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FA 2 – Human Services

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FA 2 Tasked Agencies	
Primary Agencies	City Administration
Supporting Agencies	Yachats Rural Fire Protection District Lincoln County Sheriff's Office Lincoln County School District Housing Authority of Lincoln County County Emergency Management County Health and Human Services Department County Animal Control Local Community- and Faith-Based Organizations (e.g., Red Cross, Salvation Army) Humane Society Oregon Coast Community College

1 Purpose and Scope

This annex provides information regarding the City’s response to the needs for mass care/sheltering, human services, and public health support for victims of natural and technological emergencies and disasters. It outlines basic roles and responsibilities for primary agencies, provides a concept of operations to assist the City in coordinating emergency services, and references related authorities, agreements, and supporting plans. The City Emergency Management Organization, as outlined in the Basic Plan of this Emergency Operations Plan (EOP), is designed to provide support to local human services agencies through assistance in accessing needed resources and coordination in more complex incidents and events. Nothing in this annex is meant to replace or supersede the standard operating procedures (SOPs) of local response agencies.

This annex covers the following functions:

- Mass Care.
- Emergency Assistance.
- Housing.
- Human Services.
- Public Health Services.
- Care of Emergency Response Personnel and Emergency Coordination Center (ECC) Staff.

For larger events that may require short- or long-term housing for disaster victims, County Emergency Management coordinates this need with the City Emergency Preparedness Coordinator. Emergency shelter includes the use of pre-identified shelter sites in existing structures, creation of temporary facilities or

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shelters, and use of other facilities outside the incident area, should evacuation be necessary.

Food is provided to victims through a combination of fixed sites, mobile feeding units, and bulk distribution. Emergency first aid, consisting of basic first aid and referral to appropriate medical personnel and facilities, is provided at mass care/sheltering facilities. Bulk distribution of emergency relief items such as food, water, and ice is managed and coordinated via established sites within the City. Some situations may require coordination and management of volunteer services and donated goods to maximize benefits without hindering response activities.

Emergency response agencies for the City will also identify and coordinate assistance for Access and Functional Needs Populations (also called Special Needs and Vulnerable Populations) within the impacted area. Access and Functional Needs Populations describes members of the community who experience physical, mental, or medical care needs who may require assistance before, during, and after an emergency incident after exhausting their usual resources and support network.

2 Policies and Agreements

The following policies and agreements are currently in place to support emergency services for the City:

- None

3 Situation and Assumptions

3.1 Situation

Emergencies or disasters can necessitate evacuation of people from residences that are temporarily uninhabitable, damaged, or destroyed. Providing for these victims will consist of making facilities and services available and coordinating activities with government agencies and volunteer disaster assistance organizations. Emergency shelter or housing needs may be short or long term. When such needs arise, it is the responsibility of the City to work with the various human service agencies to meet them.

3.2 Assumptions

- Although City government has primary responsibility for implementing and coordinating the resources and services included in this annex, the Red Cross will manage and coordinate sheltering and mass care operations to the extent of its capability. The Salvation Army will support these operations, and other professional and/or volunteer organizations (e.g., faith-based organizations) that normally respond to emergency/disaster situations will continue to do so.

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- The Red Cross will have agreements in place for use of specific shelters that could be activated by calling the local Red Cross representative. These shelters may be used for specific events associated with the City and County, as well as housing evacuees from neighboring counties if the need arises.
- Permission to use Red Cross–approved facilities for disaster operations and sheltering will be obtained and agreed upon in writing. Pre-identified facilities intended for shelter and mass care will be available and operational at the time of need.
- City government and other available response agencies will manage and coordinate all shelter and mass care activities until the Red Cross has arrived on scene, assessed the situation, and activated procedures for preparing and operating shelters.
- Assistance will be available through mutual aid agreements with the County, other counties, other regions, and State and federal emergency agencies and organizations.
- Unique demands will be placed on the delivery of human services, including crisis counseling, emergency assistance, and the care of access and functional needs groups. As a consequence, the clientele groups of both local and State human service organizations will increase.
- Under localized emergency conditions, a high percentage of evacuees will seek lodging with friends or relatives rather than go to established facilities.
- If the threat of an evacuation is due to a visible hazard or has been discussed in the media, some spontaneous evacuation will occur prior to an implementing order. Therefore, mass care operations may have to commence early in any disaster period.

4 Roles and Responsibilities

The roles and responsibilities for each department in support of emergency services will vary depending on the type of resource, the length of the warning period, and the duration of the incident.

4.1 Emergency Preparedness Coordinator

The Emergency Preparedness Coordinator may be responsible for the following actions in support of an emergency:

- Coordinating emergency preparedness planning and exercise activities with the Red Cross.

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- Identifying local government’s authority, responsibility, and role in providing long-term temporary emergency housing for disaster victims.
- Assessing the situation and issue appropriate notifications to activate and staff the ECC, including notification of the Red Cross, if it is determined that a representative is needed to coordinate emergency food and shelter.
- Establishing a communications link with affected jurisdictions, volunteer agencies, and the public and ensure that they are kept informed of available shelters.
- Assisting in coordinating logistics to support operations and ensure that the provisions of any memorandum of understanding (MOU) are implemented, as necessary.
- Pursue additional mass care-related MOUs with local retailers and service providers.
- Assist in procurement of mass care resources including food, water, and sheltering equipment.
- Coordinating with local, State, and federal agencies in damage assessment and cost recovery activities, as well as identifying long-term temporary emergency housing options.
- Ensuring that necessary communication activities are conducted to inform the public of disaster recovery activities, including information regarding long-term temporary emergency housing assistance.
- Continuing to assist in restoration of normal services and operations, as appropriate.
- Conducting an after-action debriefing/evaluation regarding the overall effectiveness of the City’s efforts in providing emergency food and shelter.

4.2 American Red Cross

The Red Cross provides disaster relief services across Oregon and SW Washington 24 hours a day, seven days a week, 365 days a year. It is not the intent of the City to supplant the Red Cross as the primary provider and coordinator of emergency housing, sheltering, and feeding services; however, the City is not relieved of its obligation to safeguard the welfare of its citizens in times of emergencies, as outlined in Chapter 401 of the Oregon Revised Statutes.

The Red Cross may be responsible for the following actions in support of an emergency:

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- Developing and maintaining plans, procedures, and policies for establishing, managing, and operating a feeding and sheltering system to meet the needs created by a major disaster.
- Developing and maintaining MOUs with local governments to define and clarify roles and responsibilities in preparing for and responding to disasters.
- Participating in regularly scheduled exercises conducted by the City Emergency Management Organization to test the EOP.
- Implementing the response actions outlined in the MOU with the City, as necessary.
- Evaluating the direct or indirect effects of the hazard on available shelter resources.
- Providing specific resource requirements, including feeding support, clothing and bedding supplies, emergency registration of people, and trained shelter management volunteers.
- Coordinating activities with voluntary organizations active in disaster; faith-based organizations; other social service agencies; and local, State, and federal government to provide emergency food and shelter.
- Assisting the City in determining post-emergency needs for long-term emergency temporary housing, as requested.
- Preparing a report on the condition of shelter facilities and making arrangements for returning them to normal use.
- Compiling a record of emergency expenditures.
- Critiquing the provision of shelters for people displaced from their residences and institute reforms, as required.

4.2.1 Contacting the Red Cross

The Red Cross toll free number (1-888-680-1455) is answered at their regional headquarters during normal business hours. After business hours, the number is routed to their answering service, which will take initial information and contact their Regional Duty Officer. The Regional Duty Officer will then contact the agency requesting services in order to obtain additional information before dispatching the appropriate first response agency for incident verification before proceeding.

4.2.2 Activation Triggers

The Red Cross works with those impacted to assess their unmet disaster caused needs. Services they may provide include:

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- Temporary shelter (congregate shelter or hotel lodging)
- Feeding (distributing meals or financial assistance to purchase food)
- Clothing (ensuring there is a change of clothing available)
- Mental health support
- Essential medications and medical supplies
- Referrals to other agencies for additional services

The City will contact the Red Cross if evacuations are occurring; there are people that need food, clothing, or shelter as a result of a disaster; there are people that need mental health support as a result of a disaster; and/or there are people who have lost their essential medications or medical equipment (e.g., eyeglasses, cane) in a disaster.

4.3 Yachats Rural Fire Protection District

The Yachats Rural Fire Protection District may be responsible for the following actions in support of an emergency:

- Providing personnel, supplies, materials, and facilities as available in support of this function.
- Establishing a shelter Emergency Medical Services (EMS) response plan.
- Providing fire and line safety inspections, as appropriate.

4.4 Lincoln County Sheriff's Office

The Lincoln County Sheriff's Office may be responsible for the following actions in support of an emergency:

- Assisting with shelter security and communications.

4.5 County Emergency Management

County Emergency Management may be responsible for the following actions in support of an emergency:

- Providing liaison with the Red Cross.
- Assisting in dissemination of public information in coordination with the City PIO.
- Maintaining a list of available shelters in the County.

4.6 County Health and Human Services Department

The County Health and Human Services Department may be responsible for the following actions in support of an emergency:

- Upon request, screening shelter residents and visitors for communicable diseases.
- Establishing and monitoring isolation space.
- Providing staff and supplies for immunizations as directed by the medical officer.
- Providing advice on sanitation measures for emergency food and water.
- Monitoring garbage and waste disposal.

4.7 Lincoln County School District

The School District may be responsible for the following actions in support of an emergency:

- Providing shelter locations as available.

4.8 Housing Authority of Lincoln County

The Housing Authority of Lincoln County may be responsible for the following actions in support of an emergency:

- Assist with temporary and permanent housing support to residents impacted by the disaster.

5 Concept of Operations

5.1 General

The City Council has overall responsibility for ensuring the welfare of citizens and visitors within the City during an emergency or disaster. In cooperation with available volunteer disaster assistance organizations, the City Emergency Preparedness Coordinator will ensure the provision of basic human services. Disaster victims will be encouraged to obtain housing with family or friends or in commercial facilities. To the greatest extent possible, the City will assist and coordinate the post-disaster housing needs of the homeless. While coordinated City/Red Cross decision-making is desirable, the Red Cross may independently initiate operations. The Salvation Army and other charitable groups (e.g., faith-based organizations) will provide additional support for disaster victims.

In the case of unmet needs, the Emergency Preparedness Coordinator will issue requests for County assistance via the ECC to County Emergency Management.

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Some emergencies will not entail mass care assistance but will still require a limited amount of emergency food and clothing.

5.1 Readiness

Initial preparedness efforts will begin with identification of population groups requiring special assistance during an emergency (e.g., senior citizens and the handicapped). Needs should be matched to capabilities and resources, and any gaps should be addressed through planning, training, and exercises.

In addition, the following activities will be undertaken to help ensure the City is prepared to deliver disaster human services:

- Regularly assess identified shelter facilities.
- Determine available mass care resources to better understand regional mass care capabilities.
- Regularly review this Functional Annex, and apply lessons learned from exercises and real events.
- Provide operational training opportunities to City staff and participate in supporting agencies training opportunities.

5.2 Response

Mass care activities within the City are undertaken immediately upon determination that a substantial section of the public is in need of support. Specific activities may rely on partner-specific plans, including the American Red Cross, Housing Authority of Lincoln County, and Salvation Army. To be further highlighted in *Section 7*, the following mass care-related mass care activities will be performed:

- Coordinate and lead all evacuation orders, if necessary.
- Support the American Red Cross and other partners in the set-up, operations, and demobilization of all shelters and mass care facilities.
- Ensure emergency medical services are provided following the immediate detection of an emergency.
- Coordinate and support the communication of disaster welfare information services.
- Coordinate long-term housing options following the immediate response of an emergency.
- Provide crisis counseling and mental health services.
- Manage all volunteer and donation efforts in the City.

5.3 Transition to Recovery

Once the incident transitions to the recovery phase, human needs of victims should be continually assessed and met as necessary via one or more Disaster Resource Centers. In addition, the City may be required to consider the following:

- Transitional and permanent housing needs.
- Ongoing mental health service needs.
- Unemployment support and workforce development needs.
- Public health concerns caused by the incident.

6 City of Yachats Human Services Functions

When an incident occurs that requires evacuation, preparations will begin for receiving evacuees at selected facilities. Essential personnel, including volunteers, will be alerted; pre-positioned material resources (cots, blankets, food, etc.) will be made ready; and medical facilities will be alerted to the possibility of receiving evacuee patients. Participating agencies will provide food and clothing as needed, assist with registration of evacuees/victims, and provide information to assist victims who need additional services. Once the incident transitions to the recovery phase, the human needs of victims should be continually assessed and met as necessary via one or more Disaster Recovery Centers.

6.1 Mass Care

Mass care includes the registration of evacuees, the opening and management of temporary lodging facilities, and the feeding of evacuees and workers through both mobile and fixed feeding sites. The Red Cross will assist in registering evacuees and, as applicable, will coordinate information with appropriate government agencies regarding evacuees housed in Red Cross shelters.

6.1.1 Shelter

Protective shelters are life-preserving; they are designed to afford protection from the direct effects of hazard events and may or may not include the life-supporting features associated with mass care facilities. In contrast, mass care facilities are life-supporting; they provide protection from the elements and basic life-sustaining services when hazard events result in evacuations. The latter category of facilities is the focus of this annex and is designated as Reception and Care facilities in local Red Cross sheltering plans.

The designation of specific lodging and feeding facilities will depend on the actual situation and the location of the hazard area. Public school facilities will receive prime consideration for use as emergency mass care facilities; such use will be coordinated with school officials. Selected facilities will be located far enough from the hazard area to preclude the possibility of the threat extending to the mass care facility. Agreements for use of some facilities have been obtained

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by the Red Cross. The City will obtain permission from owners to use other facilities as required. When Red Cross facilities are opened, the Red Cross will be responsible for maintaining all functions and staffing according to Red Cross policy. The Red Cross will maintain listings of qualified and trained shelter and lodging facility managers.

Options for temporary shelter available to the City during the first 72 hours of an incident include:

- Predetermined sheltering sites and supplies available through the Red Cross.
- General purpose tents available through the Oregon National Guard and requested by the County ECC from the Oregon Office of Emergency Management (OEM).
- If a Presidential Declaration has been issued, temporary buildings or offices requested through the Federal Coordinating Officer.

A designated member of the City ECC staff may serve as the City Shelter Coordinator. Services will be provided through the coordinated efforts of staff members, the Red Cross, the Salvation Army, other State-supported agencies, volunteer agencies, and mutual-aid agreements with various support groups. Law enforcement agencies will provide security at shelter facilities, where possible, and will also support back-up communications, if needed.

Food will be provided to victims through a combination of fixed sites, mobile feeding units, and bulk distribution. Feeding operations are based on nutritional standards and, if possible, should include meeting dietary requirements of victims with special dietary needs. The Red Cross will be responsible for meal planning, coordination of mobile feeding, and identifying feeding sites and resources for the procurement of food and related supplies. The Red Cross will coordinate all mass feeding and other services needed at open shelters within the City's jurisdiction with City Emergency Management via the City ECC.

Shelter/lodging facility managers will be responsible for the operation of their individual facilities. The primary communications link between shelter facilities and the ECC will be landline and cellular phones. If telephones cannot be used or are overloaded, law enforcement personnel may provide radio assistance. Shelter facility managers should arrange for persons in their facilities to monitor prescribed communication sources for guidance and announcements.

6.1.2 Sheltering Service and Companion Animals

The City, the Red Cross, and other organizations or groups providing sheltering and mass care will comply with Americans with Disabilities Act (ADA) requirements for service animals, with the facility owners' limitations, and with County and State of Oregon Health Code requirements.

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However, pets are not allowed in Red Cross shelters. Depending on the emergency, evacuees may be requested to provide food and water for pets prior to leaving their homes, or they may take small animals to a pet care facility at their own direction and expense.

6.1.3 Bulk Distribution

Emergency relief items to meet urgent needs are distributed via established sites within the affected area. Distribution of food, water, and ice through federal, State, and local governmental entities and non-governmental organizations is coordinated at these sites. The Red Cross will coordinate all bulk distribution activities needed within the City's jurisdiction with the City Emergency Preparedness Coordinator via the City ECC.

6.2 Disaster Welfare Information

Disaster Welfare Information collects and provides information regarding individuals residing within the affected area to immediate family members outside the affected area. The system also aids in reunifying family members within the affected area. The Red Cross will establish a Disaster Welfare Inquiry Operation to answer requests from relatives and friends concerning the safety and welfare of evacuees or those in disaster areas. Welfare inquiry listings, along with registration listings, will be coordinated with the ECC and law enforcement agencies for comparison with missing persons lists. County Amateur Radio Emergency Services provides support to the Red Cross and City Emergency Management in gathering, disseminating, and managing disaster welfare information.

6.3 Long-Term Housing

All housing needs identified during and following emergency incidents or disasters impacting the City will be coordinated through the County Emergency Manager via the County Emergency Operations Center (EOC). In some disaster situations, the federal government may be requested to provide emergency housing. Disaster victims will be encouraged to obtain housing with family or friends, or in commercial facilities. To the greatest extent possible, local and County government will coordinate post-disaster housing needs for the homeless population.

6.4 Human Services**6.4.1 Behavioral Health**

The City relies on the County Health and Human Services Department for behavioral health services during a disaster. Details regarding the provision of these services are provided in the County EOP.

Additional agencies and organizations involved with providing crisis counseling and mental health support to victims and families, the first responder community, and Access and Functional Needs Populations include:

- Area hospitals.
- County and regional volunteer organizations.
- Local nursing homes and care facilities.

See the County EOP, ESF 6 – Mass Care, Emergency Assistance, Housing, and Human Services for more details.

6.4.2 Access and Functional Needs Populations

The needs of children and adults who experience disabilities and others who experience access and functional needs shall be identified and planned for as directed by policy makers and according to State and federal regulations and guidance. The City will seek the assistance of the County Health and Human Services Department and other human service agencies or organizations to assist in coordinating the emergency housing, sheltering, and feeding of Access and Functional Needs Populations. The following is a detailed description of the types of support individuals within each functional need category may require:

- **Maintaining Independence.** Individuals requiring support to be independent in daily activities may lose this support during an emergency or a disaster. Such support may include consumable medical supplies (diapers, formula, bandages, ostomy supplies, etc.); durable medical equipment (wheelchairs, walkers, scooters, etc.); service animals; and/or attendants or caregivers. Supplying needed support to these individuals will enable them to maintain their pre-disaster level of independence.
- **Communication.** Individuals who have limitations that interfere with the receipt of and response to information will need that information provided in methods they can understand and use. They may not be able to hear verbal announcements, see directional signs, or understand how to get assistance due to hearing, vision, speech, cognitive, or intellectual limitations, and/or limited English proficiency.
- **Transportation.** Individuals who cannot drive or who do not have vehicles may require transportation support for successful evacuation. This support may include accessible vehicles (e.g., vehicles with lift equipment or oxygen facilities) or information about how and where to access mass transportation during an evacuation.
- **Supervision.** Before, during, and after an emergency, individuals may lose the support of caregivers, family, or friends or may be unable to cope in a new environment (particularly if they have dementia, Alzheimer's disease, or psychiatric conditions such as schizophrenia or intense anxiety). Young children may be unable to identify themselves if separated from their caregivers, and when in danger,

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they may lack the cognitive ability to assess the situation and react appropriately.

- **Medical Care.** Individuals who are not self-sufficient or who do not have adequate support from caregivers, family, or friends may need assistance with managing unstable, terminal, or contagious conditions that require observation and ongoing treatment; managing intravenous therapy, tube feeding, and vital signs; receiving dialysis, oxygen, and suction administration; managing wounds; and operating power-dependent equipment to sustain life. These individuals require the support of trained medical professionals.

6.4.2.1 Children and Disasters

Planning and preparing for the unique needs of children is of utmost concern to the City. In particular, the City will focus on the following issues when planning for children:

- **Preparedness.** Program and planning activities that relate to the needs of children. This includes involving members of the community familiar with children's issues.
- **Evacuation.** Identifying where children are located (schools, daycares) and how they will be evacuated.
- **Shelter.** Identifying resources for diapers, formula, and food appropriate for all ages; portable cribs and playpens; and staffing resources needed to supervise unaccompanied children.
- **Public Outreach and Education.** Promoting personal preparedness among families with children as well as at local schools and daycares.

6.4.2.2 Animals in Disaster

As resources allow, the City will consider issues particular to household pets and service animals. Preparing for the care of animals during a disaster is the responsibility of owners; however, the City recognizes that the following services may be needed in a disaster:

- Animal pickup – large and/or small animals
- Animal housing – in house and/or temporary shelters
- Food for evacuated animals
- Medical care
- Information and referral
- Financial assistance

- Animal rescue

Equipment and supplies that may be necessary include:

- Portable cages, crates, and cardboard cat carriers
- Box traps
- Nets
- Temporary livestock stalls
- Food

The City may coordinate with local animal owners, veterinarians, and animal advocacy groups to address animal-related issues that arise during an emergency. If local resources are insufficient to meet existing needs, the City may request assistance through County Emergency Management.

6.4.2.3 Managing, Transportation and Communicating

Agencies and organizations involved in managing, transporting, and communicating with Access and Functional Needs Populations during an emergency and pertaining to mass care include:

- Area hospitals
- Private clinics and care facilities
- Red Cross and other volunteer agencies
- School districts
- Local radio stations serving the City

Nursing homes and residential care facilities are required to have disaster and emergency plans in place that ensure the transfer of clients to appropriate facilities.

6.5 Public Health Services

The County Health and Human Services Department provides public health and welfare services to all citizens within the County. Contact with the Department during a major emergency will be through County Emergency Management.

The County Health and Human Services Department is responsible for developing plans to address how public health personnel plan for, respond to, and recover from all hazards that may impact public health, including communicable disease, pandemic scenarios, chemical incidents, radiological incidents, and bioterrorism. The department maintains a comprehensive EOP and guidelines for public health personnel responding to a public health incident in the County.

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County public health administrators are charged with the strict and thorough enforcement of the public health laws of Oregon. As part of their duties, they may enact protective public health measures on matters relating to the preservation of life and health of the people of the State. In addition to naturally occurring pandemics, a bioterrorism event may be the most challenging experience the public health arena will ever face. The control of such an epidemic requires a coordinated effort of public health services, public safety agencies, and emergency management organizations traditionally lacking in integrated operations.

The County Health and Human Services Department will request emergency medical, health and welfare services not available in the County from the Oregon Health Authority.

See the County EOP, ESF 8 – Public Health and Medical Services and the County Health and Human Services EOP for more details.

6.6 Care of Response Personnel and Emergency Coordination Center Staff

Arrangements for the feeding and sheltering of ECC staff are the responsibility of the City Manager, or designee. As space allows, ECC staff will sleep and eat at the ECC. Sleeping areas may also be set up in other facilities.

Response personnel will be released to their homes or stations to sleep. If necessary, space may be arranged in a shelter. This shelter should be different than the one used for disaster victims or evacuees.

Families of response personnel may be sheltered together in the event of an extended incident involving a major shelter operation. This will facilitate keeping families informed and help maintain the morale of response personnel.

7 Annex Development and Maintenance

The Emergency Preparedness Coordinator, in coordination with identified primary and supporting agencies, is responsible for regular review and maintenance of this annex. To ensure that City staff are familiar with their roles in providing human services, the City will incorporate elements of human services into its training and exercise program.

8 Supporting Plans and Procedures

The following documents support human services for the City:

- County Emergency Operations Plan
 - ESF 6 – Mass Care
 - ESF 8 – Health and Medical

- ESF 11 – Food and Water
- ESF 17 – Agriculture and Animal Protection
- ESF 14 – Long-Term Community Recovery
- State of Oregon Emergency Operations Plan and ESFs
- State of Oregon Recovery Plan
- National Response Framework and ESFs

9 Appendices

Appendix A Shelter Materials

- A-1 Shelter Survey Form
- A-2 Sample Shelter Agreement

Appendix A Shelter Materials

A-1 Shelter Survey Form

A-2 Sample Shelter Agreement

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Appendix A-1 Shelter Survey Form

This form is intended to record information needed to make decisions when it becomes necessary to open a shelter.

<p>Directions: Please print all information. Complete one survey for each <u>area</u> within a facility that is to be used as a shelter or, if the entire facility is to be used as a shelter, for each facility. Complete all sections as thoroughly as possible, indicating numbers, space dimensions, etc. This form is generic to many types of facilities; some of the questions on this form may not apply to every site. In such cases, answer not applicable (N/A).</p>	
<p>General Facility Information</p>	
<p>Facility Information</p>	
<p>Facility Name:</p>	
<p>Name/Description of area in this facility being surveyed for use as a shelter (e.g. Gymnasium):</p>	
<p>Are there other areas in this facility being surveyed? If yes, name them.</p>	
<p>Governing Agency/Owner:</p>	
<p>Street Address:</p>	
<p>Town/City:</p>	<p>Zip Code:</p>
<p>Latitude:</p>	<p>Longitude:</p>
<p>Map Locator Information (map name, page, grid):</p>	
<p>Mailing Address (if different):</p>	
<p>Business Phone Number: () -</p>	<p>Fax Number: () -</p>
<p>E-mail Address (if applicable):</p>	
<p>Primary Contact to Authorize Facility Use: Name: _____ Day Phone: (_____) _____ - _____ After Hours/Emergency Phone: (____) _____ - _____ Mobile Phone: (_____) _____ - _____ E-mail: _____</p>	<p>Alternate Contact to Authorize Facility Use: Name: _____ Day Phone: (_____) _____ - _____ After Hours/Emergency Phone: (____) _____ - _____ Mobile Phone: (_____) _____ - _____ E-mail: _____</p>

<p>Primary Contact to Open Facility: Name: _____ Day Phone: (_____) _____ - _____ After Hours/Emergency Phone: (____) _____ - _____ Mobile Phone: (_____) _____ - _____ E-mail: _____</p>	<p>Alternate Contact to Open Facility: Name: _____ Day Phone: (_____) _____ - _____ After Hours/Emergency Phone: (____) _____ - _____ Mobile Phone: (_____) _____ - _____ E-mail: _____</p>
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Facility Physical Information
Attach a sketch or copy of the facility floor plan.

Availability for Use/Use Restrictions

Some facilities are only available during certain times due to other activities. Please indicate the periods that the facility is available.

Facility available for use at any time of the year

Facility **only** available for use during the following time periods:
From: _____ to _____
From: _____ to _____

Facility **is not** available for use during the following time periods:
From: _____ to _____
From: _____ to _____

Is the facility within 5 miles of an evacuation route? Yes No

Is the facility within 10 miles of a nuclear or hazardous materials storage or disposal site? Yes No

Are there trees, towers, or other potential hazards that could impact the safety of the facility or block access to it after a disaster? Yes No
If yes, please describe:

Is smoking allowed in the facility buildings? Yes No
Is smoking allowed on the facility grounds? Yes No

Capacity

Shelter Capacity - How many persons can be accommodated for sleeping?
Area available for shelter use:
Length: _____ x Width: _____ = Total Area: _____
Record only useable space. For example, if a room is 600 square feet but has furniture or fixtures that occupy half of that space and can't or won't be removed, the useable space is 300 square feet.

The area listed above is is not is partially disabled accessible.

Calculation of Shelter Capacity (Total area ÷ Square feet per person = Capacity)
Recommended range of square feet per person by shelter type:
Evacuation shelter: 15 to 30 square feet per person
General shelter: 40 to 60 square feet per person
Access and Functional Needs Shelter: 80 square feet per person

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Type of Shelter	Total Area	Square Feet/ per person	Capacity *
<input type="checkbox"/> Evacuation			
<input type="checkbox"/> General			
<input type="checkbox"/> Access and Functional Needs			
* Does the actual layout of the area being surveyed decrease the usable space and significantly impact the capacity of the area? If so, explain.			
Seating Capacity - How many persons can be accommodated in fixed (not pull-out) seating areas (bench and flip-up type seating)?			
<input type="checkbox"/> Bench	Measured Linear Feet of Bench _____ ÷ 16 ft ² /person = Bench Seating Capacity _____		
<input type="checkbox"/> Chairs	Number of Chairs Counted = _____ = Seating Capacity _____		
<input type="checkbox"/> Not Applicable			
Parking			
Number of on-site parking spaces (do not include on-street parking in this figure):			
Number of handicapped parking spaces:			
Do curb cuts exist in and exiting the parking area that are at minimum 35 inches wide? <input type="checkbox"/> Yes <input type="checkbox"/> No			
When the facility is in normal use (e.g., school in session):		When the facility is not in normal use (e.g., school not in session):	
<input type="checkbox"/> On-site parking is adequate for shelter residents <input type="checkbox"/> Off-site parking is available as noted below (e.g., on streets around the school): _____ _____ <input type="checkbox"/> There is not adequate on-site or off-site parking available		<input type="checkbox"/> On-site parking is adequate for shelter residents <input type="checkbox"/> Off-site parking is available as noted below (e.g., on streets around the school): _____ _____ <input type="checkbox"/> There is not adequate on-site or off-site parking available	
General Facility Construction			
Facility Construction <input type="checkbox"/> Wood Frame <input type="checkbox"/> Prefabricated <input type="checkbox"/> Concrete <input type="checkbox"/> Trailer <input type="checkbox"/> Masonry <input type="checkbox"/> Bungalow <input type="checkbox"/> Metal <input type="checkbox"/> Pod <input type="checkbox"/> Portable Classroom <input type="checkbox"/> Other If "Other," describe:		Number of stories: Elevator: <input type="checkbox"/> Yes <input type="checkbox"/> No Where, in relation to shelter area?	Approximate year of construction: Chair Lift: <input type="checkbox"/> Yes <input type="checkbox"/> No Quantity:

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<input type="checkbox"/> Accessible doorways (minimum 35 inches wide)	<input type="checkbox"/> Ramps (minimum 35 inches wide): <input type="checkbox"/> Fixed <input type="checkbox"/> Portable							
<input type="checkbox"/> Automatic doors or appropriate door handles	<input type="checkbox"/> Level Landings							
Open Space: Indicate quantity and size (square feet)								
<input type="checkbox"/> Athletic Field(s):								
<input type="checkbox"/> Fenced Court(s):								
<input type="checkbox"/> Secured Playground Area								
<input type="checkbox"/> Other:								
Fire Safety								
<i>Some facilities that appear to be suitable for sheltering might not meet local fire codes based on building capacity. It is recommended that local codes be examined to determine if the facility meets them.</i>								
Does the facility have inspected fire extinguishers?	<input type="checkbox"/> Yes <input type="checkbox"/> No							
Does the facility have functional fire sprinklers?	<input type="checkbox"/> Yes <input type="checkbox"/> No							
Does the facility have a fire alarm? If yes, choose one: Does the fire alarm directly alert the fire department?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Manual (pull down) <input type="checkbox"/> Automatic <input type="checkbox"/> Yes <input type="checkbox"/> No							
Does the facility have an internal fire hose system?	<input type="checkbox"/> Yes <input type="checkbox"/> No							
Does the facility have smoke detectors in/near the shelter area?	<input type="checkbox"/> Yes <input type="checkbox"/> No							
Sanitation Facilities								
Indicate the quantity of only those sanitation facilities that will be accessible to shelter staff and residents near the area being surveyed for use as a shelter. If more than one area within the facility is being surveyed, only describe the sanitation facilities that will be for the exclusive use of the shelter area described in this survey.								
Standards for ADA-compliant, accessible features for people with disabilities:								
<u>Toilets:</u> Bathroom stall (38 inches wide); Grab bars (33–36 inches wide)								
<u>Showers:</u> Shower stall (36 x 36 inches); Grab bars (33–36 inches in height); Shower seat (17–19 inches in height); Fixed shower head (48 inches in height) or Hand-held spray unit with hose accessible for people with disabilities;								
<u>Sinks:</u> Sink (34 inches in height); Towel dispenser (39 inches in height)								
	Urinals	Toilets	Showers	Sinks				
	ADA compliant	Not compliant	ADA compliant	Not compliant	ADA compliant	Not compliant	ADA compliant	Not compliant
Men’s								
Women’s								
Unisex								
Total								
Are there any limitations on the availability of these facilities?					<input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, describe limitations (e.g., only during specific time blocks, etc.):								
Are there baby diaper changing tables in any of the restroom facilities?					<input type="checkbox"/> Yes <input type="checkbox"/> No			

Food Preparation Facilities		
<input type="checkbox"/> There are no food preparation or food service capabilities at this facility		
<input type="checkbox"/> Full-Service Kitchen: food is stored, prepared, and served on site. If full-service, number of meals that can be produced: _____		
<input type="checkbox"/> Food is prepared off site by a central kitchen and served on site Central Kitchen Contact: _____ Phone Number: ()		
<input type="checkbox"/> Warming Oven Kitchen		
Appliances/Equipment: Indicate quantity and size (square feet) as appropriate.		
Refrigerators:	Walk-in Refrigerators:	Industrial Refrigerators:
Freezers:	Walk-in Freezers:	Roasters:
Burners:	Griddles:	Warmers:
Ovens:	Convection Ovens:	Microwaves:
Steamers:	Steam Kettles:	Food Processors:
Ice Machines:	Sinks:	Number of Sink Compartments:
Commercial Dishwasher (<i>approved sanitation levels</i>):		Non-commercial Dishwasher:
Location of equipment if in area other than kitchen:		
Dining Facilities		
Dining area on site: <input type="checkbox"/> Yes <input type="checkbox"/> No	Location:	
Snack Bar: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, seating capacity:	
Cafeteria: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, seating capacity:	
Other indoor seating: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, describe; include size and seating capacity:	
Total estimated seating capacity for eating:		
Standards for accessible for people with disabilities		
Tables (28–34 inches in height); Serving Line/Counter (28–34 inches in height); Aisles (minimum 38 inches wide)		
Are there accessible tables? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, number:	Are serving line/counters accessible? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are aisles accessible? <input type="checkbox"/> Yes <input type="checkbox"/> No

Additional comments related to food preparation or dining areas:	
Health Service Facilities	
Number of private rooms available:	Access to locked refrigeration? <input type="checkbox"/> Yes <input type="checkbox"/> No
Total square footage of available space for health care needs:	
Location of health service area:	
Laundry Facilities	
Number of clothes washers:	Number of clothes dryers:
Availability to shelter operator	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are laundry facilities coin operated?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Special conditions or restrictions:	
<u>Facility Services Information</u>	
Electricity	
Emergency (generator power) on site: <input type="checkbox"/> Yes <input type="checkbox"/> No	Capacity in kilowatts:
Is facility staff required to operate emergency generator? <input type="checkbox"/> Yes <input type="checkbox"/> No	
This generator powers: <input type="checkbox"/> Facilities throughout the shelter area <input type="checkbox"/> Only emergency lights and other critical circuits in the shelter area <input type="checkbox"/> No generator serves the shelter area	
Estimated run-time without refueling (in hours):	<input type="checkbox"/> Auto start <input type="checkbox"/> Manual start
Fuel type:	
Emergency fuel serve (fuel reserve) availability: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, quantity (in gallons):
Utility Company/Vendor:	Emergency Phone Number: () -
Generator Fuel Vendor:	Emergency Phone Number: () -
Generator Repair Contact:	Emergency Phone Number: () -
Heating	
Source of heat: <input type="checkbox"/> Electric <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input type="checkbox"/> Oil <input type="checkbox"/> Gasoline <input type="checkbox"/> Diesel	
Shelter area is heated: <input type="checkbox"/> Yes <input type="checkbox"/> No	

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Utility/Vendor:	Emergency Phone Number: () -
Repair Company:	Emergency Phone Number: () -
Cooling	
Source of cooling: <input type="checkbox"/> Electric <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane	
Shelter area is air conditioned: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Utility/Vendor:	Emergency Phone Number: () -
Repair Company:	Emergency Phone Number: () -
Water	
Source of Water: <input type="checkbox"/> Municipal <input type="checkbox"/> Well(s) <input type="checkbox"/> Trapped Water	
If trapped, potable (<i>drinkable</i>) storage capacity in gallons:	Non-potable (<i>undrinkable</i>) storage capacity in gallons:
Utility/Vendor:	Emergency Phone Number: () -
Repair Company:	Emergency Phone Number: () -
Cooking: *refer to Food Preparation Facilities for additional information on facility cooking capacities.	
Source of Cooking Energy: <input type="checkbox"/> Electric <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane	
Utility/Vendor:	Emergency Phone Number: () -
Repair Company:	Emergency Phone Number: () -
<u>Communications Information</u>	
Radio:	
Is there an NOAA Weather Radio at this facility? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, where is it located?	
Is there an emergency communications (ham) radio at this facility? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, where is it located? Who is trained/authorized to operate it? Name: _____ Contact #: ()	
Telephone/fax machines:	
Telephone Service: <input type="checkbox"/> Traditional Landline <input type="checkbox"/> VOIP (internet line)	

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Are there business telephones available to shelter staff: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, list any restrictions:
Are there business telephones available to shelter occupants: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, list any restrictions:
Are there accessible telephones (49 inches from floor)? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, number of accessible phones:	Is there Telecommunications Device for the Deaf (TDD) availability? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are there earpiece telephones (volume adjustable)? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are there fax machines available to shelter staff? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is there speaker telephone/conference availability? <input type="checkbox"/> Yes <input type="checkbox"/> No	Total number of fax machine telephone lines:
Utility/vendor:	Emergency phone number: () -
Repair company:	Emergency phone number: () -
Computers:	
Type of internet service connection: <input type="checkbox"/> Dial-up <input type="checkbox"/> High-Speed <input type="checkbox"/> Cable <input type="checkbox"/> Wireless	
Computers available to shelter staff: <input type="checkbox"/> Yes <input type="checkbox"/> No	Is there public access to computers? <input type="checkbox"/> Yes <input type="checkbox"/> No
Number of computers:	
Location of computers for evacuee use:	
Utility/vendor:	Emergency phone number: () -
Repair company:	Emergency phone number: () -
Television:	
Is there a TV available for shelter use?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Location of cable TV drop for shelter area:	
<u>Shelter Management Information</u>	
This section is designed to identify shelter use capabilities of the facility for registration, management, and pet-care.	
Shelter Management	
Location of shelter registration:	Is there a computer network drop in this area? <input type="checkbox"/> Yes <input type="checkbox"/> No

Location of office for shelter management team:	Is there a computer network drop in this area? <input type="checkbox"/> Yes <input type="checkbox"/> No
Phone number in this office:	
Shelter supply kit is located:	
Key for kit is located:	
Pet Care Capacity: if applicable	
Pets could be housed:	
<input type="checkbox"/> On-site in existing facility	Capacity: _____
<input type="checkbox"/> On-site using additional resources (Tents/Trailers)	Capacity: _____
<input type="checkbox"/> Combination of existing facility and additional resources	
<input type="checkbox"/> Off-site	
Location of pet intake area:	Location of pet shelter area:
Is the space used for the pet shelter area near chemicals: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Location of outdoor pet walking area:	
Facility Staff	
Facility personnel required when using facility:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Facility kitchen staff required when using facility kitchen:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Voluntary organizations (<i>such as church or fire auxiliaries</i>) required when using the facility:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Sanitation/Maintenance staff required:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will any of the above groups be experienced or trained in shelter management?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Shelter Agreement Information	
Does the facility/owner have a current agreement for use as emergency shelter?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
Date:	Updated:
Additional information about agreement, if applicable:	
Additional Notes (use additional page as needed):	

Survey completed/updated by:		Date:	
<i>Printed name and title of authorized facility personnel:</i>		<i>Signature of authorized personnel:</i>	
<i>Agency/Organization of authorized facility personnel:</i>			
<i>Printed name and title of shelter surveyor:</i>		<i>Signature of shelter surveyor</i>	
<i>Agency/Organization of surveyor:</i>			
<p>Shelter Determination:</p> <p><input type="checkbox"/> Facility can be used as general emergency shelter.</p> <p><input type="checkbox"/> Facility can be used as an evacuation shelter.</p> <p><input type="checkbox"/> Facility can be used as an access and functional needs shelter.</p> <p><input type="checkbox"/> Facility can be used as a pet-friendly shelter</p> <p><input type="checkbox"/> Facility will not be used as a shelter.</p> <p>Facility is ADA-compliant: <input type="checkbox"/> Partially <input type="checkbox"/> Fully <input type="checkbox"/> Not ADA Accessible</p> <p>Is this shelter entered in the National Shelter System (NSS)? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>NSS ID: _____</p>			

Appendix A-2 Sample Shelter Agreement

The City of Yachats coordinates the provision of mass care services to individuals, families, and communities impacted by a disaster. Certain disaster relief activities are supported by private facility owners who permit their buildings to be used as a temporary shelter for disaster victims and designated community organizations, like the American Red Cross or Salvation Army, who support relief activities. This agreement is between the City of Yachats and a facility owner (“Owner”) so that the City can use the facility as an emergency shelter during a disaster that directly or indirectly impacts the City.

Parties and Facility

Owner:

Legal name: _____

Chapter: _____

24-Hour Point of Contact:

Name and title: _____

Work phone: _____ Cell phone/pager: _____

Address for Legal Notices:

City of Yachats

City Department/Agency: _____

24-Hour Point of Contact:

Name and title: _____

Work phone: _____ Cell phone/pager: _____

Address for Legal Notices:

Copies of legal notices must also be sent to:

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Shelter Facility:

(Insert name and complete street address of building or, if multiple buildings, write “See attached facility list” and attach a facility list, including the complete street address of each building that is part of this agreement).

Terms and Conditions

- Use of Facility: Upon request, and if feasible, the Owner will permit City of Yachats to use the facility on a temporary basis as an emergency public shelter.
- Shelter Management: City of Yachats will have primary responsibility for the operation of the shelter and will designate a member of the relief organization personnel as Shelter Manager, to manage the sheltering activities. The Owner will designate a Facility Coordinator to coordinate with the Shelter Manager regarding the use of the facility by the City of Yachats.
- Condition of Facility: The Facility Coordinator and Shelter Manager (or designee) will jointly conduct a pre-occupancy survey of the facility before it is turned over to the City of Yachats to record any existing damage or conditions. The Facility Coordinator will identify and secure all equipment that the City of Yachats should not use while sheltering in the facility. The City of Yachats will exercise reasonable care while using the facility as a shelter and will make no modifications to the facility without the express written approval of the Owner.
- Food Services: Upon request by the City of Yachats, or Shelter Manager, and if such resources exist and are available, the Owner will make the food service resources of the facility, including food, supplies, equipment, and food service workers, available to feed the shelter occupants. The Facility Coordinator will designate a Food Service Manager to coordinate the provision of meals at the direction of and in cooperation with the Shelter Manager. The Food Service Manager will establish a feeding schedule, determine food service inventory and needs, and supervise meal planning and preparation. The Food Service Manager and Shelter Manager will jointly conduct a pre-occupancy inventory of the food and food service supplies in the facility before it is turned over to the City of Yachats.

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- Custodial Services: Upon request by the City of Yachats, and if such resources exist and are available, the Owner will make the facility's custodial resources, including supplies and custodial workers, available to provide cleaning and sanitation services at the shelter. The Facility Coordinator will designate a Facility Custodian to coordinate the provision of cleaning and sanitation services at the direction of and in cooperation with the Shelter Manager.
- Security: In coordination with the Facility Coordinator, the Shelter Manager, as he or she deems necessary and appropriate, will coordinate with law enforcement regarding any public safety issues at the shelter.
- Signage and Publicity: The City of Yachats may post signs identifying the shelter as a City of Yachats emergency shelter in locations approved by the Facility Coordinator and will remove such signs when the shelter is closed. The Owner will not issue press releases or other publicity concerning the shelter without the express written consent of the Shelter Manager. The Owner will refer all media questions about the shelter to the Shelter Manager.
- Closing the Shelter: The City of Yachats will notify the Owner or Facility Coordinator of the closing date for the shelter. Before the County vacates the facility, the Shelter Manager and Facility Coordinator will jointly conduct a post-occupancy survey, to record any damage or conditions. The Shelter Manager and Facility Coordinator or Food Service Manager will conduct a post-occupancy inventory of the food and supplies used during the shelter operation.
- Reimbursement: The City of Yachats will reimburse the Owner for the following:
 - *Damage to the facility or other property of Owner*, reasonable wear and tear excepted, resulting from the operations of the City of Yachats. Reimbursement for facility damage will be based on replacement at actual cash value. The City of Yachats will select from among bids from at least three reputable contractors. The City of Yachats is not responsible for storm damage or other damage caused by the disaster.
 - *Reasonable costs associated with custodial and food service personnel* that would not have been incurred but for the City of Yachats's use of the facility for sheltering. The City of Yachats will reimburse at a per-hour, straight-time rate for wages actually incurred but will not reimburse for (i) overtime or (ii) costs of salaried staff.
 - *Reasonable, actual, out-of-pocket operational costs*, including the costs of the utilities indicated below, to the extent that such

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costs would not have been incurred but for the City of Yachats’s use of the premises (both parties must initial all utilities to be reimbursed by the City of Yachats):

	Owner initials	City initials
Water	_____	_____
Gas	_____	_____
Electricity	_____	_____
Waste Disposal	_____	_____

The Owner will submit any request for reimbursement to the City within 60 days after the shelter closes. Any request for reimbursement for food, supplies or operational costs must be accompanied by supporting invoices. Any request for reimbursement for personnel costs must be accompanied by a list of the personnel and the dates and hours worked at the shelter.

- **Insurance:** The City of Yachats and designated relief organizations that support mass care activities shall carry insurance coverage in the amounts of at least \$1,000,000 per occurrence for Commercial General Liability and Automobile Liability. The City of Yachats shall also carry Workers’ Compensation coverage with statutory limits for the jurisdiction within which the facility is located and \$1,000,000 in Employers’ Liability.
- **Indemnification:** The City of Yachats shall defend, hold harmless, and indemnify the Owner against any legal liability, including reasonable attorney fees, in respect to bodily injury, death and property damage arising from the negligence of the City of Yachats during the use of the premises.
- **Term:** The term of this agreement begins on the date of the last signature below and ends 30 days after written notice by either party.

_____	_____
Owner (legal name)	
_____	_____
By (signature)	By (signature)
_____	_____
Name (printed)	Name:
_____	_____
Title	Title :
_____	_____
Date	Date