PURPOSE: To provide support to meet the medical and health needs of shelter residents in established disaster shelters.

AUTHORITY: California Health and Safety Code Section 34070-34072
California Health and Safety Code Section 101025, 101030
Hospital Preparedness Program Agreement

PRINCIPLE:

1. The primary responsibility for the general health of a community in a disaster rests with the local public health authorities and local medical, nursing, health, and hospital facilities. The American Red Cross (ARC) as part of the community’s emergency response system supplements the existing service delivery system for community health care.

2. By congressional mandate and in accordance with its corporate policy, the ARC has a long-standing disaster relief mission. The ARC is a partner with government in helping to fulfill government’s legal responsibility of providing care and shelter for its citizens in a disaster.

3. The Hospital - “Adopt a Shelter” program is designed to supplement existing health-related services, secure resources to meet the health needs of the shelter residents, and mitigate disaster-related illness, injury and death. The role of the adopting hospital will include providing medical screening, first aid treatment, medical/nursing care, writing prescriptions/prescription refills, immunizations, TB testing and other medical care as needed within the functional capacity of the provider.

4. Although the adopting hospital personnel will be carrying out the aforementioned functions, the ARC will manage the overall shelter operation. Support services for mental health and social services will be provided by the various County departments. Shelter residents who require more advanced health care that can not be provided at the shelter will be referred, preferably, to the adopting hospital’s services or County services.

5. Hospitals that choose to participate in the Adopt-a-Shelter program are encouraged to meet the health needs of shelter residents and keep track of expenses incurred while participating in this program. The County Emergency Medical Services Agency (EMS) will work closely with the County Office of Emergency Management (OEM) to seek assistance with regard to reimbursement from state and federal disaster funding sources.
POLICY:

I. Role of the Adopting Hospital - the adopting hospitals should:

A. Provide at least one Registered Nurse (RN) to staff the shelter (24 hours a day, 7 days a week) during the entire operation of the shelter. On-call response may be evaluated as an option as shelter operations progress.

B. Provide additional medical/health staff as needed (i.e., physicians to oversee the hospital’s Adopt-a-Shelter medical functions and write prescriptions, etc).

C. Hospital staff should perform the following functions for shelter residents:
   1. Assess for immediate medical/health needs.
   2. Assist in finding healthcare resources including identifying and referring shelter residents to primary care providers.
   3. Provide medical care as appropriate.
   4. Work with public health personnel to provide education on communicable disease and communicable disease transmission.

II. Role of the Department of Health Services (DHS) - DHS will:

A. Coordinate with the ARC to determine the need to implement the Adopt-a-Shelter program.

B. Work with hospitals to determine which facilities are available to adopt a shelter.

C. Coordinate transportation for residents whose medical needs exceed the capability of the shelter(s).

III. Role of the American Red Cross (ARC) - ARC will:

A. Work with DHS to determine the need to activate the Adopt-a-Shelter program.

C. Provide an orientation to hospital staff participating in the program. Areas of information to be covered include:
   1. ARC Disaster Health Services functions and protocols within shelters.
   2. Available ARC pharmacy agreements and other health related resources.
   3. Assessment of safety and sanitation issues in the shelter.
   4. Appropriate ARC documentation for continuity of care within ARC shelters.
IV. Support Agencies/Organizations:

A. County Office of Emergency Management (OEM) - OEM will serve as the coordinating body for all County departments.

B. Department of Public Social Services (DPSS) - DPSS will:

1. Partner with the American Red Cross to support those mass care operations at the shelter that are non-medical, per its role as the lead agency for care and shelter at the Operational Area.

2. DPSS will provide personnel as needed to assist with running the shelter infrastructure and to fill-non-medical staffing needs – registration, arranging for mass feeding & snacks, disaster welfare inquiries, and securing general shelter supplies.

3. DPSS will also coordinate with the appropriate County departments and other partners to identify specialized staff to address the needs of people with disabilities in mass care shelters including the activation of Personal Assistance Services (PAS) and Functional Assessment Shelter Teams (FAST).

C. Department of Mental Health (DMH) - DMH staff will assess mental health needs and arrange for disaster mental health services. They will also ensure the continuation of care and treatment for those clients within the mental health system who may be in the shelter.

D. Department of Public Health (DPH) - DPH will assist with the provision of public health nurses and healthcare staff to assist with the medical and public health needs of mass care shelters including communicable disease monitoring and education as well as shelter safety and sanitation.

E. Sheriff's Department – County Sheriff maintains, manages, and/or coordinates with local law enforcement agencies for security at mass care facilities as needed. They also coordinate the traffic management during evacuee movement to shelter facilities, and monitor identified registered sex offenders in shelters in accordance with local and state statutes.

PROCEDURE:

1. DHS is notified by DPSS or ARC that shelter(s) have been established and that there is a need for medical support beyond what the ARC provides.

2. DHS DOC will notify hospitals and request participation in the Adopt-a-Shelter program. Hospitals located within the general geographic area of the shelter site(s) will be contacted first via ReddiNet.

3. Once a hospital has expressed its interest in adopting a shelter, the DHS DOC will coordinate participation between the hospital, DPSS and ARC.
4. The DOC will establish periodic communications with the adopting hospital(s) and/or the shelter site(s) to determine status of shelter operations and ongoing need for health resources.

REFERENCES:

American Red Cross Disaster Cycle Services, Program Essentials, Response Program Essentials, V.1.0.2015.05.27
County Agreement with the American Red Cross Los Angeles Chapter, June 12, 2007
Los Angeles County Operational Area Mass Care and Shelter Annex
The Federal Charter of the American Red Cross National Response Plan
Public Health and Medical Services Annex, Emergency Support Function (ESF) #8