



#6 MASS CARE & HUMAN SERVICES

State Emergency Support Function Annex

Hawai'i Emergency Management Agency

March 2022

STATE OF HAWAI'I
EMERGENCY
OPERATIONS PLAN



SESF #6 TASKED AGENCIES

State ESF Primary Agencies:

- Hawai`i Emergency Management Agency (HI-EMA)
- Hawaii Department of Human Services (DHS)

State Support Agencies:

- *Department of Accounting and General Services (DAGS)*: Aloha Stadium Authority, State Procurement Office
- *Department of Agriculture (HDOA)*
- *Attorney General (AG)*
- *Department of Business Economic Development & Tourism (DBEDT)*: Hawaii Tourism Authority (HTA)
- *Department of Commerce & Consumer Affairs (DCCA)*: Public Utilities Commission (PUC), Professional & Vocational Licensing (PVL), Insurance Division
- *Department of Education (DOE)*: Hawaii State Public Library System, School Food Services
- *Department of Hawaiian Homelands (DHHL)*
- *Department of Health (DOH)*: Disability & Communications Access Board (DCAB), Executive Office on Aging (EOA), Office of Language Access (OLA), Sanitation Branch
- *Department of Human Resources Development (DHRD)*
- *Department of Human Services (DHS)*: Hawaii Public Housing Authority (HPHA), Benefit, Employment, & Support Services, MedQuest, Council on Homeless, Social Services, Youth Services
- *Department of Labor and Industrial Relations (DLIR)*: Disability Compensation Division, Office of Community Services, Unemployment Insurance
- *Department of Public Safety (PSD)*: Crime Victim Compensation Commission (CVCC)
- *University of Hawaii System; Community Colleges*
- *Office of the Ombudsman*

State Non-Profit and Private Sector Support Agencies:

- Chamber of Commerce
- Hawaii Association of Independent Schools (HAIS)
- Hawaii Food Industry Association (HFIA)
- Hawaii Restaurant Association
- Hawaii Veterinary Medical Association (HVMA)
- Hawaii Voluntary Organizations Active in Disaster (HVOAD)
- Retail Merchants of Hawaii



RECORD OF CHANGES

The SESF #6 is responsible for the #6 Mass Care & Human Services State Emergency Support Function Annex and is authorized to make changes in coordination with the HI-EMA Operations Branch. All updates to the #6 Mass Care & Human Services State Emergency Support Function Annex will be tracked and recorded in the following table to ensure the most recent version is disseminated and implemented. This annex will be reviewed on a biennial basis and after every incident where SESF #6 was activated.

| Change Number | Date of Change | Section Changed | Summary of Change |
|---------------|----------------|-----------------|-------------------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |
| 6 | | | |
| 7 | | | |

Luke Meyers
HI-EMA Administrator

Date Apr 11, 2022

David Lopez
HI-EMA Executive Officer

Date Apr 11, 2022

Joseph Campos II
SESF #6 Mass Care EMO

Date Apr 8, 2022



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1. INTRODUCTION

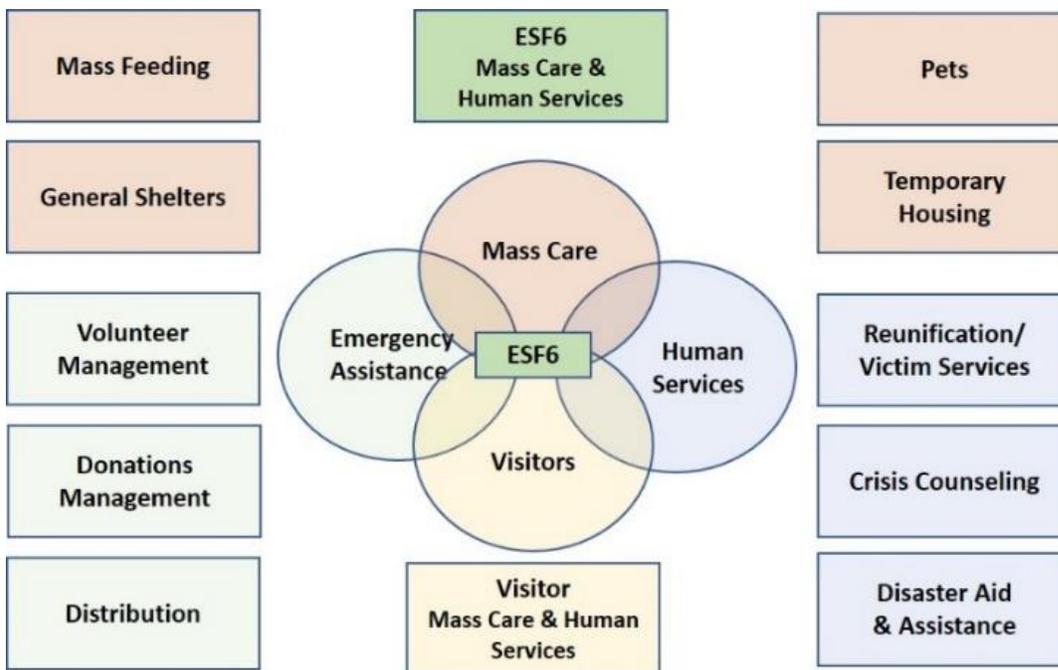
1.1 PURPOSE

1. The #6 Mass Care & Human Services Annex (Annex) provides information concerning mass care and human services support during disaster events when response and recovery needs exceed local capabilities in support of state emergency operations.
2. This Annex supports coordination between state entities, NGOs, voluntary organizations, and private sector partners (Partners) in the area of mass care and sheltering after a disaster.
3. The Annex identifies lines of coordination and areas of responsibility by key State and local agencies as well as the operations expectations.

1.2 SCOPE

1. The Annex will assist in the coordinated delivery of State and Federal program resources to assist individuals, households, and families impacted by disasters or emergencies.
2. When mass care, emergency assistance, or human services are provided in response to a disaster and the need for these has exceeded local capabilities and resources, Counties may request support from the State to meet their needs through the WebEOC request for assistance (RFA) and request for information (RFI) process. Activities include:
 - a. Serving as the focal point for essential communications, issues and policy decisions

Figure 1. Hawaii Mass Care & Human Services





relating to mass care in all state level response and recovery efforts.

- b. Assessing and reporting on food and water supplies availability, and sheltering capacity to include status, facility damages, and estimated impacts.
 - c. Facilitating coordination among the state, impacted counties, and voluntary organizations to help establish priorities for response and recovery.
 - d. Coordinating with state and county partners, voluntary organizations, and private industry to collect data and information to assess and analyze community needs and status for use in decision making related to allocation and distribution of food, water, sheltering, and mass care services.
3. This Annex applies to all hazards that impact the state of Hawai`i.



2. SITUATION AND ASSUMPTIONS

2.1 SITUATION OVERVIEW

1. Disasters or emergencies that require activation of this SESF are affected by a number of factors which may include evacuation displacement of individuals, families, and pets, as well as access and functional needs populations. This can include tourists, students, and foreign visitors. The loss of real and essential personal property or economic hardships caused by a disaster or emergency may also trigger the need to activate response and support missions

2.2 ASSUMPTIONS

1. In Hawaii planning assumptions are coordinated with State agencies and organizations in which information is accepted by planners as being true, in the absence of facts, in order to provide a planning framework. The data and assumptions below are unique to Hawaii and strengthen the import of SESF #6 Mass Care and Human Services preparedness and response. The [Hawaii Emergency Operations Plan](#)¹ contains additional planning assumptions which are applicable across all annexes.
2. The SESF #6 planning assumptions below are expanded upon with Hawaii statistics in *Attachment 1. Planning Data*.
 - a. The geographic isolation of the Hawaiian Islands at 2,500 miles to the nearest major maritime ports and airports creates a complex time-distance relationship for resource coordination between the island and Contiguous United States (CONUS). Transit time by ocean from CONUS West Coast requires five to eight days by commercial cargo vessel and at least five hours by commercial flight.
 - b. Food supplies in the state will be depleted within seven days of port closure, five days after no imports (40% of market capacity). After a major disaster, it will be hand to mouth resupply of food and water for 30 days with severe shortages until the port reopens.
 - c. At least 11% and potentially up to 35% of residents may require emergency shelter, feeding, and basic sanitary facilities following a disaster.
 - d. The state is not a shelter provider. The state coordinates sheltering resources with counties and partner agencies when requested by local jurisdictions.
 - e. Pet and service animal friendly shelters will be needed.
 - f. Hawaii's 2018 ALICE² population estimate is at least 33% (467,000) of the state's 1.4 million people with over 9% (150,000) in poverty. For these people individual and family preparedness actions such as stockpiling 14 days of food and supplies is an impossibility.
 - g. Seniors 65+ made up 19% (275,000) of Hawaii's residents in 2020. Of these, 153,000 (11%) have one or more underlying medical conditions to include access and functional needs disabilities.

¹ <https://dod.hawaii.gov/hiema/files/2020/02/Hawaii-State-EOP-Fall-2019-Published.pdf>

² ALICE (Asset Limited, Income Constrained, Employed). ALICE workers are teachers, health care workers, and members of the service industry but do not earn enough to support their own families. <https://www.unitedforalice.org/hawaii> (2019).



- h. Most individuals with access and functional needs, including individuals with disabilities, can be supported in a general population shelter environment with the use of durable medical equipment (DME), assistive technology (AT), or personal assistance services (PAS), some of which may need dedicated power and water.
- i. The total number of people experiencing homelessness (sheltered and unsheltered) statewide in 2020 was 6,458 with 1,590 (24%) of them chronically homeless adults.³ They will need special care.
- j. Over 25% (350,000) of Hawaii's residents speak a language other than English at home, higher than the U.S. average of 21%. Meeting language access needs including non-written for residents is essential in the 25 languages other than English as primary spoken languages in Hawaii. These are Ilocano, Tagalog, and Japanese are the top three followed by Korean, Vietnamese, Chinese, Spanish, Hawaiian, Samoan, Cantonese, Marshallese, Mandarin, German, French, Micronesian: Chuukese, Pohnpeian, Yapese, Palauan, Tongan, Bisayan, Laotian, Thai, Portuguese, Hawaiian Pidgin, Russian, Indonesian, and Chamorro.
- k. Daily there are at least 217,000 visitors in who increase the state by 15% in the state, with an average of 30,000 daily arrivals. Visitors are particularly vulnerable during emergencies or disasters as they will lack supplies to self-sustain or shelter, be unfamiliar with local hazards and plans, and may have significant language barriers to understand safety directives.
- l. Family reunification activities may be necessary should family members become separated or should unaccompanied minors arrive at shelters or other service sites.
- m. Disruption caused by debris, damage, or relocation of residents may cause disruption in postal activities or commerce, create financial hardship, and limit accessibility of communication systems. Disruption to internet, broadband, and cell services should be expected and may last hours to weeks.

³ <http://hhdw.org/2020-homeless-point-in-time-count/>



3. ROLES AND RESPONSIBILITIES

1. The following section outlines the roles and responsibilities assigned to state agencies and community partners to ensure SESF #6 activities are completed.
2. This document does not relieve tasked agencies of the responsibility for emergency planning as agency plans should adequately provide for the capability to implement the actions identified below.

3.1 GENERAL DUTIES OF ALL SESF #6 AGENCIES

1. Each member agency is responsible to develop and maintain their own internal operational plans which specify how they will carry out their requisite tasks and duties required to meet their obligations under this plan. The capabilities of and responsibilities under which each SESF #6 agency falls are listed in *Attachment 2. State Operations Priorities & Core Capabilities*.

3.2 SESF PRIMARY AGENCIES

1. Primary Agencies, as defined by the *HI-EOP* have significant authorities, roles, resources, or capabilities for functional areas SESF #6 oversees. *Attachment 2. State Operations Priorities & Core Capabilities* identifies agency and organizations which have the capabilities in key preparedness and response operations areas. The **Hawai`i Emergency Management Agency (HI-EMA)** and the **Department of Human Services (DHS)** are the Primary SESF #6 agencies. Their mission and charge is to build the self-sufficiency and support the well-being of individuals, families, and communities in Hawaii.

BEFORE AN INCIDENT

1. Coordinate SESF #6 preparedness activities, including convening planning meetings and ensuring SESF #6 participation in applicable trainings and exercises.
2. Lead the development, review, and refinement of SESF #6 plans, procedural guides, Continuity of Operations Plan (COOP), job aids and/or other written resources to document operational processes and procedures.
3. Participate in state level emergency management planning initiatives on behalf of SESF #6 as requested by HI-EMA.

DURING AN INCIDENT

1. Notify Support Agencies when SESF #6 is activated by the SEOC.
2. Provide a representative(s) to the SEOC during activation hours.
3. Prioritize requests for SESF #6 assistance or information using incident objectives and work with Support Agencies to identify and direct recommended/required resources or capabilities.
4. Provide SESF #6 information to *SESF #5 Information and Planning* to include Situation Reports, inputs to incident action planning, and other planning products as requested.



5. Provide updates to the SEOC on the status of SESF #6 mission assignments. Notify the SEOC Operations Section if SESF #6 is unable to fulfill assigned missions or tasks.
6. Maintain and provide regular updates to the SESF #12 Energy Status Boards during an incident.

AFTER AN INCIDENT

1. Coordinate with SESF #6 partners and the SEOC to finalize and close out any remaining requests for assistance or information.
2. Perform all demobilization, incident record keeping, and after actions activities as instructed by HI-EMA.

3.3 SUPPORT AGENCIES

1. Support Agencies, as defined by the *HI-EOP*, have specific capabilities, expertise, or resources that can the assist Primary Agencies in executing missions assigned to SESF #6 by the SEOC. *Attachment 2. State Operations Priorities & Core Capabilities* identifies agency and organizations which have the capabilities in key preparedness and response operations areas.
2. The primary support agencies are:
 - a. The **Salvation Army** (TSA) is the primary agency for feeding operations.
 - b. The **American Red Cross** (ARC) is the primary agency for temporary shelter operations.
 - c. The **Hawaii Voluntary Organizations in Disaster** (HVOAD) are the primary organizations that deliver mass care services to communities affected by disaster including feeding and sheltering.



4. CONCEPT OF OPERATIONS

4.1 GENERAL

1. Mass care and human services support is provided to minimize the immediate, disaster-caused suffering of members of the community and visitors. Disaster mass care and human services support starts at the local level. When county capabilities are exceeded, state-level mass care and human services support operations are established. The type and level of services provided in advance of, during, and after disaster depend on the nature, location, and complexity of the disaster. Wherever possible, these services will build upon established service networks such as local homeless shelter providers, elder meal delivery services, community centers, and other social service programs serving the impacted area.

4.2 KEY ACTIONS

4.2.1 PLANNING, PREPAREDNESS, & MITIGATION

4.2.1.1 PLANNING AND PREPAREDNESS

1. The planning process identifies and sets a shared path for mass care and human services response efforts. Planning is an iterative process where statistics, capabilities, gaps, and lessons from past event response, and trainings and exercises inform needed changes for improvement. Agencies and partners work together in the preparedness phase to ensure readiness to implement effective and efficient response and recovery activities within the scope of SESF #6. State and local agencies develop, review, and refine plans, functional annexes, and Standard Operating Guidelines (SOGs) that address specific operational processes and procedures. The practices that follow are components of planning that lead to preparedness for SESF #6.

4.2.1.2 RISK ASSESSMENT & CAPABILITY ASSESSMENT

1. Hawaii completes an annual Threat Hazard Identification Risk Assessment (THIRA). The THIRA process involves identifying scenarios that will most stress the State's capabilities and assessing those capabilities. The *Hawaii 2021 THIRA and Stakeholder Preparedness Review* outlines the following capabilities, to include mass care, which the State expects to meet.

4.2.1.3 TRAINING & EXERCISES

1. HI-EMA sponsors and conducts trainings to improve knowledge and response capability by its partners. HI-EMA with DHS coordinates joint planning, training, and exercise efforts with SESF #6 to ensure their collective readiness to perform SESF duties. SESF #6 agencies should ensure adequate training for personnel who will support SESF #6 during a disaster.



4.2.1.4 STOCKPILES, SUPPLIES, AND SPECIALIZED SKILLS & EQUIPMENT

1. In order for stockpiles, supplies, or specialized equipment to be assigned to an SESF #6 mission, request for assistance needs to be entered into HI-EMA WebEOC for action by SESF #7. The mission is dependent on approval from HI-EMA. SESF #6 agencies are expected to document their basic stockpiles, supplies, resources, skill sets, and/or specialized equipment that directly support SESF #6 response operations.

4.2.1.5 PUBLIC AWARENESS MESSAGING

1. SESF #6 agencies are encouraged to prepare pre-scripted messages, preferably unified, to expedite mass care and human services information dissemination by SESF #15 in advance of and immediately after disaster to Hawaii’s residents and visitors.

4.2.1.6 MEMORANDUMS OF AGREEMENT/ UNDERSTANDING (MOAS/MOUS)

1. Coordinate with key partners and document agreements in advance of disaster events to ensure that all parties can better manage expectations and work cooperatively. Memorandums of Understanding (MOUs) outline intended, mutually agreed upon actions. Memoranda of Agreement (MOAs) establish a legal agreement for a course of action.

4.2.2 OPERATIONS

4.2.2.1 GENERAL DUTIES OF ALL SESF #6 AGENCIES

1. All agencies assigned to SESF #6 are responsible for the following in addition to the agency-specific duties outlined in *Attachment A. State Operations Priorities & Core Capabilities*.

BEFORE AN INCIDENT

1. Designate primary and alternate SESF #6 representatives, who shall be responsible for coordinating with internal department stakeholders, the SEOC and other SESF #6 agencies to ensure successful execution of duties assigned in this Annex. Notify HI-EMA of any changes to assigned contacts.
2. Participate in joint planning to further develop, document, and refine procedures and processes for interagency coordination of SESF activities.
3. Participate in SESF #6 response meetings, trainings, and exercises.
4. Ensure internal agency readiness to execute SESF duties assigned in this Annex. Ensure SESF responsibilities are addressed in agency plans, that sufficient agency personnel are assigned and trained to support SESF, required resources are identified, and any necessary mutual aid plans are developed to address gaps.
5. Identify necessary contingency contracts with vendors for services or equipment that may be required to execute the department’s SESF #6 duties during an emergency in coordination with department procurement officers, the Logistics Section, and the State Procurement Office as appropriate.

DURING AN INCIDENT

1. Coordinate with SESF #6 partners and the SEOC to fulfill requests for assistance or information.

Coordinate actions with counties, other SESFs and Federal ESFs, and private sector companies, as appropriate.

2. Activate, assign, and track department resources in support of SESF mission assignments. Ensure financial and property accountability for agency resources used in support of SESF #6.
3. Provide situational awareness of SESF #6 activities to the SEOC. Represent the SESF at the SEOC and other incident sites as requested.

AFTER AN INCIDENT

1. Coordinate with SESF #6 partners and the SEOC to close out all remaining requests for assistance or information. Coordinate actions with counties, other SESFs and federal ESFs as appropriate.
2. Document the incident lessons learned and identify/document any recommended corrective actions. Participate in any incident hot wash, or after-action review.
3. Ensure completion of work and shift time logs to submit for formal accounting and documentation.
4. Gather important e-mails and documentation and save this information to a central repository location in WebEOC.

4.2.3 SHORT TO LONG-TERM RECOVERY

1. Recovery from disaster at the first day of response. As the incident transitions to longer term recovery, SESF #6 may deactivate. The decision to deactivate SESF #6 will be made by the Operations Section Chief with approval from the SEOC Manager. Following large or complex disasters, the Governor may appoint a State Disaster Recovery Coordinator (SDRC) to manage state support of county reconstruction efforts.

4.2.3.1 DEMOBILIZATION

1. Demobilization of agencies and SESFs from the State EOC will occur based upon operational needs and will be determined by the Operations Section Chief and SEOC Manager with input from the SESF #6 coordinator. Agencies may be subject to a rapid recall for reactivation of SESF #6, if needed.
2. In most cases, demobilization of SESF #6 will include the release of the coordinating agency and all member agencies. There may be instances where SESF #6 can be partially demobilized, allowing member agencies to be released as the need for their capability for mass care and human services is no longer necessary.
3. In the process of demobilizing SESF #6, all member agencies must ensure that any open or ongoing activities that require cross-coordination with other SESFs are closed out prior to demobilizing. This must be done in a manner to ensure that any dependencies or interdependencies of SESF #6 are properly and effectively communicated across the response organization. In addition, each agency must ensure that they coordinate their demobilization with their agency-specific counterparts that are represented on other SESFs.

4.2.3.2 TRANSITION TO LONG-TERM RECOVERY

1. As the urgency of a response lessens and communities begin to focus their efforts on implementing recovery programs, the State's focus will also shift to the long-term recovery needs of the affected areas. In Presidential Disaster Declarations, this will likely include the activation of a federally established Joint Field



Office (JFO).

2. JFOs are established, operated, and maintained by FEMA, and will include the temporary recovery organization structure put in place to support recovery. To properly ensure effective integration of State and Federal recovery activities, the State will organize in a similar structure to the federal structure contained within the National Disaster Recovery Framework.

4.2.3.3 IMPLEMENT RECOVERY SUPPORT FUNCTIONS (RSFS)

1. As JFO activation occurs, the Federal government will transition from emergency support to recovery support. Recovery Support Functions (RSFs) bring together the core recovery capabilities of Federal departments and agencies to focus on community recovery needs. The RSF structure includes the following: Community Planning and Capacity Building; Economic, Health and Social Services; Housing; Infrastructure Systems; and Natural and Cultural Resources. RSFs are intended to facilitate the coordination and delivery of Federal assistance to supplement the recovery efforts of local and State governments and are designed to operate within a timeframe of months to years.
2. As the Federal ESFs transition to RSFs, the State's ESF posture will also transition into State Recovery Support Functions (SRSFs). As such, State agencies will transition from their assigned SESF role to the appropriate SRSF, as warranted. Not all federally declared disasters will require full SRSF activation and not all SRSF activations will require full participation from each agency. The transition from an agency to the SRSF construct is situation-based and depends upon the agency's role(s) within the State response framework. The overlap areas between mass care and human services support in response and recovery support are: housing, business/ economic, emotional, and psychological care, and mitigation.
3. Following large or particularly complex disasters, the Governor may appoint a State Disaster Recovery Coordinator (SDRC) to manage state support of county reconstruction efforts. Agencies that are part of SESF #6 may be assigned responsibilities for supporting this type of long-term recovery effort.

4.3 DIRECTION, CONTROL, AND COORDINATION

1. HI-EMA follows the [National Incident Management System](https://www.fema.gov/emergency-managers/nims)⁴ (NIMS 2017) response organizational structure for all responding agencies. State agencies and SESFs are organized under the framework of the NIMS Incident Command System as required by *NIMS Executive Order 26.1 of 2006* and [HSPD-5](https://www.dhs.gov/publication/homeland-security-presidential-directive-5)⁵. As such, a variety of direction and control components may be used to manage and coordinate Hawaii's resources in an efficient and effective manner and to provide the interoperability between the local and Federal response organizations.
2. The State ESFs (SESFs) are organizationally under the SEOC Operations Section and report directly to the Operation Section Chief (OSC) or Branch Chiefs, if established. SESF #6 will provide incident management support and coordination under HI-EMA as the SESF #6 coordinating agency. HI-EMA will ensure the activities of SESF #6 are consistent with this Annex, and that agencies are operating in unison to achieve the common goals and response mission of the SESFs.
3. HI-EMA is the primary interface with the OSC and the member agencies of SESF #6. All requests for

⁴ <https://www.fema.gov/emergency-managers/nims>

⁵ <https://www.dhs.gov/publication/homeland-security-presidential-directive-5>



assistance (RFA) and information (RFI) will be managed through the OSC for availability of resources and response missions. HI-EMA will facilitate the best resource or solution set in response to the request that the State has received.

4.3.1 COORDINATION AMONG AGENCIES

1. The SESF #6 Primary Agency representative(s) in the SEOC coordinates SESF #6 responses to RFAs and RFIs. The request is evaluated and assigned to the SESF #6 agency most likely to have the requested capability or information. Information on the status of the request must be entered in WebEOC by the tasked SESF #6 agency.
2. When activated, the SESF #6 Primary Agencies will coordinate communication with the SEOC who will be available to respond to inquiries and resource requests. The SESF #6 Primary Agencies will organize a daily internal agency conference call to share information and confirm coordination procedures. If Federal agencies have been activated to support the event, this call should include FEMA.

4.3.2 COORDINATION WITH OTHER SESFS

1. The SESF #6 lead will coordinate with other SESFs for the movement of donations and response resources such as food and water, the SEFS #6 lead will provide information in support of the Common Operating Picture (COP) and unified communication.

4.3.3 COORDINATION WITH FEDERAL PARTNERS

1. Federal ESFs are multi-agency operational components that serve as the primary means to coordinate Federal resources and capabilities into Hawaii. As such, Hawaii SESF #6 will serve at the primary integration point for Federal ESF #6.
2. If a Federal ESF #6 is activated in response to, or in anticipation of, a presidential disaster declaration, SESF #6 will establish contact with FEMA and ensure daily coordination for the duration of the activation. Coordination will primarily occur at the SEOC, Initial Operating Facility (IOF), or Joint Field Office (JFO).

4.3.4 TASK FORCES

1. Task Forces may be stood up during an incident to address major response activities that require coordination across different levels of government and/or involve multiple state and federal ESFs.
2. SESF #6 will be part of the following task forces if they are implemented during an incident:
 - a. Feeding
 - b. Sheltering
 - c. Distribution

4.4 RESPONSE SUPPORT STAFF

1. When existing staffing is insufficient for SESF #6 operations, there are three primary options.



- a. Start at home where State agencies pre-identify employees with and train for the essential skills and knowledge needed during a disaster.
- b. Tap the Emergency Management Assistance Compact (EMAC) between Hawaii and other States and Territories. However, this can be expensive.
- c. Use volunteers where possible.

4.4.1 STATE AGENCY STAFF – DISASTER RESPONSE WORKERS

- 1. Hawaii State agency employees may be designated as disaster response workers. Disaster response workers need to report to work in accordance with the EOP and in accordance with their agency’s processes. The [State Disaster Response Manual for Managers](#)⁶ (2019) provides more detailed information.

4.4.2 EMERGENCY MANAGEMENT ASSISTANCE COMPACT

- 1. At the interstate level, members of the [Emergency Management Assistance Compact](#) (EMAC) may offer assistance during governor-declared states of emergency through a responsive system that allows States and Territories to send personnel, equipment, and commodities to help disaster relief efforts in other States and Territories. Hawaii is an EMAC member.

4.5 FINANCIAL MANAGEMENT & RECORD KEEPING

- 1. Hawaii State agencies, the Counties, and NGOs must work closely with HI-EMA financial management staff to ensure that personnel properly document all reimbursable expenses to their disaster activities. Such expenses should be directly related to official requests for assistance submitted through HI-EMA and include, but are not limited to, travel, maintenance, meals, supplies, and response resources.

⁶ <https://dod.hawaii.gov/hiema/files/2019/08/DHRDResponse-Manual-for-Managers.pdf>



5. AUTHORITIES AND REFERENCES

5.1 STATE LAWS, REGULATIONS AND DIRECTIVES

1. [Hawai`i Revised Statutes Chapter 127A – Emergency Management](#)⁷ - Establishes state and county emergency management authorities and statutory duties.
2. [Administrative Directive No. 15-01, Emergency Management Preparedness Policies for Departments](#)⁸ - Establishes emergency management preparedness requirements for state agencies.

MOAs & MOUs

1. Mass Care Feeding HI-EMA & The Salvation Army (2020)
2. County Prosecutors – Victim Assistance in Mass Casualty Crime Events (2019)
3. HI-EMA & The Hawaii Veterinary Medical Association (2019)

5.2 FEDERAL LAWS, REGULATIONS, AND DIRECTIVES

1. **National Response Framework** [ESF 6 – Mass Care, Emergency Assistance, Temporary Housing, and Human Services](#)⁹
2. [ARC and FEMA National Shelter Systems](#) (NSS)¹⁰
3. FEMA [Disaster Assistance Policy](#)¹¹, DAP9523.19, Eligible Costs Related to Pet Evacuations and Sheltering
4. [Pets Evacuation and Transportation Standards](#)¹² (PETS) Act of 2006
5. Americans with Disabilities Act (ADA) of 1990

5.3 REFERENCES

1. *Emergency Planning Considerations for Individuals with Access and Functional Needs in Hawaii* (2012), Hawaii State Civil Defense.
2. *Detailed Languages Spoken at Home in the State of Hawaii* (2016), Department of Business, Economic Development and Tourism.

⁷ https://www.capitol.hawaii.gov/hrscurrent/Vol03_Ch0121-0200D/HRS0127A/HRS_0127A-.htm

⁸ <https://dod.hawaii.gov/hiema/files/2017/08/AD-15-01-Emergency-Management-Preparedness-Requirements-for-Departments.pdf>

⁹ https://www.fema.gov/sites/default/files/2020-07/fema_ESF_6_Mass-Care.pdf

¹⁰ <https://hub.arcgis.com/maps/d000037396514f70a2ba3683e037caee/explore>

¹¹ <https://www.fema.gov/assistance/public/policy-guidance-fact-sheets>

¹² <https://www.avma.org/pets-act-faq>



6. ATTACHMENTS AND SUPPORTING DOCUMENTS

Attachment 1 Planning Data

Attachment 2 State Operations Priorities & Core Capabilities

Attachment 3 Support Resources

ATTACHMENT 1. PLANNING DATA

The data and additional planning considerations below are unique to Hawaii. The [Hawaii Emergency Operations Plan](#)¹³ contains additional planning assumptions which are applicable across all annexes.

Geographic Isolation/Supply Chain

- The geographic isolation of the Hawaiian Islands at 2,500 miles to the nearest major maritime ports and airports creates a complex time-distance relationship for resource coordination between the island and Contiguous United States (CONUS). Transit time by ocean from CONUS West Coast requires five to eight days by commercial cargo vessel and at least five hours by commercial flight.
- All major stores statewide rely on just in time inventory which means distribution of emergency supplies will be limited. Most of the population will experience delays to get immediate emergency needs met.
- Demand upon local resources in anticipation of a significant threat to public safety may overwhelm local and State capacity and capabilities. In addition, State and local resources may be damaged or unavailable in a significant emergency

Resident Population¹⁴

- At least 11% and potentially up to 35% of residents may require emergency shelter, feeding, and basic sanitary facilities following a disaster.
- The total number of people experiencing homelessness (sheltered and unsheltered) statewide in 2020 was 6,458 with 1,590 (24%) adults chronically homeless.¹⁵
- Hawaii's 2018 ALICE¹⁶ population estimate is at least 33% (467,000) of the state's 1.4 million people with over 9% (150,000) in poverty. For these people individual and family preparedness actions such as stockpiling 14 days of food and supplies is an impossibility.
- Seniors 65+ made up 19% (275,000) of Hawaii's residents in 2020. Of these, 153,000 (11%) have one or more underlying medical conditions to include functional and access needs disabilities.
- Residents of all ages with two or more chronic illnesses make up 27% (386,500) of the State's population.
- Pacific Islanders, most of whom live on Oahu, make up 4% (48,000) of the state's population. This includes Compact of Free Association (COFA) residents who are citizens of Palau, the Marshall Islands, and Micronesia, and make up 27,000 (1.9%) of the population.
- Native Hawaiian residents make up 25% (355,000) of the State's population.
- The average square footage of Hawaii single family residence (1,300 square feet) is half the size of an average mainland house (2,700 square feet). While local houses are considerably smaller, the average

¹³ <https://dod.hawaii.gov/hiema/files/2020/02/Hawaii-State-EOP-Fall-2019-Published.pdf>

¹⁴ US Census and Hawaii DEBEDT data

¹⁵ <http://hhdw.org/2020-homeless-point-in-time-count/>

¹⁶ ALICE (Asset Limited, Income Constrained, Employed). ALICE workers are teachers, health care workers, and members of the service industry but do not earn enough to support their own families. <https://www.unitedforalice.org/hawaii> (2019).

household size of Oahu, for example, is the second largest nationally at 3.05 people.¹⁷ A 2019 study found 23%¹⁸ of the Oahu's households are overcrowded and/ or doubled up.

- Eleven percent of Hawaii's households are multi-generational, more than three times the national average and the highest in the county.
- Emergencies and disasters disproportionately impact people who are poor, have limited English proficiency, are older, or disabled because they are less likely to have natural supports in their communities upon which they may rely for assistance and are dependent on government services for help.

Visitor Population

- On any given day, there are nearly 217,000 visitors in the state with an average of 30,000 daily arrivals. This increases the state's population by 15%. Visitors are particularly vulnerable during emergencies or disasters as they will lack supplies to self-sustain, be unfamiliar with local hazards and plans, and may have significant language barriers to understand safety directives.

Civil Rights

- Access and functional needs populations include but are not limited to the elderly, individuals with physical and/or mental disabilities, their caregivers and service animals, those without transportation, limited or non-English speaking, and many other segments of the population.
- Limited English Proficiency (LEP) refers to those who have a limited ability to read, write, speak, or understand English. Over 25% (350,000) of Hawaii's residents speak a language other than English at home, higher than the U.S. average of 21%. There are 25 languages other than English as primary spoken languages in Hawaii. Ilocano, Tagalog, and Japanese are the top three followed by Korean, Vietnamese, Chinese, Spanish, Hawaiian, Samoan, Cantonese, Marshallese, Mandarin, German, French, Micronesian: Chuukese, Pohnpeian, Yapese, Palauan, Tongan, Bisayan, Laotian, Thai, Portuguese, Hawaiian Pidgin, Russian, Indonesian, and Chamorro.
- Shelters and other facilities used in mass care activities are required to be compliant with the Americans with Disabilities Act (ADA) and meet the access and function needs (AFN) of all. Individuals and families may have specific needs which may not be immediately apparent or recognized at the time of the emergency, such as specific dietary needs, conditions that affect communication, limited English proficiency, disabilities, or chronic medical conditions that require a need to coordinate with ESF8 to support medical or mental health needs. Most individuals with AFN, including individuals with disabilities, can be supported in a general population shelter environment the use of durable medical equipment (DME), assistive technology (AT), or personal assistance services (PAS), some of which may need dedicated power and water.

Shelters & Temporary Housing

- The state is not a shelter provider. The state coordinates sheltering resources with counties and partner

¹⁷ 2018 American Community Survey, U.S. Census Bureau

¹⁸ 2019 Hawaii Housing Planning Study, Hawaii's Housing Finance and Development Corporation



agencies when requested by local jurisdictions.

- Pet and service animal friendly shelters will be needed.
- Medical shelters fall under SESF-8 but require appropriate services coordination to include dedicated power and water supplies.
- Local shelter managers in cooperation with partner agencies will work to provide guidance for pet owners on how or where to shelter pets. When feasible, pet shelters will co-locate near or within congregate care shelters.
- Alternate shelter sites may be required should pre-designated sites sustain damage or become uninhabitable.
- Sheltering and short-term housing may need to be located outside the impacted area, to include CONUS.
- If significant damage has occurred, short-term and temporary shelters and housing solutions will transition into long-term housing recovery solutions, to include possible relocation or consolidation.
- Spontaneous community shelters may open without adequate supplies and may require assistance and supplies to sustain operations.

Food and Water

- The state does not stockpile food or water for emergencies. However, government commodities may be released under authorization by the U.S. Department of Agriculture (USDA) when a federal disaster declaration is in place to meet the immediate needs of survivors.
- Food supplies in the state will be depleted within seven days of port closure, five days after no imports (40% of market capacity). After a major disaster, it will be hand to mouth resupply of food and water for 30 days with severe shortages until the port reopens
- The ratio of households statewide with the advised 14-day food and water stockpile is unknown. Limited data from a single county found more than half of households do not have the recommended stockpile.¹⁹
- Temporary water treatment plants likely will be needed.
- Water supply from deep aquifer pumping stations will need backup generators, fuel, and support staff.
- Cook chill, the process of food preparation of rapid chilling of cooked food, may be used for shelters, fixed feeding sites, and mobile distribution.
- A Feeding Taskforce will be stood up to manage efforts to feed those in need.

Human Services

- Family reunification activities may be necessary should family members become separated or should unaccompanied minors arrive at shelters or other service sites.
- Federal assistance may be required to augment local and State efforts in providing mass care relief, this includes the need for short-term, temporary emergency housing which likely will surpass local and State

¹⁹ <https://health.hawaii.gov/kauai/files/2019/09/Kauai-2019-CASPER-Final-Report.pdf>



resources.

- Emergency economic resources and benefits may be needed.
- Disaster mental health support may be required at mass care service facilities.
- Victim services support may be required at mass care service facilities.
- Mass care response activities will continue until all emergency and life safety issues are resolved and will assist with the transition of individuals into recovery when Disaster Assistance Centers (DAC) and Disaster Recovery Centers (DRC) are activated and fully functioning.

Pets

- Animals whose owners are not present but are impacted by disasters will require support.
- Domestic animals without owners (strays) will be indistinguishable from owned animals.
- Coordination with SESF-11 may be required for pet or pet friendly shelters, as requested.
- Food Banks statewide are expected to stockpile pet food for disaster response.

Recovery

- Recovery efforts are initiated concurrently with response activities for major disaster. Close coordination is required among State agencies, non-governmental organizations (NGOs), and the Hawaii Voluntary Organizations Active in Disaster (HVOAD) assisting with mass care response and recovery activities.

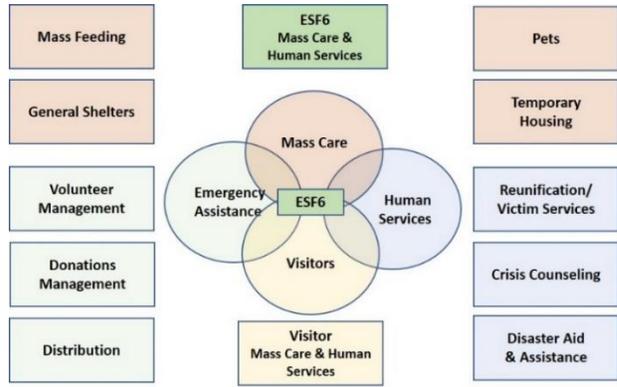
Additional Considerations

- Security may be required to support shelters and/or recovery centers.
- Solicited and unsolicited volunteers, as well as non-governmental organizations (NGOs), may offer assistance, causing normal intake processes for volunteers to become overwhelmed.
- Federal agencies may engage in a unilateral response and/or offer assistance under their statutory authority to affected areas in lieu of a presidential declaration.
- Disruption caused by debris, damage, or relocation of residents may cause disruption in postal activities or commerce, create financial hardship, and limit accessibility of communication systems.
- Disruption to internet, broadband, and cell services should be expected and may last hours to weeks.

ATTACHMENT 2. STATE OPERATIONS PRIORITIES & CORE CAPABILITIES

Hawaii SESF #6 Mass Care and Human Services support falls into these operational areas:

- **Mass Care**
 - **Feeding:** Support feeding and hydration needs.
 - **Sheltering:** Support congregate and non-congregate sheltering. Support individuals with disabilities and others with access and functional needs in congregate facilities. Temporary housing options including rental, repair, identification and provision of safe, secure, functional, and physically accessible housing and access to other sources of temporary housing assistance.
 - **Pet/ Service Animal Sheltering:** Support rescue, transportation, care, shelter, and essential needs of household pets and provide essential needs of service animals which may require additional support through SESF #11.



- **Human Services:** Disaster assistance that helps survivors address unmet disaster caused needs and/or non-housing assistance; also includes supplemental nutrition assistance, crisis counseling, victim services, disaster case management, unemployment, and other programs available to disaster survivors. Distribute emergency supplies, Support family reunification. Provide mass evacuation assistance.
- **Emergency Assistance:** Coordinate voluntary organizations and essential relief services, volunteers, donations, and donations distribution.
- **Visitor Services & Assistance** Because visitors make up at least 15% of Hawaii’s population on any given day and that they have needs above and beyond those of residents in disaster, this annex has a focus area on visitors. Visitors are particularly vulnerable during emergencies or disasters as they will lack supplies to self-sustain, be unfamiliar with local hazards and plans, and may have significant language barriers to understand safety directives.

| Operational Priorities | Goals | Objectives | Responsible Agencies |
|---|--|--|--|
| 1. Coordinate Mass Care & Human Services Support | | | |
| <ul style="list-style-type: none"> • Outcome: Mass Care & Human Services resource and information requirements are met. | | | |
| | <p>Immediately activate a Mass Care & Human Services coordinating function able to assess and coordinate operational requirements and shortfalls, to request additional Federal/State resources.</p> | <ul style="list-style-type: none"> • Establish Mass Care & Human Services EOC staffing • Define the scale of the disaster based on population affected, geography and intensity of the event • Estimate resources required to conduct mass care and emergency assistance activities based on defined scale of the disaster • Determine resources available from local, State, private sector, and NGOs to conduct Mass Care & Human Services activities based on defined scale of the disaster | <ul style="list-style-type: none"> • All |



| Operational Priorities | Goals | Objectives | Responsible Agencies |
|--|--|--|---|
| | | <ul style="list-style-type: none"> Assess and identify resource shortfalls Request resources to meet identified shortfalls through appropriate channels Establish Mass Care & Human Services operational tasks in coordination with Mass Care & Human Services providers and in conformance with the jurisdiction’s overall incident objectives Maintain situational awareness Establish demobilization procedures Coordinate the use of educational facilities during emergency activations among Federal, State, and local agencies, to include the UH system, and private colleges and schools. | |
| | Maintain a steady-state evaluation of Mass Care & Human Services capabilities and available support resources. | <ul style="list-style-type: none"> Conduct regularly scheduled coordination with Mass Care & Human Services providers Coordinate, on an ongoing basis, with local, State, private sector, and NGOs to determine mass care resources available within the jurisdiction Support integration of children and adults with and without disabilities that have access and functional needs into all aspects of Mass Care & Human Services. Support provision of emergency first aid for survivors and emergency workers Coordinate the provision of Mass Care & Human Services support for Recovery operations. | <ul style="list-style-type: none"> All |
| | Integrate and report the actions of response organizations for all incidents | <ul style="list-style-type: none"> Collect, report, and coordinate information on mass care activities and share with mass care and emergency assistance partners Track and respond to requests for information and resources related to Mass Care & Human Services activities | <ul style="list-style-type: none"> All |
| 2. Support Food & Water Distribution Operations <ul style="list-style-type: none"> Outcome: Mass Care: Food & Water distribution infrastructure is established in the impact area with the logistical support to achieve and maintain the targeted meals per day production and distribution capability. Outcome: Mass Care: Food & Water infrastructure is demobilized and disaster feeding transitioned to DSNAP and targeted distribution of food boxes. | | | |
| | Immediately assess, in coordination with responsible agencies, feeding requirements, and shortfalls | <ul style="list-style-type: none"> Determine the targeted meals per day production and distribution capability. Identify feeding resource requirements and shortfalls Request feeding resources to meet identified shortfalls Account for infants, children, and individuals with special dietary needs including those with medical and religious dietary needs | <ul style="list-style-type: none"> ARC TSA DHS HI-EMA Counties HVOAD HIFSA |
| | Activate a multi-agency feeding task force to | <ul style="list-style-type: none"> Operate the feeding task force according to established operational procedures | <ul style="list-style-type: none"> ARC TSA |



| Operational Priorities | Goals | Objectives | Responsible Agencies |
|--|---|---|--|
| | coordinate state feeding support within 6 hours of determination of need | | <ul style="list-style-type: none"> DHS HI-EMA HVOAD Counties |
| | Coordinate the establishment and support of a targeted mass care feeding infrastructure in the affected area. | <ul style="list-style-type: none"> Confirm the arrival and report the operational employment of disaster feeding production and distribution capabilities Respond to requests for feeding resources from the counties and supported agencies Ensure shelter populations are being fed | <ul style="list-style-type: none"> ARC TSA DOE DOH |
| | Coordinate the implementation of DSNAP in eligible jurisdictions | <ul style="list-style-type: none"> Determine if USDA criteria for DSNAP have been met in eligible jurisdictions Coordinate with eligible jurisdictions to determine DSNAP distribution locations | <ul style="list-style-type: none"> DHS |
| | Coordinate the implementation of targeted household disaster feeding, if required | <ul style="list-style-type: none"> Determine the type & amount of food required, and the geographical area of distribution Determine sources for the food Establish initial distribution date & process for assembly of food boxes Establish distribution timeline Coordinate demobilization process | <ul style="list-style-type: none"> ARC TSA HVOAD HI-EMA |
| | Coordinate demobilization of the mass care feeding infrastructure in the affected area | <ul style="list-style-type: none"> Assess and determine if criteria for closing of feeding operations have been met. Confirm that feeding agencies are coordinating demobilization plans with the counties & providing proper notice to the public Monitor and report the demobilization of production and distribution capabilities | <ul style="list-style-type: none"> ARC TSA DHS HVOAD |
| 3. Support Shelter Operations <ul style="list-style-type: none"> Outcome: All survivors with a stated need for shelter have access to a safe, secure, & accessible environment with basic life-sustaining services. Outcome: Shelter residents are placed in appropriate housing solutions. | | | |
| | Immediately assess, in coordination with shelter providers, the shelter requirements and shortfalls | <ul style="list-style-type: none"> Estimate evacuation shelter population and subsequent short-term shelter population Estimate non-congregate shelter population within the impact area Identify shelter resource requirements and shortfalls for estimated shelter populations | <ul style="list-style-type: none"> ARC HI-EMA Counties |
| | | <ul style="list-style-type: none"> Identify Special Needs shelter resource requirements and shortfalls for estimated shelter populations | <ul style="list-style-type: none"> ARC DOH DHS Counties |
| | Immediately assess, in coordination with shelter providers, requirements for | <ul style="list-style-type: none"> Estimate functional needs support resources for shelter residents Obtain functional needs support resources for shelter | <ul style="list-style-type: none"> ARC DOH DHS |



| Operational Priorities | Goals | Objectives | Responsible Agencies |
|---|--|--|--|
| | functional need support services for shelter residents | residents when required to meet actual projected shortfalls. | |
| | Activate a multi-agency sheltering workgroup to coordinate state shelter support within 6 hours of determination of need | <ul style="list-style-type: none"> Operate the shelter workgroup according to established operational procedures. | <ul style="list-style-type: none"> ARC DHS |
| | Immediately assess, in coordination with shelter providers, requirements for household pet and service animal shelters for shelter residents | <ul style="list-style-type: none"> Estimate household pet and service animal resource requirements for shelter residents Obtain household pet and service animal resources for shelters when required to meet actual or projected shortfalls Respond to appropriate resource requests | <ul style="list-style-type: none"> ARC DOH DoAG HVMA |
| | Coordinate daily with shelter providers | <ul style="list-style-type: none"> Establish priorities for shelter support operations Provide guidance as required to shelter providers Request additional shelter resources to meet actual or projected shortfalls Respond to resource requests from shelter providers Provide disaster information for distribution to shelter residents | <ul style="list-style-type: none"> ARC DOE Counties |
| | Support transition of general population shelter residents to temporary or permanent housing | <ul style="list-style-type: none"> Estimate resources required to support transition of shelter residents Obtain resources required to support transition of shelter residents to temporary or permanent housing Support establishment of Shelter Transition Teams when requested | <ul style="list-style-type: none"> ARC HI-EMA Counties |
| | Support Discharge Planning of Special Needs shelter residents to temporary or permanent housing. | <ul style="list-style-type: none"> Estimate resources required to support Discharge Planning of Special Needs shelter residents Obtain and deploy resources required to support Discharge Planning of Special Needs shelter residents according to established operational procedures | <ul style="list-style-type: none"> ARC DOH |
| | Coordinate daily with shelter providers. | <ul style="list-style-type: none"> Establish priorities for shelter support operations Provide guidance as required to shelter providers Request additional shelter resources to meet actual or projected shortfalls Respond to appropriate resource requests | <ul style="list-style-type: none"> ARC Counties |
| | Transition shelter responsibilities to Recovery Housing | <ul style="list-style-type: none"> Operate the shelter response according to established operational procedures Demobilize shelter support according to established operational procedures | <ul style="list-style-type: none"> ARC HPHA |
| 4. Support Mass Evacuation | | | |
| <ul style="list-style-type: none"> Outcome: Evacuees have access to targeted levels of mass care resources. | | | |
| | Prior to initiating an evacuation, assess the | <ul style="list-style-type: none"> Assess the need and availability of resources required to support mass evacuation | <ul style="list-style-type: none"> All |



| Operational Priorities | Goals | Objectives | Responsible Agencies |
|---|---|---|---|
| | requirements for mass care support, to include access and functional needs support availability, along evacuation routes and at collection points. | <ul style="list-style-type: none"> Request additional state and federal resources to support mass evacuation as required. | |
| | Coordinate with responsible organizations in the local community, State, nation, or internationally to deliver mass care support and track evacuated individuals. | <ul style="list-style-type: none"> Maintain situational awareness of individuals undergoing evacuation and likely to need evacuation Provide mass care services in congregate evacuations locations. | <ul style="list-style-type: none"> All State Dept Consulates |
| 5. Support Management of Volunteers and Donations | | | |
| <ul style="list-style-type: none"> Outcome: Offers and donations of resources are distributed to areas of need. | | | |
| | Assess, in coordination with responsible agencies, offers of materials, resources, money, services, and staff. | <ul style="list-style-type: none"> Determine the needs Determine the targeted distribution for offers and donations. Request resources to meet identified shortfalls. | <ul style="list-style-type: none"> HI-EMA ARC TSA HVOAD |
| <ul style="list-style-type: none"> Support Emergency Assistance Distribution of Emergency Supplies Operations Outcome: A Mass Care Distribution of Emergency Supplies infrastructure established in the impact area with the capability to achieve and maintain the targeted levels of distribution | | | |
| | Immediately assess, in coordination with responsible agencies, the distribution of emergency supplies requirements and shortfalls. | <ul style="list-style-type: none"> Assess the need and availability of commodities for distribution of emergency supplies Determine the targeted distribution of emergency supplies capability Request resources to meet identified shortfalls | <ul style="list-style-type: none"> SESF-7 HVOAD ARC TSA HI-EMA |
| | Coordinate state distribution of emergency supplies support within 6 hours of determination of need | <ul style="list-style-type: none"> Activate the workgroup to meet community needs. Distribute emergency supplies according to established operational procedures | <ul style="list-style-type: none"> ARC TSA HI-EMA SESF-7 |
| | Coordinate the establishment and support of a targeted distribution of emergency supplies infrastructure in the affected area. | <ul style="list-style-type: none"> Confirm the arrival and report the operational employment of distribution of emergency supplies distribution capabilities Confirm distribution of emergency supply locations with responsible agencies. Respond to resource requests from supported agencies. | <ul style="list-style-type: none"> ARC TSA SESF-7 HI-EMA |
| 6. Support Human & Social Services Needs. | | | |
| <ul style="list-style-type: none"> Outcome: Survivors have access to targeted levels of human services. | | | |
| | Coordinate and support the delivery of human and social services in the affected area. | <ul style="list-style-type: none"> Disaster assistance that helps survivors address unmet disaster caused needs and/or non-housing assistance. Assess need for and provide crisis counseling and mental health services. | <ul style="list-style-type: none"> DHS DOH HPHA DLIR |



| Operational Priorities | Goals | Objectives | Responsible Agencies |
|---|---|---|---|
| | | <ul style="list-style-type: none"> Assess need for and provide victim services in appropriate environment. Identify victims who need supplemental nutrition assistance, disaster case management, unemployment, and other programs. | <ul style="list-style-type: none"> TSA ARC HHS CCVM |
| 7. Support Visitor Mass Care and Human Services Needs. <ul style="list-style-type: none"> Outcome: Visitors have access to targeted levels of human services and mass care to ensure their needs are met without reducing services to residents. Outcome: International visitor post-disaster support to include reunification evacuation are met. | | | |
| | Coordinate visitor mass care and evacuation needs as for residents, to include foreign nationals. | <ul style="list-style-type: none"> Provide mass care and human services support. Coordinate with Consulates and the US State Department for foreign national reunification evacuations. | <ul style="list-style-type: none"> All State Dept Consulates Airlines |



ATTACHMENT 3. SUPPORT RESOURCES

The following resource areas support the *Hawaii State SESF #6 Mass Care & Human Services Annex*. These will allow partner agencies to manage and update these interconnected components of the Annex. Some are fully intertwined with SESF #6 while others support SESF #6 response activities. These are being managed and developed separately but in coordination with this Annex.

Mass Care

1 Mass Care: Food & Water

Coordinated efforts between State, County, and Federal agencies in partnership with voluntary organizations and the private sector to provide food and water to disaster survivors at fixed distribution sites or via mobile units as appropriate. A Feeding Taskforce will be stood up to manage efforts to feed those in need. Food and water services may include hot or shelf-stable meals, infant formula, baby food, snacks, beverages, and food packages, diverse dietary and culturally appropriate meals, and pet food.

2. Mass Care: Shelters & Temporary Housing

General shelters (evacuation, general population, pet friendly) may be congregate or non-congregate and typically are the responsibility of the Counties with support from ARC and others. These temporary shelters provide a safe, sanitary, and secure environment for individuals and households displaced by disasters. Support is given to survivors sheltering in place and those in SESF #8 medical shelters. Pet and Service Animal friendly shelters are general shelters. Those with disabilities or access and functional needs will be accommodated in congregate shelters.

3. Pet & Service Animal Support

Support pet and animal sheltering, evacuation, and care. Coordinate pet evacuation and shelter support, communication, health and safety, transportation, and other shelter considerations. Service animals, under the Americans with Disabilities Act, will be allowed to accompany the owner. SESF #11 is a key partner in animal welfare during preparedness and response.

4. Evacuations

In Hawaii, resident evacuations will range from shelter in place to locally within a county or on an island to potentially between islands. The most extreme would be from Hawaii to the West Coast or other parts of CONUS. Visitor evacuations are similar to resident evacuations except visitors will be from not only the U.S. but are foreign nationals whose evacuation needs will require coordination with the U.S. State Department and various Consulates.

Human Services

5. Human & Social Support

Human and social support services offer a complex menu of essential individual, household, and community relief services. They range from providing support to children in disasters, to mass evacuations, and for the rescue, transportation, care, shelter, and essential needs of household pets and service animals. Disaster assistance programs that help survivors address unmet disaster-caused needs and/or non-housing losses through loans and grants; also includes supplemental nutrition assistance, crisis counseling, disaster case



management, disaster unemployment, disaster legal services, and other State and Federal human services programs and benefits to survivors, to include victims of violence.

6. Crime Victim Services & Assistance

Incidents of mass violence require a specialized response to address the complex and unique needs of violent crime victims and traumatized communities. Agencies with specialized training coordinate effective and timely responses by providing information and assistance in conjunction with other support agencies and victim service organizations.

Emergency Services

7. Donations Management (SESF #7)

People and organizations locally and afar spontaneously and formally offer resources and goods to those in need. In anticipation of offers and donations of goods, resources, and money, the types and quantity of which vary, HI-EMA and partner agencies have processes in place to prepare for the acceptance and distribution of these resources at the local and State levels. Because many non-governmental agencies use donations on a day-to-day basis the State level guidance will not replace those individual agency efforts. Donations Management is an SESF #7 Logistics subordinate operation.

8. Volunteer Management (SESF #6, SESF #7)

In anticipation of volunteer service offers, the skill sets and quality of which vary, HI-EMA and partner agencies have processes in place to prepare for the acceptance of these offers at the local and State response levels. Because many non-governmental agencies use volunteer services on a day-to-day basis the State level guidance will not replace those individual agency efforts. Volunteer management is typically associated with SESF #6 Mass Care food and water and shelter support but can be applied anywhere.

9. Emergency Relief Supply Distribution / DMP Alignment (SESF #7)

In anticipation of donations of goods and disaster response resources, HI-EMA and partner agencies have processes in place to prepare for the acceptance and distribution of these products at the local, State, and Federal response levels. The [Hawaii Distribution Management Plan](#)²⁰ (2021) is the State consolidated distribution operations plan and falls under SESF #7 Logistics.

Visitors

10. Visitors

Visitors make up at least 15% of Hawaii’s population on any given day. They have needs above and beyond those of residents in disaster. Visitors are particularly vulnerable during emergencies or disasters as they will lack supplies to self-sustain, be unfamiliar with local hazards and plans, and may have significant language barriers to understand safety directives. The [Visitor Industry Coordination Annex](#)²¹ (2019) establishes the structure, roles, and responsibilities and procedures that government and the visitor industry will use to coordinate emergency support to the visitor population and relay information and needs.

²⁰ <https://dod.hawaii.gov/hiema/files/2020/12/State-of-Hawaii-Distribution-Management-Plan-DMP-FINAL-31-Dec-2020.pdf>

²¹ <https://dod.hawaii.gov/hiema/files/2019/08/VISITOR-COORDINATION-ANNEX.pdf>



Cross Cutting

11. Civil Rights in Disaster

No two disasters are ever the same. Yet nearly all disproportionately affect individuals with access and functional needs (AFN), i.e. people with disabilities, older adults, children, limited English proficiency, and the transportation disadvantaged. The [*State of Hawaii: 2009 Interagency Action Plan on Emergency Preparedness for Persons with Disabilities*²²](#) is the core state document to address the civil rights responsibilities State, Counties, and partners have during disaster response. This is in addition to an expansive body of law and regulations which addresses Civil Rights law (Title 6; Sec 504 & 508); [E.O. 12898](#), [Stafford Act sec 308](#); [HHS Office of Civil Rights & EM](#); [DHS Office of Civil Rights](#); [FEMA Office of Civil Rights](#).

The special needs and vulnerable population groups include individuals with physical, mental, sensory, cognitive, socio-economic (including homeless), or any other circumstance that creates barriers to understanding or the ability to act/ react as requested: this population includes people who are ethnically and culturally diverse, have limitations or are unable to read or understand English, have reduced or no ability to speak, hear, or see; and have limitations in learning or understanding

12. Public Information (SESF #15)

Coordinate information through the State PIO to disaster survivors, families outside the affected area, local, state, and federal officials; and the public. It is important for all agencies involved with mass care operations to coordinate their messaging. Pre-scripted messages to support and advise LEP residents and visitors in time of crisis is imperative. These are the SESF-6 parts which fall under SESF #15 External Affairs.

²² <https://health.hawaii.gov/dcab/files/2013/01/interagencyplan2009.pdf>