

OFFICE OF RESPONSE AND RECOVERY

FACT SHEET

FP 104-009-001

INFECTIOUS DISEASE EVENT

This Fact Sheet describes the scope of assistance that may be provided under a Robert T. Stafford Disaster Relief and Emergency Assistance Act, as amended (Stafford Act) emergency declaration in response to a domestic infectious disease event. Any action taken by the Department of Homeland Security (DHS), including the Federal Emergency Management Agency (FEMA), in response to an infectious disease event will be within the context of an integrated whole community all hazards approach and in coordination with other agency authorities and activities that would have a primary role in these incidents, including the U.S. Department of Health and Human Services (HHS) and its Centers for Disease Control and Prevention (CDC). In order to assist States, Tribes and U.S. Territories in assessing impacts and evaluating the need for Federal assistance in an infectious disease event, FEMA has developed these guidelines for requesting an emergency declaration.

As part of an all hazards approach, the key roles and responsibilities across the whole community for any threat or hazard – including infectious disease – are contained in the national planning frameworks for prevention, protection, mitigation, response, and recovery. Supporting federal interagency operational plans (FIOPs) include a more detailed concept of operations; description of critical tasks and responsibilities; detailed resource, personnel, and sourcing requirements; and specific provisions for the rapid integration of resources and personnel appropriate for responding to Public Health events.

Emergency Declaration

- Other federal agencies, such as HHS and its CDC have existing authorities that enable support and assistance for the State or Tribe in an infectious disease event.
- For the purpose of emergency declarations for an infectious disease event, FEMA will follow the procedures described in 44 C.F.R. § 206.35, Requests for Emergency Declarations. As with all declaration requests, FEMA utilizes a variety of evaluation criteria and factors, as established in 44 C.F.R. Part 206, Subpart B. However, the four primary evaluation criteria for an infectious disease emergency declaration are:

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- Whether the State, Tribe or U.S. Territory has directed execution of its State/Tribe/U.S. Territory emergency plan; and
- Whether the State, Tribe or U.S. Territory has demonstrated that the incidence of infection for the event for which a declaration is being requested is significantly higher than the State's, Tribe's or U.S. Territory's baseline or is otherwise abnormally high enough to qualify the event for an emergency declaration; and
- Whether the State, Tribe or U.S. Territory can demonstrate that effective response to the event is beyond the capability of the State, Tribe, U.S. Territory, and/or affected local governments; and
- o Whether the State, Tribe or U.S. Territory has identified specific, supplemental Federal emergency assistance that is required to save lives, protect public health and safety, or lessen or avert the threat of a disaster.
- FEMA will formulate a recommendation based on all available information to include whether Public Assistance Emergency Protective Measures (Category B), Direct Federal Assistance (e.g., personnel, equipment, and supplies) is needed to meet critical emergency protective requirements that are beyond the capability or capacity of the State, Tribe and/or U.S. Territory.
- FEMA may not duplicate assistance provided or available under the authority of another federal agency or from insurance. Other federal agencies, including but not limited to HHS and its CDC, have authority to provide assistance to support jurisdictions during infectious disease events.
- In the event of an emergency declaration, FEMA would determine the incident period in coordination with HHS.
- The President retains sole authority to approve all declaration requests, regardless of any FEMA recommendation.

Eligible Assistance

- Under an emergency declaration as described above, FEMA may provide assistance for emergency protective measures in accordance with Public Assistance policies and guidance. Assistance may include, but is not limited to the following:
 - o Management, control and reduction of immediate threats to public health and safety:
 - Emergency Operation Centers (EOC) costs.
 - Training specific to the declared event.

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- Decontaminating eligible public facilities, to include emergency responder vehicles.
- Decontaminating private facilities, such as infected person's residences, when determined necessary by the CDC, State, Tribe, U.S. Territory or local public health authorities.
- Technical assistance to State, Tribe, U.S. Territory and/or local governments on disaster management and control.
- o Emergency medical care in accordance with FEMA Policy 9525.4 *Emergency Medical Care and Medical Evacuations*:
 - Non-deferrable medical treatment of infected persons in a shelter or temporary medical facility.
 - Related medical facility services and supplies, including x-rays, laboratory and pathology services, and machine diagnostic tests.
 - Temporary medical facilities (for treatment when existing facilities are overloaded and cannot accommodate the patient load or to quarantine potentially infected persons).
 - Inoculation for emergency responders.
 - Use of specialized medical equipment.
 - Medical waste disposal.
 - Emergency medical transport.
- o Tracking potentially exposed persons.
- Congregate sheltering (when existing facilities are overloaded and cannot accommodate needs).
- o Non-congregate sheltering, such as hotels, dormitories, etc. for the specific purpose of containment.
- o Household Pet Sheltering in accordance with FEMA Policy 9523.19 *Eligible Costs Related to Pet Evacuations and Sheltering*.
- o Containment actions related to household pets in accordance with CDC guidelines.
- o Purchase and distribution of food, water, ice, medicine, and other consumable supplies, to include personal protective equipment (PPE) and hazardous material (HAZMAT) suits.
- o Movement of supplies and persons.
- o Security, to include barricade, fencing and law enforcement.
- o Communicating health and safety information to the public.
- o Protection of municipal water supply.
- Search and rescue to locate and recover members of the population requiring assistance, and to locate and recover human remains.
- o Storage and interment of unidentified human remains.
- o Mass mortuary services.
- o Recovery and disposal of animal carcasses (except if another Federal authority funds the activity; e.g., U.S. Department of Agriculture Animal and Plant Health Inspection Service provides for removal and disposal of livestock). See FEMA Recovery Fact Sheet 9580.206 *Animal Carcass Removal and Disposal* for additional information.

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- Reimbursement for State, Tribe, U.S. Territory and/or local employees is limited to overtime. See 44 C.F.R. §206.228 for additional information.
- Donated Resources may be credited toward the non-federal cost share in accordance with FEMA Recovery Policy 9525.2 *Donated Resources*.
- Direct Federal assistance may be available through mission assignments (see Attachment), internal FEMA capabilities, or a combination of the two.

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Office of Response and Recovery

10.21.14

Date

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Attachment

Pre-Scripted Mission Assignments (PSMA) that may accommodate DFA in support of an infectious disease event:

TASK	PSMA	ESF	AGENCY	PSMA TITLE (CONTINUED ON NEXT PAGE)
1	171	3	USACE	National Water
1	173	3	USACE	National Ice
1	240	8	HHS	Emergency Prescription Asst. & Medical Equipment Replacement Program
2	201	5	OSHA	Implement the Worker Safety & Health Support Annex
2	250	8	HHS	Food & Product Safety Inspection
2	248	8	HHS	Behavioral Health Care
2	245	8	HHS	Environmental Health-Hazard Identification & Control Measures
3	136	1	DOD	Rotary Wing Lift (Med)
3	137	1	DOD	Rotary Wing Lift (Heavy)
3	138	1	DOD	Tactical (Ground) Transportation Support
3	139	1	DOD	Strategic Transportation Support
3	183	4	USFS	MOB Centers
3	207	7	USACE	Logistical Support
3	175	3	USACE	Commodity Team
4	187	5	FPS	Contract Security Officers
4	270	13	СВР	Force Protection Non-USAR
4	178	13	ICE	Contract Security Officers
4	176	8	NPS	Law Enforcement Strike Team (Field Ops)
5	72	8	HHS	Medical Care and Support
5	73	8	HHS	Federal Medical Station
5	254	8	HHS	National Disaster Medical System (Patient Evacuation)
5	252	8	HHS	NDMS (DMAT, NVRT, DMORT)
5	236	8	HHS	ALRT Push Package
6	228	8	DOD	Temporary Medical Treatment Facilities
7	231	6	CNCS	Corp for National and Community Service (CNCS) Field Deployment
8	71	8	HHS	Public Health Services
8		15	FEMA	OFA SME to Support ESF #15 External Affairs
9	169	3	USACE	Technical Assistance to States, Tribes or U.S. Territories
9	193, 194, 195	5	NGA	Geospatial Intelligence Analytical Support
9	238	8	HHS	Technical Assistance

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Attachment (continued)

PSMAs that may accommodate DFA in support of an infectious disease event (continued from previous page):

TASK	PSMA	ESF	AGENCY	PSMA TITLE (CONTINUED FROM PREVIOUS PAGE)
10	218	9	NPS	SAR Field Operations
10	184	13	CBP	LE SAR K-9 Team
11	243	8	HHS	Mortuary Operations Assistance
11	225	8	DOD	Mortuary Affairs Assistance
13	242	8	HHS	Animal Disease Control (Veterinary Services (FSIS)
	133	1	DOT	Federal Transportation Assistance for Aeromedical Evacuation Forces