



Oregon Department of Human Services,
Office of Resilience and Emergency Management

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**These templates are provided by
the Oregon Department of Human Services,
Office of Resilience and Emergency Management
as guidance to assist jurisdictions in developing their own
policies and procedures for providing
congregate shelter or other mass care services.**

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Access and Functional Needs

This guidance assists in the identification methods for achieving a lawful and equitable delivery of Functional Needs Support Services (FNSS) to adults and children. Those with disabilities and/or access and functional needs have the same right to services in shelters as other residents. Always view the needs of people through an equity lens and utilize trauma-informed concepts.

“Individuals having access and functional needs may include, but are not limited to, individuals with disabilities, seniors, and populations having limited English proficiency, limited access to transportation, and/or limited access to financial resources to prepare for, respond to, and recover from the emergency.” Excerpt: FEMA press release of January 11, 2022.

Functional Needs Support Services (FNSS) are defined as services that enable individuals to maintain their independence in a general population shelter, per FEMA guidance. Those services include:

- Reasonable modification to policies, practices, and procedures
- Durable medical equipment (DME)
- Consumable medical supplies (CMS)
- Personal assistance services (PAS)
- Other goods and services as needed

If a general shelter needs to provide any of these services to assist individuals and they are not immediately available, contact Operations for assistance.

Key Concepts:

- People are the most knowledgeable about their own needs
- Not everyone has the same needs and require the same assistance
- Everyone must have the same opportunity to benefit from programs, services, and activities
- Everyone must be included in the provision of services and activities provided by government, private businesses, and nonprofit organizations
- Integration settings keep people connected to their support system and caregivers
 - Strive to keep people together with family, caregivers, or other familiar people
- Locations of shelters, service locations and activities must be physically accessible
- People with access and functional needs or disabilities must have equitable access to all services
- Communication must be comparable in content and detail; be understandable and timely
 - Change the way questions are asked, provide reader assistance, at an accessible location

Children and adults may have physical, sensory, mental health, and cognitive and/or intellectual disabilities affecting their ability to function independently without assistance. Others may include late-stage pregnancy, elders, and the need for bariatric equipment. When opening and operating a general population shelter, consider the need for:

- Communication assistance in completing forms
- Items needed for daily living
- Access to medication

- Sleeping accommodations (universal/accessible cots or beds, placement for stabilization of cots), and possible privacy screens
- Way-finding assistance for people who are blind or have low vision
- Assistance for individuals with cognitive and intellectual disabilities
- Aids and services for persons with communication disabilities
- Access to temperature related environments for those who cannot regulate their temperature
- Refrigeration for medications
- Availability of appropriate food and beverages for dietary restrictions
- Provision of food and supplies for service animals; designation of a relief area; clean up bags
- Assistance with activities of daily living such as:
 - Eating and taking medication, dressing and undressing
 - Transferring to and from a wheelchair or other mobility aid
 - Walking or stabilization
 - Bathing or toileting
 - Communicating
- Post disaster alternative housing assistance that meets their access and functional needs
- Transportation suited to their needs which includes the transport of mobility devices

Shelters need accessible:

- Entrances, sidewalks, walkways, parking
- Passenger drop off and pick up areas
- Shelter entrances, hallways, and corridors
- Routes to all service and activity areas
- Check in and information areas
- Sleeping, eating, and recreation areas
- Restrooms, showers, and toilet stalls, including portable toilets; routes within toilet rooms
- Public telephones or technology such as computers
- Medical, behavioral health, or spiritual care service areas

Examples of Americans with Disabilities (ADA) Standards and general guidance

- Entrance doors: 32 inches of clear space; threshold should be no more than ½ inch
- Hallways: minimum of 36 inches
- Handrails: 34 – 38 inches above the leading edge of stair tread or walking surface
- Restrooms must have sufficient space for wheelchair to turn without interference from the swinging door, and with grab bars, if possible. Sinks should be low enough and allow access for a seated person to reach levers, soap dispensers, and drying towels.
- Tables for eating or recreational activities: At least 19 inches high to allow wheelchair access
- Signs and notices should be in large print for those with low vision
- For those with hearing impairments use TTY technology, ASL, or communicate in writing

Specific ADA requirements can be found at: <https://www.ada.gov>

Checklist For Opening, Operating and Closing a Congregate Shelter

Mission: _____ **Incident Date** _____

Location Name & Address: _____

PRE-OCCUPANCY				
Yes	No	NA	Responsible	Activity / Task
				Identify prospective site; arrange inspection and any contract; inclusion of RV parking
				Inform / integrate public information messaging
				Request pet shelter for site
				Request equipment / supplies
				Identify location of large animal site
				Determine & assign initial staff for 24/7 as needed <ul style="list-style-type: none"> • Shelter Manager • Shelter Supervisors • Workers <ul style="list-style-type: none"> ○ Registration ○ Dormitory ○ Feeding ○ Medical ○ Behavioral Health ○ Spiritual Care ○ Security (inside & out)
				Identify & resource Spiritual Care
				Identify any other organizations to support
				Request food contracts be activated
			Logistics	Inspection & Contract/Agreement
			Logistics	Set up / post exterior signs
			Logistics	Conduct facility tour with Shelter Manager
			Shelter Manager	Conduct briefing for Supervisors
			Shelter Manager	Determine shelter layout <ul style="list-style-type: none"> • Registration & lobby/waiting • Dormitory • Isolation space • Feeding • Information Boards • Manager space • Medical (water available?)

PRE-OCCUPANCY				
Yes	No	NA	Responsible	Activity / Task
				<ul style="list-style-type: none"> Behavioral Health Activities / Smoking area designated Storage of supplies Storage of unsolicited donations
			Shelter Manager	Assign staff and supervisors to function groups
			Shelter Manager	Confirm all functions are supplied
			Shelter SV	Assign team tasks
			Shelter SVs	Set up in order of priority <ul style="list-style-type: none"> Storage of supplies Lobby/waiting Registration Snack area Manager secured space Medical Dormitory Behavioral Health Spiritual Care Information Boards Activities
			Shelter SVs	Place interior signs
			Shelter Manager	Develop Emergency Plan

OPENING				
Yes	No	NA	Responsible	Activity / Task
				Establish opening time with Shelter Manager
			Shelter Manager	Confirm staff in place; supplies ready; Open doors
			Shelter Manager	Confirm all teams in place <ul style="list-style-type: none"> Registration and lobby/waiting Dormitory Medical Behavioral Health Reunification Feeding (snacks and first meal) Security

OPERATING				
YES	NO	NA	Responsible	Activity / Task
			Shelter Manager	Daily reports and planning information
			Shelter Manager	Daily Client Meetings
			Shelter Manager	Daily SV shift change meetings
			Shelter Manager	Daily partner team supervisors, if any
			Shelter SV	Daily shift change meetings with team
			Feeding SV	Daily <ul style="list-style-type: none"> • Identify special meal & snack needs <ul style="list-style-type: none"> ○ Allergies ○ Medical ○ Children / infant • Inventory supplies • Reporting on meals/snacks served • Meal planning for 72 hours • Snack planning for 72 hours • Order supplies • Maintain sanitation
			Shelter Manager	Medical Services requested
			Shelter Manager	Behavioral Health requested
			Logistics & Shelter Manager	Maintain storage of supplies; secured <ul style="list-style-type: none"> • Base inventory • Items In • Items Out
			Shelter SV	Activities (Children and Adults)
			Shelter Workers & Shelter SV & Shelter Manager	Address unique needs of individual clients <ul style="list-style-type: none"> • Getting to work <ul style="list-style-type: none"> ○ Special clothing ○ Lunch ○ Day sleepers • Getting children to school <ul style="list-style-type: none"> ○ Clothing ○ Supplies ○ Transportation (thru school)
			Medical staff	Arrange transportation to medical appointments
			Shelter Manager	Establish space and process for storage of client belongings: Secured, Agreement Signed <ul style="list-style-type: none"> • Access only when accompanied by staff
				Assign / Establish MASTT for transition
			MASTT	Initiate transition / recovery conversations with clients <ul style="list-style-type: none"> • Address immediate Recovery solutions

OPERATING				
YES	NO	NA	Responsible	Activity / Task
				<ul style="list-style-type: none"> ○ Transportation ● Contact with client pre-disaster assistance <ul style="list-style-type: none"> ○ Tribal ○ Veterans ○ DHS caseworker
				Establish projected closing date; confer with Shelter Manager and local jurisdiction
				Develop closing plan with Shelter Manager <ul style="list-style-type: none"> ● County ● Partners ● Clients Written and verbal (consider AFN) Coordination with Logistics

CLOSING				
Yes	No	NA	Responsible	Activity / Task
			Shelter Manager	Implement the closing plan; inform staff & clients with notice and timelines
			Shelter SV	Assist clients with pack up – <i>After notified</i>
			Logistics	Clean and sanitize all cots and similar equipment
			Shelter Manager	Pack all documents, records, logs (to Operations)
			Logistics	Pack all supplies; return to stock/cache
			Logistics	Clean facility and other equipment
			Logistics	Return/replace items used from facility; make facility repairs
			Logistics	Return facility to owner <ul style="list-style-type: none"> ● Inspection ● Signed release
			All	Evaluations; release of staff through Logistics

Daily / Shift Shelter Safety Inspection

SHELTER: _____ INCIDENT: _____

INSPECTION BY: _____ DATE/TIME: _____

Y	N	ITEM	NOTE
		New Facility damage	
		All entrances and exits visible and unobstructed	
		All accessible entrances clearly marked	
		Restricted areas marked, controlled	
		EXTERIOR	
		Walkways clear of trip or fall hazards	
		Walkways clear of snow or ice	
		All accessible ramps and handrails secure/maintained	
		Proper containers for disposing of cigarettes	
		Proper containers for garbage; no visible garbage	
		Appropriate area for service animal relief; clean	
		INTERIOR	
		Passages to all service areas at least 36" wide and accessible to all residents and staff	
		All passageways free of protruding objects	
		All facility areas clean, dry, sanitary, and free of hazards	
		Signage reflects languages used by shelter residents	
		Signage for service areas visible and legible	
		Restrooms clean and properly supplied, sanitized	
		Sharps containers available	
		Restroom floors free of standing water	
		Restroom toilets and sinks working properly	
		Diaper changing area sanitized; supplies available	
		Containers available in all restrooms and changing areas for disposing of hand towels, diapers	
		Showers clean, sanitary	
		Adequate power supply for medical devices	
		Recharging power supply for medical devices	
		Electrical cables routed and/or covered to prevent trips	
		Doors and windows secured to preclude unintended entrance	
		Emergency exit devices operable	
		Reception and entrance to shelter properly controlled	
		Dormitory entrance controlled for security, privacy	

Immediate Actions Needed: _____

Dietary Restrictions and Food Allergies

For meal planning to best serve the shelter residents, it is important to identify as quickly as possible whether there are restrictions that must be considered. Restrictions can be cultural, religious, or based on health conditions. If there is information available about the anticipated population when the shelter is being established, it is helpful during the initial planning phase and activation of food vendor contracts.

More often the shelter staff learns about restrictions and allergies as they interact with residents either during registration or in the initial hours. *Observe if people are not eating or eating limited items. Sometimes they hesitate to ask.*

Diabetics: There are multiple types of diabetes and many types of diabetic diets. It is important to talk with the resident to determine what works best for them and what types of foods they need to avoid. Consult with the Medical staff for additional guidance, especially if the resident seems unable to provide specifics.

Gluten-free (Celiac): There are many hidden glutens in foods and the resident should be able to provide guidance. Things to avoid can include most grains, salad dressings, canned soup, and some seasoning mixes.

Allergies: Some allergies can be deadly and should be taken seriously. When purchasing snack items for the shelter be aware of ingredients like peanuts and tree nuts. Other common allergens include eggs, milk (and milk products), fish and shellfish. Ask the resident.

Intolerance: People may have an intolerance for certain foods that create digestive issues. Common is lactose. Provide alternatives if possible.

Vegetarian: There are multiple types of vegetarian practices that warrant inquiry of the resident about specific foods beyond the meat and fish restriction. Inquire regarding dairy, eggs, or other products.

There are many cultural and religious practices related to food and preparation. It is usually best to ask the resident what will meet their needs and what we need to do to follow their practices. In a disaster situation, this may be a collaboration between the resident and the shelter feeding staff looking at best alternatives. Some practices include fasting during specific days and times, so meal schedules may need to be adjusted as well as the types of food provided. Examples:

Judaism (Kosher)	Hindu	Seventh Day Adventist
Muslim	Buddhist	Sikh
Humanist	Jain	Jehovah's Witnesses

SHELTER RESIDENT RESPECT AND DIGNITY

During a disaster when people have been evacuated and forced to leave their home and familiar environment to live in a congregate shelter, it is our responsibility to support their individual needs as much as possible. Not all issues can be immediately accommodated, but there are things that can be done to make a positive difference. Seek those opportunities.

When establishing a shelter lay-out, *always consider the need for safety of all residents and staff* and the need for the supervision of any spaces provided. If possible, establish:

- Private dressing spaces
 - Privacy screens if available
 - Rooms adjacent to the dormitory to be used only for dressing
 - Caution: locked doors may be a safety issue
 - People may be able to lock themselves in and not get out
 - It may create a location for inappropriate activity
- Curtains may be possible in some locations for showering
Alternative: schedule showering
- Infant care
 - Changing, breastfeeding
 - Cry Room (to avoid disturbing other residents)
- Private areas for consultation and visual privacy:
 - Medical Services (running water is helpful), Behavioral Health, Spiritual Care
 - Other service-related issues of a private or confidential nature
- Spaces for autistic individuals or those with dementia-related conditions, if possible
 - Seek assistance from Medical or Behavioral Health staff
- Spaces that conform to cultural needs such as separating women from men

Interactions and communication:

- Provide bags/containers for people to carry/store small personal items such as hygiene or incontinence products, infant supplies, clothing
- Greet people with their name or a respectful generic “Sir”, “Ma’m”, or other suitable term
- Introduce yourself – first name only is fine – and explain why you are interacting with them, i.e. “My name is Anna and I’m stopping by to see if there is anything you need this morning.”
- Respect the resident’s personal items; don’t move them or store them without asking first and explaining why. If there has been a report of a weapon, contact the Shelter Manager to determine any action, if any, to be taken. We do not conduct searches to discover weapons. Brandishing a weapon is unacceptable. The Shelter Manager will contact the Operations for guidance
- Always give the resident an opportunity to make decisions for themselves related to the help they need or want. They may process what is happening differently than you and should be given options when possible. “Food will be arriving at 5:00pm and will be available until 6:00pm. Please feel free to eat when it best suits you.”

DONATIONS

During any disaster response it is very common to experience an outpouring of donations from well-meaning individuals/groups who do not have good information about needs and the logistics associated with managing donations. Items can include damaged/dirty clothing, bedding with pests, and homemade food that comes from an unsanitary kitchen. Local rumors may also result in donations that are not useful. Media relations can assist by releasing information that is factual and monitoring social media to clarify potential misinformation.

Donations may be described as:

Solicited: Items that have specifically been requested by the jurisdiction to support the operation, or by a manager with the authority to request items. This may include things like the donation of *unexpired* bottled water.

- Be prepared at the shelter site to receive solicited items and to store them away from the client population.
- Be aware that if items are solicited, very specific criteria must be established, and the amount(s) needed. General solicitations will potentially result in extreme donations.

Unsolicited: Items brought to the shelter site that may or may not be useful and may involve resources to sort, clean, dispose of, store, or distribute. Even donations of new clothing may create issues of inequity.

- Acknowledge that donations will be brought to a shelter site
- Never accept money; be prepared to refer people to a non-profit organization
- Immediately advise the leadership of any donations
- Arrange prior to shelter opening for items to be taken to partner organizations that generally serve the community
 - Free clothing distribution (faith-based clothes closet or community groups)
 - Partner organizations who run resale retail stores and may agree to receive the items and offer free vouchers to disaster clients
- Be prepared to decline homemade food items; accept only items that come from a commercially licensed facility and that are needed
 - Sanitation and food temperatures are critical as are potential allergens
 - Avoiding food-borne illnesses in shelters must be a top priority
- Be prepared to temporarily store unsolicited donations out of view of clients
 - May require acquiring a box truck or similar storage container
 - Clothing, bedding must be bagged
- If donations are potentially usable by shelter clients, i.e. hygiene items, establish a process for sorting and making them available
 - Items must be in new, and in sealed containers
 - Not to include any over-the-counter medications
 - Confer with Medical staff for guidance
- New packaged towels or pillows
 - Make certain you don't create an inequity issue

EMERGENCY EVACUATION ACTION & SAFETY PLAN

It is important that in the first few hours – 24 at most – that an Emergency Plan be established in the event of an emergency in the shelter or in the area outside the shelter. The evacuation plan should include maps designating assembly points. All shift supervisors must be informed of the plan and their expected actions in the event of an emergency.

If there is a fire or other hazardous condition inside the shelter, evacuate the residents and staff as quickly as possible to a safe location. Be sure to take the Sign In/Out log and Registration notebook to enable you to account for everyone.

Call 911 immediately. Be sure to provide the address and name of facility to inform responders.

External Environment: If the shelter is in an area subject to impending danger such as a flood or wildfire, including the potential for road closures, the Plan should include the actions needed to safely move staff and residents to another location. If there are trees that may be impacted by windstorms, consider whether parking lot residents should be moved inside. For these potential risks it is critical that the Shelter Manager stay in contact with the Operations to maintain situational awareness.

Safety Inside the shelter facility: Establish a regular schedule of daily shift inspections that includes the identification of potential hazards and corrective measures taken. These measures are important to maintain a safe and secure environment for staff and residents. At a minimum the Daily Shelter Inspection Form should be used each day.

Behaviors that may be dangerous to and individual, other residents, or staff

- Remain calm
- Contact 911 – be sure that the address is readily available to inform responders
- Contact Medical and/or Behavioral Health to assist with de-escalation
- Remove other residents to safe areas within the shelter without creating further disruption

EMERGENCY SHELTER EVACUATION PLAN FORM (Sample) PRIORITY IS RESIDENT AND STAFF SAFETY

Name of shelter: _____ Address: _____
Address posted: _____

Shelter Emergency #: Shelter Manager: _____
Day Shift Supervisor: _____ Night Shift Supervisor: _____

Operations #s: (1) _____ (2) _____ (3) _____

For risks existing in the shelter such as a fire, ALWAYS CALL 911 FIRST, move residents to safety

Designated assembly areas. (1) _____, (2) _____, (3) _____
(1) Lead assigned: _____ (2) Lead assigned: _____ (3) Lead assigned: _____

- Gather all registration and other log books to enable accounting for all residents and staff
Name or position assigned: _____
- Gather medications and prepare to take: Name or position _____
- Snacks/water to take if possible: Name or position _____

Potential External Emergency risk that may require evacuation, i.e. flood, wildfire, air quality
Or other _____ Potential road issues: _____

Where would shelter residents and staff be evacuated to, if known: _____
If not known, be prepared to follow advice of evacuating agency or Operations

If preliminary notice is given, assignment of evacuation tasks:

- Gather items as noted above: registrations, log books, medications, snacks/water
- Assessment of transportation needs: Name or position _____
 - Individuals with vehicles
 - Those without transportation
 - Need for special transportation
 - Report to Shelter Manager for arrangements
- Notification of evacuation to residents: Shelter Manager or person in charge
 - Calm
 - Provide instructions in languages of residents
 - Timeline
 - Transportation
 - Assign staff to assist those with access and functional needs
 - Medical Services and Behavioral Health staff available _____

If advised to Shelter In Place residents will be located away from doors and windows, residents will be located _____. Food and water will be located _____.
Evacuees staying in vehicles outside will be invited inside.

HEALTH-RELATED CONDITONS

Infectious diarrhea such as norovirus: These are not to be confused with cases of foodborne illnesses or other conditions causing a stomachache. If someone complains of a stomach ailment, is vomiting or complaining of diarrhea, or has a fever, contact medical staff immediately. For some individuals the condition is very serious and can require hospitalization. These conditions can be diagnosed with proper testing and minimizing any further outbreak is important. Follow any guidance provided by medical professionals.

These conditions are easily transmitted to others and immediate action must be taken to prevent a further outbreak. Operations must be contacted immediately, and a plan developed based on advice or requirements of state or local public health officials for enhanced sanitation, containment of fluids such as vomit, restriction of shared areas such as restrooms, and use of personal protective equipment. It may be necessary to establish separate sheltering spaces for individuals such as isolation.

Definitions:

Isolation: Separating individuals who are sick from those who are not to minimize transmission.

Quarantine: If a person has potentially been exposed to an infectious disease, their movements can be restricted for a pre-designated amount of time to determine if they have become ill.

Note: Only local or state public health agencies have legal authority to require isolation or quarantine of residents or staff. The Shelter Manager will work closely with the designated health authority to assist with any monitoring of isolation or quarantine areas.

Bed Bugs: These pests feed on human blood and their bites are irritating to those who experience an infestation. They are considered a public health pest, but not an emergency. Contact the local public health office or a medical staff person to determine the best course of action. These pests may be introduced into the shelter by residents who bring them in on personal linens or clothing. Donated linens, unless new or that can be laundered prior to use, may introduce these pests.

Fleas and Ticks: These pests may be introduced into the shelter by animals or residents and can be transmitted to residents. Follow the same guidance as for bed bugs. Animals may also need treatment.

Ticks: Ticks can create serious complications and should be removed by medical staff.

Head Lice: This is not considered a public health emergency, but an individual (usually children) may experience some irritation. Scratching can cause an infection. There are over-the-counter shampoo remedies available. Discuss a potential condition with the medical staff or the local health department for potential action. Parents must be involved in any discussion about treatment options. Lice can live for 1-2 days so it may be necessary to launder linens, clothing, etc. to preclude re-infestation. Any shared items may also need to be laundered or replaced. Rely on the guidance of any medical or public health staff.

OPIOID OVERDOSE AND ADMINISTERING OF REVERSING DRUG

Emergency shelters and cooling/warming/air quality centers may have residents who experience what appears to be an opioid overdose. If a shelter worker elects to take the training and is willing to administer the potentially life-saving drug, the following information is provided:

(jurisdiction to provide)

NARCAN kits (may) be made available in shelter and center sites.

Awareness:

- **Opioid overdoses are a medical emergency. Always call 911.**
 - If Narcan is administered there may be a recurrence.
- Individuals may demonstrate a physical reaction; stay clear to avoid contact.
- If Narcan is administered to an individual not needing it, there is no harm.

* * * * *

It's important to note that Oregon has a [Good Samaritan law](#) that protects individuals from civil prosecution if they give someone naloxone in a good faith effort to reverse an opioid overdose, or if they choose not to administer naloxone.

Individuals Required to Register with a Government Agency

Individuals who may be required to register include the following situations, and may be based on their requirement to report their current address or situations related to court orders:

- **Probation or pre-trial release**
- **Sex offender status**

In some cases, people who are required to register have restrictions because of a court order which puts a “no contact” restriction in place. It is in their best interest to reveal that information and failure to report can put them in violation.

In some cases, people may be required to report a change of address, but they are given a designated time to report that information. The person may not be in the shelter long enough for that requirement to become an issue. It is their responsibility to report, not ours to manage.

Individuals are eligible to receive mass care services such as lodging, food, medical and other services.

Registration staff will discreetly refer anyone answering “yes” to this question to the Shelter Manager.

Shelter Manager will:

- discuss the reason for registry and determine the best course of action considering:
 - the individual
 - shelter population as a whole
 - local jurisdiction law
 - potential risk based on the individual’s unique status.
 - Other factors to consider:
 - Potential for added trauma to the resident population, especially if the person’s status is known by others in the shelter
 - Protection of residents
 - Protection of privacy / confidentiality of the individual
 - The type of services being requested, i.e., dormitory, only meals, only parking, only medical, etc.
- collaborate with law enforcement based on the situation.

Potential Actions:

- Pre-trial or probation conditions
 - Individual must:
 - indicate an understanding of shelter and site rules
 - Shelter Manager must:
 - Remind the individual to contact their probation officer within the timeline
 - Return the individual to Registration, if appropriate

- Sex offender status
 - Advise that law enforcement will be contacted to determine if they can remain.
 - The individual may choose to leave.
 - If they choose to stay at the shelter while awaiting law enforcement:
 - Shelter Manager will request that they restrict their activities to a specific place in the shelter away from the general population where staff can observe them until law enforcement arrives. Supervision is required if they move to general areas such as restrooms, feeding areas, etc.
 - Shelter Manager will confer with law enforcement and provide information, including makeup of the shelter population.
 - Law enforcement may speak with the individual; perform a background check.
 - If law enforcement permits the individual to remain in the shelter, the Shelter Manager will:
 - advise the individual of shelter rules and behavior expectations
 - provide appropriate information to shelter staff to ensure the individual's confidentiality, and for the protection of other residents
 - staff needs to have sufficient information to appropriately observe
 - staff must report any incidents to the Shelter Manager immediately
 - notify any security personnel on site
 - place notes in the Manager Log (not general log)
 - Individual client will remain in areas where they can be appropriately observed and not interact with prohibited groups, i.e. children
 - Law enforcement to provide guidance
 - If law enforcement recommends the individual should not remain in the shelter, they need to take them to an alternate shelter
 - If law enforcement cannot take them, contact Operations for next steps.

If someone answers “no” to the registration requirement and the shelter staff later learns that a person in the shelter should have answered “yes”.

- **Shelter Manager** will discuss the requirement with the resident and gather facts
 - **Probation or pre-trial release:** take the same action described above
 - Resident is directed to change their response on the registration form
 - **Sex offender status:** have the individual go to an area where they can be observed until law enforcement can arrive. Inform staff who are assigned to observe.
 - Follow the same process described above.
 - Shelter Manager discusses the situation with any shelter staff or residents who have expressed concern
 - Maintain confidentiality as much as possible
 - May involve Medical or Behavioral Health staff
 - Shelter Manager documents actions in Shelter Manager Log.

This document should be reviewed carefully by the jurisdiction together with the Welcome and Rules document prior to their use.

Removal of an Individual from a Congregate Shelter

For purposes of this guidance, the term Shelter includes the primary building, parking lots, vehicles, on-site pet shelter location, smoking areas, service delivery spaces, or other adjacent property being used for evacuee support.

In the event of a fight or other immediate situation involving a physical altercation, contact 911 for law enforcement assistance. Eliminate as many individuals from the area as possible for everyone's safety.

For the safety and security of shelter workers and residents, it may be necessary to remove someone from the shelter. This may be based on physical altercations, fighting, perpetrating domestic violence, verbal abuse of either workers or shelter residents, disturbances, sexual harassment, use of racial, ethnic, gender, religious, or sexual identity slurs or epithets or similar behaviors, or serious violations of the shelter rules. Example of serious violations: blocking of emergency exits, blocking emergency doors open to allow uncontrolled entry by non-registered residents, smoking in the shelter. Removal may occur because of bringing prohibited items into the shelter such as weapons, or damage to the facility. Theft of items from other residents or shelter facility, *as verified by law enforcement*, may be cause for removal.

Shelters are intended to provide a safe, secure place where people can wait to go back home or to begin their recovery process. Stress levels are high and congregate settings are uncomfortable for everyone. In most instances, removal occurs after attempts to resolve the issue or behaviors have not resulted in satisfactory changes. Attempts should be made to resolve behaviors without the necessity of removal unless there is an indication that physical altercations, fighting, domestic violence or other behaviors will continue. It may be advisable to engage behavioral health specialists to assist. In the case of serious infractions such as physical altercations, removal may be immediate, and it may be necessary to involve law enforcement. All interactions must be documented, including any attempts to change the unacceptable behavior and results.

The Shelter Manager is responsible for contacting Operations to discuss options for potential removal.

Process and criteria to be considered:

- The seriousness of the infraction, impact on staff and residents, and potential for repetition
 - In a domestic violence situation, effort must be made to not re-victimize
 - Engage behavioral health or domestic violence specialist to assist the victim, if appropriate
- If law enforcement is involved, consider any advice given.
- Consult with Behavioral Health and/or Medical Services to discuss potential background and perspectives on the situation; discuss potential options to ensure the safety and security for all.
- Document client's behavior, resolution efforts, who was involved, and potential witnesses or victim's statements. Those statements or other information will be kept in a secure location. Maintain confidentiality.
- Document the decision in the Shelter Manager's Log for future reference.

- Once the decision is made, Operations will inform leadership, including the PIO in the event it becomes a media issue. Social media should be monitored.
- Operations should make efforts to minimize the potential for the removed individual to gain access to another shelter if appropriate.

Conducting the Removal

Removal should:

- Be performed by at least two staff that may include the Shelter Manager, any security staff available to assist, any law enforcement personnel available, and/or behavioral health. The situation and personnel available will determine who should be a part of the team along with the Shelter Manager.
 - If law enforcement or security staff assist, document agency, name, and badge number.
- Provide an opportunity for the resident to gather their belongings if the situation allows.
 - Make certain two staff help facilitate that effort
 - If the resident is not able to retrieve their own belongings, two staff should be assigned to pack their items and deliver to a location where the individual can retrieve them later. This is an important option if the individual is not to be allowed back into the dormitory area or on shelter property. Arrangements may be made with local law enforcement, if necessary and the situation warrants. Advise the individual where the belongings will be placed and when they will be available.
 - Inventory the items and place with the documentation.
- Escort the individual to the exit, making certain there are as few individuals around as possible, both to maintain their dignity, and to minimize disruption in the shelter. Document any behaviors during the removal, particularly any general or specific threats. Inform Operations for further action.
 - Inform the individual that they cannot relocate to a different shelter *if that decision was made*.
 - Inform the individual that they are not allowed back on shelter property.
- Record the removal status in the registration database.
- Inform Shelter Supervisors and Registration staff of the removal and any action they should take if the person returns to the shelter.

Resident Helpers in a Congregate Shelter

Frequently shelter residents like to help maintain the shelter in an orderly, sanitary condition. Extra hands benefit the shelter staff, and it provides an opportunity for residents to stay busy and contribute valuable services.

The following are tasks that should not be performed by residents because of requirements for background checks, confidentiality, and data access.

- Registration data collection and data entry
- Supervision of children or other vulnerable residents
- Monitoring the shelter in/out process (may require access to confidential information)
- Any financial tasks, i.e. shopping (may accompany an authorized person, if not in a personal vehicle). Caution should be exercised when allowing a resident to accompany only one staff person. Use discretion.

The following are tasks that can be accomplished by resident helpers:

- Making and posting signs or informational messages
- Cleaning / sanitizing tables. Chairs and food service areas
- Organizing items at the snack table and replenishing
- Distributing packaged food items / meals
 - Safe food handling requirements must be followed, and supervision provided by a worker with a Safe Food Handling Certificate
- Sweeping or mopping floors
- Cleaning / sanitizing restrooms and showers
 - Be sure they have proper personal protective equipment, and they are aware of needle stick precautions
 - Replenishing restroom supplies
- Assisting with doing inventories
- Loading and unloading supplies
- Removing garbage
- Picking up discarded items on the exterior of the shelter and parking lot

Note: be cautious about allowing unsupervised access to storage areas and be certain safety practices are observed.

RESIDENT PERSONAL BELONGINGS AT THE SHELTER

People may bring nothing to the shelter, or they may have carloads and trailers of their personal items. Even if they bring nothing, they will begin to acquire items as they settle in. For safety reasons because space will be limited in the dormitory it is important that residents

- limit the items they keep near them.
- not store items in the aisles between cots; all items should be stored under cots
 - For those with mobility devices, their assigned space should be larger to accommodate things like wheelchairs, walkers, etc. Extra space is also recommended for service animals. Extra space should still allow an unobstructed aisle and emergency exit for all residents.

It may be necessary to purchase storage containers for residents to keep their personal items under their cot.

Some people may bring blankets and pillows to make their cot more comfortable and familiar. For small children or those with incontinence issues, laundry may become an issue. There is the potential health issues with bed bugs and head lice. (See separate guidance.) Be aware.

For those with more items than can be stored under their cot:

1. Encourage them to leave items in their vehicle*
2. Provide a secure location in the shelter where items can be stored
 - a. Locked
 - b. Items labeled with the owner's name
 - c. Access only when accompanied by shelter staff
 - d. Signed agreement regarding storing and accessing items
3. If the shelter is large and a significant number of items are being stored, it is important to have a written layout where each resident's location is designated.
4. Items may include strollers, bicycles, suitcases, boxes, and other large items
5. It may be necessary to purchase bins/containers to stack items more easily
6. If there is no space in the shelter that can be secured, contact the Operations for possible use of a box truck or other accommodation

Items should not be stored outside where they are unsecured and subject to contamination from weather or smoke.

At the time of shelter closing, any unclaimed items will require attempts to locate the owner. Review the sign in/out log to determine the last contact with the resident and any casework documentation to determine if contact information has changed. If attempts are unsuccessful, arrange with the local jurisdiction to take the items. Inform residents that they will only have 15 days to collect their items from the local jurisdiction.

*If loaded vehicles and trailers are parked on the shelter lot, contact Operations for consideration of security. Depending on the situation and recommendation of law enforcement, it may be advisable engage security staff, especially if RVs are also parked in the lot. Or, law enforcement may offer to increase patrols in the area.

Shelter Storage Agreement

Date: _____ Disaster Name or #: _____ Shelter Name: _____

Resident: _____ Storage location: _____

Name of additional person who can access: _____

Cell: _____ Alternate cell: _____ Email: _____

Received by: _____ Job Title: _____

# of boxes	#of bins/tubs	# of bags	Other	General Additional Description

Agreement:

1. Storage is being provided to assist residents who do not have other options for keeping items secure while they are at the shelter. Although every effort will be made to limit access to the storage area to protect against loss, theft, or damage, there is no guarantee.
2. By placing your items in storage, you agree that (jurisdiction) will not be held responsible for any loss, theft, or damage.
3. Storage is available for shelter residents only.
4. The following items may **not** be stored, and containers may be inspected to ensure compliance:
 - a. Weapons, drugs, alcohol, flammables, or any materials that may create a safety or health hazard to shelter workers or residents
 - b. Wet or otherwise contaminated items
 - c. Jewelry, money, legal documents, electronics, or other valuable items
 - d. Perishable foods; opened food items
 - e. Pets or other animals
5. **You agree to remove your stored items when you check out of the shelter or when the shelter closes. Unclaimed items will be distributed to () for storage for no longer than 15 days.**
6. Items remaining in storage 15 days after shelter closing will be disposed of.

Client Signature

Date

Access Log:

Date	Worker	Resident	Items Removed /Added

Additional access dates can be written on the back of this agreement.

Support for Residents Who Are Working or Going to School

Some evacuees may have jobs and it is important that they continue going to work both from a financial standpoint, but also to maintain their routine. Children may need to resume going to school.

To enable them to continue, it may be necessary to provide immediate assistance unrelated to long-term recovery casework. Immediate needs may be accomplished by engaging community partners, non-government organizations (such as Red Cross), or other resources.

Potential Employment Needs:

- Clothing, including work boots, outerwear
- Lunch (or other to-go meal)
- Tools, electronics
- Childcare (possible to be provided in the shelter by a partner agency)
- Transportation, including gas card

Note: If the individual works nights, some accommodation may need to be made for a quiet sleeping area during the day.

Potential school needs for children:

- Clothing
- School supplies
- Lunch, if not available at school
- Transportation, which can usually be arranged by the school
- Space and electronics to complete homework

Reunification of Animals with Owners

During the aftermath of a disaster household animals can be separated from their human families for a variety of reasons. It is important that we help facilitate their reunification. Counties can coordinate with ESF 11, Department of Agriculture to prepare for animal separations.

Household Animals Missing and Reported at the Shelter

- Provide a description of the animal on an intake form entitled Animals Reported Missing
 - Include any unique information about the animal
 - Breed, Size, age, friendly, etc.
 - Any needs that the animal may have such as medications
- Does the animal have on a collar?
- Are there identifying tags/ chip?
- Location last seen
- Contact name, email, and telephone number of the owner
- Staff may be assigned to contact animal shelter sites to establish a match, if possible

Animals Separated and Brought to Evacuee Shelter Site

- Document any available information on the Animals Reported Missing form for matches
- Arrange sheltering, if needed, until reunification is established

Large Animals Missing or Found and Reported at the Shelter

- Type
- Number (may be an estimate)
- Unique identifier such as brand
- Location last seen
- Document information on the Animals Reported Missing form for potential match information
 - Coordinate with ESF 11, Department of Agriculture

Intake Staff: _____
Location: _____
Date: _____

Animals Reported Missing

Household Animals Reported Missing

Description of the animal: _____
Species: _____ Breed: _____ Size: _____ Age: _____
Sex of Animal: Male _____ Female _____
Unique Information: (blind, not friendly, etc.) _____
Has a collar _____ Color of collar _____ Tag / chip _____
Needs: (medication, etc.) _____
Owner name: _____ Tele # _____
Owner email: _____
Location last seen: _____
Multiple animals of same owner: _____

Animals Separated and Brought to Evacuee Shelter Site

Description of the animal: _____
Breed: _____ Size: _____
Sex of Animal: Male _____ Female _____ Age estimate: _____
Does it have a Collar? _____ Color of collar _____
Tag with contact information: _____
Location where found: _____
Shelter referred to: _____

Large Animals Reported Missing _____ Found _____

Type: _____ Number: _____
Unique identifier, i.e. brand _____
Current location: _____
If missing, location last seen: _____
Date last seen: _____ Owner: _____
Contact: _____

Reunification of People

KEY CONCEPT: CONFIDENTIALITY IS CRITICAL – NOT EVERYONE WANTS TO BE FOUND OR HAVE THEIR LOCATION DISCLOSED.

- There may be protective orders in place that are unknown to us.
 - All names and contact information must be protected if the individual requests confidentiality. Create a separate file for registration forms and sign in/out logs.
 - Unintentional disclosures must be avoided
 - Do not offer to check the registration information just because you are asked
 - Do not offer to bring the person being sought to the registration area
 - Do not do or say anything that may lead the seeker to think the person is at the shelter location
 - Do take the seeker's contact information and refer it to the on-site Reunification Staff
- If someone wants to be found and contact information can be disclosed, let them initiate contact options
 - Red Cross Safe & Well site enables a person to register themselves for others to locate them
 - Post messages
 - Refer them to the on-site Reunification Staff who will coordinate with other agencies
 - Reunification Staff.
- Location of family members or others who are unaccounted for
 - Do not reveal the location or absence of any individuals to the seeker unless the sought individual has indicated they want to be found, and by whom
 - Contact the designated staff who can:
 - Research shelter sites to determine potential locations
 - Coordinate between the seeker and the person being sought
 - Arrange for the disclosure of a person's location, or
 - Arrange for the person being sought to make any connection
 - Operations will contact law enforcement, if needed, to report individuals who are unaccounted for and provide any information that may be shared by family members or others. Staff will follow any established procedures for the specific event, particularly if there is the likelihood of deaths.
- Staff do not make death notifications; it is the responsibility of the medical examiner.
- ESF13 through the Oregon State Police coordinates activities and communication involving law enforcement and missing individuals.

CLEANING OF COTS

Cots must be cleaned and sanitized after use. Use includes having been set up but never occupied by a resident because they may have been inadvertently tainted by passerby, having materials placed on them, or other incidental “use”.

Tip: Don’t set up cots that may not be used; when opening, set up a few at a time, evaluate and set up more.

If cots are cleaned on site, make certain this is enough time for them to dry completely before they are replaced in boxes or bags. If they are still damp, they may get moldy while in storage. As residents begin leaving the shelter, start cleaning, and place the cleaned cots on end in an area where they cannot be accessed and handled by others.

If cots are to be cleaned at another location where they can be placed during their drying time, do not transport them in their bag or box which would then become contaminated. Transport cots outside their box or bag. Once cleaned they can be stored in a clean bag or box.

Personal protective equipment to be worn while cleaning: Gloves, simple mask, and if using a power washer, plastic suit to protect clothing.

Cleaning supplies:

- Broom for sweeping off debris
- Hose attachment for spraying
- Brush
- Dishwashing liquid
- Hospital grade liquid disinfectant
- Protective clothing

Process:

1. Sweep any debris on sleeping surface and frame
2. Spray entire cot with hose sprayer
3. Brush all cot surfaces with liquid dishwashing solution; rinse
4. Spray all cot surfaces with disinfectant solution
5. Air dry for at least 24 hours
 - a. In sunlight if possible
 - b. Caution that humid environments may take longer to dry
6. After dry, place in box or bag and return for storage

Note: If cot sleeping surface remains stained with bodily fluids, it may be necessary to dispose of the cot according to medical waste procedures. If stained from some other source, place in the garbage.

SHELTER SANITATION, DISEASE, INFECTION CONTROL

By their nature, congregate shelters have the potential to expose many individuals to communicable diseases and infections. Sanitation is important in controlling the spread of these conditions. Health professionals should always be consulted when there is any indication of communicable conditions in a shelter environment, and sanitation procedures must be carefully observed.

Food-borne illnesses: The local Health Department representatives may conduct inspections and may provide assistance in developing specific protocols for a shelter. They may inspect a kitchen or any food service location to determine that all rules are followed to prevent food-borne illnesses. Rules include adherence to wearing of gloves, sanitizing of surfaces, proper removal of garbage, refrigeration, and serving temperatures.

Water contamination may occur in disaster situations. If there is any concern about water safety, contact Operations for guidance. Rely on bottled or boiled water for drinking, toothbrushing, or other hygiene activities. Ice may also be contaminated.

Restrooms including toilets and showers: Regular (2-hour interval) inspections should be conducted and any issues addressed. Regular cleaning should be done by staff or contracted service. This includes any mobile showers, toilets, or handwashing stations.

Cleaning and sanitizing of floors and surfaces: Use a detergent solution or wipes to clean all hard surfaces such as tables and chairs, and food serving tables. Follow with a sanitizer wipe or spray. Meal serving and eating areas should be sanitized after every meal and between table occupants. Other surfaces in areas where residents and staff frequent such as activity or worktables and chairs should be sanitized at least daily. Some areas such as diaper changing tables should be sanitized multiple times per day depending on the number of children involved.

Floors should be swept as needed to remove any debris. Mopping should be done regularly in common areas such as eating spaces, or when it is observed that there has been a spill.

Sanitation: Disasters may impact waste disposal systems. Notify Operations immediately.

Waste Management: Dispose of garbage in proper bags and containers, including dumpsters that reduces potential rodents and other pests. Provide for the regular removal of garbage to preclude accumulation. Food waste may need to be double bagged and secured to lessen the attraction of pests.

Medical Waste: Properly collect and dispose of according to Bloodborne Pathogen rules. Consult with Medical staff for guidance if necessary. This includes the waste associated with needles, blood, or other body fluids. Cleaning up of this waste requires personal protective equipment and discarding in special, labeled containers/bags.

Personal Waste: Diapers should be disposed of in designated bags and disposed of frequently. Soiled linens should be bagged separately from other linens and identified for special laundry. Badly soiled linens may need to be disposed of.

Welcome to the Shelter

We know this is a difficult time for everyone. We are here to support you while you are in shelter, and to help you reconnect with family and move forward in your recovery.

Everyone in this shelter must do their part to make this a safe, secure, and sanitary place to stay. The instructions below are intended to create the most satisfactory shelter experience for everyone. Serious or repeated violations may result in your removal from the shelter.

If you need anything that is not described below, please talk with shelter staff who will work to address any issues. Please let us know what we can do to assist you.

Weapons, illegal drugs, alcohol	Are not allowed in the shelter.
Physical altercations	Strictly prohibited.
Respect and dignity	Respect the spaces assigned to others. Put items in your space only. Remain clothed. If you need assistance with privacy, ask staff. No photography that depicts a person is allowed without permission of that person.
Check in and check out	Each time you enter or leave the shelter you must check in and check out. This is a safety measure. If you have confidentiality concerns, discuss them with staff.
Safety and security	Your behaviors cannot jeopardize the safety and security of others. For example: <ul style="list-style-type: none"> • Do not block emergency exits or prop doors open. • Do not allow entry into the shelter by persons not registered. • Do not enter prohibited areas. Follow the instructions of staff regarding safety and security.
Behavior	Negative or abusive behavior that creates a disruption in the shelter, stealing, or destruction of property are not acceptable. This may include language or behaviors that are threatening or constitute sexual harassment, racial or other slurs that are based on an individual's identity or disability. Any issues of domestic violence will be addressed immediately.
Charging stations	If charging stations are provided, share that resource with others. You are responsible for securing your own devices. Do not touch or remove someone else's device. Contact staff if you need assistance.
Children	Parents are responsible for supervising their children. Children cannot be left unsupervised in the shelter. Please help your children be respectful of others. No running. Keep food in designated areas.

Clean and sanitary	Containers will be provided for you to dispose of garbage or litter. Please do your part to help keep the shelter clean. If you notice spills on the floor, or discarded materials, please help by cleaning them up or notifying staff.
Emotional, medical, or spiritual support	Discuss your needs with staff who will make every effort to address them Report any illness or medical needs immediately.
Food and beverages	Food and beverages are not allowed in the dormitory area. Water in a container with a lid, may be allowed in the dormitory.
Lights	Dormitory lights will be dimmed at 10 p.m. until 7 a.m. This will be considered quiet time. Times may change based on shelter needs; follow the posted schedule or ask a staff member.
Meals	Meals will be served in the eating area as posted. Beverages and snacks will be available in designated areas. <ul style="list-style-type: none"> • If you need special meals or food items, discuss with staff.
Noise	Keep your personal technology items at a low volume or use headphones or earbuds. No yelling or screaming.
Personal belongings	Security of your belongings is your responsibility. If you cannot secure your items under your cot, discuss other alternatives with staff. If you need a storage container, discuss your need with staff.
Pets	Service animals are welcome. Accommodations for pets will be made at a pet shelter.
Privacy	Speak to shelter staff if you have concerns or need additional privacy.
Reunification	If there are family members not with you, please let the Registration staff know that they may be arriving. Ask staff how you can let others know where you are.
Smoking and vaping	Allowed only in designated areas outside the shelter. Some facilities prohibit smoking or vaping anywhere on the property. Ask staff for the location of the designated area.
Vehicles	Need to be parked in the designated areas. Garbage cannot be accumulated around vehicles; garbage is to be placed in receptacles. If you have questions about the parking area, discuss with staff.