MULTI-AGENCY REUNIFICATION SERVICES PLAN TEMPLATE

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Jurisdiction

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Month/Day/Year

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Multi-Agency Reunification Services Plan Template

Signature page for all participating agencies/organizations for the State of _____

The following agencies/organizations within the State of _____ are participants in this plan:

NOTE: Consider including the name of the organization, name and title of individual signing the Plan and the date of signature.

_____   _____   _____
Name of Organization   Name   Date
                                     Title

_____   _____   _____
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I. Instructions: How to Use This Multi-Agency Reunification Services Plan Template

A. Purpose for the Multi-Agency Reunification Services Plan Template

This template provides suggested guidance and procedures for a jurisdiction to consider in the development of a multi-agency reunification services plan that focuses on the role of managing and/or supporting reunification activities and that may supplement the Emergency Operations Plan (EOP) and/or Mass Care Annex. Additionally, the plan should address the roles and responsibilities of a coordinating group (the Multi-Agency Reunification Task Force (MARTF)) that can support reunification in advance of, during, and after a disaster throughout the impacted area(s) of the jurisdiction.

The template emphasizes coordination among the various organizations and agencies participating in reunification operations. These organizations/agencies include: local, State, Tribal, and Federal agencies; non-government organizations (NGOs); National and State Voluntary Organizations Active in Disaster (VOADs) member organizations; faith-based and other voluntary organizations; and the private sector involved with reunification operations.

While this multi-agency template is inclusive of the various agencies and organizations that support reunification activities, the individual jurisdiction must designate an entity as the coordinating agency. This agency may request another organization/agency with reunification legal responsibility to be the lead agency or co-lead reunification agency. However, responsibilities of the coordinating agency still include coordinating and supporting reunification activities. In all cases, reunification is a combination of community efforts that involves NGOs, private sector, government, and public sector.

The Reunification Services Plan Template can be used by any jurisdiction, be it a county or parish, State, Tribal, or municipal emergency management agency. The principles remain the same whether the jurisdiction is supporting or managing reunification services. Each jurisdiction utilizing this template will determine its role in reunification (managing or supporting reunification services) and should **modify the language throughout the template accordingly.**

Additionally, the template can serve as an educational tool for jurisdictions, NGOs, faith-based organizations, the private sector, and other stakeholders who provide reunification services or support, to assist in understanding the complexities of implementing a coordinated and collaborative reunification operation, including but not limited to: reunification protocols and the legal responsibilities of government entities, terminology, methods of reunification, and the coordination of various providers. Effective and efficient information sharing and the request and receipt of resources will ensure the streamlined integration of Federal, State, Tribal, and local processes and resources.

The Multi-Agency Reunification Services Plan Template may not be used for commercial purposes.

B. Document Format

1. Template Guidance
   The guidance given in this template is not necessarily meant to be part of the final plan created by the jurisdiction. The Reunification Services Plan Template is simply a tool to introduce jurisdictions to planning concepts in order to create a final Reunification Services Plan. Jurisdictions should utilize what fits their needs.
2. Template Layout
   - Boxed Text: These boxes provide a description of what information should be included in the respective section. The boxes should not be included in the final Plan.
   - Times New Roman Font: Guidance.
   - *SAMPLE: The samples in sections, shown in italics, are to assist the planners in understanding the content needed to be included within the section. They are not necessarily a fit for every jurisdiction.*

NOTE: The use of "State" throughout the template is based on the *Robert T. Stafford Disaster Emergency Assistance Act* definition meaning any State of the United States, the District of Columbia, and all United States' Territories and Commonwealth governments. Additionally, the use of the term "Federal ESF #6" or "ESF #6" within this document refers to the Mass Care and Emergency Assistance (MC/EA) functions of the ESF #6 Annex as defined in the *National Response Framework*; "State ESF #6" and "State Mass Care" refer to the function as defined by the State plan.

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II.   Introduction

> **Describe why reunification services are needed; where this activity falls in the jurisdiction's structure; when the plan will be used; and under what authorities.**

Whether an incident is small and localized or results in catastrophic damage, the need to determine if loved ones are safe is universal. Evacuations can separate families and damage to communication infrastructure can hinder efforts to check on family members. Families and friends struggle to learn the status of those impacted by the incident and to reunite with each other.

When disasters occur that result in large numbers of casualties, power and phone outages, evacuations, and high levels of media coverage, local jurisdictions can quickly become overwhelmed with requests from concerned family, friends and colleagues to locate individuals within the disaster-impacted area.

A comprehensive reunification plan can help mitigate the burden of responding to the high volume of requests to locate survivors. Proactively pushing messaging about survivor status from inside the impacted area to outside alleviates some of the call volume while minimizing the concern of those seeking individuals. The success of reunification operations is dependent upon (a) survivor access to communications to include telephone, cellular phones, and/or internet to connect with email, social media, and reunification systems; (b) seamless coordination and the ability to share information among agencies and organizations with reunification responsibilities for evacuees, children, displaced adults, missing persons, emergency welfare inquiries, medical patients (to include those in facilities and those evacuated), and fatalities; and (c) timely and consistent public messaging to survivors and the public outside the disaster area on available reunification mechanisms.

This plan describes State support for disaster reunification services when local resources are overwhelmed where reunification services are defined as the process of assisting displaced disaster survivors to voluntarily re-establish contact with family, friends, and colleagues after a period of separation and providing facilitated assistance to children separated from their parent(s)/legal guardian(s). The plan provides guidance and procedures to manage and/or support multi-agency activities and resources within a coordinated structure that supports reunification services in advance of, during, and after a disaster in the impacted areas of the jurisdiction.

Reunification Services is a mass care activity under the Emergency Support Function (ESF) #6 (or equivalent) and is one of many support functions established by the State Emergency Operations Plan (EOP). ESF #6 provides coordination, collaboration, and resource identification for mass care/emergency assistance actions to support the local jurisdiction's capabilities to minimize the humanitarian impact of disasters and other emergencies. The lead agency, **[insert name of jurisdiction]**, is responsible for reunification coordination.

The Governor and his/her emergency management staff are responsible for the coordination of mass care within the State. Coordination occurs through the appropriate Emergency Support Function and the State mass care lead. A Governor's emergency declaration triggers

the EOP implementation, which is required to request a Presidential Declaration and Federal assistance.

The process discussed in this plan can be implemented by the State with or without a request for Federal assistance.

Throughout this document the term "people with disabilities and others with access and functional needs" is used for consistency and clarity; use of the term is intended to align the guidance in this planning template with national doctrine as stated in the National Response Framework (NRF). Additionally, the NRF addresses the importance of incorporating support for animals into planning and response operations. However, as a support plan to the jurisdiction's ESF #6 plan, this document addresses only the support provided to household pets and service/assistance animals as identified in the ESF #6 Annex to the NRF.

> "Emergency management staff in all jurisdictions has a fundamental responsibility to consider the needs of all members of the whole community, including children; and individuals with disabilities and others with access and functional needs; those from religious, racial, and ethnically diverse backgrounds; and people with limited English proficiency. The potential contributions of all these individuals toward delivering core capabilities during incident response (e.g., through associations and alliances that serve these populations) should be incorporated into planning efforts.
>
> Staff must also consider those who own or have responsibility for animals both as members of the community who may be affected by incidents and as a potential means of supporting response efforts. This includes those with household pets, service and assistance animals…" (National Response Framework, May 2013, page 8).

See Appendix A: Reunification Accessibility Considerations

Reunification partners that traditionally deliver reunification services in a disaster will respond with available resources in accordance with the requirements of their internal policies and in cooperation with emergency management officials. These agencies will respond as soon as a need is identified and often prior to the declaration, under their own authorities.

Under a Presidential declaration of major or emergency disaster and when conditions warrant, the State may request additional Federal support through the Federal Emergency Management Agency (FEMA) Region. This support may include technical assistance, activation of Federal resources and contracts, and coordination of national tools and resources when State and voluntary resources are insufficient to meet demand in disaster-impacted areas. Reunification support may be provided under the Stafford Act, as Amended, April 2013, Sections 774 and 775.

III. Purpose, Scope, Planning Assumptions, Situation

A. Purpose

> **This section should describe why this plan is being developed and what it is meant to accomplish.**

SAMPLE:
The purpose of this multi-agency reunification services plan is to define the framework for State/Federal support of a coordinated, timely, and efficient reunification response in **[insert name of jurisdiction]**. *It also defines the full spectrum of services required from initiation until the recovery phase, when cases can be transitioned to local agencies.*

This multi-agency reunification services plan has been developed as an integrated strategy and process for implementing coordinated reunification operations at the jurisdictional level. The multi-agency reunification services plan will help to limit duplication of efforts and maximize use of available local, State, Tribal, and Federal governments; the private sector; and non-governmental resources.

B. Scope

> **This section should state the scope of activities provided by the entities (agencies, organizations, NGOs, the private sector, etc.) to which the plan applies. The reunification services plan may be written for a specific jurisdiction that has the authority to request resources directly from the Federal government. It may also be developed to include jurisdictions that share boundaries (such as those involved in regional planning) or resources. It should be scalable and adaptable to include new/additional entities over time.**

SAMPLE:
This plan describes the coordination steps and implementation procedures necessary to meet the reunification requirements within **[insert name of jurisdictions]** *to respond to the needs of the population affected by a disaster.*

This plan also describes:

- *Response capabilities and strategy of the multi-agency reunification services plan participants to implement reunification services and meet the needs of affected jurisdictions.*
- *Roles and responsibilities of the organizations/agencies participating in reunification operations for missing adults, separated families, and unaccompanied minors; disaster welfare inquiries; patients; foreign residents and visitors; household pets; and fatality management.*
- *Legal responsibilities, roles, and tasks of the various organizations/agencies participating in reunification operations.*

- *A holistic approach to reunification utilizing a multi-agency task force, which provides collaboration and coordination between participating agencies of the plan during a disaster.*
- *A breakdown of specific populations and related challenges and resources to consider in reunification plans.*
- *Methods for implementing reasonable accommodations that will allow individuals with disabilities, individuals with limited English proficiency, and those who do not speak English to access reunification services.*
- *Methods for scaling up operations and integration of State and national agencies/organizations into the response.*
- *The provision of support and crisis counseling for mental health, bereavement, grief, and other needs of disaster survivors suffering long-term separation or loss of loved ones.*
- *State and national tools and resources available to support reunification and a process to integrate them into operations.*

C. Planning Assumptions

This section should contain a list of the conditions that have a significant impact on the success of the plan.

SAMPLE:
- *Prior to a disaster, State and local emergency management will have coordinated with the local/State/Federal agencies, voluntary organizations, and the private sector to understand and define respective reunification roles, responsibilities, capabilities, and capacity of their jurisdictions.*

- *Reunification services will be needed in some capacity on nearly every disaster incident. In small incidents, reunification needs may be easily met by the deployment of personnel from local NGOs, such as the American Red Cross.*

- *In larger or catastrophic incidents, reunification needs may exceed the resources and capability of any one agency or organization, requiring a combination of resources provided by Federal and State government, NGOs, and the private sector.*

- *Planning efforts include people with disabilities and others with access and functional needs, as well as agencies that provide services for children, older adults, and household pets and service animals have identified adequate accommodations and services required for the timely provision of reunification services.*

- *Agencies and organizations responsible for the temporary care of children (educational, child care, medical, foster care, juvenile justice, and recreational facilities), to include guardianship of children separated from parents or legal guardians as a result of disaster, and those overseeing reunification efforts have clearly identified roles and responsibilities.*

- *Schools, childcare providers, and residential facilities have established relationships and share emergency preparedness plans with first responders and/or local emergency managers in an effort to better coordinate overall reunification efforts in the event of a large scale or catastrophic incident.*

- *Prior to implementation of this plan, the jurisdiction is aware and knowledgeable of local and State laws relating to reunification. Individual privacy rights will be respected and information will be safeguarded as required by applicable Federal and State laws.*

- *Protocols to share information among agencies/organizations providing reunification services have been developed through MOUs and routine use agreements; these will reduce duplicative efforts and contribute to a more accurate common operating picture.*

- *A streamlined process for survivor access to reunification systems, as well as coordinated public messaging about availability and accessibility of reunification services to survivors and their families, will lessen public confusion and result in more effective reunification outcomes.*

- *Reunification activities are dependent upon adequate communication and technology infrastructure.*

- *Public messages supporting reunification are thorough, timely, accurate, accessible, and compliant with all legal requirements for individuals with disabilities, individuals with limited English proficiency, those who do not speak English and others with access and functional needs.*

- *Reunification systems will be utilized at congregate and evacuation support sites throughout the disaster area and at host locations, including libraries and other Government and alternative installations as appropriate.*

- *Mass casualty incidents will require enhanced coordination among reunification operations, health care facilities, and fatality management services.*

- *Many ad hoc reunification systems may be created during large events by private sector entities and some individuals. These databases, social media sites, and message boards may not be interoperable and may result in duplicative efforts often leading to frustration for survivors.*

- *Support and crisis counseling for behavioral health, bereavement, grief, and other needs will be available for disaster survivors suffering long-term separation or loss of loved ones and for workers providing reunification services to survivors and their families.*

D. Situation

> **This section should provide a process, implemented at the beginning of any potential reunification event, for the organizations/agencies participating in the reunification operations to perform a situation analysis to determine the scope of the need for reunification services and/or support.**

A major incident has occurred which requires reunification support to disaster survivors and their families. It will be either a notice or no-notice event and can be the result of a natural, man-made, or technological incident. The incident will disrupt communications and cause populations to disperse; incidents that occur during the work and/or school day and that may result in evacuations will separate families. Calls from many people outside the area seeking information on the status of loved ones will overwhelm local government, non-governmental organizations, and emergency dispatch centers.

Social media applications that survivors utilize to post status updates or obtain family contact information will be a reunification asset if they are accessible. Many groups may volunteer to assist by creating databases, websites, and message boards, which can result in duplicative efforts. When survivors do not have access to communications, cell phones, and other electronic equipment, especially in a catastrophic disaster, it may not be possible to use social media or these types of reunification tools.

Emergency responders will be affected by the incident as well, and will seek information about their families, in some cases before reporting for duty. The effects of separation, particularly for children, and the lack of information about family members will likely cause some level of psychological distress among many populations.

This event may be located within one jurisdiction, may span multiple jurisdictions, or may encompass a very large (even national) geographic area if many survivors evacuate outside of the disaster area.

Initial tracking data will likely be collected in silos by entities such as emergency medical services, law enforcement personnel, county and State emergency management, public health officials, hospitals and other healthcare facilities, the medical examiner's/coroner's office, animal control, non-profit disaster relief organizations, and private sector organizations such as Google. Lack of interoperability among systems used for reunification (e.g., missing persons, unaccompanied minors, fatality management, patient tracking, evacuation tracking, existing registries for people with disabilities, and lost/found household pets and service animals) will contribute to the complexity of tasks such as validating, reconciling, cross-referencing, and sharing data and will affect the type and scope of reunification services required to support operations.

The bullets below provide an outline that a jurisdiction may use as a guide for developing a situation summary and checklist for either a notice or a no-notice event.

- Define the scope and scale of the disaster (see Table B-1 Estimating Disaster Intensity for use in forecasting mass care resources Appendix B)

- Determine which reunification intensity factors are applicable (see Table B-2 Reunification Intensity Factors Appendix B) and estimate the level of service needed
- Determine the applicable reunification methods to meet the need (see Table B-3 Intensity Factors and Reunification Methods Appendix B)
- Determine resources required to implement the chosen reunification methods
- Determine resources available from NGOs, the State/territory, or the private sector
- Identify any shortfalls

See Appendix B: Situation: Estimating Reunification Requirements

IV. **Concept of Operations**

> **This section explains in broad terms the jurisdiction's intent with regard to reunification operations through each operational phase. It provides a snapshot of how response organizations accomplish their mission.**

A. **General**

The success of reunification operations is dependent upon (a) survivor access to communications to include telephone, cellular phones, and/or internet to connect with email, social media, and reunification systems; (b) seamless coordination and the ability to share information among agencies and organizations with reunification responsibilities for evacuees, children, displaced adults, missing persons, emergency welfare inquiries, medical patients (to include those in facilities and those evacuated), fatalities, and household pets and service animals; and (c) timely and consistent public messaging to survivors and the public outside the disaster area on available reunification mechanisms.

All emergencies and disasters begin and end locally, and initial response actions will be conducted by local jurisdictions and NGOs. The State agency identified as the ESF #6 lead in the State Emergency Operations Plan has the primary responsibility, supported by the lead agency coordinating reunification support, to ensure that adequate resources are available to meet the disaster reunification requirements of the citizens and visitors to the jurisdiction during an event. When the combined resources of the NGOs and impacted jurisdictions are insufficient to meet the actual or projected demand for reunification, then State ESF #6 will take action to secure the necessary resources from the State and, if required, the Federal government.

See Appendix C: Decision Tree to Process Resource Requests

Locating missing children and reuniting unaccompanied minors with their parent/guardian is a priority of reunification operations. The most effective method to reunite children is to provide an efficient and coordinated family reunification program with a goal to deliver reunification services and support to all survivors and their families, friends, and colleagues. The agency that is the lead for reunification of children will coordinate its efforts and requests for resources with the lead agency coordinating overall reunification operations or the Multi-Agency Reunification Task Force (MARTF), if operational.

See Appendix D: Child Reunification Planning Considerations

Accounting for all missing persons, whether alive, injured, or deceased, will require effective communication and coordination among multiple agencies and organizations, each of which may have responsibility for a different component of reunification.

See Section V: Reunification Support Organizations

The American Red Cross and other NGOs that traditionally provide family reunification services in a disaster response in accordance with the requirements of their charters will coordinate and work with emergency management officials. NGOs, such as the National Center for Missing & Exploited Children (NCMEC), may provide services at the request of the local/state government. Local government officials provide guidance on the plan within their jurisdiction to these organizations.

A concerted effort is made to incorporate all agencies and organizations providing reunification services into the reunification plan and to identify ad hoc groups that may organize during a disaster to provide reunification services or tools and encourage them to participate in coordinated reunification operations.

All agencies with a reunification responsibility are expected to participate in a collaborative manner.

Resource Considerations

Medium or high intensity level incidents (as estimated in Appendix B Table B-2 Reunification Intensity Factors) will trigger deployment of increased levels of reunification staff and equipment resources. Examples of resources that may be needed are listed below:
- A designated reunification system of record may be activated.
- Large incidents, especially those that result in an overwhelming volume of calls to emergency dispatch centers from people unable to contact family and friends impacted by the disaster, and those where the population is dispersed across wide geographic areas, may require a dedicated call center and/or a family assistance center.
- Wide-spread communication outages may result in requests for private sector and voluntary resources such as telephones and mobile telephone banks, cell phones and wireless access (i.e., Cells on Wheels), charging stations, and/or computers with internet access for survivor communications at shelters, service and community sites, and evacuation sites (e.g., embarkation/debarkation and reception processing centers).
- During evacuations, staff may be deployed and integrated into the evacuation operation to ensure accountability and safety of unaccompanied minors.
- Reunification support teams may be assembled to assess reunification needs and to support multi-agency coordination, information sharing and reunification activities.
- Significant numbers of missing children and/or unaccompanied minors may trigger a request for activation of the NCMEC's National Emergency Child Locator Center

(NECLC) and/or Team Adam as well as utilization of the Unaccompanied Minors Registry (UMR).

- Provision of behavioral health resources for survivors separated from family members and for reunification workers providing services and support to these individuals under stressful and emotional circumstances may be needed.
- The Multi-Agency Reunification Task Force may be activated.

See Appendix E: Behavioral Health Impacts

See Appendix F: Multi-agency Reunification Task Force (MARTF) Guidance

Ongoing assessments of incident intensity, reunification considerations (Section III D—Reunification Considerations), and shortfalls are critical to an effective and efficient response and will determine the methods of reunification services (Section III C—Reunification Descriptions) and capabilities (Section V—Reunification Support Organizations and Resources) needed. At a minimum, reunification support analyses are conducted every operational period.

All organizations participating in this plan retain operational control of their assets and resources.

The MARTF may be used to coordinate the reunification support operation. The task force is activated in accordance with the requirements set forth in this plan.

Coordinating Reunification Systems

Operational decisions on the employment of family reunification systems are the responsibility and concern of the jurisdiction or NGO that own those assets. If State and/or Federal family reunification assets are employed, they are deployed in coordination and cooperation (at the State EOC) with the principal NGOs operating in the area.

In incidents where survivors are evacuated to other jurisdictions, coordination with those jurisdictions and/or Host States should include provision of communications equipment at evacuation sites for survivor use. Additionally, evacuee information collected through evacuation tracking systems and other mechanisms can be utilized by emergency management to aid reunification operations.

Information shared between multiple reunification and evacuation tracking systems will be subject to applicable local, State, and Federal privacy laws and data sharing agreements in place among participating agencies, organizations, and jurisdictions.

Planned Events

Special events, such as large community or athletic events, marathons, and political gatherings, may require a plan for reunification. Reunification services for such events may include a standby plan or a designated group taking an active presence to collect

field inquiries. These events also may serve as a test for unplanned disasters, with the advantages of pre-planning and additional resources. This includes pre-staged resources, the advance availability of participant and emergency contact information, and early notification of and/or coordination with medical providers. The lead agency or the event organizer may have specific plans for reuniting unaccompanied minors with parents/legal guardians.

See Appendix G: Patient Reunification Coordination

Catastrophic Planning
During a catastrophic event, response operations, including reunification operations, may be consistent with FEMA's Catastrophic Housing Annex concept of operations where most support is provided in the least impacted zones and progresses inward toward heavily impacted areas as accessibility allows. This strategy is relayed to the public through the jurisdiction's Public Affairs office.

See Appendix H: Catastrophic Reunification Considerations for detail on the catastrophic planning approach including zone definitions, the zone approach, and other important considerations.

B. Operational Phases

The chart below outlines the operational phases as described in the Response Federal Interagency Operational Plan, July 2014. The phases of a notice event include actions prior to the incident that increase readiness and available resources in preparation for the event. No-notice events will not include phases 1b and 1c. A breakdown of reunification activities by phase can be found in the Roles and Responsibilities Section IV.

Phase 1 Pre-incident	Phase 2 Response	Phase 3 Recovery
Phase 1a: Normal Operations • Prevention • Mitigation • Plans • Exercises • Public information	**Phase 2a: Immediate Response** • Activation, Mobilization • Protective actions • Assessment • Determine staging areas • Develop support plan	**Phase 3a: Short Term Recovery** • Restoration
		Phase 3b: Intermediate Recovery • Transition
Phase 1b: Elevated Threat • Increased readiness • Coordinate threat information	**Phase 2b: Deployment** • Deployment • Movement to staging areas	**Phase 3c: Long Term Recovery** • Rebuilding
Phase 1c: Credible Threat • Pre-position resources	**Phase 2c: Sustained Response** • Employment	

The reunification phases are embedded in the three Operational Phases
- Phase 1a: Normal Operations

Reunification Phase: Planning, Public Awareness

Jurisdiction identifies a lead agency for reunification and completes/updates reunification plans. Agreements, which will be essential to the success of Phase 2 operations, are developed between agencies and organizations detailing how and what information will be shared in relation to missing persons, children, fatalities, and patients. Public messaging promotes the development of Family Communication Plans in advance of a disaster.

Phase 1b – 1c: Elevated Threat, Credible Threat
Reunification Phase: Coordination, Public Messaging

Once there is an elevated or credible threat, agencies with reunification responsibilities review plans and initiate contact with supporting organizations. Public messaging encourages those within the affected disaster area to communicate their location and well-being to loved ones using traditional communications, social media, or disaster reunification technology. This phase is typically handled through local emergency management, NGOs, and the media leading up to an incident and typically continues until an incident subsides or occurs.

- Phase 2a – 2b: Immediate Response, Deployment
  Reunification Phase: Short Term

  Public messaging continues and the intensity of the incident and the corresponding resources required are determined. Resources are deployed to assist the affected population with re-establishing communication with loved ones and registering in reunification systems. This phase may be supported with State resources and capabilities. Additional resources during this phase may include the Safe and Well program, requests for and deployment of NCMEC resources, FEMA's National Emergency Family Registry and Locator System (NEFRLS), Reunification Support Teams, and others.

- Phase 2c: Sustained Response
  Reunification Phase: Employment of resources

  Ongoing assessments and information are validated as the situation becomes better understood. Operations continue and often require continued or additional State and Federal support. Every effort is made to coordinate with all relevant agencies.

- Phase 3a-3c: Short-term Recovery, Intermediate Recovery, Long Term Recovery
  Reunification Phase: Long Term

  Ongoing reunification of affected population displaced across vast geography, unaccompanied minors and missing children and unclaimed fatalities. Individual unresolved cases are transitioned to local agencies when the situation becomes stable and communications are restored.

C. Reunification Descriptions

It is important to understand the different methods of reunification service and support that may be needed during an incident. Identifying limiting factors associated with these methods can inform which of these types of services are provided and the resources that will be utilized. Typically, more than one of these types of support will be used.

Reunification Method	Description	Limiting Factors
Access to Reunification Systems	• Providing survivors access to typical communication channels using telecommunications and internet services to connect with email and social media as well as formal reunification systems such as the American Red Cross Safe and Well system.	• Electronic systems may not be available. • Substitute manual registration, which can be uploaded at a distant location. • Initially, first responders will be assigned communication priority, which can potentially result in delayed access for survivors.
Physical Reunification	Reuniting family members who are separated geographically by: • Identifying missing children and reuniting unaccompanied minors with their parents/guardians. • Assisting affected families who are safe and in communication but need support traveling to the same location.	• Locating parents/guardians of minors and ensuring appropriate custody. • Identifying funding and assigning responsibility for transportation resources.
Emergency Welfare Inquiries	• Direct service for situations considered to be critical such as a person with a serious, pre-existing disability, health, or mental health condition. • In these cases, resources can be directed to locate the missing family member and to either help the client establish direct communication with the inquirer or to relay information back to the inquirer. • The American Red Cross provides an Emergency Welfare Inquiry service during disasters.	• Degree of infrastructure damage (e.g. communication, transportation access). • Sufficient staffing for the number of calls for service. • Managing privacy concerns.
Reunification of the Missing, Injured, or Deceased with Families	• Support for cross-referencing reports of missing, injured, and deceased persons with information reported in reunification systems, evacuation tracking systems, registries, social media, and other information sources.	• Systems storing data and organizations using them may have no mechanism in place to cross-reference names of missing, injured, or deceased individuals.

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Reunification Method	Description	Limiting Factors
	• Coordination among participating agencies/organizations is key to the success of this method and may include development of a single technological solution, such as a common database used for reporting, that is shared among agencies. • Coordination among reunification operations and health/social service systems (e.g., hospitals, nursing homes, assisted living, Departments of Aging/Disabilities) to encourage patients/clients to register in reunification systems. • This method does NOT include notification to families of deceased disaster victims.	• Privacy concerns regarding patients (as well as fatalities) may limit information sharing. (See Appendix G for more information on HIPAA and disasters.) • Developing a comprehensive disaster management system that manages and coordinates all activities related to missing persons reporting and victim identification can be challenging due to privacy concerns and information-sharing protocols among different agencies.
Reunification or Missing Persons Call Center	• A call center established in a facility or managed remotely by call takers operating via a well-publicized single toll-free telephone number accessible to people with and without disabilities. • Operators take information from those looking for loved ones or making missing persons reports. • Call centers can relieve dispatch center call volume. • The NCMEC can establish the National Emergency Child Locator Center at the request of a State to FEMA after a Presidentially-declared disaster.	• Multiple organizations setting up call centers. • Providing call center information to the public including families living outside the area. • Ensuring training for staff and volunteers taking calls on procedures and privacy issues. • Lack of a common database/ system to collect and compile information including missing persons' reports, patient locations, and fatalities.
Reunification Multi-Agency Coordination Center (R-MACC) and Reunification Coordination System (RCS)	• An R-MACC is a facility that co-locates the agencies and organizations involved in reunification operations, to include local/State/Federal emergency management (Mass Care), law enforcement, fatality management, health and social services, non-governmental organizations, mental health resources, household pets and services animal reunification, and others in order to facilitate information sharing and to streamline operations. It also may house a reunification/missing persons call center.	• Lack of common definitions and coordination of processes among reunification service providers. • Lack of a coherent organizational structure and assignment of responsibilities. • Limited resources and staff needed to stand up an R-MACC.

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Reunification Method	Description	Limiting Factors
	• A Reunification Coordination System (RCS) is the coordinated collaborative process put in place by reunification agencies and organizations to provide reunification services. • A national R-MACC, consisting of national organizations with reunification tools and expertise, may be implemented at the request of a State or, potentially, in a multi-State catastrophic incident.	
Family Assistance Center (FAC)	A Family Assistance Center (FAC) is a facility where individual assistance services, including reunification services, are offered, or that may be exclusively utilized for fatality management activities.	• Media inundation may impact privacy of survivors utilizing facility. • Funding for and availability of transportation resources for survivors/family members to FAC.

D. Reunification Planning Considerations
The chart below provides a breakdown of specific populations and related information that are useful to consider when developing reunification plans.

Population	Description	Reunification Considerations
Children	• Dependents under the age of 18. • "Displaced child" is defined in the Robert T. Stafford Disaster Relief and Emergency Assistance Act (Stafford Act) (Section 774) as "an individual under 21 years of age who is displaced from the habitual residence of that individual as a result of a declared event. • "Missing children" is defined in the Stafford Act as children whose whereabouts are unknown to the primary caregiver. • Unaccompanied minors are children who have been separated from both parents, legal guardians, and other relatives and are	• Unaccompanied minors must be placed with those with legal authority for them until reunited with parent/legal guardian. • Some children may not be able to self-identify due to their age, English proficiency, disability, and/or trauma. • Determination of legal custody may delay reunification of some children with parents/guardians. • Plans should include procedures for children who have been orphaned as a result of disaster, for those in the foster care and juvenile justice systems, and those in the care of health facilities. • The capacity of agencies with daily responsibility for unaccompanied minors and missing children may be stressed or overwhelmed by this function during disaster.

	not being cared for by an adult who, by law or custom, is responsible for their care.	
Missing adults*	• A non-disaster specific term routinely used in most communities that refers to an individual over 18 years of age (adult) or less than 18 years of age (child) who has been legally reported as missing by relatives/friends with law enforcement agencies. • "Displaced Adult" is defined in the Stafford Act (Section 774) as "an individual 21 years of age or older who is displaced from the habitual residence of that individual as a result of a declared event."	• Law enforcement officials may request assistance from mass care providers to coordinate information from missing persons' lists with information in reunification systems and shelter registrations. • Missing persons' lists may include people whose status is unknown, found, missing, or temporarily out of communication. • Privacy considerations may hinder information sharing among organizations and databases unless procedures to share information are in place. • Although there are legal requirements to reunify children with parents/guardians, some adults listed as missing may not want to be reunified with families/friends and there are no such requirements to do so. Reunification providers should respect the wishes of those not wanting to be reunified.
Patients*	• A person under the care of a hospital or children's hospital, urgent care or outpatient facility, nursing home, assisted living facility, home healthcare agency, rehabilitation center, or other medical facility during or immediately following a disaster.	• Coordination between public health and medical services and mass care/reunification is necessary to ensure patients in medical facilities and those receiving home health care services receive reunification services. • Coordination between the agency evacuating/moving patients and the reunification services group can be accomplished by providing access to databases and/or manifests to specified service providers. • Patients may be transported to facilities, possibly out of the area, without notice to family. • Patients may lack identification or be unable to self-identify if traumatized, unconscious, of minor status, or are unable to communicate due to disability or other reason. • Adults and children with ongoing home health, mental and behavioral

		health needs receiving supportive services (e.g., older adults with full-time home health care and dementia, Alzheimer's disease and psychiatric patients) may need assistance reconnecting with health care providers and/or family and guardians. • Medical staff may not support reunification assistance due to perceived privacy restrictions (See Appendix G for more information on HIPAA and disasters). • Patients may not wish to be reunited with seekers.
Fatalities*	• A person whose death resulted from a disaster.	• Coordination between fatality management and mass care/reunification is necessary to provide people with information about family members in a timely manner. • Fatality notifications will be made in accordance with State/local laws. Clear understanding among reunification providers of legal responsibility for fatality notifications is essential. • Understanding the resources that are available locally or through contracts to support the bereavement, behavioral health, and spiritual needs of disaster survivors is important. • Working with families of deceased/missing either via call center or in a physical facility can cause severe emotional stress for staff. Mental health resources should be available for those workers.
People with disabilities and others with access and functional needs	• Those with access and functional needs may include people with disabilities and older adults, as well as populations having limited English proficiency, limited access to transportation, and/or limited access to financial resources to prepare for,	• Individuals with disabilities and others with access and functional needs living independently in community settings may be at higher risk of loss of communications with caregivers and family/guardians during a disaster. • Residential facilities, including skilled nursing, assisted living, and long-term care facilities, and supportive housing for people with

	respond to, and recover from the emergency.** • Other access and functional needs include at-risk individuals such as children, pregnant women, those who live in institutional settings, individuals from diverse cultures, individuals experiencing homelessness, individuals who have chronic medical disorders, and individuals who have pharmacological dependency.***	disabilities and older adults, can ensure that staff and families of residents are familiar with emergency plans. • Provision of physical, programmatic, and effective and meaningful communication access to facilitate reunification for people with disabilities and others with access and functional needs is required by the Americans with Disabilities Act (ADA), the Rehabilitation Act of 1973, and Title VI of the 1964 Civil Rights Act. • Mechanisms to request accommodations for effective communication access and alternative formats should be in place for survivors and their families. • Ensure that reunification messaging reaches all individuals with access and functional needs, including those who are the most difficult to reach, by working with trusted leaders to deliver messages in the appropriate format.
Foreign nationals	• Individuals who are not citizens of the United States, who are permanent residents or are visiting the United States (for example for business or tourism) or those who are undocumented and are in the area of impact.	• Procedures for interacting with foreign governments searching for citizens on behalf of their families may be unclear. • Resources to overcome language barriers must be provided. • Physical reunification of families over great distances can be challenging. • Undocumented individuals may choose to avoid interaction connected with government. • International media interest can generate additional attention on reunification activities.
College students	• Students enrolled in a college or university who commute to classes or live on campus	• Parents/guardians of college students may seek assistance looking for their children. • College/universities may have accountability systems in place that can be important reunification resources.

Employers/employees	• Person or entity that hires an individual to work (employer) and an individual who agrees to work for an individual or entity (employee).	• Employers attempting to check on employees may request reunification assistance to ensure they are safe and accounted for. • Reunification may be a priority for businesses/organizations working to resume operations, particularly those that contribute to disaster response/recovery functions. • Some businesses/organizations, particularly large corporations, may have resources to launch their own reunification operations; coordination with mass care providers could be beneficial. • Businesses with Continuity of Operations Plans may minimize the need for reunification services.
Household pets and service animals*	• Household pets and service and assistance animals are considered within ESF #6 reunification services plans. • NRF includes the following categories of animals however, these are not addressed within ESF #6 reunification plans: working dogs, livestock, wildlife, exotic animals, zoo animals, research animals, and animals housed in shelters, rescue organizations, breeding facilities, and sanctuaries.	• Reunification of animals separated from their owner or caretaker as a result of the disaster as soon as practical minimizes the burden on government for containing and caring for the animals and reduces the risk of cascading effects in the disaster. • Collaboration between reunification planners and organizations responsible for household pet and service animal support ensure that household pet sheltering and reunification plans are coordinated with general reunification plans. • Jurisdictions will have varying plans for management of animals and animal issues during a disaster, and should plan for reunification of all captive animals with their owners or caretakers.

*Requires coordination with responsible agency for Law Enforcement, Health Services, Fatality Management, Animal Control, or other.
**This is a draft definition for access and functional needs currently in final review with the DHS Lexicon Office.
***2013 Pandemic and All-Hazards Preparedness Reauthorization Act of 2013

E. Reunification Preparedness

Activities completed in the preparedness phase can mitigate some of the reunification challenges likely to occur following a disaster, including:
- Strong messaging encouraging families to complete family communication plans and to store family contact information in online applications accessible by any

device in the event of circumstances when survivors are separated from personal cell phones.

- Outreach with community partners and private sector, to include businesses, service organizations, schools, child care and residential facilities, to encourage and support the creation of emergency and business continuity plans that include employee contact lists and accountability systems.
- Institutions responsible for the temporary care of children (e.g., schools, child care providers) share evacuation and reunification plans with parents/legal guardians and local responders to minimize confusion in the event of an emergency.
- Development of agreements among agencies and organizations providing reunification services that outline provisions for sharing information to facilitate reunification of survivors and their families, including use of a common data base or a shared standard that allows for data exchange, if applicable.
- Incorporating behavioral health resources for survivors and reunification workers into reunification plans.
- Collaboration between reunification planners and organizations responsible for household pet and service animal support to ensure that household pet sheltering and reunification plans are coordinated with general reunification plans.

See Appendix I: Family Communications Plan

See Appendix J: Household Pets and Service Animals(HPSA) – Reunification Considerations

V. Organization and Assignment of Responsibilities

This section establishes the organizational structure that will respond to the disaster. The subsections (A, B, C, and D) are completed by the jurisdictions in accordance with their own protocols. The information listed below each of the sections is guidance to assist you in identifying what needs to be included.

A. General

Insert your organizational chart that shows the relationship between the ESF #6 Lead, the Mass Care Coordinator, and the Mass Care/Emergency Assistance Task Forces.

B. Role of State Mass Care Coordinator

The State Mass Care Coordinator is a National Incident Management System (NIMS) typed position.* Describe the role of the State Mass Care Coordinator within your jurisdiction.

*Position description can be found at https://rtlt.ptaccenter.org/Public/Position/View/9-509-1083?q=mass%20care

SAMPLE:
The State Mass Care Coordinator, working with ESF #6 Support Agencies, coordinates the planning and conduct of reunification operations, or may designate an agency to coordinate reunification services, including for emerging or contingent situations.

C. Role of Local Mass Care Coordinator

Describe the role of the designated Local Mass Care Coordinator(s) within your jurisdiction.

D. Multi-Agency Reunification Task Force (MARTF)

The Mass Care Coordinator activates the MARTF if one or more of the following conditions exist:

- *The reunification need surpasses the current or projected capability.*
- *Coordination complexity of the event requires a multi-agency task force.*
- *A request for activation has been received from the State, local government, and/or a reunification partner.*
- *By mutual agreement of the stakeholders of the Plan.*

E. Mass Care/Emergency Assistance Task Forces and Coordination Considerations

Below is a listing of the common task forces that may be activated during a disaster. It is important to understand that task forces are interdependent and will coordinate with each other to meet the needs of individuals affected by the disaster. This does not preclude the need for activation of other specialized task forces dependent on the event. If a particular task force is not activated, there should be either a liaison or reach-back capability with subject matter expertise to assist in addressing any identified issues and/or shortfalls.

It is critical to understand the role of each task force in order to facilitate coordination and communication with the activated task forces to prevent duplication of work and to ensure sharing of information, which may result in positive outcomes.

Task Force	Role
Sheltering Support	Support the Mass Care/Emergency Assistance (MC/EA) Coordinator through the operational and future planning tasks identified by the jurisdiction for the sheltering requirements within the affected areas.
Feeding Support	Support the MC/EA Coordinator through the operational and future planning tasks identified by the jurisdiction for the feeding requirements within the affected areas.
People with Disabilities and Others with Access and Functional Needs	Identify support that people may require to maintain health, safety and independence during congregate activities, including sheltering, feeding, distribution of emergency supplies, reunification, and mass evacuee support. Identify resources (e.g., equipment, services, staff) that people may require to address their access and functional needs. As an alternative to activating a separate task force, consider embedding a SME on each task force and asking State and local agencies to participate on the activated task forces.

Task Force	Role
Distribution of Emergency Supplies	Identify and procure critical emergency supplies and the means to distribute them. Emergency supplies are listed in four categories: life-sustaining, comfort, clean-up, and other essential supplies.
Reunification Services Support	Provide systems and mechanisms to allow people who are separated to contact one another. Facilitate the reunification of children with parents or guardians, and of household pets with their owners.
Household Pets and Service Animals (HPSA) Support	Identify and coordinate whole community support to meet the needs of people with household pets and service animals. Such support would address evacuation, rescue, congregate care activities (including sheltering, feeding, and distribution of emergency supplies), and veterinary care. Consider rather than a separate task force, embedding a SME on each task force and coordinating with State and local agencies and ask that they participate on each of the activated task forces or, if indicated, activate a task force.
Mass Evacuation Support	The provision of congregate care support to evacuees and their household pets and service/assistance animals; exchange of information, including the registering and tracking of evacuees.

F. Reunification Services Responsibilities by Phase

The phases of a notice event include actions prior to the incident that increase readiness and available resources in preparation for the event. No-notice events will not include phases 1b and 1c. A description of the objectives and tasks of each phase is depicted below. The table below is a sample of operational priorities, objectives, and tasks for reunification operations.

Reunification Services
Operational Phase, Priorities, Objectives, and Tasks

Phase 1—End State				
Reunification support requirements and capabilities are defined; plans are developed, reviewed, and exercised; personnel are trained.				
Phase 1a Normal Operations and 1b Elevated Threat				
Operational Priorities	Objectives	Tasks	Primary Agency	Supporting Agency
Conduct multi-agency response and recovery planning that includes risk reduction and mitigation elements to support reunification	Develop all-hazard mass care plans and procedures.	• Designate lead for reunification planning and operations. • Identify agency/organization responsible for unaccompanied minors within the State and ensure its plans are integrated with this annex. o Ensure plans provide for the swift and safe reunification of minors		

services operations.		with parents or legal guardians. o Ensure plans provide for safe and temporary care of unaccompanied minors to include accessible sheltering and/or housing. • Develop/update State/local reunification services support plan(s) o Determine reunification reporting requirements. o Ensure plans are inclusive of individuals with disabilities and others with access and functional needs. • Develop/update Multi-Agency Reunification Task Force operational procedures. • Agencies/organizations with reunification responsibilities develop internal procedures and train personnel to perform the duties and responsibilities described in this plan. • Coordinate with External Affairs to develop preparedness and operational public messages. o Encourage development Family Communication Plans by citizens, familiarity with school, childcare, juvenile justice, and workplace evacuation plans. o Develop pre-scripted messages that detail reunification support services available during emergencies.		
	Determine existing reunification resource capabilities.	• Determine reunification resource requirements to meet capability target for low, medium, and high intensity incidents and to meet end-states defined in this plan. • Determine mass care partners' reunification capability. • Determine resources needed to monitor and support staff		

		emotional health during and after reunification operations. • Identify partners providing direct services to people with disabilities and others with access and functional needs who can support reunification services including physical, programmatic, and effective communications. • Identify sources of support to fill resource gaps.		
	Develop information-sharing agreements to support reunification activities.	• Identify a reunification system of record and/or a common database for all reunification/missing persons' information. • Determine what systems are utilized daily that can support reunification (ex. EMS tracking systems, hospital patient tracking, 211) and those that will be utilized in a disaster (ex. Missing Persons database, Safe and Well, UMR). • Identify what information collected in reunification systems and by agencies supporting reunification will be needed to facilitate reunification and how it will be shared. • Develop agreements between agencies to support information sharing.		
	Conduct training and exercises to validate existing plans and capabilities.	• Conduct training. • Provide and support training and assistance to operational areas, counties, and local jurisdictions. • Conduct exercises that are inclusive of agencies/organizations with reunification responsibilities and whole community partners.		
Phase 1c Credible Threat				
Identify anticipated reunification support needs and resource requirements in coordination	Monitor threats for potential reunification component.	• Monitor local/State/national incidents, media reports, and partner activity for developing threats that include a reunification component. • Assess, in coordination with reunification providers, potential		

with whole community partners.		reunification requirements and shortfalls. • Activate the MARTF, if needed. • Coordinate with ESF #15 to refine or develop reunification information messages. • Develop talking points and disseminate to reunification providers and other mass care task forces.		

Phase 2—End State

- Individuals requiring reunification assistance have access to targeted levels of resources to affect reunification with household members.
- Agencies responsible for identifying parents/guardians of unaccompanied minors and missing children receive targeted levels of assistance to affect reunification.
- Relatives and concerned individuals receive assistance locating household members displaced by a disaster or emergency.

Phase 2a: Immediate Response

Operational Priorities	Objectives	Tasks	Primary Agency	Supporting Agency
Support and/or conduct reunification operations.	Immediately assess the intensity level of the incident.	• Determine the probable reunification level (based on the Estimating Levels of Impact for Forecasting Reunification Resources matrix).		
	Immediately assess, in coordination with reunification partners, the potential reunification requirements and shortfalls.	• Assess the need for individual reunification methods and the availability of resources (i.e., reunification systems, communication support; equipment, personnel and teams; access and functional needs; and behavioral health) required to support reunification. • Identify shortfalls in requirements and request additional State and Federal resources to support reunification, as required. • Confirm and coordinate with the agencies/organizations responsible for missing persons, unaccompanied minors, the injured, and fatalities. • Establish a coordinated reporting system for reunification activities that is inclusive of all agencies with responsibility for reunification.		

	Provide public information within three hours of determination of need.	• Reunification services and support organizations provide accessible, coordinated messaging directing survivors and the public to reunification support and systems available. • Develop talking points and disseminate to reunification service and support organizations. • Coordinate with ESF #15 to monitor traditional and social media information related to reunification and for additional groups, websites, and apps that are advertising reunification services; provide this information to reunification operations team.		
2b: Deployment				
	Deploy equipment, personnel, and plans to field within 72 hours.	• Deploy equipment, personnel, and teams to locations such as shelters and evacuation sites to provide reunification assessments and facilitate reunification activities as needed for the incident. • Stand up a call center and/or reunification coordination center if situation assessments support the need.		
	Activate a multi-agency reunification task force to coordinate State reunification support within six hours of determination of need.	• Activate the task force as specified in the State Multi-agency Reunification Services Plan. • Operate the reunification task force according to established operational procedures. • Determine any critical life-sustaining or safety needs (i.e. unaccompanide and/or injured children) and establish a sub-group to support the needs of unaccompanied minors.		
	Coordinate daily with reunification resource providers.	• Establish priorities for reunification support. • Provide guidance as required to supported agencies. • Continue to monitor and assess reunification shortfalls, resource		

		requirements, and public messaging.		
		• Coordinate with other mass care task forces and/or shelter providers, as well as other mass care facilities, to determine reunification activity and support requirements.		
		• Request additional resources to meet actual or projected shortfalls.		
		• Respond to appropriate resource requests.		
		• Provide information to ad hoc reunification providers on the reunification system in place and account for them in operational plans.		
		• Identify a single organization to report reunification numbers to avoid conflicting reports.		
		• Report on reunification activities to stakeholders.		
		• Provide support for mental health and bereavement needs of disaster survivors and reunification workers.		
Phase 2c: Sustained Response				
	Employ resources	• Ongoing assessments and information are validated as the situation becomes better understood.		
		• Operations continue and often require continued or additional State and Federal support.		
		• Every effort is made to coordinate with all relevant agencies.		
Phase 3—End State				
• Individuals and families requiring ongoing reunification services and/or emotional support are referred to appropriate local agencies.				
• Unresolved cases of missing children and/or unaccompanied minors are prioritized by responsible agencies and needed resources and support for families are provided.				
Phase 3a-c: Recovery				
Operational Priorities	**Objectives**	**Tasks**	**Responsible Agencies**	
Transition reunification services to	Assess need for continuing	• Determine ongoing need for reunification support for affected population displaced across vast geography, reunification/		

established systems/agencies	reunification operations.	identification of unclaimed fatalities, reunification of unaccompanied minors and missing children, and reunification/disposition of unclaimed household pets and service animals. • Develop plans to transition individual cases to local agencies when the situation becomes stable and communications are restored.		
	Demobilize reunification operations.	• Implement plans to transition reunification services to established systems. • Demobilize reunification operations and/or the task force according to established operational procedures. • Brief long-term recovery staff on the status of reunification services. • Conduct a reunification services after action session.		

VI. Reunification Support Organizations and Resources

Reunification support organizations and resources vary throughout the State. The type of disaster, operational phase, and availability of resources impacts organizations involved and resources used. These reunification support organizations and resources include, but are not limited to, those listed below.

A. Reunification Support Organizations

> **List the organizations/agencies that participate in disaster response and the reunification services they provide. Some, but not all of these, will be MARTF members. Include government, voluntary, and private sector organizations/ agencies. Listing these organizations/agencies may support eligibility for Public Assistance requests for reimbursement. Replace these sample agencies with agencies and organizations specific to your jurisdiction.**

SAMPLE:

Organizations	Role in Reunification*
Lead Reunification Agency	• *Planning and operational lead for reunification.*
Lead Children's Reunification Agency	• *Planning and operational lead for child reunification.* • *Integrate/coordinate with the reunification group during operations.* • *Provide leadership and subject matter expertise on children's issues and legal issues related to reunification of minors.*
Local/State Emergency Management	• *Develop, maintain, coordinate, and execute all-hazards emergency preparedness plans that incorporate evacuation and reunification procedures and processes.* • *Comply with State laws that provide necessary guidance and procedures for missing persons, including children.*
Public Information	• *Develop preparedness and operational public messaging that encourages the development of Family Communication and work place continuity plans; development and familiarity with work, school, childcare, and juvenile justice evacuation plans; and pre-scripted messages directing the public to available reunification services.* • *Deliver accessible and effective public messages throughout reunification operations. Coordinate information about reunification and missing persons' procedures with media, social media, and ad hoc reunification system providers to ensure a clear consistent messaging leading to efficient streamlined reunification services to the public.* • *Provide information to Mass Care about reunification and missing persons issues reported in the media.*
Law Enforcement	• *Responsible for taking and resolving missing persons' reports and assuming responsibility for unaccompanied minors, as provided for by law. Coordinate with Mass Care to facilitate reunification activities.*
American Red Cross	• *Operates the Safe and Well system which is activated at all times.* • *Provides staff to assist with reunification operations and Emergency Welfare Inquiries and Safe and Well Information Field Teams (SWIFT).*
Public Health Agency	• *Provide welfare checks on clients participating in agency programs.* • *Encourage clients to register their status in reunification system of record.* • *Provide guidance to and coordinate with home health care organizations and local healthcare providers who may provide welfare checks on clients.* • *Coordinate with Mass Care to facilitate reunification activities.*

Multi-Agency Reunification Services Plan Template

Organizations	Role in Reunification*
Social Services/Aging Agency	• *Provide guidance to nursing home, assisted living, and other residential facilities on developing communication plans that provide information about the well-being of residents to families.* • *After disaster, provide welfare checks on clients participating in agency programs.* • *Encourage clients to register their status in reunification system of record.* • *Coordinate with Mass Care to facilitate reunification activities.*
Local Disability Organizations/Support Organizations for At-Risk Populations /Advocates	• *Provide guidance and resources to support reunification services for people with access and functional needs, including people with disabilities and at-risk individuals.*
Hospitals/Hospital Associations	• *Coordinate with Mass Care to facilitate patient reunification activities.* • *Support patient evacuation tracking.* • *Provide information/assist patients to register their status in reunification system of record.* • *Assist with resolution of Health Insurance Portability and Accountability Act (HIPPA) of 1996 questions as they relate to reunification.*
Child Welfare Agency	• *Support the development of required emergency preparedness plans for childcare providers.* • *Support the safety and needs of children and their parents or legal guardians when separated due to disaster (may have legal responsibility for this function). This may include supporting unaccompanied minors shelters in the event significant numbers of children have become separated from parents/legal guardians.*
Local/State Education Department	• *Develop and maintain school emergency preparedness plans and processes that address lockdown procedures (to protect from imminent threats such as gunmen), shelter-in-place (to protect from the threat of contamination or weather events), evacuation, relocation, and reuniting students with their parents or legal guardians.* • *Assist with resolution of Family Education Rights and Privacy Act (FERPA) questions as they relate to reunification.*
Local Coroners/Medical Examiners	• *Investigate fatalities that occur as a result of a disaster and provide assistance in the identification of deceased persons, including children.* • *Share information with Mass Care to facilitate reunification activities.*

Organizations	Role in Reunification*
Lead Household Pet and Service Animal Reunification Agency	• *Planning and operational lead for household pet and service animal reunification.* • *Integrate/coordinate with the reunification group during operations.* • *Provide leadership and subject matter expertise on household pet and service animal reunification issues and legal issues related to property rights, other relevant animal laws, and disposition (via adoption, etc.) of unclaimed household pets and service animals.*
State Clearinghouse[1]	• *Provide resources for missing children, their families, and the professionals who serve them.* • *Provide first responders with adequate training to identify and reunite unaccompanied children with parents or legal guardians.*
Family Courts	• *Support the resolution of legal issues involving unaccompanied minors as they relate to reunification.*
Amateur Radio Operators/Groups	• *Provide emergency communications services to emergency management during disasters in support of reunification activities.*
Chamber of Commerce	• *Encourage businesses to develop preparedness plans that include employee and family communication plans.* • *Support public messaging during disasters by distributing information to local businesses on available reunification services.* • *Identify support that local businesses can provide (i.e. communications support, volunteers).*
Civic Organizations	• *Assist with preparedness activities in the community that encourage the development of Family Communication Plans and the development of and familiarity with work and school evacuation plans.* • *Provide support for reunification through donations of volunteers, equipment, and supplies.*
Logistics/Information Technology	• *Provide equipment for call centers and communications equipment (telephones, cell phones, computers, and internet access) to support survivor reunification needs in shelters and other mass care facilities.* • *Ensure access to alternate communication for people with disabilities and others with access and functional needs.*

*Identify the agencies/organizations responsible for reporting counts of missing persons, fatalities, and unaccompanied minors. This information, when not coordinated and confirmed, can result confusion among officials, media, and the public.

B. Reunification Support Teams

This section should describe procedures for operation of reunification support teams, as requested.

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[1] NCMEC, "Missing-Child Clearinghouse Program." Link to NCMEC's missing child clearinghouse program

The Reunification Support Team is assembled at the request of the affected jurisdiction and may be composed of representatives from organizations and agencies (local, State, Tribal, and/or Federal) engaged in reunification efforts.

The Reunification Support Team initially works with local authorities, and/or the MARTF if activated, to assess the scope of the reunification need and determine the resources required to support reunification efforts. Reunification Support Teams can be utilized to provide four basic functions: conducting community reunification needs assessment; facilitating access to reunification systems; assisting with physical reunification; and support for multi-agency information sharing in order to reduce the number of separated, missing, and unaccounted-for adults and children.

See Appendix K: Reunification Support Teams for more information on each of these functions.

The use of Reunification Support Teams will depend on the disaster. Each disaster may utilize the functions of the teams in a unique way to fit the needs of the disaster, ensuring a scalable and flexible nature. These teams have not been typed within the National Incident Management System.

Time is a crucial factor for identifying and deploying teams in order to gather an early and accurate assessment of the situation Although reunification is not a life-saving activity, providing reunification services to survivors as quickly as possible will alleviate the task of responding to high volumes of requests to locate survivors and provide survivors with a peace of mind that will allow them to focus much sooner on their recovery.

Federal resources may be requested to support these teams when there has been a Presidentially-declared disaster. When Federal agencies support and/or participate on teams, it is important that there also is State representation, ideally as the team lead, to ensure coordination of efforts.

C. Reunification Resources

> **This section should outline available local/State/NGO human and material resources.**

Plans should include information on available human and material resources within the jurisdiction and how to obtain needed resources when a shortfall is identified. This includes information on MOU's, contracts, NGO resources, and private sector capabilities. While many of the resources are local, State, or Federal, many of them (e.g., VOAD agencies, private sector and the American Red Cross) may have a presence in more than one of the sectors.

SAMPLE:

Reunification Resources	Description
Local and State	
211 Information and Referral Search	• Potential call center capability/capacity.
Civic Organizations	• Assist with preparedness activities in the community that encourage the development of Family Communication Plans, as well as the development and familiarity with work and school evacuation plans. • Provide support for reunification through donations of volunteers, equipment, and supplies.
Civil Air Patrol	• Capability to support assessments and communications.
Community Emergency Response Teams (CERTs)	• Trained volunteer teams affiliated with local emergency management who might participate on reunification support teams.
Emergency Management Assistance Compact (EMAC)	• Emergency Management Assistance Compact acts as a complement to the national disaster response system, providing timely and cost-effective assistance to disaster impacted States, which are the requesting States.
National Guard	• Provide wellness checks and accountability; assist with emergency welfare inquiries.
Organizations that provide services for people with disabilities and others with access and functional needs	• Local Independent Living Centers, State-wide Independent Living Council, organizations serving people with cognitive/intellectual disabilities, representative of disability organizations; cross-disability organizations at the State level; State Assistive Technology programs; long-term care ombudsman.
Translation and Interpretation Services	• Organizations that provide translation and interpretation services.
Voluntary Organizations	• State VOADs and Community Organizations Active in Disaster (COADs) providing communications, social media monitoring and information collection, behavioral health/spiritual support.
NGO and Private Sector	
American Red Cross Safe and Well reunification program	• Includes Safe and Well website; Safe and Well Information Field Teams (SWIFT); Emergency Welfare Inquiries; liaison to reunification task force. • Red Cross Disaster Mental Health and Emotional and Spiritual support services.

Reunification Resources	Description
National Emergency Child Locator Center (call center), Team Adam personnel (deployable teams), Unaccompanied Minor Registry	• National Center for Missing & Exploited Children resources available to support child reunification at the request of a State to FEMA after a Presidentially-declared disaster.
Private sector	• Telecommunication companies—cell phone charging stations, communication vehicles, internet hot spots. • Vendors—communication equipment and computers.
National Animal Rescue and Sheltering Coalition (NARSC) and local and national humane organizations, veterinarians, and animal-related businesses	• Support for household pet/service animal reunification.
Evacuation Tracking Systems	• Tools to track evacuees and patients that can be used to locate survivors.
Federal	
AmeriCorps	• Support for call center staffing.
FEMA	• National Emergency Family Registry and Locator System (NEFRLS) reunification system and call center; Technical Assistance; personnel for task force support and support teams. • Disaster Recovery Centers support for survivor recovery needs. • FEMA Disaster Survivor Assistance Teams and FEMACorps support reunification registration and staffing for support teams. • Tech Corps—technology companies providing technology and communication support and equipment.
U.S. Dept. of Health and Human Services	Administration for Children and Families (ACF) technical assistance and personnel to support assessment teams.

See Appendix L: Reunification and Evacuation Tracking Systems for details on the systems listed here and others.

D. Reunification Resource Documents

Reunification Document	Link
ADA Requirements: Effective Communication. U.S. Department of Justice, Civil Rights Division, Disability Rights Section. January 31, 2014.	http://www.ada.gov/effective-comm.pdf
American Red Cross Disaster Mental Health Handbook. October 2012.	http://www.nationalmasscarestrategy.org/wp-content/uploads/2015/03/ind_client_svc_dis_mental_health_handbook.pdf
Comprehensive Preparedness Guide (CPG) 101, Version 2.0, November 2010	http://www.fema.gov/pdf/about/divisions/npd/CPG_101_V2.pdf
Emergency Support Function #6—Mass Care, Emergency Assistance, Temporary Housing, and Human Services Annex	http://www.fema.gov/media-library-data/20130726-1913-25045-4194/final_esf_6_mass_care_20130501.pdf
Guidance on Planning for Integration of Functional Needs Support Services in General Population Shelters, November 2010	http://www.fema.gov/pdf/about/odic/fnss_guidance.pdf
Mega Shelter Planning Guide, October 2010	http://www.nationalmasscarestrategy.org/wp-content/uploads/2014/07/mega-shelter-planning-guide-11152010.pdf
Missing Person Community of Interest (MPCI): Best Practices for Missing Persons Registries	http://www.mpcionline.org/mpci/wp-content/uploads/2013/10/MPCI_Best-Practices_1.0.pdf
Missing Persons Community of Interest (MPCI) Document Library	http://www.mpcionline.org/documents/
Missing Persons Community of Interest (MPCI): Using Fair Information Practices to Develop Privacy Best Practices for Missing Persons Organizations	http://www.mpcionline.org/mpci/wp-content/uploads/2013/10/MPCI_Privacy-Best-Practices_1.5.pdf
National Incident Management System (NIMS) Resource Typing Library Tool (RTLT)	https://rtlt.ptaccenter.org/Public/Position/View/9-509-1083?q=mass%20care
National Mass Care Strategy Website	http://nationalmasscarestrategy.org/

Reunification Document	Link
National Mass Care Strategy: A Roadmap for the National Mass Care Service Delivery System	http://nationalmasscarestrategy.org/
National Preparedness Goal	http://www.fema.gov/media-library-data/20130726-1828-25045-9470/national_preparedness_goal_2011.pdf
National Response Framework	http://www.fema.gov/media-library-data/20130726-1914-25045-1246/final_national_response_framework_20130501.pdf
Post-Disaster Missing Persons Process: San Francisco 311 Customer Service Center	http://www.sf311.org/modules/showdocument.aspx?documentid=656
Post-Disaster Reunification of Children: A Nationwide Approach	http://nationalmasscarestrategy.org/reunification/
Privacy and Missing Persons after Natural Disasters	http://www.wilsoncenter.org/publication/privacy-and-missing-persons-after-natural-disasters
Reuniting the Families of Katrina and Rita: Louisiana Family Assistance Center	https://ibgeography-lancaster.wikispaces.com/file/view/Reuniting+families+-+katrina.pdf
State of Florida 2014 Generic Mass Care Task Force Operational Guide v.2	http://floridadisaster.org/training/esf6/documents/2014%20Generic%20Mass%20Care%20TF%20Operational%20Guide%20Version%202.pdf

VII.   Information Collection, Analysis and Dissemination

> **This section should describe the communication protocols and coordination procedures used during disaster reunification operations. Include procedures for collecting data from reunification partners, reunification systems and registries, and public information messaging.**

A. Information Collection

The State EOC establishes the daily operational schedule of briefings, meetings and conference calls to ensure a coordinated approach by the agencies in meeting the human and material needs of the disaster. In order to obtain and provide relevant and valuable information on a daily basis, ESF #6 or the MARTF, if activated, will communicate a core set of information to the Mass Care Coordinator. The Mass Care Coordinator or designee will detail the type of information they require and frequency of reporting; they will also share relevant information with the reunification providers to maintain accurate and up-to-date situational awareness.

B. Tracking and Reports
There currently are no nation-wide standard report formats for reunification data. Jurisdictions may have their own format and it is recommended that the format is included in the reunification plan. Reunification information, such as organizations supporting reunification, status of reunification methods utilized, support team activities,

active reunification systems, the number of calls received and the number of emergency welfare inquiries and unaccompanied/missing children cases reported and resolved, and number of household pets and service animals in shelters and number reunited with owners is critical to planning for the types of services and programs needed to support the disaster survivors.

A single source of reporting of data such as numbers of missing persons and fatalities is crucial to avoid conflicting senior leadership and media briefings. Therefore, it is important to remember to include all reunification service providers' data in one report.

C. Public Messaging

> **Public messaging must include information about availability of services for all survivors including people with disabilities and others with access and functional needs and must be available in formats accessible to the whole community.**

The Mass Care Coordinator or the MARTF should coordinate with Public Affairs to ensure that the public messages include information about reunification tools and services available to the public at large and people affected by the disaster. Public messaging also should be coordinated among agencies and organizations providing reunification services, including social media providers.

All information must be available in accessible formats and conform to the U.S. Department of Justice regulations on providing effective communication.[2]

Public messages can include:

- Information about available reunification registries that can be used by survivors and those looking for information about families, friends, and colleagues;
- Reminders to the survivors to contact family and friends via text, telephone, and/or social media sites with status information;
- Locations such as family assistance centers, shelters, and service delivery sites, where reunification services may be provided;
- Information for institutions and service providers (e.g., nursing homes, assisted living facilities, child care, educational, juvenile justice, health care organizations and providers, group homes for people with developmental disabilities or other disabilities and recreational facilities) about utilizing common forms of communication and reunification registries to let family members know the status and location of clients/students after a disaster and in cases of evacuation;
- Appropriate phone numbers to call, such as a reunification call center number, especially when dispatch centers are overwhelmed with calls from those seeking information about family and friends.
- When incidents are large in scale or geography and/or receive national media attention, information should be provided to the national media providing

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[2] U.S. Department of Justice, Civil Rights Division, Disability Rights Section. January 31, 2014. ADA Requirements: Effective Communication. http://www.ada.gov/effective-comm.pdf.

information about reunification services to those outside the disaster area seeking information about family and friends impacted by the incident.

D. Communications

Effective communications, both internal and external, is essential to the success of reunification operations. It involves seamless coordination and information sharing among reunification service providers; survivor access to communications; and timely and consistent public messaging.

Internal communication occurs primarily among the whole community providers (e.g., government agencies at all levels, NGOs, faith-based organizations, private sector) in order to keep each other informed, coordinate services, avoid duplication of effort, share data, and maximize the opportunity for successful reunifications.

Survivor access to communications, such as phone/cellular service, social media, and internet, is a primary goal of reunification services. Survivor ability to utilize communications will quickly reduce the need for reunification services. Coordination with ESF #2 Communications, NGOs, and the private sector, who potentially can provide equipment and communication services, is essential.

External communication, often referred to as Public Messaging, targets the general public in order to create awareness and understanding and to provide specific information about reunification tools and services available to people affected by a disaster. Public messaging should be coordinated among agencies and organizations to ensure information is coordinated, accurate, and timely.

Note: Reunification or Missing Persons Call Centers, the Reunification Multi-Agency Coordination Center (R-MACC), and the Family Assistance Center (FAC) are important coordination and communication bridges to both internal and external communications.

E. Privacy

Effective reunification activities require information collection and sharing of personal information about survivors among government agencies and disaster relief organizations, usually in a short time frame under stressful conditions. These activities may present privacy concerns or be hindered by privacy laws. Entities responsible for reunification planning should be aware of individual privacy rights and applicable privacy laws in order to create a system that balances these with the need for information sharing in order to achieve reunification goals. Planners should work to create a multi-agency process in advance of a disaster that (1) outlines privacy friendly designs and practices that organizations can use to effectively share valuable information, (2) clarifies the privacy obligations of participating organizations applicable to reunification activities, and (3) amends current law or provides interpretive guidance in order to enable reunification activities to proceed without the threat of legal liability.[3]

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[3] Reidenberg, Joel R., Gellman, Robert, Debelak, Jamela, Elewa, Adam, and Liu, Nancy. *Privacy*

See Appendix M: Privacy Laws - Planning Considerations.

VIII. Administration and Finance

> **This section should include the authorities to obtain resources, general policies on keeping financial records, reporting, tracking resource needs, tracking the source and use of resources, and acquiring ownership of resources. Policies should follow governmental protocols in the event that a disaster escalates.**

Each agency, organization, and local government is responsible for developing procedures, providing training, and implementing procedures for continuous document of disaster related response and damage costs. Event costs should be clearly documented and linked to missions and tasks assigned by the State.

IX. Plan Development and Maintenance, Training and Exercise

> **The section should include plan development and maintenance to ensure that the Reunification Plan is periodically reviewed and updated. Additionally, include procedures for training of personnel and exercising of the plan.**

A. Plan Development and Maintenance

B. Training

C. Exercises

X. Authorities and References

> **This section should include applicable Federal, State, Tribal, and local authorities and references.**

A. Authorities
- Americans with Disabilities Act of 1990 as amended by the Americans with Disabilities Act Amendments Act of 2008, Public Law 110-325
- Children's Online Privacy Protection Act of 1998, 5 U.S.C. 6501-6505
- Code of Federal Regulations (CFR), Title 44, Chapter 1, FEMA, October 1, 2012
- Executive Order 13166: Improving Access to Services for Persons with Limited English Proficiency. August 11, 2000
- Family Educational Rights and Privacy Act (FERPA), 20 U.S.C. § 1232g; 34 CFR Part 99
- Health Insurance Portability and Accountability Act (HIPAA) of 1996
- Pets Evacuation and Transportation Standards Act of 2006, Public Law 109-308

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and Missing Persons After Natural Disasters. Washington, DC and New York, NY: Center on Law and Information Policy at Fordham Law School and Woodrow Wilson International Center for Scholars (2013).

- Post-Katrina Emergency Management Reform Act of 2006, Public Law 109-295
- Presidential Policy Directive 8, *National Preparedness*, March 30, 2011
- Privacy Act of 1974, 5 U.S.C. § 552a
- Rehabilitation Act of 1973
- Robert T. Stafford Disaster Relief and Emergency Assistance Act, Public Law No. 93-288, as amended, 42 U.S.C. 5121, et seq.
- Title VI of the Civil Rights Act of 1964
- State and Local authorities

B. References
- Memorandums of Understanding (MOUs)
- Memorandums of Agreement (MOAs)
- Emergency Management Assistance Compact (EMAC)
- State and Local Policies
- Accommodating Individuals with Disabilities in the Provision of Disaster Mass Care, Housing, and Human Services - Reference Guide
- FEMA Public Assistance Disaster Assistance Policies related to Sheltering, Evacuation and Household Pet:
  - DAP 9523.15, Eligible Costs Related to Evacuations and Sheltering, April 9, 2007
  - DAP 9523.18, Host-State Evacuation and Sheltering Reimbursement, July 23, 2010
  - DAP 9523.19, Eligible Costs related to Pet Evacuation and Sheltering, October 24, 2007
  - DAP 9880.107, Child Care Services Fact Sheet

NOTE: Given the scope and magnitude of a catastrophic incident, waivers, exceptions, and exemptions to policy, regulations, and laws may be available in order to save and sustain life, and to protect property and the environment. However, any such waivers, exceptions, and exemptions must be consistent with laws that preserve human and civil rights and protect individuals with disabilities and others with access and functional needs.[4]

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[4] FEMA, *National Response Framework,* May 2013. Pg. 24. Link to FEMA, National Response Framework, May 2013

Appendix A: Reunification Accessibility Considerations

Under the Americans with Disabilities Act (ADA), people with disabilities receive reasonable accommodations, including emergency services, in the most integrated setting. The "most integrated setting" is defined as "a setting that enables individuals with disabilities to interact with non-disabled persons to the fullest extent possible." Integrated settings are those that provide individuals with disabilities opportunities to live, work, and receive services in the greater community, like individuals without disabilities. Integrated settings are located in mainstream society, offer access to community activities and opportunities at the times and frequencies and with persons of an individual's choosing, afford individuals choice in their daily life activities, and provide individuals with disabilities the opportunity to interact with non-disabled persons to the fullest extent possible.

Others with access and functional needs include adults and children with disabilities who are legally protected by the ADA, but also includes individuals who may have an access and functional need due to, but not limited to, limited English proficiency and/or an inability to communicate, homelessness, illiteracy, lack of transportation, late stages of pregnancy, and medication needs.

Successful reunification planning addresses equal access and reasonable accommodation for physical, program and effective communication accessibility for individuals with disabilities, and meets the access and functional needs of many other disaster survivors who require reunification services. A process that informs the public of accommodations and procedures for requesting accommodations must be put in place. Some of the considerations include:

Physical Accessibility	
Reunification Locations	**Accessibility Considerations**
- Evacuation reception centers - Evacuation embarkation/debarkation sites - Shelters - Family Assistance Centers (FACs) - Disaster Recovery Centers (DRCs) - Multi-Agency Resource Center (MARC)	- Entrances - Permanent or temporary ramps - Clear routes to all services/activity areas - Service animal relief and exercise area - Restroom facilities
Program Accessibility	
Reunification Program Access	**Accessibility Considerations**
- Public messaging - Assistance registering in reunification systems - Access to reunification tools (reunification databases, cell phones, internet, etc.) - Support for children and adults (e.g., unaccompanied minors, mental	- Access to program elements provided in a variety of formats (e.g., Braille, foreign language) - Accessible computer capability - Wi-Fi - Provision of appropriate temporary care and custody of unaccompanied minors

health/behavioral needs and support, communication access)	• Provision of reasonable accommodations for both parents, caregivers or guardians and the missing individual when needed to reunify family members • Outreach to individuals with access and functional needs, including those who are the most difficult to reach, by working with trusted leaders to deliver messages in the appropriate format.
Communication Accessibility Considerations	
• Access to assistive technology devices, including but not limited to TTYs, caption telephones (CapTel), amplified phones • Access to third-party relay systems utilizing TTYs, Video Relay Service (VRS), CapTel and Speech-to-Speech services • Video Relay Interpreting • Sign language, which may include American Sign Language (ASL), Signed Exact English, tactile, using a Certified Deaf Interpreter or other sign system used by the survivor • Access to foreign language translators and interpreters, including foreign sign language interpreters • Print and video information in alternative formats, including Braille, large-print, foreign languages, captioning, and magnification • Access to support aids and interpreters for individuals with speech disabilities	
Transportation Accessibility Considerations (for purposes of reunification)	
• Para Transit Buses • Para Transit Vans • Vehicles that are lift-equipped and/or ramped with wheelchair tie-downs • Vehicles with brackets to secure oxygen cylinders • Personal Assistant Support services if needed • Ensuring Assistive Technology Devices and service animals remain with the person with a disability in transit	

Support Organizations
The lead agency assigned for the reunification process can identify and work with State and local disability organizations that provide subject matter expertise locating resources for survivors with disabilities and others with access and functional needs. These organizations can also provide much needed expertise about people with disabilities and others with access and functional needs, including at-risk individuals. Disability and community organizations may include Area Agencies on Aging; Meals on Wheels; Centers for Independent Living; Commissions for Deaf and Hard of Hearing; Rehabilitation Services for the Blind; People First; and State agencies such as Departments of Mental Health, Developmental Disabilities Councils, Vocational Rehabilitation Services, and Family Resource Centers. There are also many other private organizations that provide resources and assistance for people with disabilities and others with access and functional needs.

Public Messaging

Sample language for public messaging and meetings about this process may include:

> Reasonable accommodations will be provided to attendees and stakeholders who have communication access needs, including limited English proficiency. We invite any person with an access or functional need or who would like to request an accommodation or obtain FEMA materials in an alternative format to please indicate your need in the registration/RSVP process at least XXXX before the meeting (specify a date). Accommodations may include:

> ☐ Sign Language Interpreter
> ☐ CART—Real-time captioning
> ☐ Braille
> ☐ Large-Print
> ☐ Other Language needs: Please indicate _____
> ☐ Other: _____

> If you have any questions, please contact the POC responsible for hosting the meeting.

Identification of People with Disabilities and Others with Access and Functional Needs

Future planning efforts during reunification operations can include anticipating and planning for potential disability and access and functional needs by documenting related information in missing persons' databases.

Appendix B: Situation: Estimating Reunification Requirements

This appendix introduces considerations for jurisdictions when estimating the initial reunification requirements following a disaster. The information in this section provides an overview of the process for completing a general mass care situation assessment and then provides specific factors to consider when developing requirements for reunification services. The factors that influence the need for reunification services are different from the factors indicating a need for sheltering, feeding, or distribution of emergency supplies. Thus, a second set of intensity factors (Table 2) was developed to focus on reunification.

The Mass Care/Emergency Assistance (MC/EA) Coordinator must define the scale of the disaster to understand its risks and impact. This is accomplished through the preparation of an <u>Initial Estimate</u> (see Diagram 1). Preparation of the initial estimate is a process by which multiple agencies can work together to determine the kinds and quantities of human and material resources required for an effective response.

Diagram 1 – The Initial Estimate Process
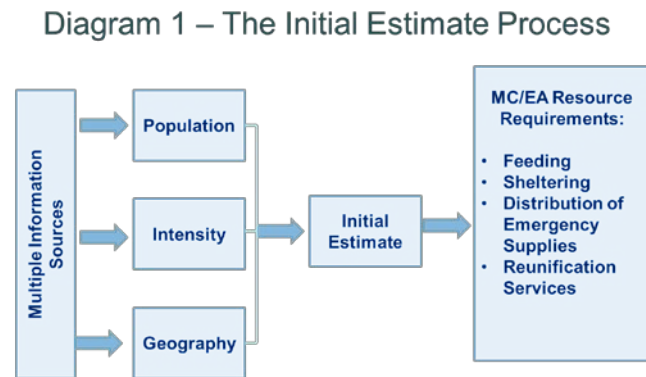
General Mass Care Initial Estimate
Generally, the initial mass care estimate is developed by the MC/EA Coordinator and is provided to the Mass Care group to support planning for Mass Care activities.

The initial estimate is a product of these four factors:
- Information from multiple sources.
- Affected population (number of people affected, by intensity).
- Level of Impact (Incident intensity - level of destruction in the impacted area).
- Geography of the event (which jurisdictions are affected).

Although there are various methods a jurisdiction can use to calculate or estimate the human and material resources required for an effective distribution operation, a detailed process for preparing an initial estimate, with disaster-specific examples, can be found on the National Mass Care Strategy Website at www.nationalmasscarestrategy.org.

The initial estimate must be completed no later than 24 hours prior to a notice event or within 12 hours of a no-notice event. These time frames are critical because the completed initial estimate becomes the basis for resource acquisition decisions. The initial assessment determines the answers to the following four questions:

1. *How big is the disaster?* Defining the scale of the disaster allows planners to determine mass care resource requirements. For mass care, the scale of the disaster is a function of the land area, the intensity of the event, and the population. The land area is defined as those parts of the jurisdiction affected by the disaster. The land area is further

subdivided by the intensity of the event into high-, medium-, and low-impact areas (see Table 1). Finally, the planner determines the total population affected by each intensity level.

2. *What ESF# 6 resources are required for the identified scale of the disaster?* Once these estimates are developed by the mass care planners, they are adopted (with modifications, if necessary) on the State Mass Care Conference Call.

3. *Can the Local/State government and NGOs provide the required level of resources?* A Resource Status Report shows available resources on hand and the estimated amount of resources from outside the disaster area, enroute, or on call. With this information, the mass care planner can determine if there is enough capability to meet the requirements identified in Question #2.

4. *Are Federal resources required to augment the Local/State and NGO resources?* If the required level of mass care resources exceeds the capabilities of the local/State governments and NGOs, the State Mass Care Coordinator takes actions to alleviate the shortfalls through Federal channels.

Table 1 - Estimating Disaster Levels of Impact for use in forecasting mass care resources	
Impact Level	**Factors**
High	- Structural damage to buildings characteristic of a Category 4/5 hurricane, Mercali Intensity earthquake levels of X/XI/XII, or F3 or higher tornado damage. - Major Flood Stage > 14 days; Record Flood Stage > 40 years. - Up to 80% or more of customers without power. - Up to 50% or more of Potable Community Public Water Systems inoperable. - Wastewater collection system is NOT providing wastewater treatment in accordance with permit conditions and regulations.
Medium	- Structural damage to buildings characteristic of a Category 3 hurricane, Mercali Intensity earthquake level of IX, or F2 tornado damage. - Flood Stage > seven days; Record Flood Stage > 20 years. - Up to 50% or more of customers without power. - Up to 30% or more of Potable Community Public Water Systems inoperable. - Wastewater collection system is properly conveying and providing wastewater treatment, but at a compromised capacity.
Low	- Structural damage to buildings characteristic of a Category 1/2 hurricane, Mercali Intensity earthquake levels of VIII, or F1 tornado damage. - Flood Stage > three days. - Up to 20% or more of customers without power. - More than 10% or more of Potable Community Public Water Systems inoperable. - Wastewater collection system is properly conveying and providing wastewater treatment with limited disruptions.

NOTE: Some tools/examples of ways to gauge event impact are: Safford-Simpson scale for hurricanes, number of feet above flood stage (for floods), Mercali Intensity Level for earthquakes, Fujita Scale for tornados, or any new measurable standard developed for the consequence of the event, e.g. the Weather Channel's TOR:CON tornado and winter storm risk scale.

Reunification Services Initial Estimate
The factors that influence the need for reunification services are different from the factors indicating a need for sheltering, feeding, or distribution of emergency supplies. Table 2 (below) identifies these factors and uses metrics to characterize them as Low, Medium, or High impact. This table is a job aid that allows the MC/EA Coordinator, along with other reunification services stakeholders, to quickly evaluate the degree to which the event has or may impact the demand for reunification resources in affected jurisdictions. ***Note: the percentages applied to the factors in this table are examples. Jurisdictions can adapt these based on their own capacities and capabilities.***

Table 2 - Estimating Levels of Impact for use in forecasting reunification resources		
Instructions for use: The Mass Care Coordinator, in coordination with other stakeholders, estimates disaster intensity for reunification not later than 24 hours prior to a notice event or within 12 hours of a no-notice event. The reunification factors below are evaluated and a check mark is placed in the far right column next to those factors that best apply. Some reunification factor evaluations may have to be estimated using the best information available. The factors checked for each intensity level are totaled and used to make a subjective High/Medium/Low Intensity estimate for reunification.		
Impact Level	**Reunification Factors**	✅
High	Government assisted, interstate or intrastate general and/or medical evacuation planned or in-progress	
	Up to 70% of affected population with limited or no access to communications	
	International and national media coverage of event	
	Primary and secondary schools, colleges, and universities are in session and students are projected to be physically separated from and/or out-of-communication with parents/guardians for period > 24 hours	
	Shelter population > than 20% of affected population	
	Number of fatalities and/or injuries overwhelms the resources of the jurisdiction	
	International/national or multiple special events occurring	
	Peak period for seasonal population	
	More than 25% of the affected population with cultural and language differences from the rest of the community	
	More than 25% of the affected population have a disability or are older residents living in their homes with or without caregivers	

	No notice incident	
Medium	Government assisted, inter-jurisdiction general and/or medical evacuation within the State planned or in progress	
	Up to 50% of affected population without access to telecommunications	
	Statewide media coverage of event	
	Primary and secondary schools, colleges, and universities are in session and students are projected to be physically separated from and/or out-of-communication with parents/guardians for period > eight hours	
	Shelter population > than 10% of affected population	
	Number of fatalities and/or injuries that stresses the resources of the jurisdiction	
	State/regional or multiple special events occurring	
	Transitional period for seasonal population	
	More than 15% of the affected population with cultural and language differences from the rest of the community	
	More than 15% of the affected population have a disability or are older residents living in their homes with or without caregivers	
	No notice or short notice incident	
Low	No or localized general and/or medical evacuation planned or in progress	
	Up to 20% of affected population without access to telecommunications	
	Local media coverage of event	
	Primary and secondary schools, colleges, and universities are in session and students are projected to be physically separated from and/or out-of-communication with parents/guardians for period < 4 hours or not in session	
	Shelter population < than 5% of affected population	
	No or limited fatalities and/or injuries	
	No special events occurring	
	More than 5% of the affected population with cultural and language differences from the rest of the community	
	More than 5% of the affected population have a disability or are older residents living in their homes with or without caregivers	
	Incident with notice	

Determining Reunification Methods

The desired outcomes for a Reunification Services Initial Estimate are (1) the determination that the local demand for reunification resources have been or will be exceeded and (2) the determination of the reunification methods and resources that are required to support and/or

provide reunification services. Table 3 below provides suggested reunification methods that may be applied to address medium/high intensity factors.

| Table 3—Intensity Factors and Reunification Methods	
This table provides suggested reunification methods that may be applied to address medium/high intensity factors. Note: most factors can be addressed by access to reunification systems, which is a primary objective in successful reunification operations. Reunification Methods are described in Section III—C Reunification Descriptions are suggested Reunification Support Organizations and Resources are listed in Section V of the base plan template.	
Medium or High Impact Levels	**Reunification Services Support and Services**
Evacuation planned or on-going	• Access to Reunification Systems • Physical Reunification • Emergency Welfare Inquiries • Reunification or Missing Persons Call Center • Reunification Multi-Agency Coordination Center (R-MACC)
Loss of communications for the public	• Access to Reunification Systems • Emergency Welfare Inquiries • Reunification or Missing Persons Call Center
Extent of media coverage	• Reunification or Missing Persons Call Center • Emergency Welfare Inquiries
Impact on schools, colleges, and universities	• Access to Reunification Systems • Emergency Welfare Inquiries • Physical Reunification • Reunification or Missing Persons Call Center
Congregate sheltering	• Access to Reunification Systems
Impact of the number of fatalities/injuries on the jurisdictions affected	• Access to Reunification Systems • Support for Reunification of Missing, Injured, or Deceased • Family Assistance Center (FAC) • Emergency Welfare Inquiries
Presence of special events in the jurisdiction	• Access to Reunification Systems • Support for Reunification of Missing, Injured, or Deceased
Peak seasonal population	• Access to Reunification Systems
Percentage of the affected population with cultural and language differences	• Access to Reunification Systems • Emergency Welfare Inquiries

Percentage of the affected population who has a disability or is older.	• Access to Reunification Systems • Emergency Welfare Inquiries

Appendix C: Decision Tree to Process Resource Requests

The decision tree process illustrates a sequential process used to determine how to fulfill requests for MC/EA resources. A narrative description follows the flow chart below.

SAMPLE:
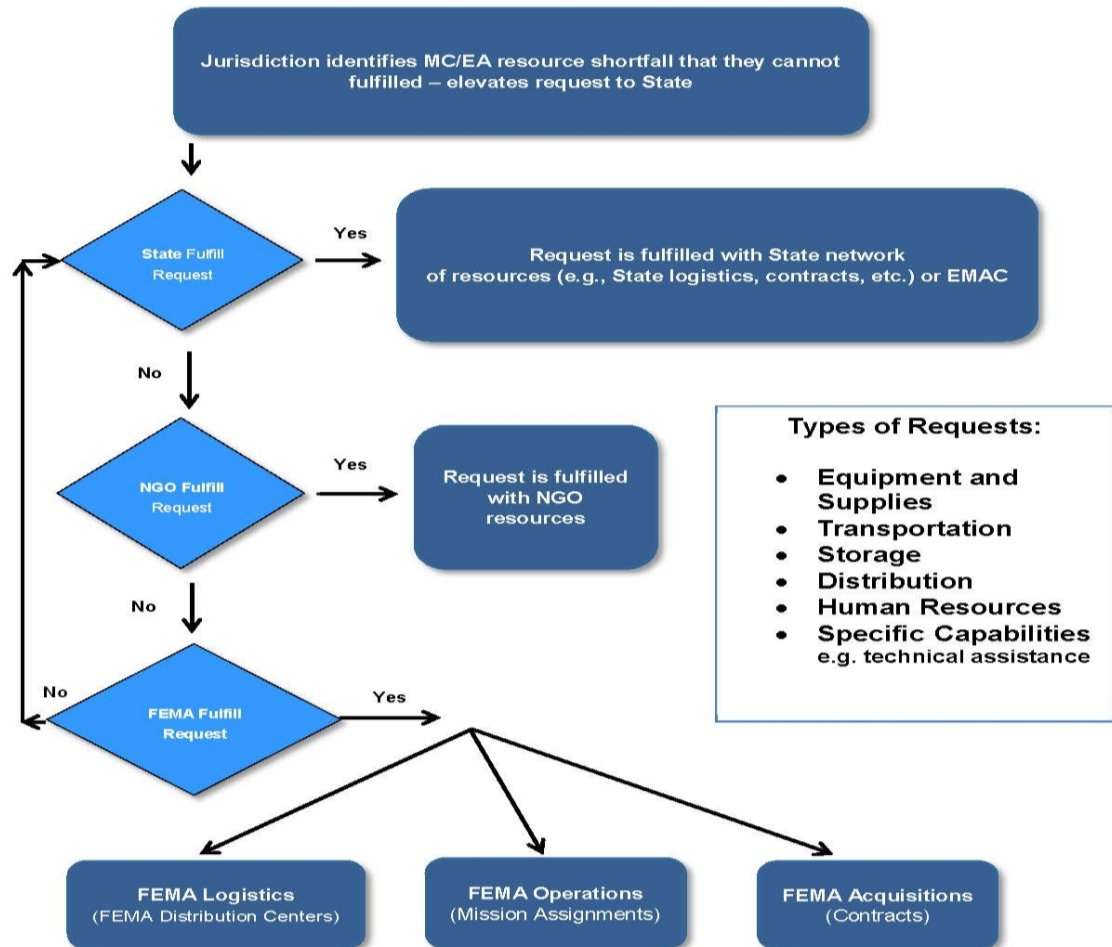
The Decision Tree Process can be used by Mass Care/Emergency Assistance (MC/EA) practitioners at any level to examine options to acquire, store, transport, and distribute supplies. It can also be used as a means to obtain human resources. A request may be satisfied with an individual or a combination of local, State, non-governmental organization (NGO), and Federal resources. For example, the State resources may be used to acquire cleaning kits, and local or NGO resources used to distribute them (e.g., at Points of Distribution (PODs)).

Multi-Agency Reunification Services Plan Template

Below is a narrative sample, with examples, of the chart above:

1. **Local Support**

   Once a need is identified by a local- or county-level jurisdiction, and a determination is made it cannot be met at that level, a request is made to the State for assistance.

2. **State Support**

   The State should ask the following questions:
   - Can the State fulfill the request?
   - Can the State fulfill a part of the request (e.g., storage, transportation, or distribution)?

   Before other resources are used, the State evaluates its own resources (e.g., State agencies, logistics, contracts, etc.) and those of local NGOs in the State's coordinated resource network, which may include donated goods. The State coordinator for mass care asks for Federal support for only what is beyond the State's capacity.

3. **NGO Support**

   If the State cannot meet the need, the MC/EA staff should consider the following:
   - Can an NGO that is not part of the State's coordinated network fulfill the request?
   - Can a local NGO satisfy a storage, transportation, or distribution request?

   If the State determines that the need cannot be met through its own network of resources, including NGOs, the MC/EA staff works with the State to examine options with national level NGOs or NGOs that are not part of the State network to meet the requirement. For example, does an NGO have a supply of cots and can they deliver to the shelter? NGOs may provide distribution support using indigenous vans or other assets.

4. **Federal Support**

   If NGOs cannot satisfy the request, the State prepares and approves a Resource Request Form (RRF) for Federal resources or assistance; the RRF must receive Federal concurrence. For example, shelter residents in a General Population Shelter may lack basic needs, such as cots and blankets. As a result, the MC/EA staff will support the State in writing an RRF for cots and blankets.

   Federal support to a State will be coordinated through FEMA. Depending on the request, there are three options that FEMA will consider, in sequence, in fulfilling the requirement:
   - FEMA Logistics through organic resources, contract, and/or Purchase Card (P-card);
   - FEMA Operations through the Mission Assignment (MA) Process; and
   - FEMA Acquisitions through existing and/or new contracts.

A. FEMA Logistics

    FEMA would consider the following:
- o Can the FEMA Joint Field Office (JFO) or Regional staff procure the requested resource through local funding vehicles?
- o Can one of these methods satisfy a storage, transportation, or distribution request?

    If FEMA Logistics acquires the needed resource (cots, blankets, linen, etc.), there must be a plan for the storage and distribution of the items. An NGO may be identified by the State to store and distribute, and the MC/EA staff would coordinate the hand-off between FEMA Logistics and the NGO partner.

B. FEMA Operations

    FEMA would consider the following:
- o Can a Mission Assignment (MA) fulfill the request?
- o Can a MA fulfill a storage, transportation, or distribution request?

    A MA is the method by which FEMA can task another Federal agency to fulfill the request. The Federal MC/EA staff will work with other FEMA elements to identify the Federal agency that may be able to fulfill the MA. As an example, to fulfill the State's need for cots and blankets, the U.S. Forest Service could be mission assigned, in which case they may be able to provide for transportation, storage, and distribution. If not, another agency or organization may be mission assigned for these purposes.

C. FEMA Acquisitions
- o FEMA Acquisitions will utilize existing contracts (organic or through another Federal agency) to meet validated requirements.
- o FEMA Acquisitions may modify or renegotiate existing contracts to meet validated shortfalls. FEMA Acquisitions is required under Section 791 of the Stafford Act to enter into contracts to ensure life-saving, life-sustaining resources are provided on time to survivors.

If FEMA is unable to fulfill the request for any reason, such as a legal obstacle or unavailability of the resource, FEMA will work with the State to see what alternative options are available.

Appendix D: Child Reunification Planning Considerations

Amid the chaos of a natural, technological, or human-caused disaster, there is an increased possibility for children to become separated from their parents or legal guardians. This separation could occur during the evacuation or sheltering process, or because children who are located in a child care, educational, medical, juvenile justice, recreational, or other facility may be unable to reconnect with their parents or legal guardians.[5]

Reunifying unaccompanied minors and separated or missing children with their parents or legal guardians in the aftermath of a disaster is a priority. The most effective method to reunite children is to provide an efficient and coordinated family reunification program with the goal of delivering reunification services and support to all survivors and their loved ones. Accomplishing this goal requires the efficient, coordinated use of resources and efforts from across the whole community at the local, State, regional, and national levels, and integrates planning for children's reunification into general reunification plans.

It is essential to successful reunification efforts that agencies with a role in the reunification of children are identified, and that mechanisms for coordination among them are developed, along with processes to ensure the protection of unaccompanied children. The scope of these efforts may be overwhelming unless a plan is developed in advance by organizations such as: child welfare agencies and the education system; law enforcement; hospitals; emergency management (specifically ESF #6 Mass Care, Emergency Assistance, Temporary Housing, and Human Services) and a reunification task force, if activated; Non-Governmental Organizations (NGO) such as the American Red Cross and the National Center for Missing & Exploited Children (NCMEC); and State Clearing Houses.

Through the Post-Katrina Emergency Management Reform Act (PKEMRA), the National Center for Missing & Exploited Children has been designated as the national organization responsible for supporting the reunification of unaccompanied minors with parents/legal guardians. NCMEC has resources including the National Emergency Child Locator Center (NECLC), Team Adam, and the Unaccompanied Minors Registry (UMR).[6]

The checklist below provides key planning points that will assist States in creating their statewide child reunification plan. It addresses planning considerations for three potential reunification situations that may occur during a disaster.
1. A minor is separated from his or her parent or legal guardian (unaccompanied minor);
2. The parent or legal guardian of a child reports the child missing;
3. A minor reported missing is found to be deceased.

All general planning considerations below were formed with all three potential reunification situations in mind, except where specifically indicated for unaccompanied minors (situation #1) and for children who are found deceased (situation #3).

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[5] "Post-Disaster Reunification of Children: A Nationwide Approach." November 2013. *National Mass Care Strategy* website. http://www.nationalmasscarestrategy.org/wp-content/uploads/2014/07/post-disaster-reunification-of-children-a-nationwide-approach.pdf

[6] Detailed information on NCMEC's resources can be found in Appendix K: Reunification and Evacuation Tracking Systems.

Additional, more detailed information can be found in the Post-Disaster Reunification of Children: A Nationwide Approach, which provides a comprehensive overview of the coordination processes and resources necessary to reunify unaccompanied minors with their parents or legal guardians.

PREPAREDNESS CHECKLIST
(All reunification scenarios)

Form a collaborative planning team	
☐ Designate Lead Agency to coordinate reunification of children throughout all phases of disaster.	• Provide leadership and subject matter expertise on children's issues and legal issues related to reunification of minors. • Integrate/coordinate plans for reunification operations with larger reunification group.
☐ Identify support agencies to serve as a planning team and assist lead agency in coordinating reunification efforts in disasters. Planning team can include stakeholders from a variety of sectors, including social services, pediatric, medical (including medical examiner), educational, childcare, Head Start, Runaway & Homeless Youth programs, juvenile justice, recreational, and disabilities communities to provide planning support for overall reunification of children.	• Stakeholders who bear responsibility for the care of children should establish their own respective emergency child reunification plans to also be coordinated with the State's reunification plan. • Encourage agencies responsible for providing care to children to develop Continuity of Operations Plans (COOP) that address medical records of children, legal custodial documentation, and other pertinent information that will assist with reunification efforts.
☐ Determine a primary point of contact to collect information from shelters, Family Assistance Centers, hospitals, and childcare and educational facilities, as well as coroners/medical examiner's offices in coordination with ESF #6 and ESF #8 Public Health and Medical Services.	
☐ Identify suitable liaison to coordinate with ESF #6 or the Multi-Agency Reunification Task Force, if it is activated.	
☐ Establish connections with any existing state or community Children & Youth in Disaster Task Force and liaise during preparedness planning and response.[7]	

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[7] For more information on the Children and Youth in Disaster Task Force model go to
http://www.acf.hhs.gov/programs/ohsepr/resource/children-and-youth-task-force-in-disasters

	Plan development	
☐	Determine planning scenarios that could potentially separate large numbers of individuals, specifically children.	• Identify demographic data on the numbers of children in schools, day care, medical, juvenile justice, and other facilities during normal business hours or the school day. o Utilize GIS technology to map data. • Research statutes and State regulations that may allow for additional staff support of reunification efforts (Disaster Leave Law).

☐	Identify State and national reunification resources to support reunification efforts.	National reunification resources include:
		  - National Center for Missing & Exploited Children's (NCMEC) National Emergency Child Locator Center (NECLC)
		  - NCMEC's Unaccompanied Minors Registry
		  - Red Cross Safe and Well SWIFT Teams
		  - Missing Child Clearinghouses
		  - Disaster Leave Law employees

☐	Determine a process for tracking individuals, including children, during mass evacuation or throughout any phase of the disaster.	• If process involves technology systems, coordinate systems with other State or Federal systems.
☐	Identify a process to search for unidentified minors, missing children, and their families in collaboration with law enforcement and other appropriate agencies.	• Generate a process to coordinate any information from emergency public communications systems (e.g., 911 centers), search and rescue teams, disaster shelters, Family Assistance Centers, hospitals, childcare and educational facilities, and coroner/medical examiner offices relating to children who have become separated from their parents or legal guardians. o Consider call center capabilities among stakeholders, within the community or via national resources such as the NCMEC's NECLC.
☐	Define procedures for training and utilization of spontaneous volunteers who have been background-checked and fingerprinted, and who can offer their services in support of reunification.	
☐	Identify suitable transportation resources to aid in physical reunification of child and parent/legal guardian, especially in disasters that occur across State or State lines.	
☐	Include child reunification scenarios in disaster training and/or exercises providing opportunities for first responders, emergency managers, and pediatric stakeholders to learn to fully incorporate children (with and without disabilities and other health care needs) into emergency preparedness plans and operations.	
	Coordinate public messaging pre-disaster	
☐	Encourage and support reunification planning among the larger community of caregivers (e.g., foster and congregate care agencies and families, hospitals, schools, child care providers, camps, scout programs, etc.).	
☐	Develop strong reunification preparedness message campaign for families.	• Promote personal preparedness among children, their families, and temporary caregivers (educational, childcare, juvenile justice, recreational personnel). • Ensure that you include messaging to families with limited English proficiency.

Coordinate public messaging post-disaster		

☐	Establish a means to coordinate the collection of information to/from the public including tips, leads, and reports regarding children who become separated from their parents or legal guardians.	o Prepare and disseminate timely speaking points in key demographic languages that align with reunification plan and that can be pushed out to the public in a disaster to provide information regarding children who have become separated from their parent or legal guardians.
		 • Speaking points should include the following information:
		   o Phone numbers of any call centers or hotlines that have been activated to collect information about children who have become separated from their legal guardians.
		     ▪ This could be managed as part of or separate from a hotline number to collect information regarding adult reunification.
		   o Location(s) where parents can go to collect their separated children.
		     ▪ If feasible, a "reunification center" can be established in a designated faith-based institution or community center.
		     ▪ Determine suitable release procedures to ensure the child is released to his/her legal guardian.
		   o Establish reporting mechanism to relay all child reunification related information to a centralized point.

☐	Coordinate public messaging with ESF #6 and other stakeholders to ensure that consistent, timely information is provided to the public about resources and processes related to child reunification.	• Utilize social media to message out important information about searching for loved ones in the disaster. • Monitor social media for important tips, leads, and reports about children who have been reported as missing from their legal guardians.
☐	Define and message out required qualifications for spontaneous volunteers who may offer their services in support of reunification.		

Minors separated from their parents or legal guardians (unaccompanied minors)

Planning Considerations		
☐	Designate agency/agencies responsible for the protection and care of unaccompanied minors until reunification occurs.	• Consider the inclusion of mental and behavioral health professionals to aid in the care of minors.
☐	Determine the jurisdiction's capacity to provide temporary custodial care for children who become separated from their legal guardians (e.g. pediatric hospital beds, foster care homes, temporary shelter facilities).	• Engage "whole community" resources to address any shortfalls identified. • Consider specific challenges to processes and systems during disasters that occur outside of normal business hours (obtaining court documentation, administrative).
☐	Establish a means of tracking and recording transportation requests in the event that unaccompanied children need to be moved or transported (e.g., to disaster shelters, hospitals, juvenile justice facilities, foster care facilities).		

☐	Develop reasonable accommodations for children with access and functional needs, including disabilities, throughout all phases of disaster.	• Ensure that children with access and functional needs are not separated from their mobility devices, durable medical equipment, and/or service animals throughout the disaster.

☐	Define a process to identify unaccompanied minors in existing general population disaster shelters and other locations and placing them in safe and secure environments in custody in accordance with jurisdictional regulations.	• Consider activation of an unaccompanied minors' shelter to accommodate large numbers of unaccompanied minors.
		  o Determine the agency or agencies responsible for managing a minors' shelter, which should also include personal care providers, as well as security personnel.
		  o Ensure that the shelter has provided reasonable accommodations for children with access and functional needs.
		• Identify a process for verifying the identity of located parents or legal guardians before unaccompanied minors are released to them.

☐	Determine privacy hindrances to sharing identification information of a young child to aid in the child's reunification, including, but not limited to, in healthcare settings.	
☐	In the event that a minor has been orphaned by the disaster, develop streamlined procedures to ensure proper care of the child until relatives are notified or the child is placed into foster care.	• Include mental and behavioral health professionals throughout temporary custodial process until the child has a new legal guardian appointed.
☐	Develop protocols to protect and manage minors who may be victims of sex trafficking who may be seeking disaster assistance.	• Develop and share training tools with disaster shelter workers, law enforcement, medical professionals, and social services who may most likely come into contact with minors who are victims of sex trafficking.

Minors reported missing are found to be deceased

Planning Considerations		

☐	Determine existing in-state post-mortem capacity for mass casualty incidents.	• Identify national resources that can support additional need or that have expertise with children's remains.
		  o HHS Disaster Mortuary Operational Response Teams
		  o NCMEC's Project ALERT and/or Team Adam

☐	Establish method to collect detailed antemortem data from parents and legal guardians who report their child missing.	• Create a reporting form that includes questions about the child's last seen location, physical appearance, scars, birthmarks, clothing, and other identifying information about the child. o NCMEC's NECLC uses an online database to collect information. • Ensure that the call center or agencies responsible for the collection of this information from calling parents and legal guardians are obtaining this important information to aid in the identification and reunification of the child.

☐	Develop a method to quickly and effectively communicate with and collect pertinent victim information from hospitals (injured) and morgue (deceased).	• Collecting important data such as physical descriptors (clothing/birthmarks/scars), medical information (dental, DNA), personal effects (glasses/doll), and post-mortem data is critical to the identification of victims.
☐	Ensure positive identification is made by a coroner or medical examiner prior to the notification of next of kin or before the body is released to a person authorized to direct the disposition of remains.	• Protocols should already be in place to address the processes and procedures for notifying authorities, agencies, and families. • Consider adding a representative of the medical examiner or coroner's office, a member of the clergy, and possibly a medical professional in the notification team. o It may benefit to have the family's pastor or other clergy member present, as well. • Develop a resource list that includes information regarding support for funeral arrangements or expenses for bereaved families.
☐	Include grief counselors, mental health support services, and the faith-based community or clergy to support parents, siblings, and/or legal guardians of the deceased.	

Appendix E: Behavioral Health Impacts

Overview
This appendix consists of considerations for reunification planners related to the behavioral health effects of family separation after a disaster as well as the stresses on disaster workers, especially those assigned to reunification call centers and family assistance centers. The appendix also identifies partners and resources that should be included in reunification services plans in order to provide emotional support for survivors, their families, and reunification workers.

Effects of family separation
Human beings rely on social connections with other people to feel safe and secure in the world and they are an important indicator of individual and community resilience.[8] [9] When families, friends and colleagues are suddenly and unexpectedly separated from or unable to reach the people who matter most to them, they lose their sense of safety and predictability. They fear that their loved one is in danger, has been hurt, or even died. This results in feelings of vulnerability, fear, hopelessness, and helplessness.

Not only do people experience the extreme stress from being separated from their loved ones, but they also face the stress that comes with surviving a disaster. These stressors can include loss of housing and belongings, a pet, or the ability to work; physical injury; financial instability; and change in established routines. Any one of these stressors can overwhelm a well-functioning person, but the combination of all of them can be truly devastating.

Even family members and friends who live outside of the disaster area are likely to experience the stress and emotions described above if they are not able to contact their loved one over a period of time. They fear the worst. In addition, people who do not live in the impacted area are faced with the stress of not having a full understanding of what is happening in the area, due to the rapidly changing disaster environment. The media can help provide information about the incident and situation, but can also increase people's stress by repeatedly showing graphic images and videos, and focusing on the most dire and dramatic circumstances.

Children
For children, the most important relationships are with their caregivers, whom they rely on to keep them physically safe, to meet their basic physical needs, and to create structure and routine. As a result, separation from their caregivers and loved ones can be intensely stressful and traumatic for them. A child's age and level of cognitive and emotional development will significantly impact how he/she reacts to being separated from their caregivers. Children can have similar stress reactions as adults, but these reactions are often more intense. They may also show more physical symptoms of stress, particularly children with limited verbal skills. For more information about helping children cope with disaster, click here.

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[8] The Road to Resilience. American Psychological Association.

[9] Chandra A., Williams M., Plough A., Stayton A., Wells K.B., Horta M., Tang J. Getting actionable about community resilience: The Los Angeles County Community Disaster Resilience project. Amer. J. Public Health. 2013;103:1181–1189. doi: 10.2105/AJPH.2013.301270

Disaster Workers

Witnessing and interacting with people who are under extreme stress can be difficult for disaster responders as well. Like people impacted by disaster, most responders will experience short-term stress reactions before they regain their pre-disaster level of functioning. In general, stress reactions are similar to and as varied as reactions experienced by disaster survivors.

Prolonged and repeated periods of being exposed to other people's stories and traumatic experiences, such as people who are separated from their loved ones, can lead to compassion fatigue, secondary trauma, and burnout. The impact on the disaster responder goes beyond job-related behaviors and attitudes and may include:
- Impaired ability to feel empathy toward anyone;
- Impaired ability to relate to friends and family;
- Loss of sense of vision or purpose in life;
- Diminished creativity and sense of humor;
- Depression, stress-related disorders and some physical ailments.

Workforce health protection strategies may mitigate or prevent compassion fatigue. However, for workers who develop compassion fatigue, recovery typically requires more than a vacation or change of job position. Workers who appear to have or believe they have compassion fatigue are best advised to consult with their personal health care providers. Find additional information about disaster worker stress reactions at the National Center for PTSD.

Additional detail on adult, children, and disaster work disaster stress reactions can be found in Appendix B of the American Red Cross Disaster Mental Health Handbook.

Pets

In the United States, it is common for people to consider their pets as part of their family and to have strong emotional connection to their animals. Therefore, being separated from a pet during disaster can be extremely stressful for disaster survivors, particularly for children. When planning for disaster responses, it is important to address pet sheltering and, when possible, shelter pets in close proximity to their owners to decrease the stress experienced by both the people and their animals.

Reunification: Disaster Behavioral Health Response and Resources

Local agencies: Any community planning for reunification should include all local agencies that can partner in response efforts. Such agencies, staffed by counselors, social workers, and other mental health providers, include hospitals, mental health agencies, social service agencies, independent living facilities, schools, and colleges and universities. Declarations of Emergency enable many governmental social service agencies to collaborate and share information that is normally considered proprietary and confidential; close collaboration can protect confidentiality while providing necessary cross-referencing or validation of needed information to help in identifying and tracking the missing on a need-to-know basis.

State Behavioral Health Systems: Each State mental health authority (i.e., the State Department of Mental Health) has designated disaster mental health coordinators who can engage local community mental health agency staff to assist with disaster response and

community outreach. Building strong relationships prior to a disaster ensures greater facilitation and coordinated response.

Local Faith Communities and Disaster Spiritual Care Providers: Local communities of faith are uniquely equipped to provide healing care and disaster spiritual care services. Local spiritual care providers and communities of faith are primary resources for post-disaster spiritual care. The trauma impact of disaster leaves many more invisible casualties than those that are visible. Although reactions vary tremendously, many survivors are drawn to their faith traditions more strongly than they were pre-disaster. Having spiritual supports available from the faith community helps many people find meaning and purpose following a trauma or catastrophic event.

Community Organizations Active in Disaster (COAD) and Voluntary Organizations Active in Disaster (VOAD): Many communities have pro-actively established COADs, composed of representatives from governmental and non-governmental agencies, to enhance their communities' ability to prepare for, respond to, and recover from disasters. Additionally, each state has a VOAD, generally defined as a coalition of non-profit and faith-based organizations that respond to disasters.

COADs and VOADs often have established standing committees dedicated to disaster behavioral health response and/or emotional and spiritual care. Emergency management agencies may participate and, in some cases, may provide resources to support these organizations.

The depth of planning and organization, as well as the availability of disaster behavioral health resources on the local/county/community level, will dictate the ability of a State to manage its disaster mental health response without outside assistance. In states with active COAD and VOAD presences, these organizations may be included in emergency management plans and contribute resources and situational awareness to state and local emergency management agencies through appropriate organizational structures.

Federal Resources: Please refer to the Multi-Agency Reunification Services Plan Template Appendix C: Decision Tree to Process Resource Requests.

Additional Resources

American Red Cross (2012). *Disaster Mental Health Handbook.*
http://www.nationalmasscarestrategy.org/wp-
content/uploads/2015/03/ind_client_svc_dis_mental_health_handbook.pdf

American Red Cross. *Helping Children Cope with Disaster.*
http://www.redcross.org/images/MEDIA_CustomProductCatalog/m14740413_Helping_children
_cope_with_disaster_-_English.pdf

American Red Cross (2009), *Taking Care of Your Emotional Health.*
http://www.redcross.org/images/MEDIA_CustomProductCatalog/m4240142_EmotionalHealth.p
df

Federal Emergency Management Agency (January 2015) *Coping with Disaster*.
https://www.fema.gov/coping-disaster

Federal Emergency Management Agency (January 2015) Crisis Counseling Assistance and
Training Program. https://www.fema.gov/recovery-directorate/crisis-counseling-assistance-
training-program

National Disaster Interfaiths Network. *Be a Ready Congregation Tip Sheets for U.S. Religious
Leaders: Disaster Spiritual Care.*
http://www.n-din.org/ndin_resources/tipsheets_v1208/10_NDIN_TS_DisasterSpiritualCare.pdf

National Voluntary Organizations Active in Disaster (NVOAD) Resource Center.
http://www.nvoad.org/resource-center/

U.S. Department of Health & Human Services (HHS) Office of the Assistant Secretary for
Preparedness and Response. Faith-based Responders and Spiritual Care Resources.
http://www.phe.gov/Preparedness/responders/faithbased/pages/default.aspx

U.S. Department of Health and Human Services (HHS) Substance Abuse and Mental Health
Services Administration (SAMHSA) Disaster Preparedness, Response, and Recovery
http://www.samhsa.gov/disaster-preparedness

Young, B. H., Ford, J. D., & Watson P. J. (2007). Disaster Rescue and Response Workers.
National Center for PTSD, U.S. Department of Veterans Affairs.
http://www.ptsd.va.gov/professional/treatment/early/disaster-rescue-response.asp

Appendix F: Multi-Agency Reunification Task Force (MARTF) Guidance

This section contains baseline information for development of a Multi-Agency Reunification Task Force procedural document that may include: 1) Description of the Role of the MARTF; 2) Membership of the MARTF; 3) Table of Organization for the MARTF; 4) Brief Job Descriptions for the roles defined in the Table of Organization; 5) Triggers for constituting a MARTF; 6) Mobilization and De-mobilization procedures; 7) MARTF Preparedness and Operational Activities; 8) Describe how the MARTF will interact and coordinate with other established task forces and the Mass Care Coordinator.

Purpose
When activated, the MARTF operates at the direction of the jurisdiction's mass care coordinator in support of operational activities relative to the coordination of reunification processes. During operations, the focus of the MARTF is on future planning, 48 hours from the present and beyond. However, there may be immediate or tactical situations in which the task force could be called upon to help.

The primary responsibilities of the MARTF are to (1) confirm initial estimates of need and monitor and asses the effectiveness of ongoing reunification activities; (2) develop and recommend strategies to address shortfalls; (3) identify the resources required to carry out strategies; and (4) provide recommendations regarding appropriate and necessary Federal support.

The task force stresses coordination among the various organizations/agencies involved with reunification operations and recommends to the mass care coordinator the best strategies to meet the projected reunification requirements for the disaster.

Establishment of a Task Force
A Multi-Agency Reunification Task Force is established during a response in accordance with the criteria specified in the Multi-Agency State Reunification Services Plan (section IV-D Multi-Agency Reunification Task Force).

Some jurisdictions may assign duties to the MARTF during preparedness (Operational Phase 1a). Other jurisdictions may designate a multi-agency reunification services planning team to perform duties during preparedness and then activate a MARTF during response. Members of the reunification planning team developing the Multi-Agency State Reunification Services Plan may or may not participate in the task force.

During response, the organization and staffing of the MARTF is driven by the impacts of the incident and the capabilities required to complete the reunification mission. Task forces are scalable and may be described by type where Type 3 minimally has a Task Force Leader and administrative support and a Type 1 Task Force may include a Deputy Task Force Leader, expanded administrative/planning support, representatives, and liaisons from multiple agencies and organizations as well as an assigned physical space from which to operate. Below are two examples of a multi-agency task force organization.

Multi-Agency Reunification Services Plan Template

SAMPLE:
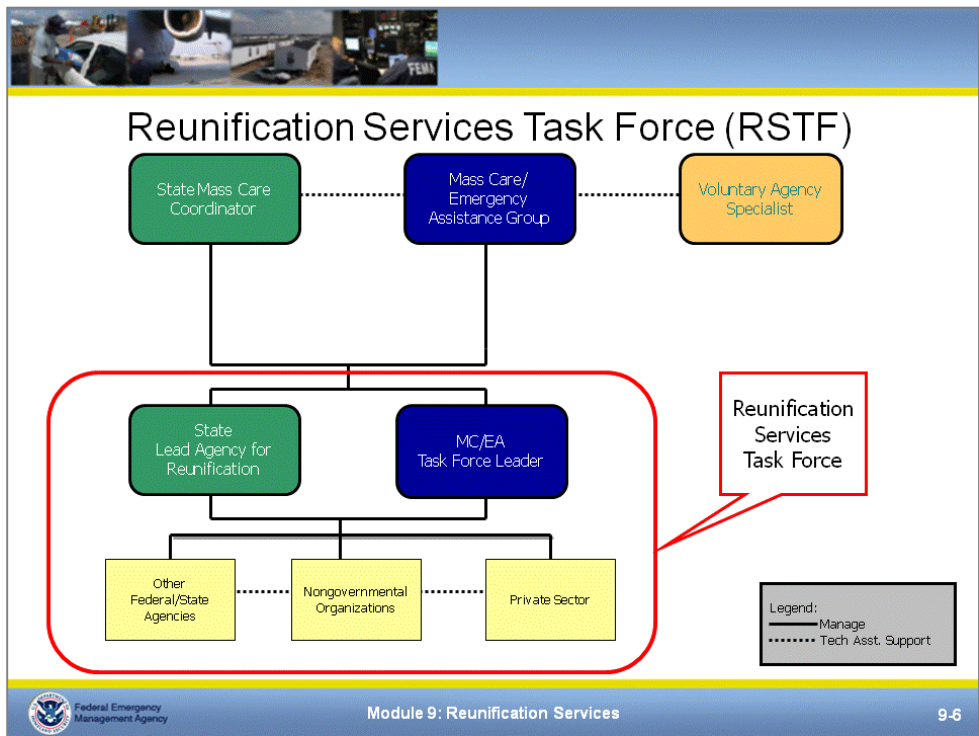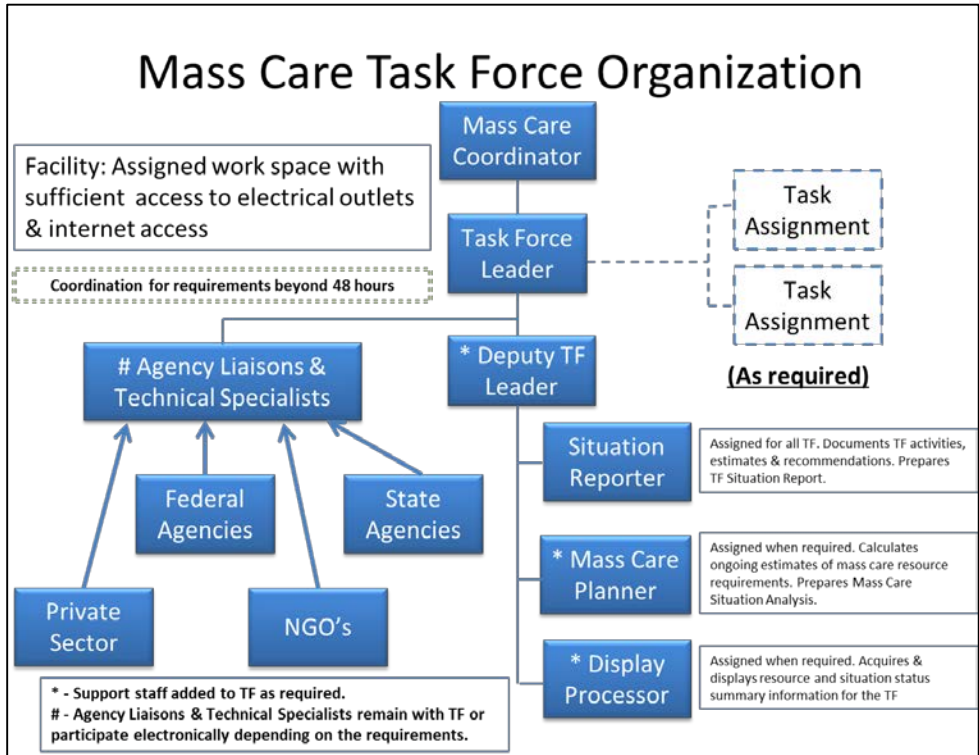
Potential Reunification Task Force members

The MARTF is generally composed of representatives from agencies and organizations that are part of the jurisdiction's Multi-Agency Reunification Services Plan, but should also be inclusive of: governmental agencies at all applicable levels; voluntary organizations including non-traditional agencies/organizations; and private sector constituents who wish to participate within the jurisdiction, as well as across jurisdictions. Criteria for participation in the task force will vary based on jurisdictional need. The specific individuals and organizations involved in a reunification operation may vary depending on the type and size of the disaster. The individuals designated to participate operationally must have the knowledge and authority to represent their agency.

Below is a suggested list of MARTF members that may be expanded or contracted to meet the needs of individual jurisdictions. Jurisdictions will likely identify other agencies that play a role and contribute to disaster reunification strategies within their State. (Refer to the base plan Section V-A Reunification Support Organizations.)

- Jurisdictional ESF #6—Mass Care/Emergency Assistance (or corresponding State ESF terminology)
- Jurisdictional Lead Agency for Reunification
- Jurisdictional Lead for Child Reunification/Children Welfare Agency
- Jurisdictional Public Health Agency
- Jurisdictional Social Services/Aging Agency
- Jurisdictional Agency for People with Disabilities and Others with Access and Functional Needs
- Jurisdictional Law Enforcement
- Jurisdictional Lead or ESF responsible for household pet and service animal support
- Jurisdictional Public Information Officer
- Jurisdictional Evacuation Coordinator
- Mass Care Planner
- Reporting/Administrative Support
- American Red Cross
- The National Center for Missing & Exploited Children (NCMEC)
- Private Sector representatives
- FEMA Regional Mass Care Program Specialist
- FEMA Regional Disability Integration Specialist
- U.S. Health and Human Services (HHS) Administration for Children and Families (ACF) Regional Emergency Management Specialist.

Reunification Task Force Roles and Responsibilities

The primary responsibilities of the MARTF are to:

- Confirm initial estimates of need and monitor and assess the effectiveness of ongoing reunification activities;
- Develop and recommend strategies to address shortfalls;
- Identify the resources required to carry out strategies; and
- Provide recommendations regarding appropriate and necessary Federal support.

Additionally, the MARTF should validate the reunification resources capacities within the jurisdiction. If available capacity exceeds the estimated need and there are no shortfalls, then no action steps are needed. If the need for reunification services is greater than the identified collective capacity, the MARTF may request additional resources from the State and/or ask for assistance from various stakeholders and/or FEMA.

Below are some primary considerations for a task force to consider during the preparedness and operational phases of a disaster. These tasks may vary depending on the disaster. The task force must remain flexible depending on the variables of the mission.

Pre-Incident (Phase 1)
- Identify resources and other requirements and set priorities for their use.
- Develop or utilize existing reunification services support plans, protocols, and procedures, including exercises.
- Organize preparedness and planning meetings.
- Coordinate task force activities.
- Establish MARTF member responsibilities for certain activities, such as (but not limited to): information gathering, coordinating with other established task forces, producing reports, addressing resource requests, and addressing problems/complaints.
- Develop an Essential Elements of Information (EEI) template.
- Encourage training, exercises, and evaluation amongst task force partners.
- Involve support and advocacy organizations for people with disabilities and others with access and functional needs to provide inclusive emergency preparedness expertise.

Response (Phase 2)
- Identify operational priorities, resources, and other requirements and set priorities for their use.
- Develop and maintain a clear picture of the reunification resources on hand and enroute.
- Assess reunification providers' shortfalls and follow up on their requests.
- Develop strategies based on incident objectives.
- Validate resource requests and determine whether or not other jurisdictional, NGO, private sector, or donated resources can support the request; ensure requests do not duplicate those already submitted.
- Coordinate reunification information among all agencies and organizations that have a reunification mission.
- Monitor and assess any emerging needs.
- Monitor and assess accessibility requirements to ensure equal access to emergency services and programs.
- Prepare and submit daily statistical reports to the mass care lead.
- Assess and monitor future jurisdictional reunification resource requirements in order to identify, procure, and transport resources to the impact area in time to meet the need.

Appendix G: Patient Reunification Coordination

Overview

The number of people injured and transported to health facilities, as well as the scope of medical evacuations of patients already in the health system at the time of a disaster, are important factors influencing the need for reunification services. While patient care and tracking is the responsibility of Emergency Support Function #8 (ESF #8) Public Health and Medical Services, ESF #6 may be asked to support reunification of these patients with their families.

There is currently no standard nationwide agency or service for medical reunification. Patient reunification coordination is especially difficult due to various roadblocks such as the misinterpretation of Heath Insurance Portability and Accountability Act (HIPAA), while even HIPAA and/or local agreements are often difficult to employ due to medical staff reluctance to release confidential information. In order to overcome these difficulties, a high level of training and information awareness in the form of drills, written protocols, and in-service training of healthcare professionals is required.

Trends and Challenges

While some organizations and jurisdictions have developed regionally-based programs and are researching expansion options, there are a number of trends and challenges that needed to be addressed. While the following list is by no means exhaustive, these challenges include:

- *Patient Tracking Software:* The assumption, at times, is that the development of patient tracking software will serve as a patient reunification tool. Yet these systems typically have no public access point for those seeking loved ones. Health facilities can develop their own reunification plans and policies for the release of information to seekers. It is recommended that an agency or organization is designated to coordinate overall patient reunification and to develop guidelines for the release of information.
- *Interoperability:* Lack of interoperability among systems designed for reunification, missing persons, unaccompanied minors, patient tracking, and evacuation contribute to the complexity of the tasks involved. These include validating, reconciling, cross-referencing, and data sharing.
- *Multi-Agency and Multi-Jurisdiction*: Especially challenging are disasters spanning jurisdictions or involving multiple agencies/organizations (i.e., hospitals, EMS, 211, emergency management, Red Cross, NCMEC and the U.S. Department of Health and Human Services National Disaster Medical System (NDMS). There will be additional need for coordination among these and other support agencies.
- *Public Messaging*: Coordination of public messaging and clear, consistent, culturally appropriate, accessible, and timely information about reunification is essential.
- *Public Accessibility:*
  - Toll-free numbers for those out of the area may be needed specifically for patient reunification and the media, and should be coordinated with any general family reunification call centers.
  - Accessible communication options for people with access and functional needs including disabilities and limited English proficiency are required by law.
  - The designated agency's capacity to handle in-person inquiries or phone calls must be considered.

- - - Alternate methods of receiving inquiries (such as via apps, email, online forms, or text message) may help to mitigate the influx of phone calls. There is also a growing public expectation of accessing services through social media or by texting.
  - *Volume:* The anticipated volume of inquiries, especially for large incidents, can affect the ability to respond in a timely and appropriate way.

Health Information Privacy[10]
[Excerpted from the HHS webpage "Can health information be shared in a severe disaster?"]

Health care providers can share patient information as necessary to identify, locate, and notify family members, guardians, or anyone else responsible for the individual's care of the individual's location, general condition, or death.

The health care provider should get verbal permission from individuals, when possible; but if the individual is incapacitated or not available, providers may share information for these purposes if, in their professional judgment, doing so is in the patient's best interest.

- Thus, when necessary, the hospital may notify the police, the press, or the public at large to the extent necessary to help locate, identify, or otherwise notify family members and others as to the location and general condition of their loved ones.
- In addition, when a health care provider is sharing information with disaster relief organizations that, like the American Red Cross, are authorized by law or by their charters to assist in disaster relief efforts, it is unnecessary to obtain a patient's permission to share the information if doing so would interfere with the organization's ability to respond to the emergency.

Imminent Danger: Providers can share patient information with anyone as necessary to prevent or lessen a serious and imminent threat to the health and safety of a person or the public -- consistent with applicable law and the provider's standards of ethical conduct.

Facility Directory: Health care facilities maintaining a directory of patients can tell people who call or ask about individuals whether the individual is at the facility, their location in the facility, and general condition.

Of course, the HIPAA Privacy Rule does not apply to disclosures if they are not made by entities covered by the Privacy Rule. Thus, for instance, the HIPAA Privacy Rule does not restrict the American Red Cross from sharing patient information.

Lead and Supporting Agencies for Patient Reunification Coordination
As discussed in the base document of this template, the State may identify the lead agency responsible for reunification. Additional agencies and organizations will be needed to support and/or coordinate aspects of reunification, including but not limited to patient reunification. It may be determined that an NGO such as the Red Cross, 211, or other organization is prepared to

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[10] U.S. HHS, "Can health care information be shared in a severe disaster?" Link to U.S. HHS, "Can health care information be shared in a severe disaster?"

assume a lead role by providing a formal system for conducting patient reunification activities. This is often dictated by relationships that have previously been established.

EMS Tracking

States and municipalities may acquire EMS tracking products for EMS providers to utilize in the field during triage and transport. These devices can transmit field-based patient information prior to patient arrival at the hospital and track inter-facility transfers.

- Understand local availability and usage protocol for EMS tracking. Some providers may operate them for daily response, while others may only activate them for incidents past a certain threshold.
- EMS tracking may provide a stream of information for the agency or agencies responsible for situational awareness.
- The devices/interfaces may also provide an access point that allows individuals providing reunification services to view transport information. Qualifications and access parameters must be determined, such as who can have access to patient data, and to what extent.

Collection of Patient Information (Select Examples)

Patient reunification is dependent upon the ability to collect victim information from hospitals, healthcare providers, and alternate care sites.

- The systems in place vary State to State, though there are principles practices and principles that are adhered to. For example, 211 in Virginia ties into an EMS Tracking interface to make matches between callers (seekers) and hospitalized patients. No conditional or death notifications are made over the phone.
- In Chicago, Red Cross offers a patient reunification system (Patient Connection). Information is either gathered from EMS tracking systems or directly from hospitals and coroners. Red Cross call agents make matches between callers (seekers) and hospitalized patients. Hospitals are permitted to share this information in accordance with the HIPAA disaster exemption and pre-established MOUs. No conditional or death notifications are made over the phone.

Condition and Death Notifications

Even where robust systems are in place, the lead agency for reunification typically operates with restricted access or maintains policies against conditional notification.

- Appropriately plan for death notifications, which are typically handled by the coroner, law enforcement or hospital personnel who have direct access to current patient status, dependent on the situation.
- In the event that children have been orphaned as a result of the disaster, coordinate with the appropriate State or Local Welfare agency.

Fielding Public Inquiries

It is important to create and test a plan for fielding public inquiries for victim reunification, as well as to ensure adequate call-taking capacity, including accommodations for non-English speakers. This should include regular coordination and participation in drills. Agencies experienced in this function stress the importance of regular testing, staff training, and advance coordination with local partners. (Assumptions: call volume highest between hours one and three. Expect ten phone calls for every one victim.)

Children[11]
- *Injured and Transported to Hospitals:* While some States may have designated pediatric reunification plans to track transports and inter-facility transfers, there are many challenges during and after a disaster to reunifying pediatric patients with parents/guardians.
  - Children may lack identification and they may have difficulty providing personal or family information making it more difficult to locate and contact parents/legal guardians.
  - Children may be transported out of the area for specialty treatment.
  - If hospitals are submitting patient information to an outside entity for reunification (e.g., NCMEC, Red Cross, 211), special emphasis should be placed on the description. While internal hospital protocol may prompt for a patient photograph, the submission of photos to Red Cross or 211 may not be supported at this time. Hospitals should be familiar with their local resources and protocol.
    - NCMEC emphasizes the importance of photographs and detailed descriptions for assistance in identification and reunification. Hospitals should consider taking photographs and descriptions (e.g., clothing, accompanying items). The Unaccompanied Minors Registry prompts for a description of what children were wearing at the time they were found.
- *Un-injured and Transported to Hospital:*
  - Some uninjured children may be transported to hospitals for safekeeping. To avoid overwhelming hospital staff, child welfare agencies, the lead agency for reunification, and/or law enforcement should coordinate with EMS and hospitals to mitigate the influx of unaccompanied minors to hospitals such as redirecting these children to the appropriate social services agency.
  - Hospitals should develop protocols for safekeeping and support of children until either reunification takes place or another agency can take custody.
  - Internal protocol for verifying guardianship should be developed in advance and followed.
  - Reunification of children should be supervised, supported, or conducted by law enforcement.

Planned Events
Growing importance is placed on preparedness for special events such as large community or athletic events, marathons, and political gatherings. It is becoming more common for event planners and/or local authorities to request or require a plan for reunification.
- Reunification services for events may include a standby plan or a designated group taking an active presence to collect medical status and field inquiries.
- Reunification for planned events may mirror or serve as a test for unplanned disasters, with the advantages of pre-planning and additional resources. This includes pre-staged resources, the advance availability of participant and emergency contact information, and early notification/coordination with medical providers

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[11] Additional information about reunification of children can be found in "Post-Disaster Reunification of Children: A Nationwide Approach." November 2013.

Appendix H: Reunification Catastrophic Planning Considerations

This appendix offers some considerations for the provision of reunification services after a catastrophic disaster, which would result in a severely degraded environment. Planning assumptions and some concepts were taken from FEMA's *Catastrophic Housing Annex* (2012) and applied to specific reunification concerns in a catastrophic event.

The *Catastrophic Housing Annex* describes FEMA's all-hazards concept of operations for response and recovery after a catastrophic disaster; it focuses on transitioning 500,000 eligible households from sheltering to temporary housing and supporting their transition to sustainable housing following a catastrophic incident. This appendix applies the planning assumptions and the Zone approach described in the Annex to a possible approach for reunification.

Some potential methods of reunification included in the chart below have not been described in the base document of this template. Additional planning efforts would be needed in order to activate them.

The needs of the jurisdiction will drive the response and recovery actions. While this Annex utilizes the zone concepts and other aspects of the Catastrophic Housing Annex, this is simply one method, used as an example, to organize reunification following a catastrophic incident.

Assumptions:
- The need for reunification services will exceed the capability of any one agency/organization, requiring a combination of resources provided by local, State, Tribal, and Federal governments, and NGOs to deliver reunification services to affected populations and their families and friends.
- Communications infrastructure will be nonexistent or severely degraded in high-impact areas.
- Significant relocation of survivors from Zones 1 and 2 to Zone 3 and then to Zone 4 will occur.
- Support to high-impact areas (Zones 1 and 2) will be limited to life-saving and some life-sustaining activities. These areas may be inaccessible or may have access restrictions. Some immediate recovery activities will occur in Zone 3 and most will occur in Zone 4.
- During no-notice and short-notice events, significant numbers of children will have to evacuate either on their own or with a trusted adult (extended family, friends, neighbors, teachers, etc.), prolonging reunification efforts and adding challenges relating to custodial release.
- People with disabilities and others with access and functional needs may have difficulty functioning independently when needed resources are scarce.
- High numbers of injured people and fatalities will result in families who are unable to contact or obtain information about loved ones for extended periods of time.
- In some catastrophic events, people will not have access to their cell phones, cell phone chargers, or other electronic devices, and may not be able to access telephone numbers of family and friends.
- A multi-state incident and/or evacuations over a large geographic area may require a coordinated reunification response utilizing a national Reunification Multi-Agency

Coordination Center (R-MACC) which can support State operations, communication requirements, and public messaging.

The Zone Approach

The table below describes the four-zone approach outlined in the *Catastrophic Housing Annex* with an additional column to show how reunification may fit into each zone. The zone approach breaks down the impacted area based on the degree of damage within and the accessibility of each zone.

The columns in the Characteristics section of the chart below are a guide for the reunification considerations and methods of services column that lists activities that potentially can be supported in Zones 1-4. For example, the support provided to Zone 1 will initially be limited to only life-saving and life-sustaining response support, due to accessibility limitations. In Zone 4, support can include the full range of recovery options because there are no access concerns.

<div align="center">

Table 1—Description of Zones

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| Zone | % Structures and Infrastructure Severely Damaged | Characteristics | | | | | Description | Zone Approach Considerations/Methods for Reunification |
		Life-Saving	Evacuation	Relocation Necessary?	Life-Sustaining	Housing and Wrap-Around Services		
Zone 1	66% - 100%	Yes	Out of area	Yes	Essential personnel only; limited to those who cannot relocate	No	• Individuals electing to remain in this zone will not be prioritized for receiving distribution resources, other than life-sustaining resources, due to the extreme accessibility limitations. • Significant volume of debris will inhibit transportation, assistance, and re-habitation. • Loss of community services.	• No/limited communications available in this Zone. • No reunification service in this Zone. • Coordination with Search and Rescue and other responders to document locations and status of survivors evacuating the area utilizing a system of record when possible. • Coordination between responders and reunification agencies/organization receiving calls, text messages etc., from survivors requesting assistance in impacted zones

Multi-Agency Reunification Services Plan Template

Zone	% Structures and Infrastructure Severely Damaged	Characteristics					Description	Zone Approach Considerations/Methods for Reunification
		Life-Saving	Evacuation	Relocation Necessary?	Life-Sustaining	Housing and Wrap-Around Services		
Zone 2	40% - 65%	Yes	Out of area	Yes, short term	Yes, if infrastructure permits	Yes, limited and slow	• Living conditions are adverse at best.	• Limited communications available • Methods same as Zone 1
Zone 3	15% - 39%	Yes	Based on disaster	May be limited short term	Yes	Yes	• Networks strained by staged resources to support response activities in Zones 1-2. • Needs addressed through additional resources and traditional recovery programs.	• Communication support for evacuation sites to enable survivor contact with families. • Reunification support teams to assist survivor access to reunification systems and provide incident reporting. • Support for identification of unaccompanied minors and physical reunification of children separated from parents/ guardians from all zones. • Patient and fatality management reunification coordination. • Limited provision of Emergency Welfare Inquiries and behavioral health support for evacuees/survivors

Multi-Agency Reunification Services Plan Template

| Zone | % Structures and Infrastructure Severely Damaged | Characteristics | | | | | Description | Zone Approach Considerations/Methods for Reunification |
		Life-Saving	Evacuation	Relocation Necessary?	Life-Sustaining	Housing and Wrap-Around Services		
Zone 4	≤ 14%	Yes	Based on disaster	No	Yes	Yes	• Area heavily utilized to support ongoing operations. • Needs primarily addressed through traditional recovery programs. • May extend beyond the Presidentially-declared disaster area.	• All reunification services provided. • Reunification call center and family assistance centers located in Zones 4 will field calls from concerned family members of survivors/victims in Zones 1, 2, and 3. • State and/or National Reunification Multi-Agency Coordination Center may be implemented to coordinate all reunification activities.

Appendix I: Family Communications Plan
Additional information to assist families, communities, and workplaces prepare for disaster can be found at www.ready.gov.

Ready
Prepare. Plan. Stay Informed. ®

Family Emergency Plan

FEMA

Make sure your family has a plan in case of an emergency. Before an emergency happens, sit down together and decide how you will get in contact with each other, where you will go and what you will do in an emergency. Keep a copy of this plan in your emergency supply kit or another safe place where you can access it in the event of a disaster.

Out-of-Town Contact Name: _____ Telephone Number: _____

Email: _____

Neighborhood Meeting Place: _____ Telephone Number: _____

Regional Meeting Place: _____ Telephone Number: _____

Evacuation Location: _____ Telephone Number: _____

Fill out the following information for each family member and keep it up to date.

Name: _____ Social Security Number: _____
Date of Birth: _____ Important Medical Information: _____

Name: _____ Social Security Number: _____
Date of Birth: _____ Important Medical Information: _____

Name: _____ Social Security Number: _____
Date of Birth: _____ Important Medical Information: _____

Name: _____ Social Security Number: _____
Date of Birth: _____ Important Medical Information: _____

Name: _____ Social Security Number: _____
Date of Birth: _____ Important Medical Information: _____

Name: _____ Social Security Number: _____
Date of Birth: _____ Important Medical Information: _____

Write down where your family spends the most time: work, school and other places you frequent. Schools, daycare providers, workplaces and apartment buildings should all have site-specific emergency plans that you and your family need to know about.

Work Location One
Address:
Phone Number:
Evacuation Location:

School Location One
Address:
Phone Number:
Evacuation Location:

Work Location Two
Address:
Phone Number:
Evacuation Location:

School Location Two
Address:
Phone Number:
Evacuation Location:

Work Location Three
Address:
Phone Number:
Evacuation Location:

School Location Three
Address:
Phone Number:
Evacuation Location:

Other place you frequent
Address:
Phone Number:
Evacuation Location:

Other place you frequent
Address:
Phone Number:
Evacuation Location:

Important Information	Name	Telephone Number	Policy Number
Doctor(s):			
Other:			
Pharmacist:			
Medical Insurance:			
Homeowners/Rental Insurance:			
Veterinarian/Kennel (for pets):			

Dial 911 for Emergencies

Appendix J: Household Pets and Service Animals (HPSA)—Reunification Considerations

Overview
Animal response issues, at their core, are people issues. As such, household pets and service animals cannot be considered independently of response issues/requirements associated with human populations. Animal response issues exist anytime a disaster affects a community. Whether planned for or not, they must be addressed by incident management during a response. Animal reunification is particularly problematic without both pre-planning and coordination among all known animal partners in a jurisdiction, and a clear strategy to manage the unknown or spontaneous animal responders.

Collaboration between reunification planners and organizations responsible for household pet and service animal support ensure that household pet sheltering and reunification plans are coordinated with general reunification plans. The intent of this appendix is to provide essential considerations as well as general information to assist emergency managers with planning for the execution of an effective, yet efficient, animal reunification process in response to a disaster situation.

- Approximately 60% of American households have at least one pet in their household.
- Losing a pet, even without the added stress of a disaster situation, can be traumatic for pet owners.
- Some pet owners will put themselves in harm's way to search for missing animals or retrieve animals left behind.
- Stray animals (which may be owned, but separated from their owners as a result of the disaster) may potentially jeopardize public health and safety, are at risk for illness or injury themselves during and after a disaster, and may create cascading effects within the incident.
- Reunifying service animals with their owners, should they become separated by the disaster, will be a priority.
- Reunifying animals in the aftermath of a disaster aids family recovery.

For these reasons, it is important to address household pet and service animal reunification as an integrated component of your overall reunification plan. The most effective method to reunite animals is to provide an efficient and coordinated animal reunification program. Accomplishing this goal requires the efficient, coordinated use of resources and efforts from across the whole community at the local, state, regional, and national levels and integrates planning for animal reunification into general reunification plans.

Stakeholders
Identifying agencies with a role in the reunification of animals and developing mechanisms for coordination among them and processes to ensure the care and sheltering of disaster animals is essential to successful reunification efforts. The scope of these efforts may be overwhelming unless organizations such as animal control, animal shelter(s), animal rescue groups (local, regional, and national), the local veterinary community, kennels/boarding facilities, and other animal-related businesses, county/state animal response teams, veterinary medical reserve corps, state veterinarian, state department of agriculture (or other state agency with responsibility for pets), law enforcement, emergency management, human sheltering, and disaster relief groups to

include those who have direct contact with potential owners of missing animals, those who will house animals at their locations during disasters (such as fairgrounds, convention center, etc.), and others, are able to plan in advance of a disaster and execute a coordinated response during the disaster.

Preparedness Checklist
The checklist below provides key planning points that will assist States in creating their statewide animal reunification plan.

Planning Considerations	Best Practices
☐ Who will be the lead agency responsible for the overall local animal response annex?	• Provide leadership and subject matter expertise on animal issues and legal issues related to reunification of animals. • Integrate/coordinate plans for reunification operations with larger reunification group.
☐ Where will the animals go that are rescued or turned in? Will the found animals go to only one location or several?	• Consolidate "found animal" information in one location to facilitate animal relocation. • Develop strategy to integrate unknown/ad hoc/spontaneous rescuers to prevent animals from being relocated out of jurisdiction before owners have a chance to claim them.
☐ How will intake be conducted? What will the intake process include? Will photographs be taken? Will the animals be scanned for microchips?	• All intake points (shelters, veterinary offices, etc.) should use the same intake and tracking system. • All animals should be checked for any identifying information (microchips, collars/tags, tattoos, etc.). • Intake process needs to address tracking, identification, and reunification of live animals, as well as management and cataloguing of deceased animals. • Microchip (or use other means of identification) to track animals receiving disaster services to facilitate reunification.
☐ How will animal reunification be integrated into overall family reunification plan? Where will the found animal data be stored? How will it be disseminated and made public? How will folks know where to look for their missing animals? Will outreach be done to include human sheltering locations and hospitals, agencies, and/or organizations involved in disaster relief, etc.?	• Integrate animal reunification into the overall reunification strategy. To the extent possible, provide "one stop shopping" for disaster survivors. • Consolidate "found animal" information in one location to facilitate animal reunification. • Use technology, if available, to facilitate lost/found animal database management. • Include animal lost/found information in public messaging about reunification.

		• Use traditional media, social media, and low-tech solutions (such as flyers, yard signs, and volunteers using word-of-mouth in disaster-affected areas). • Include local veterinarians and animal-related businesses in your messaging; they can help relay information to their clients. • Utilize available avenues, such as social workers, those in the field doing clean-up or providing meals to residents, etc., to pass out flyers or provide information about where to find lost pets to people receiving disaster services.
☐	What is the plan for retrieval of stray animals? How can someone report a lost animal?	• Provide a process for people who are missing animals to report them as lost. • Ensure coordination between animal search and rescue and animal reunification activities. • Use professional animal responders to retrieve lost animals (via trapping or other means) from unsafe areas. • Record GIS coordinates for location where animal is found.
☐	How will someone turn in/report a found animal?	• Provide effective public messaging to let people know how to report found animals. • Consolidate "found animal" information into a single database to provide, to the extent possible, "one stop shopping" for disaster survivors.
☐	Will pet owners be able to view found animals in the emergency shelter? Will there be a reclaim fee? What will be required as proof of ownership? How long will the animals be held for reclaim?	Reunification of animals following a disaster requires different policies than traditional shelter "return-to-owner" policies: • Hold periods for household pets and service animals should be extended well beyond standard jurisdictional stray hold periods and be well-publicized to protect the jurisdiction, safeguard the animals, and afford pet owners the opportunity to find and redeem their household pets. • Disaster survivors in the immediate aftermath of a disaster may not have readily available funds with which to pay reclamation fees, and may not have proof of ownership that would typically be required to return an animal in non-disaster times. • For more information, check out Emergency Animal Sheltering Best Practices at National Alliance of State

		Animal & Agricultural Emergency Programs (nasaaep.org).
□	What will be done if an animal is injured? (This should be for both when an owner is seeking assistance with an animal they have in their custody and for animals found as stray animals.)	• Animals will be injured or present with illnesses following a disaster. Include the animal control authority, state veterinarian, local veterinary community, veterinary medical reserve corps, and state or regional veterinary medical association in planning for medical management of animals in disaster. • Ensure that the veterinary component is integrated into the animal reunification plan so that ill or injured animals are reunited with their owners.
□	What if a pet owner wants to reclaim the animal but doesn't have anywhere to keep it?	Typically, the greatest need for animal "wrap-around services" occurs after the human shelters close and the disaster survivors cannot return home. Plans should facilitate animal owners reunifying with their animals as soon as possible after the disaster to foster family recovery. Wrap-around services may include: • "Pet-friendly" housing options • "Pet-friendly" hotels • Animal "day care" to enable people who can't leave their animals in hotel rooms, with relatives, etc. to have a safe and humane place to temporarily leave their pets • Emergency animal boarding (at no or reduced cost) • Animal foster care
□	What will be done with the animals that remain after the holding period expired?	• Plan for animal disposition early in the response process; options include holding adoption fairs in the affected jurisdiction or relocating animals to shelters/rescue groups in other jurisdictions for adoption. • Use mutual aid with neighboring animal shelters or engage NARSC members or other national humane groups to assist in placement of unclaimed or owner-relinquished animals. • The goal of your animal disposition plan should be live outcomes for as many animals as possible; euthanasia should be considered a last resort.

Pre-Disaster Messaging
Use media, public awareness campaigns, and community outreach to animal owners in advance of a disaster to educate them about the animal emergency management plan in their community and to urge them to:

- Have a disaster plan and "emergency kit" for their animals
- Have their animals microchipped (and keep the microchip contact information up-to-date), and have collars/tags on their animals
- Take their animals with them when they go; if it's not safe for them, it's not safe for their animals

Links to Animal Emergency Management Materials
National Alliance of State Animal and Agricultural Emergency Programs (NASAAEP)
National Animal Rescue & Sheltering Coalition (NARSC)
American Humane Association (AHA)
American Society for the Prevention of Cruelty to Animals (ASPCA)
American Veterinary Medical Association (AVMA)
American Veterinary Medical Foundation (AVMF)
Best Friends Animal Society
FEMA Ready.gov Caring for Animals
Code 3 Associates
International Fund for Animal Welfare (IFAW)
National Animal Care & Control Association (NACA)
PetSmart Charities
Red Rover
The Humane Society of the United States (HSUS)

Appendix K: Reunification Support Team

Purpose
The Reunification Support Team is assembled at the request of the affected jurisdiction to support organizations and agencies engaged in efforts to assess reunification needs, coordinate support, and share information to reduce the number of separated, missing, and unaccounted for adults and children.

These teams have not been typed with the National Incident Management System.

Team Members
The Reunification Support Team may be composed of representatives from organizations and agencies (local, State, Tribal, and/or Federal) engaged in reunification efforts.

Federal resources may be requested to support these teams when there has been a Presidentially-declared disaster. When Federal agencies support and/or participate on teams, it is important that there is State representation as well, ideally as the team lead, to ensure coordination of effort.

Team Mission
The mission of Reunification Support Teams will depend on the disaster. Each disaster may utilize the teams in a unique way to fit the needs of the disaster, ensuring a scalable and flexible nature.

Reunification Support Teams can be utilized to provide four basic functions: conducting community reunification needs assessment; facilitating access to reunification systems; assisting with physical reunification; and support for multi-agency information sharing in order to reduce the number of separated, missing, and unaccounted-for adults and children.

Time is a crucial factor for identifying and deploying teams in order to gather an early and accurate assessment of the situation. Although reunification is not a life-saving activity, providing reunification services to survivors as quickly as possible will provide them with peace of mind, which will allow them to focus on their recovery.

Team Activities
The Reunification Support Team may initially work with local authorities, and the MARTF if activated, to assess the scope of the reunification need and determine the resources required to support reunification efforts. Teams may be assigned to other activities as the operational needs change.

- **Community Reunification Needs Assessment**
  The team may conduct a community reunification needs assessment to determine the types of reunification assistance are required. The team communicates the status of the reunification operation to the appropriate EOC and/or the Multi-Agency Reunification Task Force (MARTF) for each operational period. Reports can include daily metric reports, updates to the needs assessment, unmet needs, and resource requests.

- **Access to Reunification Systems**
  The team may assess the ability of disaster survivors to access reunification systems and their typical communication channels using telecommunications and internet services. The team can facilitate access to communication networks by requesting required equipment, supplies, services, and personnel through the appropriate EOC or MARTF. The team also may provide access to online reunification systems and, when connectivity is not available, manually register disaster survivors in the system of record. A team may support system access at shelters, family assistance centers, evacuation sites, or other areas where a reunification need has been identified.

- **Physical Reunification**
  The team may identify and leverage resources for reuniting family members who are separated geographically including identifying missing children and reuniting unaccompanied minors with their parents/guardians and/or providing assistance to families who are safe and in communication but need assistance traveling to the same location.

- **Support for Reunification of Missing, Injured, and Deceased**
  The team may support the efforts of government officials cross-referencing reports of missing, injured, and deceased persons with information reported in reunification systems, evacuation tracking systems, registries, social media, and other information sources. This does NOT include notification to families of deceased disaster victims. The team may coordinate with health and social service systems (hospitals, nursing homes, assisted living, Departments of Aging, etc.) to encourage patients/clients to register in reunification systems and may support an Emergency Welfare Inquiry program.

Reunification Support Team Composition
- County/State Mass Care Coordinator designates the Team Leader
- Local/State Social Services/Human Service/Behavioral Health Agency
- Representatives from organizations engaged in reunification efforts, such as American Red Cross, NCMEC/Team Adam, 2-1-1
- Local/State Law Enforcement
- Medical Examiner's Office (participates only when disaster-related deaths are reported)
- Community Emergency Response Teams (CERT)
- Civic Associations
- FEMA staff, including subject matter experts on mass care and disabilities and access and functional needs
- U.S. Department of Health and Human Services
- Others as identified

Reports (To Be Determined by the Support Team Mission)
Examples:
- Barriers to reunification, such as communication limitations or access and functional needs challenges
- Identified data points, such as new reunification registration counts, reports of missing persons, and reunification matches
- Update needs assessments

- Unmet needs and resource requests

Appendix L: Reunification and Evacuation Tracking Systems

This appendix identifies some existing State and national systems that function as part of the reunification resource network.

National Center for Missing & Exploited Children (NCMEC)
The Post-Katrina Emergency Management Reform Act of 2006 (PKEMRA) Section 689b, codified as 6 U.S.C. §§ 774, designated NCMEC as the lead for facilitating the expeditious identification of children and reunification of families. NCMEC's resources may be provided at no cost to States during a Presidentially-declared disaster. For more information, visit http://www.missingkids.com/home.

- National Emergency Child Locator Center (NECLC)—NCMEC activates the NECLC to manage calls and a database relating to missing children for the event. Individuals reporting or searching for a child missing as a result of a disaster can call the NECLC at 1-866-908-9570 or 1-877-908-9570. NECLC is only activated at the request of a State to support Presidentially-declared disasters.
- Unaccompanied Minors Registry (UMR)—The UMR is an online database created to collect, store, report, and act on information related to children separated from their parent or legal guardian as a result of disaster. Reports to the UMR are received directly by the NCMEC's 24/7 call center staff. Individuals can log on to the Unaccompanied Minors Registry. The registry is available for utilization 24 hours a day, seven days a week. The UMR can be accessed at http://umr.missingkids.com.
- Team Adam—Comprising retired law enforcement professionals with years of investigative experience at the Federal, State, and local levels, Team Adam will provide rapid, onsite assistance to law enforcement agencies and families in reuniting unaccompanied minors with their parents or legal guardians.

American Red Cross
The Red Cross Safe and Well Linking program includes several components that support reunification activities.

- The American Red Cross Safe and Well website is a free communication tool where survivors can register and post messages to indicate that they are safe, and where their family, friends, and colleagues can conduct a search to view those posted messages. During large-scale disasters, the site is heavily promoted in the media and at local call centers. Safe and Well will also be set as the home page on computers at Red Cross congregate centers and shelters in host and evacuation areas. The website is available in English and Spanish and has also been configured for smart phones, including Blackberry, Apple, and Android devices. Safe and Well users can update statuses on Facebook and via Twitter. The site is always available and can be used by the public. Safe and Well can be accessed at http://www.redcross.org/safeandwell.
- Emergency Welfare Inquiries offer direct service for situations considered to be critical, such as seeking a family member with a serious, pre-existing disability or a health or mental health condition. In these cases, resources can be directed to locate the missing family member; these resources can either help the client establish direct communication with the inquirer or relay information back to the inquirer.

- Safe and Well Information Field Teams (SWIFT), utilized in large scale disasters, share the work of Emergency Welfare Inquiry searches and Safe and Well Website registration support.

National Emergency Family Registry and Locator System (NEFRLS)
Established in the aftermath of Hurricanes Katrina and Rita, NEFRLS is a nationally-accessible, web-based system that facilitates the reunification of families separated or displaced by a disaster. It allows adults who have been displaced from their homes or pre-incident locations to voluntarily register and share specific information on their post-disaster well-being or location with designated family members. Family members and friends may search the database for a record created by a displaced individual. NEFRLS is activated when requested by a State following a Presidentially-declared disaster or mass evacuation event and operates on a 24/7 basis. It is accessible via 1-800-588-9822 or at www.disasterassistance.gov.

Lost Person Finder (LPF)
The LPF Project focuses on tools and technologies to enable family, friends, and neighbors to locate missing people during a disaster event. The National Library of Medicine (NLM) initially created this web-based people finder software for finding people who were in hospitals after a disaster. After the Haiti earthquake, it was modified to allow public access for community-wide disasters.

- PEOPLE LOCATOR® and ReUnite®—ReUnite is a free iOS/Android app that assists users reunifying families after disasters and can be used by the public to search and report missing or found persons including a field for their health status. Information gathered through this app is uploaded to the PEOPLE LOCATOR website https://pl.nlm.nih.gov, which features search and report as well including an option for interactive notification information scrolling. ReUnite can be downloaded at https://lpf.nlm.nih.gov/.
- TriageTrak and TriagePic®—Healthcare services providers can use this website (TriageTrak) running on their own infrastructure and free reporting tool (TriagePic) to better respond to inquiries for missing persons after large scale casualty events. Report and search is flexible via Android and iOS apps and, in the enterprise, via a Windows 7 application. Service providers and their partners can help provide faster and more accurate reassurance, and thus facilitate family reunification and enhance coordination with other disaster-responding non-governmental organizations and alleviate some of the workload on public health personnel and other responders who interact with the public. See links at https://lpf.nlm.nih.gov/.

Google Crisis Response
Person Finder and Crisis Map are Google's primary tools that support reunification. Google Person Finder allows individuals to post and search for the status of relatives or friends affected by a disaster. The program also lets press agencies, NGOs, and others contribute to the Post-Disaster Missing Persons Process database and receive updates by using the Person Finder application programming interface (API) based on the Person Finder Interchange Format (PFIF) open standard. Google Crisis Map provides a map for a specific incident that can show the location of and capacity at shelters open for a disaster. Both products can be embedded in websites, and information can be downloaded and shared. For more information, visit https://www.google.org/crisisresponse/resources.html.

Facebook Safety Check

Facebook launched its Safety Check feature in 2014 that helps users alert friends and family that they are safe during major disasters. Facebook will send notifications to users in an affected area that asks if they are safe. Users can click the "I'm Safe" button to notify family and friends of their status. The tool does not interface with anyone other than users' own networks of family and friends. https://www.facebook.com/about/safetycheck/

National Mass Evacuation Tracking System (NMETS)

NMETS, developed by FEMA and composed of both manual and computer-based systems, is designed to assist States track the movement of transportation-assisted evacuees, their household pets, luggage, medical equipment, and other personal items during evacuations. The software and basic training are free to States. For more information, visit https://www.fema.gov/individual-assistance-program-tools/individual-assistance-national-mass-evacuation-tracking-system.

U.S. Department of Health and Human Services (HHS) Joint Patient Assessment and Tracking System (JPATS)

JPATS is the Federal system used to track patients that are moved by the Federal Government at the request of another agency, State, or local authority. This web-based application tracks patient movement through their continuum of care, noting the time of each movement and the location of the individual at all times. JPATS allows its users to see enough personal information about the patients to properly identify them. It also captures the patient's health status to assist in transport and to allow receiving facilities to know what is coming their way. All information is protected by the Privacy Act. This tool is provided by HHS at no cost to the States. For more information, visit https://teams2.hhs.gov/PETSDev/protected/home.do.

Rapid Family Tracing and Reunification (FTR)

Rapid FTR is an open source mobile phone app and data storage system that helps humanitarian workers expedite the process of collecting, sorting, and sharing information about unaccompanied minors and separated children in disaster situations. Registered children can receive childcare services and, hopefully, be reunited with their families through this data system. It was first developed by the Child Protection in Emergencies Team at the United Nations Children's Fund (UNICEF). This was the primary system used after the Haiti earthquake. For more information, visit http://www.rapidftr.com/.

Salvation Army Team Emergency Radio Network

Hosted by the Salvation Army, the Team Emergency Radio Network is a network of Salvation Army volunteers and other amateur radio operator groups that help provide emergency communication when more traditional networks, such as telephones, are not operating. The Salvation Army Team Emergency Radio Network relays critical information regarding the disaster, as well as welfare inquiries. Families can submit an inquiry about a survivor at https://disaster.salvationarmyusa.org/.

U.S. Department of Justice (DOJ) National Missing and Unidentified Persons System (NamUs)

NamUs is a national, centralized repository and resources center for missing persons and unidentified decedent records. NamUs is a free online resource that can be searched by coroners, medical examiners, law enforcement officials, and the general public from all over the country in hopes of resolving these cases. This system consists of three components: the Missing Persons Database, the Unidentified Persons Database, and the Unclaimed Persons Database. For more information, visit http://www.namus.gov/. The website is available in English and Spanish.

FBI National Crime Information Center (NCIC)

The NCIC system is an electronic clearinghouse of crime data that can be tapped from virtually every criminal justice agency nationwide. In operation since 1967, NCIC helps criminal justice professionals apprehend fugitives, locate missing persons, recover stolen property, and identify terrorists. This system is divided into 21 files, including a file for missing persons, a national sex offender registry, and an unidentified person's file. For more information, visit http://www.fbi.gov/about-us/cjis/ncic.

Local and State Reunification and Tracking Systems

Some local and State jurisdictions have developed or adapted reunification systems and evacuation tracking systems into their disaster plans. These systems are designed to (1) provide support for family reunification, missing persons cases, patient reunification, and fatality management, and/or (2) to register and track persons who use government-provided transportation to evacuate from and return to an area that has been or is anticipated to be impacted by a disaster. Several examples of local and State systems are included below.

    a. Unidentified Victim Identification System (UVIS)—New York City's UVIS is a comprehensive disaster management system that manages and coordinates all of the activities related to missing persons reporting and victim identification. In concert with New York City's 3-1-1 Call Center, the City of New York Office of Chief Medical Examiner, the New York Police Department, and other agencies throughout the city, UVIS enables a centralized communications and data collection system to support these processes. This coordinated system is essential to developing an accurate manifest of potential victims following a disaster—a critical first step in victim identification.

    b. 2-1-1 VIRGINIA Patient Locator System—In 2010, 2-1-1 VIRGINIA became the call center for the Virginia Hospital and Healthcare Association's Patient Locator and Family Reunification Centers. In a mass casualty event, 2-1-1 VIRGINIA can provide real-time information on the hospital location of victims to family and friends via a system that connects 2-1-1 with Virginia EMS and hospitals.

    c. American Red Cross Patient Connection—Greater Chicago-area program that reunites hospitalized disaster victims with family and friends during emergencies, offering one central hotline where families can obtain information. Patient Connection can be accessed at http://www.redcross.org/il/chicago/disaster-services/patient-connection.

    d. Phoenix Tracking System—Phoenix tracking system, utilized by the State of Louisiana, uses coded arm bands to track people during disaster evacuations. People arriving at public pickup points and evacuation centers are given armbands and their information is input into an Internet-connected computer system. As evacuees are loaded onto buses or other accessible transportation and evacuated, their locations are tracked and updated as they are relocated and moved. The system also tracks pets and durable medical

equipment that evacuees bring with them. Phoenix can be used to support reunification by allowing the State to search for information on individuals and heads of households and link them with family members.

e. Radiant RFID—The Texas Department of Public Safety has an agreement with Radiant RFID (also known as Evacuation Tracking Network [ETN]) to use their system to track evacuees during a disaster. Evacuees meet at locations known as embarkation centers. Upon arrival, each adult and child is issued a wristband, and pets have tags attached to their collars. Both the pet and child bands are linked to their legal guardians in the database. Buses are equipped with global positioning system (GPS) locators to track the whereabouts of the vehicles and the individuals inside them. As the evacuees disembark the buses, their needs are assessed and a final location destination is determined. Each individual's information is retrieved using a handheld scanner used to scan the wristbands of each individual.[12]

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[12] "RFID-based System Tracked Victims of Hurricanes Gustav, Ike," *RFID Journal.*
http://www.rfidjournal.com/article/view/4443/2.

Appendix M: Privacy Laws - Planning Considerations

Reunification includes the exchange of personal information between disaster survivors and family and friends looking for them. It also will involve the collection of personal information by governments and multiple organizations supporting the disaster and requests to them for information about the status of disaster survivors.

Privacy is a concern for all of these organizations because they may be required to comply with privacy laws that only occasionally include specific provisions accommodating information needs in emergency circumstances.[13] As States develop reunification plans, it is essential to consider the implications of privacy laws in the context of disaster generally, and reunification specifically, at the beginning of the planning process in order to avoid the many issues that can arise during reunification operations.

This appendix provides several guiding questions that agencies/organizations can use to proactively address reunification privacy considerations.

Planning Considerations
- What privacy laws and/or policies apply to your organization?
  - The answers will be different for Federal agencies, state agencies, non-profits, commercial companies, and international organizations.
  - In some cases, the answer will be none. However, organizations that do not know what privacy laws and policies apply will not know how to address privacy obligations.
- Are there relevant privacy laws covering health records, school records, children's records, government agency records, telecommunications records, social service records, or "sensitive" information?
- Do applicable privacy laws/policies restrict the sharing of Personally Identifiable Information with individuals, with other organizations, or across national borders?
- Are there any categories of disclosures that require the consent of the data subject?
  - How do privacy laws impact the use of photographic images for identification/reunification purposes, when consent is not available, and/or with regard to minors?
  - What fields of information can be shared with the public about a missing or displaced person that does not infringe on privacy laws, when the person is incapacitated or a minor, to help identify/reunify him/her?
- Do privacy laws loosen restrictions in the event of a declared emergency and, if so, what are the triggering conditions?
- If there is to be any type of central database or data sharing mechanism between organizations, where will it be located and what are the privacy rules that apply to it?

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[13] Reidenberg, Joel R., Gellman, Robert, Debelak, Jamela, Elewa, Adam, and Liu, Nancy. *Privacy and Missing Persons After Natural Disasters.* Washington, DC and New York, NY: Center on Law and Information Policy at Fordham Law School and Woodrow Wilson International Center for Scholars (2013).

Appendix N: Acronyms and Glossary of Terms

Ad hoc: Spontaneous or unaffiliated.

Antemortem: Preceding death.

Catastrophic: Any natural or manmade incident, including terrorism, that results in extraordinary levels of mass casualties, damage, or disruption severely affecting the population, infrastructure, environment, economy, national morale, and/or government functions. National Disaster Recovery Framework (NDRF), September 2011, page 79.

Congregate Shelter: Generally provided in large open settings that provide little to no privacy in facilities that normally serve other purposes such as schools, churches, community centers, and armories.

Displaced Adult: An individual 21 years of age or older who is displaced from the habitual residence of that individual as a result of a declared event. Robert T. Stafford Relief and Emergency Assistance Act as Amended, and Related Authorities, April 2013 (Stafford Act)

Displaced Child: An individual under 21 years of age who is displaced from the habitual residence of that individual as a result of a declared event. (Stafford Act)

Distribution of Emergency Supplies: Provide emergency supplies and/or the resources to distribute them.

Durable Medical Equipment (DME): Medical equipment (e.g., walkers, canes, wheelchairs, etc. used by persons with a disability to maintain their pre-disaster level of independence.

Emergency: Any incident, whether natural and/or technological/human caused disaster that requires responsive action to protect life or property. Under the Robert T. Stafford Disaster Relief and Emergency Assistance Act, an emergency means any occasion or instance for which, in the determination of the President, Federal assistance is needed to supplement State and local efforts and capabilities to save lives and to protect property and public health and safety, or to lessen or avert the threat of a catastrophe in any part of the United States. Source: *National Response Framework.*

Emergency Support Function (ESF) #6: The ESF #6 Annex of the National Response Framework (NRF) describes how the Federal government coordinates Mass Care, Emergency Assistance, Temporary Housing, and Human Services.

Emergency Support Function (ESF) #8: The ESF #8 Annex to the NRF describes how the Federal government coordinates Public Health and Medical Services, including mental health services and fatality management.

Emergency Support Function (ESF) #11: The ESF #11 Annex to the NRF describes how the Federal government provides nutrition assistance; responds to animal and agricultural health issues; provides technical expertise, coordination, and support of animal and agricultural

emergency management; ensures the safety and defense of the Nation's supply of meat, poultry, and processed egg products; and ensures the protection of natural and cultural resources and historic properties.

Essential Services: The delivery of infrastructure and additional services to address disaster-related needs of affected residents living in temporary housing sites.

Family Assistance Center (FAC): A facility where individual assistance services, including reunification services, are offered or that is exclusively utilized for fatality management activities.

Feeding: The provision of food, snacks, and hydration to the affected population and emergency workers either from fixed sites or through mobile routes.

Host State: A State, Territory, Commonwealth, or Tribe that, by agreement with an impact-State or the Federal Emergency Management Agency (FEMA), provides evacuation and sheltering support to individuals from another State that has received a Presidential emergency or major disaster declaration.

Household Pet: A domesticated animal, such as a dog, cat, bird, rabbit, rodent, or turtle that is traditionally kept in the home for pleasure rather than commercial purposes, can travel in commercial carriers, and be housed in temporary facilities. Household pets do not include reptiles (except turtles), amphibians, fish, insects/arachnids, farm animals (including horses), and animals kept for racing purposes. *Source DAP 9523.19.*

Incident: An occurrence or event, natural or human caused that requires a response to protect life or property. Incidents can, for example, include major disasters, emergencies, terrorist attacks, terrorist threats, civil unrest, wild land and urban fires, floods, hazardous materials spills, nuclear accidents, aircraft accidents, earthquakes, hurricanes, tornadoes, tropical storms, tsunamis, war-related disasters, public health and medical emergencies, and other occurrences requiring an emergency response. Source: *National Response Framework.*

Major Disaster: Under the Robert T. Stafford Disaster Relief and Emergency Assistance Act, any natural catastrophe (including any hurricane, tornado, storm, high water, wind-driven water, tidal wave, tsunami, earthquake, volcanic eruption, landslide, mudslide, snowstorm, or drought) or, regardless of cause, any fire, flood, or explosion in any part of the United States that, in the determination of the President, causes damage of sufficient severity and magnitude to warrant major disaster assistance under the Stafford Act to supplement the efforts and available resources of States, local governments, and disaster relief organizations in alleviating the damage, loss, hardship, or suffering caused thereby. Source: *National Response Framework, May 2013.*

Mass Care Activities: Mass Care activities include Sheltering, Feeding, Distribution of Emergency Supplies, and Reunification as defined under the Mass Care Function of Emergency Support Function (ESF) #6 of the NRF. Red Cross is Co-lead with FEMA for these four activities.

Mass Care/Emergency Assistance: The Mass Care/Emergency Assistance activities include the seven activities that fall within the MC/EA Branch: Sheltering, Feeding, Distribution of

Emergency Supplies, Reunification, Mass Evacuation [Support], Disabilities and Other Access and Functional Needs Support, and Household Pets and Service Animals Support. Also, included in the Annex definition is: Nonconventional/Transitional Sheltering.

Mass Care Services: Mass Care Services is the Core Capability that includes the four functions of ESF #6: Mass Care, Emergency Assistance, Temporary Housing, and Human Services.

Missing Person/Child: A non-disaster specific term routinely used in most communities that refers to an individual over 18 years of age (adult) or less than 18 years of age (child) who has been legally reported as missing by relatives/friends and filed with law enforcement agencies.

National Center for Missing & Exploited Children (NCMEC): NCMEC serves as the nation's clearinghouse on issues related to missing and sexually exploited children. NCMEC was designated in the Post-Katrina Emergency Management Reform Act of 2006 (PKEMRA) as the national organization responsible for supporting the reunification of unaccompanied minors with parents/legal guardians with resources including the National Emergency Child Locator Center, Team Adam, and the Unaccompanied Minors Registry (UMR).

National Emergency Child Locator Center (NECLC): A dedicated call center managed by the NCMEC that can be activated at the request of a disaster-impacted State to intake child-related reunification calls, alleviate call load from impacted State emergency communication systems and coordinate tips and leads with on-the-ground reunification efforts.

National Incident Management System (NIMS): A comprehensive, national approach to incident management that provides the template for incident management, regardless of cause, size, location, or complexity and is applicable at all jurisdictional levels and across functional disciplines.

National Response Framework (NRF): The second edition of the NRF, updated in May 2013, provides context for how the whole community works together and how response efforts relate to other parts of national preparedness. The NRF reinforces a comprehensive, national, all-hazards approach to domestic incidents. It guides local, State, and Federal entities, enabling partners to prepare for and respond under a unified command structure.

Nongovernmental Organization (NGO): An entity with an association that is based on interests of its members, individuals, or institutions. It is not created by a government, but it may work cooperatively with government. Such organizations serve a public purpose, not a private benefit. Examples of NGOs include faith-based charity organizations and the American Red Cross. NGOs, including voluntary and faith-based groups, provide relief services to sustain life, reduce physical and emotional distress, and promote the recovery of disaster survivors. Often these groups provide services that help individuals with disabilities. NGOs and voluntary organizations play a major role in assisting emergency managers before, during, and after an emergency. Source adapted from the *National Response Framework*.

People with Disabilities and Other Access and Functional Needs Support: Access and functional needs support services are services that enable people to maintain independence in a general population shelter. These services include reasonable modifications to policies,

practices, and procedures, durable medical equipment (DME), consumable medical supplies (CMS), personal assistance services (PAS), and other goods and services as needed. Children and adults requiring these services may have physical, sensory, mental health, cognitive, and/or intellectual disabilities affecting their ability to function independently without assistance. Others who may benefit from these services include women in late stages of pregnancy, older adults, and those needing bariatric equipment.

Personal Assistance Services: Activities of daily life that allow individuals to maintain their independence while staying in a general population shelter.

Postmortem: Done, occurring, or collected after death.

Private Sector: Organizations and entities that are not part of any governmental structure. The private sector includes for-profit and not-for-profit organizations, formal and informal structures, commerce, and industry. Source: *National Response Framework.*

Public Assistance: The mission of the Public Assistance Program is to assist communities in recovering from the devastating effects of disasters by providing technical assistance and financial grants in an efficient, effective, consistent, and customer-friendly manner.

Reunification Services: Services that provide mechanisms to help displaced disaster survivors, including children, reestablish contact with family and friends.

Safe and Well: An American Red Cross online application that allows people affected by a disaster to list themselves as "safe and well." Family members can also view the messages left by their loved ones who have self-registered on the site.

Service Animal: Any dog that is individually trained to do work or perform tasks for the benefit of an individual with a disability. (28 CFR § 34.104)

Shelter-in-Place: Individuals required to shelter in place, either in private dwellings, offices, shopping malls, or other sites that provide an isolated setting for either the individual's safety or for the safety of others.

Sheltering: Housing that provides short-term refuge and life-sustaining services to disaster victims who have been displaced from their homes and are unable to meet their own immediate post-disaster housing needs.

Team Adam: A NCMEC program of specially trained retired law enforcement professionals from Federal, State and local levels who serve as NCMEC consultants. Team Adam deploys as a rapid, on-site response and support system, providing technical assistance to law enforcement agencies and families in serious cases of missing children and support to emergency management agencies in the event that children become separated from their families due to disaster.

Unaccompanied Minor: A child who has been separated from both parents, legal guardians, and other relatives and is not being cared for by an adult who, by law or custom, is responsible for doing so.

Unaccompanied Minors Registry (UMR): UMR is an online data collection tool focused on collecting basic information of children who have been separated from their families as a result of a disaster.

Whole Community: Whole community includes: individuals, families, households, communities, the private and nonprofit sectors, faith-based organizations, and local, State, Tribal, territorial, and Federal governments. Whole community is defined in the National Preparedness Goal as "a focus on enabling the participation in national preparedness activities of a wider range of players from the private and nonprofit sectors, including nongovernmental organizations and the general public, in conjunction with the participation of Federal, State, and local governmental partners in order to foster better coordination and working relationships."