pandemic and other disasters to anticipate new operational challenges while protecting the health and safety of all disaster survivors and the disaster workforce. By ensuring a shared understanding of expectations among FEMA and SLTT partners, emergency managers at all levels will be better positioned to successfully deliver their missions in 2021.

FEMA will continue to implement the Administration’s recent Executive Orders (EO) on “Advancing Racial Equity and Support for Underserved Communities Through the Federal Government” and “Ensuring an Equitable Pandemic Response and Recovery.” Both EOs highlight and reinforce the ongoing FEMA commitment to ensuring the equitable delivery of FEMA and FEMA-funded programs and services before, during, and after disasters.

During 2021 operations, FEMA will provide substantial support to SLTT partners as they vaccinate the public, care for survivors, and prepare for disaster operations. FEMA will continue to conduct disaster operations virtually when feasible and will coordinate closely with jurisdictions to align or adjust its approach based on incident requirements, current public health guidance, and local COVID-19 infection rates. FEMA will also operate in alignment with the White House’s “National Strategy for the COVID-19 Response and Pandemic Preparedness.” FEMA personnel will continue to follow current Centers for Disease Control and Prevention (CDC), federal, and local guidance across all incident sites.

FEMA continues to support SLTT partners in accordance with the “National Incident Management System (NIMS),” “National Response Framework (NRF),” “National Disaster Recovery Framework (NDRF),” “Response Federal Interagency Operational Plan (FIOP),” “Recovery FIOP,” and “Comprehensive Preparedness Guide 101.” Emergency managers at all levels will need to continue adapting throughout 2021 as COVID-19 remains a threat but, to the greatest extent possible, foundational concepts will remain intact as they did in 2020.

As SLTT partners continue to prepare for emerging incidents, emergency managers are encouraged to review this updated guidance and adjust existing plans—including continuity of operations plans—to account for lessons learned in 2020 operations and current SLTT public health guidance as they prioritize lifesaving and life-sustaining efforts. FEMA urges SLTT partners to consider its planned operational posture as described in this updated guidance and current CDC guidance. Additionally, SLTT partners should continue preparing to support all disaster survivors – with emphasis on people with civil rights protections, such as persons with disabilities, older adults, individuals with limited

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2 All references in the document are included in Appendix A: Additional Resources.
English proficiency, and other protected classes, and distributing accessible communication materials for local communities that address preparedness in a pandemic environment.

### Additional Information on Executive Actions


The White House’s “National Strategy for the COVID-19 Response and Pandemic Preparedness” established goals relevant to FEMA and SLTT planning for disaster operations. In disaster operations, FEMA will work with SLTT leadership to determine the most appropriate operational posture to protect impacted communities and deployed personnel.

**EO 13991: Protecting the Federal Workforce and Requiring Mask-Wearing (January 20, 2021)**

Directs the heads of executive departments and agencies to immediately take action to require compliance with CDC guidelines with respect to wearing masks; applying social distancing measures; and other critical public health measures by on-duty/on-site federal employees, on-site federal contractors, and all persons in federal buildings or on federal lands.

**EO 13985: Advancing Racial Equity and Support for Underserved Communities Through the Federal Government (January 20, 2021)**

Directs executive departments and agencies to recognize and work to redress inequities in their policies and programs that serve as barriers to equal opportunity. Each agency must assess whether, and to what extent, its programs and policies perpetuate systemic barriers to opportunities and benefits for people of color and other underserved groups and create a plan to address any identified barriers.

**EO 13995: Ensuring an Equitable Pandemic Response and Recovery (January 21, 2021)**

Identifies communities of color; sexual and gender minority groups; individuals with disabilities; and rural, territorial, and tribal communities, as facing observable barriers in ensuring an equitable COVID-19 response for their respective communities. Directs the Federal Government to take swift action to prevent and remedy differences in COVID-19 care and outcomes within communities of color and other underserved populations, including modifying pandemic response plans and policies to advance equity.

### 1. 2020 FEMA Response Operations

In March 2020, the President declared the ongoing COVID-19 pandemic to be of sufficient severity and magnitude to warrant a nationwide emergency declaration for all states, tribal nations, and territories under the Robert T. Stafford Disaster Relief and Emergency Assistance Act (Stafford Act). This declaration expanded FEMA’s role in the response, as well as the agency’s support to SLTT
partners. As the Nation worked to address the impacts of the pandemic, FEMA also continued to support SLTT partners with other disaster operations (Figure 1).

**Figure 1. Overview of Disaster Operations (March 1, 2020 – March 31, 2021)**

FEMA and its SLTT partners supported a variety of incidents in 2020, including a hurricane season with the most named storms in history and a record-breaking wildfire season, in addition to pandemic response efforts.

FEMA operational adaptations in 2020 included updated policies, processes, and guidance; virtual program and service delivery; and virtual training opportunities. FEMA will continue to implement the adaptations that worked well in 2020 and will identify additional lessons learned for future disaster operations. Moreover, FEMA will continue to take a data-driven, science-based approach to determining what adaptations the agency must apply and under what circumstances.
Response Planning for 2021 Operations

During 2021, FEMA will ensure support to SLTT partners as they vaccinate the public, prepare for disasters in a pandemic environment, and care for disaster survivors. Emergency managers should anticipate evolving and emerging incidents throughout 2021 that will require response operations with lifesaving and life-sustaining efforts. FEMA encourages SLTT partners to be prepared to lead scalable and flexible response operations and adapt to adjustments in how FEMA implements disaster assistance and delivers its programs.

FEMA will continue to reassess how to make its disaster response operations as effective as possible in a pandemic environment. In 2020, FEMA conducted many aspects of disaster response remotely, and when feasible, FEMA will continue to conduct operations virtually in 2021. There will be instances when the agency requires an in-person footprint (e.g., to increase access to COVID-19 vaccinations for both the disaster workforce and survivors and to support response operations following an incident). Deployed FEMA personnel will continue to adhere to all public health and CDC guidance to prevent the spread of COVID-19. Regardless of whether FEMA deploys personnel virtually or in-person, the agency’s goal remains to align federal support with the needs of SLTT partners.

1. FEMA Response Posture

FEMA is supporting ongoing disaster operations in all 10 FEMA regions, with personnel supporting the National Response Coordination Center (NRCC), Regional Response Coordination Centers (RRCC), Joint Field Offices (JFO) and other field-level facilities. FEMA regions continue to provide technical assistance and coordination for a range of program areas with their respective SLTT partners.

Additionally, in accordance with the “National Strategy for the COVID-19 Response and Pandemic Preparedness” and EO 13995, FEMA is committed to ensuring equitable vaccination efforts where anyone who wants a vaccine can receive one. Throughout 2021, FEMA will continue supporting states, tribal nations, and territories to aid in vaccination efforts (Figure 2). FEMA continues to directly support Community Vaccination Centers (CVC) across the Nation to expand access to vaccines.
When SLTT partners are overwhelmed, FEMA is prepared and postured to provide the lifesaving, life-sustaining capabilities that have customarily been available from FEMA in support of states, tribal nations, and territories. FEMA will reprioritize resources as needed for emerging incidents while maintaining operational support to SLTT partners. After initial response, FEMA will continue to coordinate with SLTT partners to identify sustainable long-term staffing solutions, if necessary.

1.1. Operational Coordination

The NRCC and all RRCCs remain activated to support COVID-19 response operations and SLTT partners, with the ability to support concurrent operations when needed. Through NRCC and RRCC operations, FEMA prioritizes and adjudicates resources across multiple incidents—operating consistently with national doctrine and use data to drive decisions. FEMA is currently operating at historically high deployment levels but continues to train and mobilize additional personnel to ensure a flexible and scalable workforce that can meet the needs of emerging, concurrent incidents.

In line with traditional operations, FEMA will deploy a Federal Coordinating Officer (FCO)—most often in-person—to ensure effective coordination with SLTT partners from the start of an incident. The FCO will work directly with a State Coordinating Officer (SCO) to address incident requirements, in coordination with the Regional Administrator (RA). Based on the needs of the state, tribal nation, or territory, FEMA will adjust staffing requirements for the incident. FEMA may deploy response operations resources in-person, such as a National or Regional Incident Management Assistance Team (IMAT), Urban Search and Rescue (US&R) teams, or Disaster Emergency Communications (DEC) support, such as Mobile Emergency Response Support (MERS) detachments and Mobile Communications Office Vehicles (MCOV).

1.2. FEMA Disaster Staffing and Workforce Protections

In the COVID-19 environment, considerations for in-person or virtual deployments to support disaster operations will be made in conjunction with impacted states, tribal nations, or territories; FCOs; FEMA regional offices; and program areas. FEMA will continue to prioritize personnel deployments for
disaster operations that require lifesaving or life-sustaining response operations. In-person deployments will be more likely during the early response phase of a disaster to support community lifeline stabilization. Additionally, based on incident complexity, leadership positions (e.g., Branch Directors) may deploy in-person with supporting staff able to assist virtually.

Whether through virtual or in-person support, FEMA will continue to meet the needs of impacted communities and disaster survivors. FEMA will make decisions about staffing needs based on the scale and complexity of the disaster, public health guidance, the rate of COVID-19 infections, as well as other considerations identified by SLTT partners (e.g., areas with limited internet connectivity or vulnerable populations). The callout box below provides examples of the operational adaptations FEMA made in 2020.

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### Operational Adaptations in the COVID-19 Environment

Given the impacts and complexity of five named storms in 2020, including **Hurricanes Laura and Delta in Louisiana**, the FEMA RA and FCO coordinated with the SCO to deliver disaster programs through more in-person deployments (though FEMA did provide some disaster support virtually). Key operational actions included:

- **Deployment**: Over 1,400 responders in-person and over 650 virtually to both events; deployed Regional IMAT team to coordinate with state emergency management in-person at the state Emergency Operations Center (EOC).

- **Workforce Protection**: Applied workforce safety measures, including on-site testing and screenings at FEMA facilities, including at the Joint Recovery Office (JRO), branch offices, and responder base camp.

- **Program Delivery**: Established Document Dropoff Centers in place of standard, fixed Disaster Recovery Centers (DRC); pre-positioned commodities and logistics personnel in likely impact-areas.

To respond to **wildfires in California**, the FEMA RA and FCO coordinated with the SCO to deliver disaster programs to survivors through a mix of in-person and virtual deployments. Key operational actions included:

- **Deployment**: Established an in-person Unified Coordination Group (UCG) supported by approximately 400 in-person FEMA personnel and over 200 virtually deployed personnel.

- **Workforce Protection**: Established on-site health and wellness screenings at FEMA facilities and provided access to COVID-19 testing; deployed MCOVs to allow for social distancing.

- **Program Delivery**: Amplified virtual (i.e., web and mobile) registration intake for survivors instead of promoting the standard fixed DRCs.

Given the limited impacts of **severe storms and tornadoes in Arkansas**, the FEMA RA and FCO met the needs of the state through a minimal amount of in-person support (88% of support was virtual). Key operational actions included:
1.2.1. PERSONNEL HEALTH AND SAFETY

FEMA will continue to implement protective measures and CDC guidance to protect its workforce’s health and safety. Field leadership will provide specific health and safety briefings and determine protective measures, which may vary by incident based on incident requirements, relevant SLTT public health guidance and the jurisdiction’s infection rate. FEMA has also issued guidance and implemented enhanced protective measures to protect the health and safety of its workforce when working at non-FEMA facilities, including guidance outlining actions to take if an individual gets sick or tests positive for COVID-19. These measures include:

- Making vaccinations available to FEMA employees and encouraging FEMA employees to get vaccinated;
- Conducting temperature and wellness screenings;
- Offering on-site COVID-19 testing for employees on assignment and individuals entering select FEMA facilities;
- Conducting COVID-19 contact tracing and exposure referral;
- Providing masks and other protective equipment and enforcing associated protective guidance and recommendations for staffing and visitors;
- Encouraging and enabling physical distancing through facility modifications, improved ventilation, and thorough cleaning of workspaces and areas;
- Encouraging and expecting FEMA employees to remove themselves from situations where others are not practicing appropriate safeguards or following current CDC guidance; and
- Deploying MCOVs to allow deployed personnel to socially distance.

1.2.2. DISASTER FACILITIES

When an incident requires in-person deployments, FEMA may establish a JFO or other physical disaster facilities to support SLTT partners. FEMA field leadership and safety and security personnel...
will develop, adapt, and implement local mitigation strategies in compliance with CDC and SLTT public health guidance, including:

- Actions identified in the “Personnel Health and Safety” section above;
- Facility layouts with sufficient space to allow for social distancing;
- Engineering controls or resources that could improve air circulation and enhance air quality in the workplace, such as portable high-efficiency particulate absorbing (HEPA) filters;
- Provision of reasonable accommodations and/or policy modifications for employees with disabilities in accordance with Equal Employment Opportunity Commission guidance; and
- Guidance for individuals instructed not to enter FEMA facilities (e.g., persons who have tested positive for COVID-19 or are symptomatic and not cleared to return to work).

Many of these strategies will apply to anyone entering a FEMA facility, not just FEMA personnel. Additional considerations for disaster facilities may also extend beyond FEMA facilities. Non-FEMA federal buildings may have their own restrictions on who may enter at any given time, and FEMA will coordinate with its SLTT and interagency partners to understand these restrictions to ensure minimal impact to disaster operations. As the pandemic environment changes, FEMA will reassess these mitigation strategies and implement lessons learned and best practices to ensure the agency’s disaster facilities meet disaster needs while keeping the workforce and survivors safe.

### 1.2.3. REMOTE DISASTER OPERATIONS

Over the past year, FEMA has been able to conduct certain efforts virtually and will continue to support remote disaster operations without sacrificing effectiveness. While operating in a pandemic environment, FEMA will continue to balance and continually adjust the number of in-person deployments to disaster-impacted areas and will use virtual deployments, especially for smaller, less complex incidents. Using best practices and lessons learned from 2020, FEMA will continue to support virtual deployments and remote disaster operations through:

- Increasing communications to the public through social media platforms, virtual townhalls, and coordinated messaging to survivors from FEMA officials and SLTT leadership, and ensuring that all communications from FEMA are provided in ways accessible to individuals with disabilities and limited English proficiency;
- Increasing 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; and
- Using virtual personnel mobilization center processes to facilitate rapid deployment of personnel and ensure that virtually deployed personnel receive information technology services as needed to prepare them to directly support impacted areas.
1.3. Contract and Commodity Readiness

FEMA will continue to prepare for all-hazards operations in 2021 by aligning resources, awarding contracts, and readying Logistics personnel for rapid response operations. In addition to owning and purchasing resources, FEMA has multiple partnerships with other federal agencies such as the U.S. Army Corps of Engineers (USACE), the Defense Logistics Agency (DLA), and non-profit organizations, such as the American Red Cross.

FEMA will continue to ensure distribution centers maintain commodity levels at, or near, pre-COVID-19 status, and focuses on rapidly replenishing commodities used to support COVID-19 pandemic operations. When fulfilling PPE orders to states, FEMA will prioritize delivery to states based on the rate of COVID-19 infections. When requested, FEMA will provide support for commodities and supplies (e.g., tarps, food, water) for emerging disaster operations and will charge SLTT partners based on Stafford Act cost shares. FEMA will continue to deliver commodities only to a single location within a state, and the state will be responsible for final delivery to local points of distribution (POD).

As in 2020, FEMA will require that states purchase PPE supplies through DLA using the Mission Assignment (MA) process. FEMA will pay 100% of the costs for COVID-19 PPE purchases the agency had previously determined to be eligible from the beginning of the pandemic in January 2020 through September 30, 2021.

1.4. Private Sector Partners and Non-Governmental Organizations

FEMA will continue to source resource requests from regional and SLTT partners and will lead engagement and coordination with partner organizations to fulfill requests. The FEMA Office of Business, Industry, and Infrastructure Integration (OB3I) and the National Business Emergency Operations Center (NBEOC) lead coordination efforts with the private sector. The Voluntary Agency Coordination section within Individual Assistance (IA) leads coordination with non-governmental organizations (NGO). FEMA is engaged in ongoing coordination with private sector partners to understand their capabilities, how their offered capabilities can assist the overall mission, and disseminate important information. FEMA will continue to share this information with operational partners through stakeholder calls, dashboards, and email campaigns. The NBEOC also forwards all donations offers, including PPE, that come from a domestic source to the FEMA donations team within Emergency Support Function (ESF) #6 – Mass Care, Emergency Assistance, Housing, and Human Services for coordination.

FEMA continues to explore opportunities with the private sector to increase manufacturing production capacity of critical health care supplies, medical supplies and equipment, and support supply chain stabilization efforts through application of its Supply Chain Analysis Network (SCAN) and Platform for Understanding the Lifeline Stabilization of the Economy (PULSE) tools. In addition to these tools, FEMA has established the Pandemic Voluntary Agreement under Section 708 of the Defense Production Act (DPA) to enhance coordination and cooperation with private sector manufacturers, distributors, and industry representatives to provide critical healthcare resources.
Funding Sources for Pre-Incident Planning

FEMA urges SLTT emergency managers to prioritize preparedness in SLTT budgeting and use preparedness grant funding to ready their communities for all-hazards disaster operations, including for the COVID-19 environment. FEMA will continue to adapt its resilience and preparedness programs to ensure guidance and funds are actionable and useful during operations in a pandemic environment.

**Emergency Management Performance Grants (EMPG):** In Fiscal Year (FY) 2021, FEMA will award $455.1 million, which includes an additional $100 million appropriated by Congress, to assist SLTT jurisdictions in developing their emergency management capabilities for all-hazards preparedness activities, including for pandemic preparedness. In accordance with the FY 2021 EMPG Notice of Funding Opportunity, applicants are required to prioritize grant funding to demonstrate how their proposed EMPG-funded investments support closing capability gaps or sustaining capabilities identified in the Threat and Hazard Identification and Risk Assessment (THIRA)/Stakeholder Preparedness Review (SPR) process and other relevant information sources. In advance of issuing the FY 2021 EMPG Program awards, FEMA RAs will identify regional priorities based on their unique knowledge of the region’s preparedness and emergency management needs and will share those priorities with the states and territories within their region. The RA and state/territory will identify and mutually agree on final priorities through a collaborative negotiation process. This new approach will help ensure that EMPG focuses on addressing the most significant preparedness priorities and closing known capability gaps relating to those priorities, thus making states and territories better prepared to respond to all-hazards incidents.

**Regional Catastrophic Preparedness Grant Programs (RCPGP):** In FY 2021, FEMA will award $12 million in RCPGP funding to states and local governments (representing the 100 most populous Metropolitan Statistical Areas) to build regional capacity to manage catastrophic incidents by improving and expanding regional collaboration for catastrophic incident preparedness. Based on continuing needs identified through FEMA analysis of SPRs submitted by states and territories, the program focuses on the Housing, and Logistics and Supply Chain Management core capabilities, as well as other core capabilities essential to pandemic preparedness. FEMA urges Recipients to address known capability gaps within the identified program focus areas to better prepare their regions for future all-hazards incidents.

2. **SLTT Response Planning Considerations**

More than a year into COVID-19 response efforts, SLTT partners continue to manage competing demands for limited emergency management budgets, resources, and personnel. This includes, but is not limited to:
First responders and medical personnel that continue to care for COVID-19 hospitalized patients;

Public-private sector partnerships that test for and vaccinate people against COVID-19 infections; and

National Guard and volunteer organizations that support vaccination efforts.

To best prepare for emerging incidents, emergency managers are encouraged to review response plans and guidance to align and synchronize community response actions with federal planning efforts described in this document. Additionally, SLTT partners should ensure adequate protective measures are in place for their disaster workforce and survivors, including by maximizing vaccinations of all community members – especially emergency managers, critical infrastructure workers, volunteer organizations, and any other personnel critical to conducting rapid, effective disaster operations. Jurisdictions are encouraged to track vaccination rates in potentially impacted or at-risk communities (e.g., those in flood zones, earthquake-prone areas, wildfire-prone areas) – especially among the most socially vulnerable – and adjust planning, response operations, and protective measures accordingly. The callout box below lists several additional key considerations for response planning in the current environment.

**Response Considerations Checklist**

- Have you reviewed and shared available lessons learned from response operations conducted in the COVID-19 environment and incorporated best practices or recommendations into current plans?
- Do you have a plan to maximize vaccination efforts in advance of disaster activity periods? Have you established a system to track progress in vaccinating potentially impacted communities?
- Have you established or implemented a system that would offer COVID-19 vaccinations to your emergency management department or agency personnel? Is this system scalable to incorporate individuals from other departments who may be used to support the disaster response?
- Do you have plans in place to temporarily suspend operations at fixed or mobile vaccination or testing sites due to severe weather?
- Do you have a plan to determine which personnel will be physically deployed to the field and how they will be protected?
- Have you planned specifically for the needs of people with disabilities, including people with physical, hearing, visual, cognitive, psychiatric, or intellectual or developmental disabilities?
- Have you accounted for the needs of socially vulnerable populations, such as individuals with limited English proficiency, or those without access to public transportation? Are you using data, such as the CDC’s Social Vulnerability Index (SVI), to drive response planning and decision-making?
Do you have a plan to ensure equitable allocation of resources and services needed to respond to an incident?

Have you developed a plan and established additional contracts/agreements to increase accessible public transit capacity to meet social distancing and other public health guidance during an evacuation?

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

2.1. Operational Coordination and Communications

FEMA encourages its SLTT partners to review and share available lessons learned and best practices related to operational coordination and communication and incorporate them into existing response operations plans. SLTT partners are encouraged to review readiness and preparedness plans, policies, procedures, and standard operating procedures (SOP). Jurisdictions should also consider:

- Identifying how plans, policies, and practices may need to be adapted to support scalable and flexible operations in a pandemic environment;
- Maintaining or updating current command and control roles and responsibilities for COVID-19 response and/or vaccination support operations;
- Assessing risk and response and recovery capabilities to better develop, or update, realistic plans that account for incidents resulting in critical resource demands;
- Using FEMA preparedness grant program funding and available resources (e.g., “FEMA Coronavirus Pandemic Response: Preparedness in a Pandemic Exercise Starter Kit”) to exercise, evaluate and update readiness and preparedness plans for operations in a pandemic;
- Ensuring UCG membership expands beyond senior leaders to include appropriate private sector and public health or medical leadership to better enable jurisdictions to jointly manage and direct incident activities;
- Enabling decision-support through data collection, analysis, and information sharing;
- Continuing to prepare for accessible and multi-lingual messaging and innovative communications (e.g., gas station TV messaging, pharmacy messaging), wireless emergency

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3 Per the National Preparedness System, SLTT jurisdictions should, on a recurring basis, conduct continuous improvement efforts to identify plans, procedures and or resources that require updates.
communications and use of virtual townhalls for dialogue between survivors, SLTT leadership, FEMA officials, and others; and

- Continuing to engage with 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.

### 2.2. Staffing and Workforce Protection

FEMA also encourages its SLTT jurisdictions to review and share available lessons learned and best practices related to workforce protective measures to support personnel who deploy to the field and associated disaster facilities. SLTT partners are encouraged to consider adopting continuity strategies and preparing for a variety of potential conditions to account for local outbreaks, periods of peak COVID-19 activity or phased reopening. FEMA encourages SLTT partners to exercise updated plans via virtual tabletop exercises. FEMA programs can provide additional support for training, drills, or products for exercise plans. FEMA urges SLTT leaders to review staffing, continuity, and workforce protection plans and consider:

- Reassessing strategies to ensure personnel can receive a COVID-19 vaccination, if desired, and update as necessary;

- Messaging the continued importance of health and safety measures to protect the workforce and disaster survivors and slow the spread of COVID-19 in an impacted area;

- Sustaining readiness of typical disaster support personnel (e.g., first responders, logistical personnel, National Guard) who may already be deployed to ongoing operations by considering personnel rotations to address or prevent disaster fatigue;

- Reviewing and updating existing continuity plan orders of succession and delegations of authority with current information for leadership and management personnel;

- Maintaining a hierarchy of administrative, engineering, and protective controls at disaster facilities including temperature and health screenings, mask mandate provisions, hand washing and sanitizing stations, facility cleaning and disinfection measures, and social distancing requirements for on-site personnel;

- Reevaluating effectiveness of a decision support matrix to inform managers and determine next steps if an employee contracts COVID-19 and updating it as necessary;

- Messaging the continued importance of good mental health for the emergency management community, addressing the importance of taking care of oneself to better care for others, and providing access to crisis resources for anyone struggling with stress, mental health, or other personal hardships; and
Maintaining virtual coordination with federal partners, bolstering communications and information technology support for remote operations, and pre-identifying approved technology platforms that can support virtual meeting capabilities among SLTT partners, FEMA officials, federal interagency partners, volunteer organizations, and the private sector.

### 2.3. Vaccination Support

Emergency managers at all levels must focus on a strategy of pre-disaster vaccination to mitigate the spread of COVID-19 and to facilitate other response and recovery efforts following an incident. Consistent with CDC guidelines, SLTT partners are in the process of vaccinating people, local jurisdiction prioritizations, and the President’s plan for the equitable distribution and administration of COVID-19 vaccinations. The callout box below includes several of the resources FEMA has developed, including a Civil Rights Checklist and Data Collection Advisory, as guides for Recipients and Subrecipients in ensuring vaccine distribution efforts are conducted in an equitable and nondiscriminatory manner. Additional information on CVCs can be found in the Community Vaccination Centers Playbook.

SLTT partners should review, implement, and share available lessons learned and best practices for vaccine support and continue to prioritize vaccination efforts in advance of an incident to:

- Maximize the number of partially and fully vaccinated people in a jurisdiction;
- Reduce the possible spread and rate of infections in the aftermath of an incident by focusing on vaccinating as many people as possible before disaster strikes, ensuring that mass care and sheltering plans adhere to CDC guidance, and solidify plans for reestablishing testing and vaccination sites are solidified;
- Anticipate and develop plans to ensure equitable access to vaccination sites as they are re-opened, including for individuals with disabilities and limited English proficiency;
- Free up resources to expedite response and recovery efforts by ensuring that essential response and recovery personnel are vaccinated beforehand; and
- Maintain a healthy, reliable augmentation force, such as NGOs and volunteer organizations.

Additionally, SLTT partners should consider planning efforts and requirements to re-establish vaccination sites if they are damaged or destroyed, such as:

- Developing strategies to ensure protection and preservation of COVID-19 vaccine supplies during emerging incidents, including back-up refrigeration units or generator support (e.g., instituting an alarm system to alert when refrigerator power is lost);
- Developing strategies or identifying contract support to staff clinical and non-clinical support roles at CVC or other vaccination sites that may experience staffing shortages following an incident, especially if National Guard personnel is needed for response operations;
Reaffirming vaccination program plans are flexible and scalable to accommodate multiple scenarios, including plans to suspend operations at fixed or mobile vaccination sites due to severe weather or concurrent non-COVID-19 disaster operations;

Anticipating that vaccine distribution may be disrupted during response and recovery operations and develop plans to quickly scale operations, reschedule appointments, and reduce impacts due to the incident;

Having set plans and back-up plans for tracking community vaccination rates in case original resources go off-line post-incident; and

Supporting private sector partners’ re-establishment of vaccine services following an incident (e.g., for pharmacies or grocery stores that distribute vaccines).

What is FEMA requiring to ensure an equitable pandemic response and recovery?

FEMA requires Recipients and Subrecipients to focus the use of FEMA funding on the highest-risk and underserved populations and to prioritize limited resources to ensure an equitable pandemic response. Additionally, FEMA is enforcing compliance with Section 308 of the Stafford Act, Title VI of the Civil Rights Act of 1964, and other federal civil rights laws, which mandate that distribution of disaster relief be accomplished in an equitable and impartial manner without discrimination.

FEMA has a Civil Rights Checklist to supplement the Department of Homeland Security (DHS) Civil Rights Evaluation Tool as a guide for Recipients and Subrecipients in ensuring equitable provision of assistance. FEMA is also requiring that all Recipients and Subrecipients of funding for COVID-19 related activities:

- Collect data on race, ethnicity, and disability status; and
- Submit to FEMA information specific to equitable vaccine administration.

FEMA also issued an advisory on Civil Rights Data Collection reminding recipients of FEMA financial assistance, including SLTT partners, of their responsibility to collect and, when requested, submit demographic data to ensure compliance with civil rights laws.

2.4. Commodities and Points of Distribution

POD operations will continue to be state, tribal, and/or territorial-led and operated with federal support where required. FEMA encourages SLTT jurisdictions to review and share available lessons learned and best practices identified in 2020 related to commodities and PODs and consider:

- Reviewing stockpiles to ensure necessary commodities (including PPE) will be on-hand when needed and strengthening contracts to provide medical-grade PPE, masks, and necessary commodities in advance of disaster operations;
COVID-19 Pandemic Operational Guidance: All-Hazards Incident Response and Recovery

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

- Reassessing current mutual aid agreements and Emergency Management Assistance Compact (EMAC) mission-ready packages to assess whether available resources may be limited due to COVID-19 operations, and consider virtual EMAC agreements when possible;

- Leveraging data, such as the CDC’s SVI, to plan and determine sites for PODs and commodity distribution;

- Preserving alternative commodity distribution sites to limit direct contact between personnel and survivors and ensuring commodity distribution sites have plans in place to provide services to people with disabilities; and

- Leveraging the federal POD Monitor to assist with burn rate management and resupply efforts.

2.5. Private Sector Coordination

When government and private sector resources are mutually supportive and aligned, disaster response is quicker and more effective in meeting communities’ recovery needs. Private sector organizations provide products, services, employment opportunities, and other resources necessary to re-establish a functioning economy that directly affect SLTT recovery. SLTT jurisdictions should consider:

- Reviewing, implementing, and sharing applicable lessons learned and best practices for private sector coordination during response operations, including lifeline stabilization (e.g., power restoration to enable private sector vaccine distribution resumption) in a COVID-19 environment;

- Continuing engagement with FEMA OB3I and NBEOC on private sector coordination, planning and information sharing;

- Assessing, leveraging, and maintaining integration of private sector capabilities to contribute to improved response outcomes;

- Identifying personnel to serve as primary points of contact for private sector integration and provide them with the appropriate support; and

- Holding coordination calls to share information and provide resources pre-incident, if possible.

2.6. Evacuation Planning

FEMA encourages SLTT jurisdictions to review and share available lessons learned and best practices identified in 2020 related to evacuation plans and consider:
- Maintaining awareness of community demographics and identifying areas facing high risk, including considerations for those at higher risk of serious complications from COVID-19 or areas with limited access to COVID-19 vaccinations;

- Increasing the availability of accessible mainline/fixed route mass transit as well as providing paratransit services as a transportation option for individuals who are unable to use the fixed-route bus or rail system for evacuation, and specifically identifying services to support individuals with disabilities or others who depend on door-to-door transportation assistance (e.g., older adults, people requiring bariatric support, and those in late stages of pregnancy);

- Revising evacuation plans to account for the limited travel and sheltering options, and increased time needed for evacuation of health care facilities;

- Identifying accessible communication strategies to ensure people with disabilities and those with limited English proficiency are informed about changes to evacuation plans made based on COVID-19 planning factors and in accordance with public health guidance; and

- Maintaining a system with partner jurisdictions that can facilitate contact tracing during an evacuation or sheltering operation, if needed.
Recovery Planning for 2021 Operations

FEMA mobilized a record amount of recovery support to individuals and state, tribal, and territorial governments in 2020. In 2021, FEMA is committed to continuing to support SLTT jurisdictions as they lead recovery operations.

For the past year, FEMA, SLTT partners, interagency partners, non-governmental organizations, and the private sector have innovated to meet community and survivor needs. By adapting procedures for implementing disaster assistance and program delivery, we help ensure the safety of disaster survivors and emergency managers. In 2021, FEMA encourages SLTT jurisdictions to continue coordinating through virtual communications to the greatest extent possible and anticipate further innovation to adapt and streamline processes. Successful recovery will require continued interagency coordination. FEMA will assist SLTT jurisdictions in developing and monitoring progress against their resilient recovery outcomes.

1. FEMA Recovery Posture

FEMA will continue to coordinate technical assistance and recovery operations through FEMA regions in partnership with SLTT partners, NGOs, and the private sector. This includes 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. For disaster operations in the COVID-19 environment, FEMA has adapted its traditional field operations and program delivery model to expedite services, support, and assistance to SLTT partners while protecting the health and safety of employees. While the level of technical assistance will remain the same in 2021, SLTT partners should be prepared to continue coordinating remotely with FEMA.

1.1. Mass Care/Emergency Assistance

The COVID-19 operational environment continues to require adaptations to many aspects of the Mass Care and Emergency Assistance service areas, particularly all stages of sheltering assistance. Recognizing that congregate sheltering will still be necessary in many disaster scenarios, FEMA will support SLTT partners and NGOs to mitigate risks and support efforts consistent with public health guidance. For lessons learned and best practices for Mass Care in 2020, see the National Mass Care Strategy Website.

As in the 2020 season, 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. FEMA plans to extend the use of the “FEMA Emergency Non-Congregate Sheltering during the COVID-19 Public Health Emergency (Interim)” policy to ensure the continued availability while there remains
a risk due to the pandemic. Given the changes to non-congregate shelter support in 2020, FEMA regions will continue to assist SLTT partners in planning and providing additional technical assistance. However, the approval of these costs is limited to what is reasonable and necessary to address the needs of the incident.

In 2020, FEMA established the Transitional Sheltering Assistance (TSA) Non-Congregate Sheltering Business Unit which manages the TSA program and other non-congregate sheltering policy and implementation efforts. As a result, FEMA can:

- Deploy teams to the field to provide technical assistance;
- Better ensure consistent implementation of TSA across all disasters; and
- Develop guidelines to help all survivors receive prompt, equitable access to non-congregate sheltering and support during their transition into temporary and permanent housing.

Additionally, FEMA and the American Red Cross have collaborated to identify and implement revised protocols to ensure compliance with updated CDC recommendations and implemented measures to mitigate exposure in shelters. As part of this effort, FEMA and the American Red Cross assembled essential supplies into “Pandemic Sheltering Kits,” including sanitation stations, privacy walls, first aid kits, cleaning wipes, gloves, masks, thermometers, and other items to ensure safety in shelters. The FEMA warehouse networks stocks shelter kits for distribution when requested by SLTT partners.

FEMA, along with federal partners, National Voluntary Organizations Active in Disaster (National VOAD), and other non-profit, community-based, faith-based, and private sector partners will continue to provide mass care technical support to SLTT partners for the following:

- Planning for protective measures for all mass care personnel and survivors at sheltering locations, to include health screening, mask use, social distancing requirements, cleaning and disinfection, and quarantine or isolation areas, as needed;
- Planning for additional needs at shelters for supplies and material required for cleaning, disinfection, and social distancing;
- Developing strategies for providing COVID-19 testing at shelters, to protect survivors;
- 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;
- Developing a continued health screening strategy as people go in and out of the shelter, such as planning for necessary information collection and tracking of staff and survivors entering and exiting facilities;
Planning for feeding strategies for survivors sheltering in place and those located in congregate and non-congregate shelters (in accordance with CDC guidance and social distancing requirements); and

Planning for potential modifications to how federal mass care personnel support evacuees, including, but not limited to:

- Transportation to evacuation points and/or congregate/non-congregate shelters;
- Supporting health screenings of staff and survivors entering facilities;
- Supporting COVID-19 isolation/quarantine care shelters;
- Triaging identified target populations (e.g., older adults, individuals with certain underlying medical conditions, or individuals with disabilities and those with access and functional needs) processed into non-congregate options;
- Coordination of workforce lodging across agencies and responder organizations to prioritize hotel access for non-congregate sheltering; and
- Household pet sheltering.

Use of Non-Congregate Shelters in 2021

Consistent with 2020 disaster declarations, FEMA has adjusted policies to allow SLTT partners to execute non-congregate sheltering in the initial days of an incident for emergency or major disaster declarations that authorize PA, Category B, Emergency Protective Measures. Non-congregate shelters include, but are not limited to, hotels, motels, and dormitories. FEMA RAs have delegated authority to approve requests for non-congregate sheltering.

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

SLTT jurisdictions 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; and
- Plan appropriate accessibility considerations for people with limited English proficiency, disabilities and other access or functional needs.
As part of the sheltering plan, FEMA encourages SLTT partners to outline a transition from non-congregate sheltering to alternate temporary or long-term housing options, including TSA for eligible applicants if a major disaster declaration is approved, or for a timely termination when non-congregate sheltering is no longer needed.

1.2. Virtual Preliminary Damage Assessments

The PDA process is a mechanism used to determine the impact and magnitude of damage and the resulting unmet needs of individuals, businesses, the public sector, and the community as a whole. To ensure workforce protection and limit potential exposure, FEMA regions may use virtual or desktop PDA options. Virtual PDA options may include the use of desktop photo and data analysis, aerial imagery, high resolution aerial imagery (2D and 3D) and artificial intelligence (AI), geospatial analysis, parcel-enriched building footprints, Hazus, Prioritizing Operations Support Tool, enhanced windshield surveys, hybrid damage assessments, and Survey 123.

Other forms of information may include 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 continue to work with SLTT partners to determine the appropriate type of PDA process given the public health condition in the area. If personnel deploy to the field based on incident complexity and need, FEMA will ensure social distancing and may rely on windshield assessments to complete the PDA process in a timely manner.

1.3. Individuals and Households Program

In 2021, FEMA does not anticipate major changes in program eligibility, or the level of assistance provided under the Individuals and Households Program. However, FEMA will continue to use modified delivery mechanisms for certain aspects of the program.

To the greatest extent possible, FEMA will continue to use remote inspections and field work to evaluate damage and expedite the delivery of recovery assistance. FEMA will only conduct remote inspections on pre-disaster primary residences where applicants indicate a degree of damage that prevents them from safely remaining in their home upon registration. Applicants who self-report minor damage and can remain in their pre-disaster primary residence will not automatically be scheduled for an inspection. Instead, they will receive a letter from FEMA explaining that they may contact FEMA to request an inspection if they find significant disaster-caused damage to their home after they have registered. Additionally, FEMA will follow up with survivors who reported minor

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4 Hazus is a nationally applicable standardized methodology that contains models for estimating potential losses from earthquakes, floods, tsunamis, 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.
damage and were not issued an inspection to see if their housing situation has changed. Based on the survivor’s response to the outreach, FEMA will issue an inspection, if requested, to assess the disaster-caused damage.

Remote inspections and field work, consistent with eligibility, will continue to support numerous programs including rental assistance, home repair assistance, direct housing assistance, replacement assistance, other needs assistance for personal property, and assistance for miscellaneous items.

**Remote Inspection Assistance**

For remote inspections, FEMA inspectors will contact applicants and complete the standard on-site inspection process by phone. Reasonable accommodations for individuals with disabilities will be available to ensure effective communication with applicants with limited English proficiency, disabilities, and other access and functional needs. These accommodations include American Sign Language (ASL) interpreters and Video Remote Interpreting (VRI), as well as language services, including interpretation in up to 187 languages through onsite or phone-based language interpretation services. FEMA will also work to provide flexibility to applicants for documentation that is required within certain timeframes.

FEMA will administer 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, as normal. FEMA will not authorize Clean and Removal Assistance in disasters that use remote inspections.

### 1.3.1. **DIRECT HOUSING ASSISTANCE**

FEMA does not anticipate changing the criteria necessary for approving a request for Direct Housing. 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 (e.g., rental assistance, lodging expense reimbursement) and non-congregate sheltering.

For new disasters approved for Direct Housing, FEMA will prioritize the placement of Transportable Temporary Housing Units on private sites for owners and the use of Direct Lease for renters. In the case of Transportable Temporary Housing Units, FEMA may need to use specialized disinfection procedures upon return (e.g., ozone fogging or contracted deep cleaning). FEMA will resume in-person recertification visits while adhering to current public health guidelines.

### 1.4. **Community Services Programs**

Request processes and the criteria for Community Services Programs (e.g., crisis counseling, disaster unemployment, disaster case management, and disaster legal services) for non-COVID-19 related Presidential major disaster declarations remain unchanged. The delivery of these programs will be remote as much as possible, including the use of crisis counseling hotlines; publicizing 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 and individuals with limited English proficiency.

In response to the COVID-19 pandemic, and in coordination with partners, FEMA designed and led a fully virtual and integrated policy and program implementation team called the Community Services National Integrated Policy and Implementation Support Cell (CSNIC). This team’s support ensured funding for critical crisis counseling services was available for states, tribal nations, and territories. The CSNIC enhanced communication and coordination with FEMA regions and national-level partners, enabling quicker disbursement of funds to recipients. The CSNIC remains activated to ensure Community Services Programs are prepared to effectively respond to incidents in 2021.

1.5. Disaster Survivor Assistance and Disaster Recovery Centers

FEMA, in coordination with SLTT partners, will determine the use of DRCs and Disaster Survivor Assistance (DSA) teams according to the CDC COVID-19 phase 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, the agency will prioritize stabilizing the communication lifeline to restore networks and support registration processes. FEMA will continue coordination with federal, National VOAD, and other non-profit, community-based, faith-based, and private sector partners to promote digitally available disaster recovery resources, support, and referral services. FEMA will also work to ensure service delivery methods are fully accessible to people with disabilities.

If a state, tribal nation, or territory does request in-person DRCs and DSA team support, and FEMA determines it is appropriate, FEMA will consult with SLTT partners and public health officials on local requirements to ensure workforce health and safety. In DRCs, FEMA will implement additional health and safety measures based on current CDC guidance. In response to COVID-19, the FEMA implemented three additional types of DRCs to meet mission needs: Fixed or Mobile Facilities with social distancing, Virtual DRCs (VDRC), and Document Dropoff Centers (DDC). These DRC options will be coordinated with the state, tribal nation, or territory to provide disaster specific assistance while ensuring safety.

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5 FEMA will not turn away survivors at a DRC. FEMA will monitor occupancy levels and may require survivors to briefly delay their entry into the facility to allow for other occupants to exit the building, to ensure indoor social distancing.
FEMA Disaster Registration Methods

In areas with a limited field presence, FEMA will continue to use its primary registration methods via an online website (www.DisasterAssistance.gov) and telephone services (800-621-FEMA). These methods continue to be successful in limited or degraded communication environments. FEMA will work with local officials and the media to encourage people to leverage digital registration capabilities.

1.6. Public Assistance

The basic principles, eligibility, and award mechanisms of the PA program remain unchanged in 2021. However, on March 15, 2021, FEMA issued an interim policy, “FEMA Policy 104-21-0004, Coronavirus (COVID-19) Pandemic; Medical Care Costs Eligible for Public Assistance (Interim) (Version 2)”, regarding COVID-19 medical care eligible for PA. The interim policy makes clear that as a condition of receiving assistance under the FEMA PA program in connection with COVID-19, Recipients and Subrecipients must demonstrate their efforts to focus the use of FEMA funding to serve the highest-risk communities and underserved populations as determined by established measures of social and economic disadvantage including the CDC’s SVI. They should also prioritize limited resources to ensure an equitable pandemic response.

If the applicant requests a Program Delivery Manager (PDMG), FEMA will conduct most PA meetings virtually. Recipients should be prepared to conduct virtual applicant briefings, with virtual participation by FEMA. FEMA will also conduct the Recovery Scoping Meeting virtually to develop the Program Delivery Plan and discuss the damage inventory. 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. For example, FEMA may deploy personnel to perform 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.
PA Program Delivery in a COVID-19 Environment

Operational Planning
- Applicant Briefings – Encourage virtual briefings
- Request for Public Assistance – No change
- Staff and Operational Planning – Mix of virtual and, if required, minimized in-person staff
- Exploratory Call – No change
- Recovery Scoping Video or Meeting – Encourage remote meetings and, if required, minimized in-person presence, if a PDMG is assigned

Damage Intake and Eligibility Analysis (when a PDMG is requested)
- Applicant Engagement – Encourage virtual engagement and, if required, minimized in-person presence
- Damage identification, Essential Elements of Information, and Project Formulation – No change
- Conducting Site Inspections – Encourage virtual/ tabletop inspections with minimized in-person presence. Make adjustments when using just-in-time site inspections when on-the-ground inspections need to occur.

Scoping and Costing
- Grant Development – No change

Final Reviews
- Field and Final Reviews – No change

Obligation and Recovery Transition
- Project Obligation – No change
- Recovery Transition Meeting – Conducted remotely

1.7. Hazard Mitigation

FEMA continues to adapt hazard mitigation (HM) program delivery and operations to meet the needs of SLTT partners, including surge capacity support for other federal agencies including the Small Business Association. FEMA regions will continue to provide training and technical assistance to SLTT partners to develop and update HM plans to meet the plan requirements to be eligible for certain FEMA assistance programs to create more resilient communities.

Though aspects of the HM program delivery are typically highly dependent on personal interaction (e.g., community education and outreach), the HM program delivery had successful remote adaptations in 2020, including reaching socially vulnerable communities at a higher rate than in a
pre-pandemic environment. FEMA will continue to develop new methods to improve program
delivery, such as remote adjusting.

FEMA has taken proactive steps to address the COVID-19 pandemic to help serve its National Flood
Insurance Program (NFIP) customers. For example, the NFIP has issued guidance to the Write Your
Own (WYO) companies and NFIP Direct on remote claims handling. HM’s Flood Insurance personnel
will also conduct virtual visits with insurance agents in disaster-impacted areas, rather than in-
person visits, to promote the NFIP and its benefits.

FEMA will continue to conduct mitigation interviews with IA-registered survivors through a dedicated
phone line or use a model like remote flood insurance claim adjustments to continue providing
services to disaster survivors. 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 in-person to conduct infrastructure inspections and other assignments.
FEMA may also deploy HM or contract personnel to support local, substantial-damage inspections
and share data to make as many remote determinations as possible to limit the number of physical
inspections required.

1.8. Environmental Planning and Historic Preservation

Many elements of an Environmental Planning and Historic Preservation (EHP) review, which are
required for all proposed FEMA grants and other FEMA-funded actions (e.g., Direct Housing activities,
mission assignments), will be conducted through desktop analysis of relevant considerations (e.g.,
presence/absence of historic properties or critical habitat for endangered species, project
requirements associated with special flood hazard areas).

EHP will rely more heavily on critical site-specific information provided by FEMA grant programs and
applicants to understand the environmental and historic preservation resources present as the
ability to conduct in-person site inspections is likely to remain limited due to COVID-19. Therefore,
applicants should be prepared to provide adequate documentation to facilitate remote inspection
and evaluation of proposed project sites when possible. The information provided through this
documentation includes, but may not be limited to:

- Location of the work, including and latitude/longitude in decimal degrees and site address;
- Maps or aerial imagery of the project area;
- Description of any ground-disturbing activities, including site preparation, laying new or
  expanding existing utilities, and expansion of existing footprints;
- Dates of construction for facilities that are being reused, repurposed, or renovated;
- Description of modifications made to existing facilities; and
Photographs of the project site or facility.

Depending on site-specific considerations (e.g., presence of historic structures, critical habitat for protected species), FEMA may require in-person site visits to conduct further evaluation and complete any associated activities (e.g., biological, archaeological monitoring). In these instances, EHP staff will coordinate as necessary to ensure implementation of all relevant safety precautions.

FEMA may modify public participation requirements found in several EHP laws and regulations, sometimes in the form of public meetings, to ensure safe and effective public comment. Ultimately, COVID-19-related considerations will impact EHP program delivery (e.g., delivery of technical assistance, completion of compliance reviews). However, the incident-specific EHP Advisor, the Regional Environmental Officer, and the Director of the Office of Environmental Planning and Historic Preservation (OEHP) will use all appropriate methods, including coordination with the programs and applicants and viable virtual solutions, to minimize any operational impacts to the extent practical.

1.9. 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 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 (RSFLG) is supporting the coordination of assistance among partner agencies at the national level to resolve operational and policy challenges and develop resources to assist SLTT partners, including COVID-19 Resource Roadmaps and a searchable database (refer to Appendix D for links to these resources and others).
Resources to Address Equity in Disaster Response and Recovery

FEMA is collecting, analyzing, and mapping publicly available Census data and the CDC’s SVI and using this information to allocate resources and personnel to underserved and historically marginalized communities in support of an equitable and efficient COVID-19 response, including identifying potential CVC locations based on population density and vulnerability. As FEMA and SLTT partners prepare for emerging disasters, decision makers at all levels can use many of these tools to prioritize and allocate resources, support decision making during operations, and ensure a more equitable approach to disaster response and recovery.

Centers for Disease Control and Prevention Social Vulnerability Index

The CDC’s SVI uses Census data to determine the social vulnerability of every census tract – subdivisions of counties for which the Census collects statistical data. The SVI ranks each tract on 15 social factors grouped into four themes: minority status and language, household compositions and disability, socioeconomic status, and housing type and transportation. The CDC’s SVI can help emergency response planners and public health officials identify and map communities that are more likely need support before, during, and after a disaster.

Census COVID-19 Data Hub

The COVID-19 Hub presents selected Census demographic and economic data, including data from the Census American Community Survey (ACS), Census County Business Patterns (CBP), and Housing and Business COVID-19 Pulse Surveys, to help guide decision making during the COVID-19 pandemic. Census designed the Hub to provide key data, interactive maps, and downloadable resources to state and local governments, federal agencies, and local organizations. The data may identify areas with at-risk populations and businesses due to COVID-19 and helps organizations working with people and businesses in their area recover from the pandemic by helping them allocate their resources to those areas with greatest need.

Civil Rights Bulletins, Checklist and Advisory

FEMA published two Civil Rights Bulletins, Ensuring Civil Rights During the COVID-19 Response and Ensuring Civil Rights in Multiple Disasters During COVID-19, that offer best practices for communities facing a disproportionate rate of COVID-19 illness and death during response and recovery efforts. FEMA also published a Checklist, Civil Rights Considerations During COVID-19 Vaccine Distribution Efforts, as a tool to assist SLTT partners in understanding and fulfilling their obligations to provide access to vaccine-related programs, activities and services in a nondiscriminatory manner. Finally, FEMA published an Advisory, Civil Rights Data Collection, to remind recipients of FEMA financial assistance, including SLTT partners, of their responsibility to collect and, when requested, submit demographic data to ensure compliance with civil rights laws.
2. **SLTT Recovery Planning Considerations**

As COVID-19 has impacted communities and disaster operations, many SLTT jurisdictions have successfully and effectively adapted their recovery operational plans, long-term recovery objectives, and pre-disaster recovery plans to account for this new operating environment (refer to the callout box below for a checklist of key recovery planning activities). SLTT partners should continue to coordinate with FEMA regions if they have questions about implementing new policies or delivery methods for recovery programs. In addition, SLTT partners should prepare for continued reliance on virtual deployments.

### Recovery Considerations Checklist

- Have you reviewed and shared available lessons learned from recovery operations conducted in the COVID-19 environment and incorporated best practices or recommendations into current plans?
- Have you identified sufficient congregate shelter space to safely implement social distancing as well as sufficient non-congregate shelter space?
- Have you reviewed and incorporated CDC’s “Interim Guidance for General Population Disaster Shelters During the COVID-19 Pandemic” and “Environmental Health Assessment for Disaster Shelters during COVID-19” into sheltering plans and strategies?
- Have you reviewed the “FEMA Emergency Non-Congregate Sheltering during the COVID-19 Public Health Emergency (Interim)” policy for the reimbursement eligibility of both congregate and non-congregate options?
- Have you planned for providing Personal Assistance Services and other support for populations seeking shelter?
- Have you identified impacts from using non-congregate shelters as direct housing solutions? Has your capacity for non-congregate shelter options changed since 2020?
- Can you hold effective public meetings while maintaining social distancing? 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?

See Appendix D for additional Recovery checklist considerations.

### 2.1. Mass Care/Emergency Assistance

FEMA encourages SLTT jurisdictions to continue to work with partners to reassess their mass care plans and strategies 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. Important readiness measures include:
Reviewing and re-validating emergency operations and sheltering plans to account for ongoing social distancing requirements and vaccine sites that may currently occupy pre-identified shelters (e.g., public school gyms);

Proactively preparing accessible and multi-lingual messaging regarding individual and family preparedness; and

Modifying resource acquisition and allocation plans, including identifying COVID-19 high-risk populations that may require additional protective measures.

FEMA encourages SLTT jurisdictions to review and share available lessons learned and best practices identified in 2020 related to mass care/emergency assistance and incorporate them into existing mass care and sheltering plans. Jurisdictions should also consider:

Applying a framework for assessing, planning, and implementing COVID-19-related strategies for mass care efforts in alignment with the “Mass Care/Emergency Assistance Pandemic Planning Considerations Guide”, which addresses the unique challenges posed when providing mass care and emergency assistance services in traditional congregate shelter settings;

Use the resources included in the “Multi-Agency Pandemic Sheltering Job Aid” to support the revision of shelter plans;

Pre-identifying locations and altering sheltering strategies, to include:

- Identifying mass care and shelter options that meet the latest CDC guidance and mitigate risks to communities and the most vulnerable people, such as the older adults, those with underlying conditions, and people with disabilities;

- Establishing a non-congregate shelter task force with knowledgeable and available task members to address challenges and approach issues related to non-congregate sheltering;

- Sharing resource documents, lessons learned and best practices from conducting sheltering operations in 2020 with other regional or SLTT partners;

- Adapting plans and messaging to account for the care of individuals requiring additional assistance, including vulnerable populations, older adults, individuals with disabilities, and those with access and functional needs;

- Using data, such as the CDC’s SVI, to identify locations and populations that may be most at risk when developing sheltering strategies;

- Planning for continued health screenings, COVID-19 testing and vaccinating, and distribution of PPE for staff and evacuees that may enter sheltering locations;

- Continued planning for evacuees and staff that meet screening and testing criteria (e.g., positive, presumptive positive, symptomatic, known exposure) upon arrival at a congregate
shelter, including use of isolation areas for symptomatic survivors and others at congregate shelters; and

- Continued planning to support increased household pet sheltering capacity, preferably collocated if co-habitation sheltering is not a viable option or severely limited due to increased shelter space and social distancing requirements.

- Communicating and coordinating with new feeding services (e.g., farms and restaurant industries) and existing feeding services (e.g., school lunch programs, non-profits, food banks) to locate and connect food commodities to communities until additional options or memoranda of understanding (MOU) can be established;

- Recognizing some congregate sheltering will still be necessary in many non-COVID-19 disasters;

- Planning for the staging, location, and placement of commodities using trends and historical knowledge and available information from SLTT health departments;

- Ensuring MOUs/Memoranda of Agreements (MOA) are compliant and up to date; and

- Involving SLTT workforce development divisions to employ unemployed individuals to increase staffing and fill gaps resulting from decreased volunteerism among older adults and other high-risk volunteers.

### 2.2. Individual Assistance, Public Assistance, and Hazard Mitigation Application Processes

FEMA encourages SLTT jurisdictions to review and share available lessons learned and best practices identified in 2020 related to the IA, PA, and HM application processes and incorporate them into existing recovery operations plans. Jurisdictions should also consider:

- Revising plans to account for virtual work for IA, PA, and HM programs in a COVID-19 affected environment;

- Ensuring familiarity with the PA process and access to the Grants Portal system, including the simplified application submitted through the PA Grants Portal;

- 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 and capacity; and

- Reviewing the “State-Led Public Assistance Guide” and preparing to take on some or all customer service, site inspection and scoping, and costing functions.
2.3. SLTT Recovery Process

FEMA recommends that SLTT partners continue to explore how to modify existing recovery and reconstitution plans and structures to support current COVID-19 recovery operations and accommodate for potential future disasters. FEMA encourages SLTT jurisdictions to review and share available lessons learned and best practices identified in 2020 related to SLTT recovery processes and incorporate them into existing recovery operations plans. Jurisdictions should also consider:

- Managing PA operations, customer service, and site inspections in accordance with the “State-Led Public Assistance Guide”;

- Establishing and sharing communication best practices, including accessible and multi-lingual messaging, and information technology solutions to better facilitate coordination between state, local, tribal, and territorial Recovery Support Function (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;

- Working with FEMA regions to obtain guidance in the development of a State Disaster Recovery Plan for the jurisdiction, to include housing annexes; and

- Accounting for increased recovery efforts to address compounded impacts from COVID-19 and a follow-on incident, to include:
  - Economic impact, including impacts to non-essential businesses and loss of livelihood in the impacted area;
  - 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
  - Planning for increased demand for mental/behavioral health support as survivors and local responders may experience significant distress with the addition of disaster impacts on quarantined communities.
Conclusion

As the country continues to recover from COVID-19, vaccinate people, and prepare for emerging disasters, FEMA will continue to be scalable, flexible, and adaptable based on the needs of the community while ensuring the protection of the incident workforce. Given the FEMA planning and operating posture presented here, emergency managers should review existing response and recovery planning with a focus on key changes necessitated by the COVID-19 environment and ensuring the equitable delivery of disaster assistance.

FEMA will adjust and scale in-person deployments and remote disaster operations as needed. SLTT jurisdictions should continue to 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 voluntary, faith-based, and community-based organizations and the private sector. Should incidents disrupt or degrade communications, stabilizing the communications lifeline becomes even more essential in a COVID-19 environment to support remote work. If additional resources—personnel, commodities, contract support, mutual aid—are needed to adapt and conduct operations in the COVID-19 environment, SLTT jurisdictions should begin planning and posturing for these eventualities.

FEMA expects SLTT partners and fellow emergency managers to continue to problem-solve, act, and do what our profession does best—coordinate, communicate, and collaborate. As the Nation moves into its second year operating in a COVID-19 environment, emergency managers will need to continue to lead, innovate, and be resourceful to address challenges and adapt disaster operations to meet the needs of survivors.
Appendix A. Additional Resources

Appendix A includes all links referenced in this Guide, in addition to a collection of relevant novel coronavirus (COVID-19) related authorities.

1. Preparedness Resources

Table 1 below lists a variety of preparedness resources from FEMA, the Center for Disease Control (CDC), and other sources that state, local, tribal, and territorial (SLTT) jurisdictions can review.

Table 1: Preparedness Resources

<table>
<thead>
<tr>
<th>Resource</th>
<th>Description</th>
<th>Related Resource(s)</th>
<th>Related Resource Description(s)</th>
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<tbody>
<tr>
<td><strong>Centers for Disease Control and Prevention (CDC) Resources</strong></td>
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<td>Communication Print Resources</td>
<td>CDC Print-only materials to support COVID-19 recommendations.</td>
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<td>Considerations for Employers on Cleaning and Disinfecting Your Facility</td>
<td>Guidance on cleaning disinfecting, when to do so, and additional considerations.</td>
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<td>Guidance for Cleaning and Disinfection for Households</td>
<td>Guidance on cleaning and disinfecting your home.</td>
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<td>Resource</td>
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<td><a href="https://www.cdc.gov/hurricanes/pdf/preparing_for_hurricanes_coronavirus.pdf">Preparing for Hurricanes During the COVID-19 Pandemic</a></td>
<td>Information on how the COVID-19 pandemic can affect disaster preparedness and recovery, and what you can do to keep yourself and others safe.</td>
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<td><a href="https://www.cdc.gov/coronavirus/2019-ncov/healthcare-professionals/ppe-strategies.html">Strategies to Optimize the Supply of PPE and Other Equipment</a></td>
<td>CDC’s strategies to optimize personal protective equipment (PPE) supplies in healthcare settings and provides links to CDC’s full guidance documents on optimizing supplies.</td>
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<tr>
<td><strong>Federal Emergency Management Agency (FEMA) Resources</strong></td>
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<tr>
<td>Community Emergency Response Team (CERT) Website</td>
<td>A site with videos and training materials for CERT.</td>
<td>Citizen Responder Programs Registration Portal</td>
<td>A portal for CERT registration accessed via the CERT website.</td>
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<tr>
<td>Community Vaccination Center Playbook</td>
<td>Establishes guidance for providing federal support to state, tribal, and territorial Community Vaccination Centers.</td>
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<tr>
<td>Comprehensive Preparedness Guide 101</td>
<td>Provides FEMA guidance on the fundamentals of planning and developing emergency operations plans.</td>
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<tr>
<td>Continuity Guidance Circular</td>
<td>Details the fundamental theories and concepts to unify the application of continuity principles, planning, and programs across the Nation. It provides guidance on the integration of continuity concepts, provides a common foundation for understanding continuity, and guides the development of other tools and resources.</td>
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<td>Continuity Resource Toolkit</td>
<td>Provides partners at all levels of government, private, and nonprofit sectors with tools, templates, and resources to help implement concepts found in the Continuity Guidance Circular.</td>
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<tr>
<td>COVID-19 Fact Sheets and Guidance</td>
<td>Provides SLTT partners with updated information related to COVID-19.</td>
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<td>Resource</td>
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<td><strong>Federal Emergency Management Agency (FEMA) Resources</strong></td>
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<tr>
<td>COVID-19 Pandemic Operational Guidance for the 2020 Hurricane Season</td>
<td>Provides actionable hurricane season guidance to SLTT partners to prepare for response and recovery operations amidst the ongoing COVID-19 pandemic.</td>
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<tr>
<td>COVID-19 Supplement for Planning Considerations: Evacuation and Shelter-in-Place</td>
<td>Provides COVID-19 related questions to key principles and critical considerations from “Planning Considerations: Evacuation and Shelter-in-Place.”</td>
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<tr>
<td>Emergency Financial First Aid Kit (EFFAK)</td>
<td>Guidance for individuals and families to strengthen financial resilience for disasters and emergencies.</td>
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<tr>
<td>Exercise Starter Kit for Preparedness in a Pandemic</td>
<td>An Exercise Starter Kit with sample documents your organization can use to conduct your own planning workshop on preparedness in a pandemic.</td>
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<tr>
<td>FEMA Building Private-Public Partnerships Guide (National Engagement Draft)</td>
<td>A guide that provides recommendations and best practices for jurisdictions to establish and maintain a private-public partnership to help coordinate mitigation, response and recovery, planning, and preparedness.</td>
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<tr>
<td>FEMA Individual and Community Preparedness Division’s Online Ordering Platform</td>
<td>Agencies, organizations, and individuals can place orders for free preparedness publications. Products are shipped directly at no cost.</td>
<td>EFFAK</td>
<td>Products from the Individual and Community Preparedness Division’s Online Ordering Platform.</td>
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<td></td>
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<td>Hurricane Information Sheet</td>
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<td>Novel Pandemic Information Sheet</td>
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<tr>
<td>Federal Emergency Management Agency (FEMA) Resources</td>
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<tr>
<td>FEMA Preparedness Grants Manual</td>
<td>A guide for preparedness grant applicant and preparedness grant recipients.</td>
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<tr>
<td>FEMA Protective Actions Research Site</td>
<td>Protective Actions collected by FEMA for a wide variety of different hazards.</td>
<td>COVID-Specific Guidance for Natural Hazards</td>
<td>Protective Actions guidance to prepare for, keep safe during, and recover from natural hazards during the COVID-19 pandemic.</td>
</tr>
<tr>
<td>National Incident Management System</td>
<td>Guides all levels of government, nongovernmental organizations, and the private sector to work together to prevent, protect against, mitigate, respond to, and recover from incidents.</td>
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<tr>
<td>National Risk Index</td>
<td>An online mapping application that identifies communities most at risk to 18 natural hazards, visualizes natural hazard risk metrics, and includes data about expected annual losses, social vulnerabilities, and community resilience.</td>
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### Federal Emergency Management Agency (FEMA) Resources

<table>
<thead>
<tr>
<th>Resource</th>
<th>Description</th>
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<tbody>
<tr>
<td><strong>Planning Considerations for Organizations in Reconstituting Operations During the COVID-19 Pandemic</strong></td>
<td>Provides further reconstitution planning recommendations for state, local, tribal, territorial, and private sector stakeholders.</td>
</tr>
<tr>
<td><strong>Preparedness Toolkit</strong></td>
<td>An online portal that provides SLTT partners and the private and nonprofit sector with tools and resources to plan and conduct exercises and aids in implementing preparedness activities.</td>
</tr>
<tr>
<td><strong>Ready.gov/Pandemic</strong></td>
<td>Readiness information for a pandemic.</td>
</tr>
<tr>
<td><strong>Exercise Starter Kit for Workshop on Reconstituting Operations</strong></td>
<td>An Exercise Starter Kit with sample documents your organization can use to conduct your own planning workshop to navigate the complexities of returning to full operations during the COVID-19 pandemic.</td>
</tr>
<tr>
<td><strong>Resilience Analysis and Planning Tool (RAPT)</strong></td>
<td>A geographic information system (GIS) planning tool to inform strategies for emergency preparedness, response, and recovery.</td>
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<tr>
<td>National Resources</td>
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<tr>
<td><strong>National Strategy for the COVID-19 Response and Pandemic Preparedness</strong></td>
<td>Outlines an actionable plan across the federal government to address the COVID-19 pandemic, including twelve initial executive actions issued by President Biden on his first two days in office.</td>
</tr>
<tr>
<td><strong>Federal Government Official COVID-19 Website</strong></td>
<td>Provides information relevant to individuals, households, schools, businesses, health care professionals, health care departments, and emergency managers.</td>
</tr>
<tr>
<td>Other Resources</td>
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<tr>
<td><strong>Emergency Management Assistance Compact (EMAC) Website</strong></td>
<td>Provides information on the all-hazards national mutual aid system.</td>
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</table>
2. **Response Resources**

Table 2 below lists a variety of response resources from FEMA, CDC, and other sources that SLTT jurisdictions may review.

### Table 2: Response Resources

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<thead>
<tr>
<th>Response Resources</th>
<th>Description</th>
<th>Related Resource(s)</th>
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<tr>
<td><strong>Center for Disease Control (CDC) Resources</strong></td>
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<td></td>
<td><a href="https://www.cdc.gov">Long-term Care Facilities and Nursing Homes</a></td>
<td>Guidance on infection prevention and control recommendations to prevent SARS-CoV-2 spread in nursing homes.</td>
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<tr>
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<td><a href="https://www.cdc.gov">People with Disabilities</a></td>
<td>COVID-19 considerations for people with disabilities.</td>
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<td><a href="https://www.cdc.gov">Strategies to Mitigate Healthcare Personnel Staffing Shortages</a></td>
<td>Guidance for healthcare facilities that may be experiencing staffing shortages due to COVID-19.</td>
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<td>Resource</td>
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<tr>
<td><strong>Center for Disease Control (CDC) Resources</strong></td>
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<td>Strategies to Optimize the Supply of Personal Protective Equipment (PPE) and Other Equipment</td>
<td>CDC’s strategies to optimize PPE supplies in healthcare settings and provides links to CDC’s full guidance documents on optimizing supplies.</td>
</tr>
<tr>
<td>COVID-19 Pandemic Response Fact Sheet: Healthcare Capacity Building: Alternative Care Sites and Federal Medical Stations</td>
<td>Provides background information and guidance on Alternate Care Sites (ACS) and outlines the differences between ACS and Federal Medical Stations.</td>
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<tr>
<td>Federal Healthcare Resilience Task Force: Alternate Care Site Toolkit</td>
<td>A toolkit that provides operations guidance intended to help SLTT entities address potential capacity and capability gaps in health care systems during COVID-19 pandemic.</td>
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<tr>
<td><strong>Federal Emergency Management Agency (FEMA) Resources</strong></td>
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<tr>
<td>Community Lifelines Implementation Toolkit</td>
<td>Provides whole community partners the information and resources to understand lifelines, coordinate with jurisdictions using lifelines, and serve as basic guidance for how to implement the lifeline construct during incident response.</td>
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<tr>
<td>Coronavirus (COVID-19) Pandemic: Medical Care Eligible for Public Assistance (Interim) (Version 2)</td>
<td>Defines framework, policy details, and requirements for determining the eligibility of medical care work and costs under the PA Program across all COVID-19 emergency and major disaster declarations.</td>
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<td><strong>Federal Emergency Management Agency (FEMA) Resources</strong></td>
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<td>COVID-19 Best Practice Information: SLTT Public Information Guidance</td>
<td>A variety of different kinds of information for SLTT partners on Public Information during the COVID-19 pandemic.</td>
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<tr>
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<td></td>
<td>Ensuring Civil Rights During the COVID-19 Response</td>
<td>Best practices to assist our SLTT partners in anticipating and attending to civil rights concerns during the COVID-19 response and recovery.</td>
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<td>Resource</td>
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<td><strong>Federal Emergency Management Agency (FEMA) Resources</strong></td>
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<tr>
<td><strong>Ensuring Civil Rights in Multiple Disasters During COVID-19</strong></td>
<td>Offers additional best practices for communities facing a disproportionate rate of COVID-19 illness and death during response and recovery efforts in simultaneous disasters.</td>
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<tr>
<td><strong>FEMA Civil Rights Considerations During COVID-19 Vaccine Distribution Efforts Checklist</strong></td>
<td>Assists state, tribal, and territorial partners in understanding and fulfilling their obligations to provide access to vaccine-related programs, activities, and services in an equitable and nondiscriminatory manner.</td>
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<td><strong>FEMA Civil Rights Data Collection</strong></td>
<td>Reminds Recipients and Subrecipients that receive financial assistance of their Civil Rights Data Collection responsibilities.</td>
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<tr>
<td><strong>Healthcare Facilities and Power Outages</strong></td>
<td>Provides guidance and resources on improving healthcare facility resilience to power outages.</td>
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<tr>
<td><strong>HURREVAC</strong></td>
<td>Assists SLTT partners with Hurricane Evacuation planning, training, and timely decision-making during response operations.</td>
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<tr>
<td><strong>National Response Framework</strong></td>
<td>A guide to respond to all types of disasters and emergencies.</td>
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<td><strong>Radiological Emergency Preparedness Program</strong></td>
<td>Resources and training to do with radiological emergency preparedness, and additional information about the Radiological Emergency Preparedness program.</td>
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<td>Resource</td>
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<td><strong>National Resources</strong></td>
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<tr>
<td>Fact Sheet: President Biden Announces Increased Vaccine Supply, Initial Launch of the Federal Retail Pharmacy Program, and Expansion of FEMA Reimbursement to States</td>
<td>The President will allow FEMA to increase support to state, local, tribal, and territorial partners through additional federal funding.</td>
<td>FEMA Statement on 100% Cost Share</td>
<td>The President will allow FEMA to increase support to state, local, tribal, and territorial partners through additional federal funding.</td>
</tr>
<tr>
<td><strong>Other Resources</strong></td>
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<tr>
<td>Americans with Disabilities Act (ADA) List of Resources</td>
<td>Technical assistance and resources to help state and local governments ensure that their emergency preparedness, response, and management programs are accessible to people with disabilities.</td>
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<tr>
<td>CISA COVID-19 Risk Management</td>
<td>Helps executives consider physical, supply chain, and cybersecurity issues that may arise from the spread of COVID-19.</td>
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<tr>
<td>Emergency Management Assistance Compact (EMAC) Website</td>
<td>Provides information on the all-hazards national mutual aid system.</td>
<td>EMAC Overview</td>
<td>Provides an overview of EMAC.</td>
</tr>
<tr>
<td>Guidance on the Essential Critical Infrastructure Workforce</td>
<td>Information on securing critical infrastructure during COVID-19 provided by the Cybersecurity and Infrastructure Security Agency (CISA).</td>
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<tr>
<td>Resource</td>
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<tr>
<td><strong>Protecting Workers:</strong> Guidance on Mitigating and Preventing the Spread of COVID-19 in the Workplace</td>
<td>Intended to inform employers and workers in most workplace settings outside of healthcare to help them identify risks of being exposed to and/or contracting COVID-19 at work and help them determine appropriate control measures.</td>
<td>OSHA COVID-19 Regulations and Standards</td>
<td>OSHA standards and directives (instructions for compliance officers) and other related information that may apply to worker exposure to COVID-19.</td>
</tr>
<tr>
<td><strong>National Mass Care Strategy</strong></td>
<td>Provides COVID-19-related feeding and sheltering guidance.</td>
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<tr>
<td><strong>National Weather Service (NWS) Statement</strong></td>
<td>Addresses tornado shelters during a pandemic.</td>
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3. **Recovery Resources**

Table 3 below lists a variety of recovery resources from FEMA, CDC, and other sources that SLTT jurisdictions can review.

**Table 3: Recovery Resources**

<table>
<thead>
<tr>
<th>Recovery Resources</th>
<th>Resource Description</th>
<th>Related Resource(s)</th>
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<tbody>
<tr>
<td><strong>Center for Disease Control (CDC) Resources</strong></td>
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<tr>
<td>CDC COVID-19 Website</td>
<td>Guidance for keeping individuals, healthcare professionals, and communities safe.</td>
<td><strong>Environmental Health Assessment for Disaster Shelters during COVID-19</strong> A tool to assist environmental health practitioners in conducting a rapid assessment of shelter conditions during emergencies and disasters.</td>
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<td><strong>Interim Guidance for General Population Disaster Shelters During the COVID-19 Pandemic</strong> Provides interim guidance to reduce the risk of introducing and transmitting COVID-19 in general population disaster shelters before, during, or after a disaster.</td>
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<td><strong>Homeless Service Providers</strong> Guidance for homeless service providers to plan and respond to COVID-19.</td>
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<td><strong>People with Disabilities</strong> Considerations for the disabled in relation to COVID-19.</td>
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<tr>
<td>Resource</td>
<td>Description</td>
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<tr>
<td><strong>Center for Disease Control (CDC) Resources</strong></td>
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<td><strong>Public Health Communications</strong></td>
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<tr>
<td><strong>CDC Agency for Toxic Substances and Disease Registry (ATSDR) Social Vulnerability Index (SVI)</strong></td>
<td>Helps emergency response planners and public health officials identify and map communities that will most likely need support before, during, and after a disaster using Census data to determine the social vulnerability of every census tract.</td>
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<tr>
<td><strong>Federal Emergency Management Agency (FEMA) Resources</strong></td>
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<tr>
<td><strong>Community Recovery Management Toolkit</strong></td>
<td>Resources for SLTT and private nonprofits on potential assistance they could be eligible for after a disaster.</td>
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<tr>
<td><strong>Continuity Resource Toolkit</strong></td>
<td>Provides partners at all levels of government, private and nonprofit sectors with tools, templates, and resources to help implement concepts found in the Continuity Guidance Circular.</td>
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<tr>
<td><strong>Coronavirus (COVID-19) Pandemic: Medical Care Eligible for Public Assistance (Interim) (Version 2)</strong></td>
<td>Interim policy defines framework, policy details, and requirements for determining eligibility of medical care work and costs under the Public Assistance (PA) Program across all COVID-19 emergency and major disaster declarations.</td>
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<tr>
<td>Resource</td>
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<tr>
<td><strong>Federal Emergency Management Agency (FEMA) Resources</strong></td>
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<tr>
<td><strong>Disaster Financial Management Guide</strong></td>
<td>Helps jurisdictions (e.g., SLTT partners) establish and implement sound disaster financial management practices.</td>
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<tr>
<td><strong>Evacuation &amp; Sheltering Assistance under an Emergency Declaration in a COVID-19 Environment</strong></td>
<td>Describes eligible evacuation and sheltering costs for those emergency declarations under which grant reimbursement is authorized.</td>
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<tr>
<td><strong>FEMA Disaster Assistance Registration</strong></td>
<td>Provides online registration for disaster assistance for areas with a limited FEMA field presence.</td>
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<tr>
<td><strong>FEMA Mass Care/Emergency Assistance Pandemic Planning Considerations</strong></td>
<td>Provides planning considerations for jurisdictions that are responding to a pandemic or responding to a pandemic occurring concurrently with a natural, technological and/or human caused disaster.</td>
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<tr>
<td><strong>Grants Portal System</strong></td>
<td>Access portal for Public Assistance grantees.</td>
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<tr>
<td><strong>Guidance on Planning for Integration of Functional Needs Support Services in General Population Shelters</strong></td>
<td>Provides planning guidance to meet access and functional needs in general population shelters and assists emergency managers and shelter planners in understanding the requirements related to sheltering children and adults with functional support needs in general population shelters.</td>
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<tr>
<td>Resource</td>
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<tr>
<td><strong>Federal Emergency Management Agency (FEMA) Resources</strong></td>
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<tr>
<td>Guidance on Planning for Personal Assistance Services in General Population Shelters</td>
<td>Provides guidance to emergency managers and shelter planners for the development of Personal Assistance Services (PAS) for children and adults with and without disabilities who have access and functional needs and require PAS to maintain their usual level of independence in a general population shelter.</td>
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<tr>
<td>Hazus</td>
<td>Supports all-hazards risk assessments.</td>
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<tr>
<td>Individual Assistance (IA) Program and Policy Guidance</td>
<td>Information on IA, including how to apply for assistance.</td>
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<tr>
<td>Mitigation FIOP</td>
<td>Describes how the Federal Government delivers core capabilities for the Mitigation mission area.</td>
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<tr>
<td>National Disaster Recovery Framework</td>
<td>Establishes a common platform and forum for how the whole community builds, sustains, and coordinates delivery of recovery capabilities.</td>
<td>Pre-Disaster Recovery Planning Guide for State Governments Pre-Disaster Recovery Planning Guide for Local Governments Pre-Disaster Recovery Planning Guide for Tribal Governments Provides additional resources, guidance, and tools for States, Local, and Tribal Governments to prepare and develop a pre-disaster recovery plan identifying new partners, resources, planning shortfalls, or solutions to emergency operations plans and annexes.</td>
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<tr>
<td>Resource</td>
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<tr>
<td><strong>Federal Emergency Management Agency (FEMA) Resources</strong></td>
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<tr>
<td>Personal Assistance Services (PAS) Addendum to the Mass Care/Emergency Assistance Pandemic Planning Considerations Guide</td>
<td>Information and promising practices to assist SLTT partners, as well as shelter planners and operators, in anticipating and attending to the needs of people with disabilities.</td>
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<tr>
<td>Preliminary Damage Assessment Guide</td>
<td>A standard framework for how emergency management officials conduct PDAs following a disaster—will be effective starting June 8, 2020.</td>
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<tr>
<td>Procurement Disaster Assistance Team Site</td>
<td>Guidance on Contracting with Federal Funds for Goods and Services Before, During, and After Disasters, and additional training webinars.</td>
<td>FEMA Memo on Procurement Under Grants Conducted Under Emergency or Exigent Circumstances for COVID-19</td>
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<td>FEMA Fact Sheet-Procurement Under Grants: Under Exigent or Emergency Circumstances</td>
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<td>COVID-19 Procurement User Guide Video</td>
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<tr>
<td>Resource</td>
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<tr>
<td>Federal Emergency Management Agency (FEMA) Resources</td>
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<tr>
<td><strong>Public Assistance Program and Policy Guide</strong></td>
<td>A guide to the PA program and related policy.</td>
<td><strong>FEMA Emergency Non-Congregate Sheltering during the COVID-19 Public Health Emergency (Interim)</strong></td>
</tr>
<tr>
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<td><strong>Coronavirus (COVID-19) Pandemic: Medical Care Eligible for Public Assistance (Interim) (Version 2)</strong></td>
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<td></td>
<td></td>
<td><strong>Coronavirus (COVID-19) Pandemic: Purchase and Distribution of Food Eligible for Public Assistance</strong></td>
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<tr>
<td><strong>Recovery FIOP</strong></td>
<td>Describes how the Federal Government delivers eight core capabilities for the Recovery mission area.</td>
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<tr>
<th>Resource</th>
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<tbody>
<tr>
<td><strong>Federal Emergency Management Agency (FEMA) Resources</strong></td>
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<tr>
<td>State-Led Public Assistance Guide</td>
<td>Provides clear and streamlined guidance on the processes, resources, and capabilities required for Recipients to lead PA operations.</td>
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<td><strong>National Resources</strong></td>
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<tr>
<td>Multi-Agency Pandemic Sheltering Job Aid</td>
<td>Addresses the unique planning, preparedness and operational considerations and actions associated with conducting congregate, non-congregate sheltering, and evacuee support activities in a pandemic environment.</td>
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<tr>
<td><strong>Other Resources</strong></td>
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<tr>
<td>American Meteorological Society Tornado Sheltering Guidelines for the COVID-19 Pandemic</td>
<td>Provides guidance on sheltering and seeking refuge from a tornado in the COVID-19 environment.</td>
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<tr>
<td>Census COVID-19 Data Hub</td>
<td>Presents selected Census demographic and economic data, including data from the Census American Community Survey (ACS), Census County Business Patterns (CBP), and Housing and Business COVID-19 Pulse Surveys, to help guide decision making during the COVID-19 pandemic.</td>
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<tr>
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<tr>
<td>Emergency Management Assistance Compact (EMAC) Website</td>
<td>Provides information on the all-hazards national mutual aid system.</td>
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<tr>
<td>International City/County Municipal Association (ICMA) Guidance on Public Meetings and Crisis Communications</td>
<td>Community resources for use among communities during the COVID-19 pandemic.</td>
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4. Relevant Authorities for Combatting COVID-19

Throughout 2020, FEMA implemented several new or rarely used authorities to enhance the agency’s ability to support its SLTT partners, as well as to protect its workforce from disease. Table 4 below outlines several key authorities.

Table 4: Relevant Authorities

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<thead>
<tr>
<th>Authority</th>
<th>Description of Impacts</th>
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| **American Rescue Plan Act of 2021**                         | Appropriates an additional $50 billion to the FEMA Disaster Relief Fund (DRF), covering costs associated with major disaster declarations, including the ongoing battle against COVID-19.  
  ▪ Provides additional funding opportunities to state, local, tribal, and territorial partners through FEMA Emergency Management Performance, Assistance to Firefighters, Staffing for Adequate Fire and Emergency Response, and Emergency Food and Shelter grant programs. |
| **Civil Rights Act of 1964, Title VI**                       | Title VI, 42 U.S.C. § 2000d et seq., prohibits discrimination on the basis of race, color, and national origin in programs and activities receiving federal financial assistance. |
| **Coronavirus Aid, Relief, and Economic Security (CARES) Act (2020)** | The CARES Act provides fast and direct economic assistance for workers, families, and businesses. Key provisions include:  
  ▪ Providing additional COVID-19 funding opportunities to state, local, tribal, and territorial partners through FEMA Emergency Management Performance, Assistance to Firefighters, and Emergency Food and Shelter grant programs.  
  ▪ Providing $45 billion to the FEMA DRF, more than doubling the amount available to support emergency and disaster declarations. |
| **Coronavirus Response and Relief Supplemental Appropriations Act of 2021** | Congress authorized FEMA to provide financial assistance to individuals who incurred COVID-19-related funeral expenses after January 20, 2020. |
# Authority

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<tr>
<th>Authority</th>
<th>Description of Impacts</th>
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<tr>
<td><strong>Defense Production Act (DPA) of 1950</strong></td>
<td>The DPA gives the President the authority to work with the private sector to prioritize federal government contracts to aid the national defense which includes emergency response and preparedness activities. FEMA has used DPA authorities to prioritize contracts, allocate limited supplies, and enter into voluntary agreements with industry partners. There are three Titles of the Defense Production Act (DPA) which give the President a broad set of authorities to influence domestic industry in the interest of National Defense. Title I allows the President to require the private sector to prioritize and accept contracts. Title III allows the President to incentivize the domestic industrial base to expand production and supply. Title VII contains general provisions such as authority to establish voluntary agreements with private industry and establish a voluntary pool of industry executives who could be called to government service.</td>
</tr>
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</table>
| **Relevant Executive Orders (EO)** | Multiple executive orders have directed FEMA to take certain actions to respond to COVID-19 and protect its workforce. Key examples include:  

- **EO 14001 (2021): A Sustainable Public Health Supply Chain**: Directs FEMA to review the availability of critical materials, treatments, and supplies needed to combat COVID-19 and, if necessary, revise its plan and take appropriate action to address identified shortfalls as soon as possible.  

- **EO 13991 (2021): Protecting the Federal Workforce and Requiring Mask-Wearing**: Directs FEMA to immediately take action to require compliance with Center for Disease Control (CDC) guidelines with respect to wearing masks, maintaining physical distance, and other public health measures by on-duty or on-site federal employees, on-site federal contractors, and all persons in federal buildings or on federal lands.  

- **EO 13985 (2021): Advancing Racial Equity and Support for Underserved Communities Through the Federal Government**: Directs executive departments and agencies to address identified inequities in their policies and programs that serve as barriers to equal opportunity.  

- **EO 13995 (2021): Ensuring an Equitable Pandemic Response and Recovery**: Directs the federal government to take swift action to prevent and remedy differences in COVID-19 care and outcomes within communities of color and other underserved populations. Also calls to strengthen enforcement of anti-discrimination requirements pertaining to the availability of, and access to, COVID-19 care and treatment. |
Authority | Description of Impacts
--- | ---
Robert T. Stafford Disaster Relief and Emergency Assistance Act | The Robert T. Stafford Disaster Relief and Emergency Assistance Act constitutes the statutory authority for most Federal disaster response activities especially as they pertain to FEMA and FEMA Programs.

Section 308 of the Stafford Act, Nondiscrimination in Disaster Assistance (42 U.S.C. 5151) includes regulations for equitable and impartial relief operations, allowing the President to issue, and alter and amend, regulations necessary to guide Federal assistance functions to ensure distribution of supplies, processing of applications, and other relief and assistance activities are accomplished in an equitable and impartial manner, without discrimination on the grounds of race, color, religion, nationality, sex, age, disability, English proficiency, or economic status.

Section 308 of the Stafford Act also requires compliance with regulations as a prerequisite to participation by other bodies in relief operations. As a condition of participation in assistance or receiving assistance through the Stafford Act, governmental bodies and other organizations are required to comply with regulations relating to nondiscrimination promulgated by the President, and other regulations applicable to activities within an area affected by a major disaster or emergency as deemed necessary for the effective coordination of relief efforts.
Appendix B. Preparedness Considerations Checklist

Our SLTT partners may consider using the following checklist when modifying the preparedness phase of all-hazards or incident-specific plans in the COVID-19 environment.

1. Review and Modify

☐ Have you reviewed and modified your emergency operations plan to align with public health guidance to include social distancing limitations, mask requirements, and travel restrictions?

☐ Does your emergency operations plan consider potential impacts to your supply chain or reduction of government services, as well as fiscal impacts to the jurisdiction due to lost revenue because of COVID-19 impacts on businesses?

☐ Have you reviewed your jurisdiction’s orders concerning any potential 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 in your jurisdiction to ensure equitable distribution of information, resources, and services (e.g., public/private sectors, community-based service and advocacy organizations, nongovernmental organizations, faith-based organizations, nonprofits, and individuals and families)?

☐ Have you reviewed and modified your plans to promote equity, including considerations for individuals with disabilities, individuals with limited English proficiency, and others with access and functional needs in a COVID-19 environment?

☐ Have you reviewed and updated your continuity plans to successfully continue essential functions and tasks with little to no interruption in a pandemic environment?

☐ Have you updated your resource management inventory to make response personnel available to support non-COVID-19 incident response?

☐ Have you conducted a business analysis across government departments to identify mission essential personnel and potential shortfalls or limitations based on COVID-19 conditions?

☐ Have you identified orders of succession for key personnel and leadership in your continuity plan? Do critical tasks and decision-making have approved delegations of authority?

☐ Have you identified alternate sites and capabilities to ensure continuity of operations (COOP) to include telework?
Have you reviewed and evaluated current mutual aid agreements and Emergency Management Assistance Compact (EMAC) agreements if available resources and/or personnel are limited due to COVID-19 operations? Have you considered virtual support where possible?

2. Consider and Identify

Do the impacts of COVID-19 within your, and neighboring, jurisdictions warrant the revision 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 (e.g. grocery, fuel, home mitigation supplies, and medical equipment supplies)? Has a Pre-Disaster Recovery Plan been written for your state, local, or tribal jurisdiction that might already include this information?

Have you considered resourcing cross training for emergency management roles and responsibilities to support concurrent disasters with extended timelines and limited resources?

Have you assessed your personnel requirements and planned for contingency staffing?

Have you determined alternate communication capabilities, information technology support, and remote platforms to operate your Emergency Operations Center (EOC) virtually, including accessibility and equity considerations?

Have you explored inclusive virtual 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 health and safety guidelines for incident workforce response? (Note: Local conditions will influence decisions that public health officials make regarding community-level strategies)

3. 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?

Have you met with leaders from underrepresented, multilingual, and cultural groups to discuss possible barriers and solutions to effective COVID-19 management in disaster situations?

Have you updated pre-scripted messages to incorporate the current recommended personal protective equipment (PPE) posture for disaster survivors based on the Centers for Disease
Control and Prevention (CDC) and/or local health guidance? How will you coordinate state and local messaging?

☐ 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?

☐ Have you advised individuals and households to track their critical financial, medical, and household information by using the Emergency Financial First Aid Kit (EFFAK) tool as a guide?

☐ How will you use accessible, multilingual, and culturally appropriate messaging to communicate to employees and stakeholders?

☐ 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 Cybersecurity and Infrastructure Security Agency (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?
Appendix C. Response Considerations Checklist

Our state, local, tribal, and territorial (SLTT) partners may consider using the following checklist, organized by the seven community lifelines, when modifying the response phase of all-hazards or incident-specific plans in the COVID-19 environment.

☐ Have you purchased and stockpiled appropriate personal protective equipment (PPE) for personnel required to be in the field, including shelter staff? 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?

☐ Have you considered updating your vendor contracts and agreements to procure and deliver supplies and equipment in case of a shortage?

☐ Are any resources needed for a potential response currently unavailable or in short supply? Have you reached out to your Emergency Management Assistance Compact (EMAC) or private sector partners for assistance and to discuss resource availability based on existing contracts and mutual aid agreements?

☐ Have you confirmed your access to FEMA HURREVAC, as a web-based storm tracking and decision support tool, to view data on National Hurricane Center and National Weather Service (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?

☐ 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 using mass transit modes (e.g., buses) given the need for social distancing?

☐ Have you considered and identified resources needed for evacuation of people with disabilities and others with access and functional needs, including but not limited to the availability of paratransit services?

☐ Have you considered using geographic information system platform planning tools, to include the FEMA Resilience Analysis and Planning Tool (RAPT), to identify population characteristics and infrastructure locations that may be impacted to help with your evacuation and shelter-in-place planning?
Have you considered increasing the membership of Community Emergency Response Teams (CERT), Medical Reserve Corps (MRC), and associated volunteer training? If so, do you have a mechanism to conduct remote recruiting and training?

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 partners to assess their current ability to respond to an emergency?

Have you reached out to your private sectors partners to assess their current ability to respond to an emergency?

If you do not have a Business Emergency Operations Center (BEOC), have you identified personnel to address questions, concerns, and coordination with the private sector?

Do you have a designated point of contact and information exchange platform to continue coordination with critical infrastructure and private sector partners? How often are you receiving updates on their operational status?

Have you considered expanded use of aerial imagery and other remote sensing capabilities to gain and maintain situational awareness and conduct damage assessments?

Does your Emergency Operations Center (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 diverting resources for COVID-19 efforts may alter planning goals and objectives?

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

1. Safety and Security

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

Have you considered continuity of operations (COOP) plans and ways to deliver essential government functions equitably in a COVID-19 environment if conditions are further degraded by another disaster event?
Have you reviewed your evacuation and sheltering plans for correctional facilities?

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 performed a proper hazard assessment that takes into consideration the hierarchy or controls including administrative, engineering, and personal protective equipment controls?

Are all your safety and health plans in place in accordance with 29 Code of Federal Regulations (CFR) 1904, 1910, 1926, and 1960 requirements?

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 Center for Disease Control (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?

2. Food, Water, Shelter

Additional sheltering considerations are included in Appendix D: Recovery Considerations Checklist, Section 4: Recovery Planning.

Have you coordinated with public health officials in your jurisdiction regarding evacuation and shelter safety, infection control, and planning?

Have you coordinated with non-governmental 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?
3. **Health and Medical**

- Are you prepared to maintain adequate staffing during the event of a reduction of personnel availability?
- Have you identified alternate vaccine distribution sites?
- Are there any potential issues with supply chain and logistics of vaccine distribution?
- 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?

4. 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 are needed?

Does your plan for potential emergency repairs for energy infrastructure account for COVID-19 social distancing or PPE needs?

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?

5. 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 through means that are inclusive of those who are Deaf, Hard of Hearing, and/or without speech, or persons with limited English proficiency, 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 and Warning System alerting authorities within your jurisdiction and worked to close any gaps in alerting authority coverage?

Have you tested all alert, warning, and notification systems in accordance with Federal, state, and local guidance, ordinance, or policy?

Have you identified primary and secondary alert, warning, and notification systems for operational redundancy?
COVID-19 Pandemic Operational Guidance: All-Hazards Incident Response and Recovery

☐ Do you have a system or virtual platform 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, and made provisions for accessibility for these virtual meetings, such as captioning, American Sign Language (ASL) interpretation, or Video Remote Interpreting (VRI)?

☐ Have you considered requiring masks (if appropriate) and social distancing if town hall meetings are to be conducted in-person, and made provisions for accessibility for these in-person meetings, such as assistive listening devices, or ASL interpretation?

☐ Are 9-1-1 dispatch and public safety answering points available to people 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 all-hazards preparedness for your communities while under the threat of COVID-19?

☐ 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?
6. **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 an 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 and vans, if economic impacts preclude people from self-evacuating, to include paratransit for individuals 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?

7. **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](https://www.pandemicresponse.gov) or any hazardous and radiological materials groups to determine constraints and limitations from COVID-19 on facilities?
☐ 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

Our state, local, tribal, and territorial (SLTT) partners may consider using this checklist when modifying the recovery phase of all-hazards or incident specific plans in the COVID-19 environment.

1. 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? Has a Pre-Disaster Recovery Plan been written for your state, local, tribal, or territorial jurisdiction that might already include this information?

☐ 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)?

2. Staffing

☐ Does your continuity plan address staffing requirements to ensure successful 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?
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- Do you have a reconstitution plan with a prioritized order of return for personnel after COVID-19 or a comprehensive remote work/telework strategy?

- 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?

3. 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 jurisdictions?

- 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 Public Assistance (PA), Individual Assistance (IA), or Hazard Mitigation (HM) Applicants virtually, including establishing virtual communications and information sharing platforms?

- What accessible communications channels have been identified to relay community disaster information?
4. Recovery Planning

☐ Does the jurisdiction have a website or social media presence to convey disaster-related information? If not, will one be established? Who will establish, maintain, and update it?

☐ 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 Resilience Analysis and Planning Tool (RAPT) for data-driven decision support?

☐ 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 disabilities with services in accordance with the Americans with Disabilities Act (ADA) and Center for Disease Control (CDC) guidance?

☐ How will you provide the people experiencing homelessness with services in accordance with CDC guidance, while also ensuring the health and safety of emergency responders and recovery personnel?

☐ 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?

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

☐ How do social distancing considerations affect current shelter capacity?

☐ Do sheltering and feeding plans incorporate social distancing guidelines and personal protective equipment (PPE) requirements outlined by the National Mass Care Strategy?

☐ Have you confirmed that public shelters you normally rely upon will be available (not only those owned publicly or that are open to the general public) in the aftermath of an incident (i.e., have schools been removed from use or are they being used as vaccine distribution sites)?
Have you considered identifying additional shelter locations, including in areas near public transportation and/or in places near to low-income communities, to reduce shelter density and promote social distancing?

Have you considered and planned for Special Needs Shelter for individuals who during periods of evacuation or emergency, may require shelter assistance due to physical impairment, mental impairment, cognitive impairment, or sensory disability?

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 near public transportation and/or in places near to low-income communities?

Have you established a mechanism for non-congregate sheltering partners (i.e., hotels) to indicate occupant capacity and availability?

Have you established contractual agreements and rates with potential non-congregate shelter partners (e.g., hotels)?

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 capabilities of whole-community partners to operate or support mass care/sheltering in a COVID-19 environment?

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 (including both survivors and response staff/healthcare professionals)?

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 (for both survivors and response staff/healthcare professionals)?

Have you considered how individuals that can provide proof of vaccination will be processed when accessing the facility? Will you require temperature screens and testing for those that are fully vaccinated?

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?
5. 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?

☐ 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 equal access and 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?

☐ Do you have a sufficient record keeping system to maintain historical records of procurements and project monitoring for federal funding requirements and is this system available remotely?
## Appendix E. Acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>ACS</td>
<td>American Community Survey</td>
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<tr>
<td>ADA</td>
<td>Americans with Disabilities Act</td>
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<td>AI</td>
<td>Artificial Intelligence</td>
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<tr>
<td>ASL</td>
<td>American Sign Language</td>
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<tr>
<td>ATSDR</td>
<td>Agency for Toxic Substances and Disease Registry</td>
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<tr>
<td>BEOC</td>
<td>Business Emergency Operations Center</td>
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<tr>
<td>CARES</td>
<td>Coronavirus Aid, Relief, and Economic Security</td>
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<td>CBP</td>
<td>County Business Patterns</td>
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<td>CDC</td>
<td>Centers for Disease Control and Prevention</td>
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<td>CERT</td>
<td>Community Emergency Response Team</td>
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<tr>
<td>CISA</td>
<td>Cybersecurity and Infrastructure Security Agency</td>
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<tr>
<td>COOP</td>
<td>Continuity of Operations</td>
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<tr>
<td>COVID-19</td>
<td>Novel Coronavirus Disease 2019</td>
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<td>CSNIC</td>
<td>Community Services National Integrated Policy and Implementation Support Cell</td>
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<td>CVC</td>
<td>Community Vaccination Center</td>
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<td>DDC</td>
<td>Document Dropoff Center</td>
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<td>DEC</td>
<td>Disaster Emergency Communications</td>
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<td>DHS</td>
<td>Department of Homeland Security</td>
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<td>DLA</td>
<td>Defense Logistics Agency</td>
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<td>DPA</td>
<td>Defense Production Act</td>
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<td>DRC</td>
<td>Disaster Recovery Center</td>
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<td>DRF</td>
<td>Disaster Relief Fund</td>
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<td>Acronym</td>
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<tr>
<td>DSA</td>
<td>Disaster Survivor Assistance</td>
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<tr>
<td>EFFAK</td>
<td>Emergency Financial First Aid Kit</td>
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<td>EHP</td>
<td>Environmental Planning and Historic Preservation</td>
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<td>EMAC</td>
<td>Emergency Management Assistance Compact</td>
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<td>Emergency Management Performance Grant</td>
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<td>EMS</td>
<td>Emergency Medical Services</td>
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<td>Executive Order</td>
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<td>Emergency Support Function</td>
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<td>Federal Coordinating Officer</td>
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<td>FEMA</td>
<td>Federal Emergency Management Agency</td>
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<td>FIOP</td>
<td>Federal Interagency Operational Plan</td>
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<td>FIT</td>
<td>FEMA Integration Team</td>
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<td>FY</td>
<td>Fiscal Year</td>
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<tr>
<td>GIS</td>
<td>Geographic Information System</td>
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<tr>
<td>HEPA</td>
<td>High-Efficiency Particulate Absorbing</td>
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<td>HM</td>
<td>Hazard Mitigation</td>
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<td>IA</td>
<td>Individual Assistance</td>
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<td>ICMA</td>
<td>International City/County Management Association</td>
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<td>IMAT</td>
<td>Incident Management Assistance Team</td>
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<tr>
<td>JFO</td>
<td>Joint Field Office</td>
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<td>JRO</td>
<td>Joint Recovery Office</td>
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<tr>
<td>MA</td>
<td>Mission Assignment</td>
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<tr>
<td>MCOV</td>
<td>Mobile Communications Office Vehicle</td>
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<tr>
<td>Abbreviation</td>
<td>Full Form</td>
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<tr>
<td>MERS</td>
<td>Mobile Emergency Response Support</td>
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<td>MOA</td>
<td>Memorandum of Agreement</td>
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<td>MOU</td>
<td>Memorandum of Understanding</td>
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<td>MRC</td>
<td>Medical Reserve Corps</td>
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<td>NBEOC</td>
<td>National Business Emergency Operations Center</td>
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<td>NDRF</td>
<td>National Disaster Recovery Framework</td>
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<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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<td>NIMS</td>
<td>National Incident Management System</td>
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<td>NRCC</td>
<td>National Response Coordination Center</td>
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<td>National Response Framework</td>
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<td>National Weather Service</td>
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<td>OB3I</td>
<td>Office of Business, Industry, and Infrastructure Integration</td>
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<td>OEHP</td>
<td>Office of Environmental Planning and Historic Preservation</td>
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<td>OSHA</td>
<td>Occupational Safety and Health Administration</td>
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<td>PA</td>
<td>Public Assistance</td>
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<td>PDA</td>
<td>Preliminary Damage Assessment</td>
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<td>PDMG</td>
<td>Program Delivery Manager</td>
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<td>Point of Distribution</td>
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<td>PPE</td>
<td>Personal Protective Equipment</td>
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<tr>
<td>PULSE</td>
<td>Platform for Understanding the Lifeline Stabilization of the Economy</td>
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<tr>
<td>RA</td>
<td>Regional Administrator</td>
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<tr>
<td>RAPT</td>
<td>Resilience Analysis and Planning Tool</td>
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<tr>
<td>RCPGP</td>
<td>Regional Catastrophic Preparedness Grant Program</td>
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<td>Regional Response Coordination Center</td>
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<td>RSF</td>
<td>Recovery Support Function</td>
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<td>RSFLG</td>
<td>Recovery Support Function Leadership Group</td>
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<td>SCAN</td>
<td>Supply Chain Analysis Network</td>
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<td>SCO</td>
<td>State Coordinating Officer</td>
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<tr>
<td>SLTT</td>
<td>State, Local, Tribal and Territorial</td>
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<td>SOP</td>
<td>Standard Operating Procedure</td>
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<td>SPR</td>
<td>Stakeholder Preparedness Review</td>
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<td>Threat and Hazard Identification and Risk Assessment</td>
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<td>Voluntary Organizations Active in Disaster</td>
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<td>VRI</td>
<td>Video Remote Interpreting</td>
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<tr>
<td>WYO</td>
<td>Write Your Own</td>
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