



Use of Mass Care Task Forces

March 2024

ABSTRACT

This document provides best-practices and relevant guidance, procedures, checklists, and job aids for use of task forces in mass care.

Purpose

The purpose of this document is to provide best practices and relevant guidance, procedures, checklists, and job aids for mass care and emergency assistance task forces during preparedness and response for strategic coordination. For simplicity this document will use the term “mass care” to refer to both mass care and emergency assistance. None of the material is prescriptive but is intended to share a range of practices that have been useful in different situations encountered by mass care task forces.

Audience

The audience for this document includes Federal, State, Local, Tribal, and Territorial emergency management agencies, Non-Governmental Organizations (NGOs) and private sector entities involved in the coordination of mass care services during a disaster.

Scope

The scope of this document addresses the use, role, and organization of mass care task forces operated at Emergency Operations Centers (EOCs) to support the response and recovery operations taking place in the field.¹

Mass Care Task Forces

In response, the [National Incident Management System](#) (NIMS) defines a task force as “[a]ny combination of resources of different kinds and/or types assembled to support a specific mission or operational need.” When required, mass care task forces are established at emergency operations centers by the jurisdiction’s Mass Care Coordinator. EOCs are part of the standard, national framework for incident management described in the Command and Coordination component of the NIMS providing incident support, through operational and strategic coordination, resource acquisition and information gathering, analysis, and sharing.

The State Mass Care Coordinator assists and coordinates the efforts of mass care and emergency assistance personnel in the state.² Local jurisdictions may designate a Mass Care Coordinator as well.

Some jurisdictions maintain a standing committee to advocate, plan, and prepare for Mass Care prior to events. These Mass Care planning committees are sometimes referred to as task forces as well. Members of such committees may form a core of a mass care task force for a response. Forming a collaborative planning team³ with all MC/EA stakeholders, representing the Whole Community, helps to ensure all are involved in the planning process and ultimately in the response. This results in a more coordinated and collaborative response.

¹ Some task forces may be formed at the time of the incident. Others may utilize standing mass care committees that support efforts outside of response and recovery in the emergency management cycle. This document will concentrate on the use of the task force during an incident.

² [State Mass Care Coordinator Position Qualification](#)

³ [Developing and Maintaining Emergency Operations Plans Comprehensive Preparedness Guide \(fema.gov\)](#)

Although examples in this document primarily address mass care activities, a task force could be developed to assist in the response to or coordination of any issue, gap, or activity within the responsibilities of the Mass Care Coordinator. Depending on the jurisdiction's emergency management plan, mass care coordinators may be responsible for coordinating mass care and one or more emergency assistance activities.

Mass Care and Emergency Assistance Activities

The guidance for task forces in this document is presented in relation to mass care services and emergency assistance as defined in the [ESF #6 – Mass Care, Emergency Assistance, Temporary Housing, and Human Services Annex](#) to the [National Response Framework](#). The mass care function is composed of four activities:

- Congregate sheltering - provides a safe, sanitary, and secure environment for individuals and households displaced by disasters,
- Feeding - provision of feeding services at fixed sites and distribution sites and through mobile feeding units,
- Distribution of emergency supplies - acquisition and delivery of life-sustaining resources, hygiene items, and cleanup items to meet the urgent needs of disaster survivors, and
- Reunification - facilitates assistance for children separated from their parent(s)/legal guardian(s), as well as adults from their families, due to disaster.

The Emergency Assistance function is defined as:

- Coordination of voluntary organizations and unsolicited donations and management of unaffiliated volunteers,
- Essential community relief services,
- Non-congregate and transitional sheltering,
- Support to individuals with disabilities and others with access and functional needs in congregate facilities,
- Support to children in disasters,
- Support to mass evacuations, and
- Support for the rescue, transportation, care, shelter, and essential needs of household pets and service animals.

For brevity, the remainder of this document will use the term “mass care” to refer to both mass care services and emergency assistance.

Decision-making Steps to Provide Operational Support

The FEMA [G418 Mass Care/Emergency Assistance Planning & Operations Course](#) identifies the following steps the Mass Care Coordinator can use to assist with decision-making to provide operational support:

- Review Information – review emergency operations plans, annexes, situation reports and incident objectives.
- Coordinate conference calls – regularly scheduled calls, based on the operational tempo, with mass care organizations identified in the state mass care plan.
- Determine the scale of the disaster – Define the scale and scope of the disaster to estimate the quantity of persons requiring mass care.
- Determine requirements for resources – Determine human and material resources required for the identified course of action.
- Determine available resources – Collaborate with stakeholders to determine resources available.
- Identify resource shortfalls – Compare available resources with resource requirements to identify kinds and quantities of resource shortfalls.
- Fulfill resource shortfalls – Collaborate with stakeholders to identify resources available to meet resource requests.
- Identify courses of action – Identify options for meeting the mass care needs of the survivors.

The Mass Care Coordinator may create one or more task forces to meet the expanding scope and scale of any of the mass care support duties or functions. These steps can be allocated between operational coordination and planning coordination as shown in Table 1 below.

Table 1 - Operational Coordination vs Crisis Action Planning Coordination Tasks	
<u>Operational Coordination for current and subsequent Operational Periods</u>	<u>Multi-agency Crisis Action Planning Coordination across multiple Operation Periods</u>
Coordinate Conference Calls	Determine the scale of the disaster
Fulfill resource shortfalls	Determine requirements for resources
	Determine available resources
	Identify resource shortfalls
	Identify courses of action
Review Information	

Operational Coordination

Identifying a time frame based on the goals to be accomplished can ensure that operational coordination (e.g. current and subsequent operational period) and planning coordination (e.g. three to seven operational periods out) tasks do not overlap and cause confusion. The Mass Care Coordinator can adjust the time frame for operational or planning coordination based on the specific circumstances of the disaster and the practices of their jurisdiction.

Providing operational support cannot be performed in a vacuum, but in consultation with the other Mass Care and Emergency Assistance (MC/EA) partners including government agencies, NGOs, public and private sector partners that are providing the MC/EA disaster services and support.

This process should be detailed in the State Emergency Operations Plan (EOP), but conditions may arise during the response that will require spontaneous solutions not previously considered, including the utilization of previously unknown resources and groups.

Some jurisdictions deploy and direct jurisdiction-assigned resources from the Emergency Operations Center (EOC). This is an Incident Command function and is outside the scope of this document.

Planning Coordination

The time frame for planning coordination may be days, weeks, or months out and depends on the timeframe for recovery and kinds of resources and the actual quantities required and difficulty sourcing. The planning coordination tasks outlined in Table 1 above are further defined below.

Determine the scale of the disaster. The scale of a disaster is an estimate of the number of people requiring mass care services. This estimate is translated into capacity requirements for each mass care activity. For example:

- Sheltering – total shelter population & # of shelter locations.
- Feeding – # of meals/day to produce and distribute.
- Distribution of emergency supplies - # of households/day to distribute.

The detailed process to estimate the scale of the disaster for mass care is beyond the scope of this document. The State Mass Care Coordinator can seek estimates from government and NGO partners or assign a mass care task force the job to compile estimates and make a recommendation. This estimate would be for requirements over the life of the mass care response, which, depending on the disaster, could be weeks or months.

An example of such an estimate would be that 10,000 people would need congregate shelter in 40 locations. This requirement would decline to 2,000 in 8 locations within 2 weeks, and then 1,000 in 4 locations within the month.

The estimation of the scale of the mass care disaster is a critical first step in planning for a large response. Once the State and all MC/EA partners agree on an estimate of the mass care requirement, then it becomes a goal toward which everyone can begin to allocate resources.

Determine requirements for resources.

NIMS defines resources as “Personnel, equipment, teams, supplies, and facilities available or potentially available for assignment to incident operations and for which status is maintained.” The [National Mass Care Strategy](#) website has several reference documents to assist in identifying mass care resource requirements. These include:

- [Sheltering & Feeding Capabilities Definitions](#)
- [Multi-agency Sheltering/Sheltering Support Plan Template](#)
- [Multi-agency Feeding Support Plan Template](#)
- [Multi-agency Distribution of Emergency Supplies Plan Template](#)
- [Multi-agency Reunification Services Plan Template](#)

A mass care task force can assist the State Mass Care Coordinator in identifying the resources required to meet the identified scale of the disaster.

Determine available resources. Once mass care resource requirements are identified, the mass care task force can coordinate with MC/EA partners to estimate the quantity and timeframe for the availability of their resources. In a large disaster, disaster agencies with a volunteer workforce may have difficulty sustaining a high operational tempo over the duration of the mass care response. Members of the mass care task force can work to obtain estimates of their level of service delivery after 2, 4, 6 or 8 weeks of sustained operations.

Appendix 1, Mass Care / Emergency Assistance Resource Request Process, identifies the process that a state, territory, or tribal entity must follow to secure federal mass care resources. This process specifies that before seeking federal resources, the jurisdiction must determine that the resource cannot be met with NGO or state resources. The mass care task force can assist in this process.

Identify resource shortfalls. Once the various mass care requirements over time have been determined, and the availability of resources from the NGOs and the state identified, the mass care task force is able to specify mass care resource shortfalls. While the resource shortfalls are estimates, they must be specific as to quantity, location, and timeframe. For example, Grant County will have a disaster feeding shortfall of 20,000 meals/day by Week 4.

Identify courses of action. With the resource shortfalls identified, the mass care task force can develop courses of action for the jurisdiction to address these shortfalls. Some of these courses of action will include preparing, with the assistance of FEMA representatives, Resource Request Forms to address specific mass care resource shortfalls.

Table 2 shows that the timeframe between a request for mass care resources and the expected delivery can extend from hours to days, to weeks or even months. The quantity of resources required, and the estimate of when the resources must become available, must be reconciled with the acquisition timeframe.

Table 2 - Acquisition Timeframe for kinds of Mass Care Resources			
Resource	Sources	Examples	Acquisition Timeframe
Commodity acquisition	FEMA, States, NGOs	Bottled water, shelf-stable meals	Hours - days
		Food boxes	Weeks
Commodity distribution services	NGOs	Mobile distribution of emergency supplies	Days
	NGOs, States	Fixed-site distribution of emergency supplies	Days
	FEMA	Mobile/Fixed-site distribution of emergency supplies	Weeks
Services	NGOs, States	Congregate short-term sheltering	Hours - days
	FEMA		Weeks - months
	NGOs	Congregate long-term sheltering	Days
	FEMA		Weeks - months
	NGOs	Hot meal production and distribution	Days
	FEMA		Weeks

Mass Care Task Force Models

There is no single model for a task force's composition or role. Different jurisdictions utilize task forces differently and requirements may vary by event. The intent of this document is to present three task force models:

- Operational Model - Supporting resource needs and requests, including allocation and tracking.⁴ This model is used when the strategy and requirements are known or broadly understood, e.g., a frequent hazard, resources are largely available, but the event requires additional staffing to coordinate mass care functions across the area of operations.
- Planning Model - This model primarily deals with coordinating plans, determining current and future needs,⁵ and recommending possible implementation strategies for the mass care activities. The planning model is typically required when the understanding of the situation is low e.g., community needs are unknown, awareness of available resources is limited, or conventional resources are already committed or exhausted.
- Hybrid Model - This model is a combination incorporating elements of both previous models. This may mean the task force develops the plan and has an operational coordination role in the plan's implementation.

In the Operational Model, the Mass Care Coordinator would provide the Operational Model Task Force with parameters and guidelines to make sure that they are not duplicating the actions of the Mass Care Coordinator in the EOC. For example, the Mass Care Coordinator could direct the task force to handle multi-agency feeding conference calls, review incoming information on the status of feeding, tracking the locations and number of meals being provided by whole community partners and coordinating the fulfillment of feeding requests to the state.

In the Planning Model, the task force performs the Multiagency Planning Coordination tasks outlined above. The Mass Care Coordinator can direct the Planning Task Force to perform one or more Planning Coordination tasks. For example, the Mass Care Coordinator can direct the Planning Task Force to estimate the state feeding requirements for the next 14 days, determine the resources available to meet those requirements and identify any resource shortfalls that would require state action.⁶

In a Hybrid Model, the task force would be assigned both operational and planning coordination tasks. Depending on the size of the disaster, a Hybrid Model Task Force could simultaneously perform the Operational Model and Planning Model examples in the previous paragraphs. This model effectively delegates responsibility for creating and implementing a course of action for the identified tasking, freeing the mass care coordinator to address other needs.

⁴ See Resource Management During an Incident in [National Incident Management System Emergency Operations Center How-To Quick Reference Guide](#)

⁵ Ibid.

⁶ Operating in a blue-sky environment, the Mass Care Planning Task Force can develop mass care deliberate plans. These deliberate plans provide valuable guidance to tasks forces operating during a large response. The multi-agency plan templates, available on the National Mass Care Strategy website, and listed above, are an important resource for blue-sky the Mass Care Planning Task Forces.

Decision to Activate Task Force

The decision to activate a task force will fall to the judgment of the mass care coordinator or local emergency management coordinator. There are methods that can be used to gauge whether additional support is required before the need becomes pressing. [Table 3](#) below, [Mass Care Coordination Complexity for States](#), outlines several factors that can inform the Mass Care Coordinator on the decision to activate a task force.

Lower	Table 3: Mass Care Coordination Complexity	Higher
Minimal	Counties/Parishes/Municipios Impacted	Significant
Minimal	State/Federal Agencies Engaged	Significant
Hundreds	Size of Shelter Population	Thousands
Local	Media Attention	National/International
One Event	# of Simultaneous Events	Multiple Events
Minimal	Need for Federal Resources	Significant
Within Capacity	Voluntary Agency Capacity	Capacity Exceeded
Easily Available	Private Sector Resources	Constrained or delayed
Within Capacity	State Capacity	Capacity Exceeded

After Action Reviews of previous disasters may help identify response shortfalls that promote the formation of Mass Care Task Force(s) on future disasters (during deliberate planning to account for identified gaps). Some jurisdictions may have pre-existing mass care planning committees utilized during preparedness. The membership of these steady-state groups may be available to provide support during an event or may have their own agency-specific duties depending on the source of their membership.

Task Force Structure and Function

The activation of one or more mass care tasks forces at the State EOC in a major or catastrophic event must be planned. This planning may be conducted in coordination with the Federal Emergency Management Agency (FEMA), State agency(ies), NGO, and private sector mass care partners.

Concept of Operations

A mass care task force operates under the direction of the State Mass Care Coordinator to conduct multi-agency operational and planning coordination. Depending on the size of the event, a jurisdiction may establish more than one mass care task force organized by function, such as feeding or sheltering or by geography, such as mainland and barrier islands.

Once established in accordance with the mass care plan, the task force is assigned operating priorities and goals from the specified activity (sheltering, feeding...) plan. The assigned operating priorities and goals are the focus of the operational and planning activities of the personnel assigned to the task force.

If a plan does not exist for the activity, then the task force must determine operating priorities and goals in coordination with the mass care coordinator.

Size of Task Force Staff

Mass Care Coordinators should consider group dynamics and elements such as span of control when determining the size of task forces. As incidents grow, task forces may also grow as well to meet the needs of the incident. The task force may form subgroups or split into separate task forces for different activities (e.g., sheltering, feeding) or geographies.

The size of the task force staff is need-based and dependent on the scope and scale of the disaster. Task forces may include a core group, with other subject matter experts brought in to consult, share relevant information, or as liaisons. Operating in this manner assists with span of control.

There are several options for acquiring these additional personnel:

- 1) By working with the NGOs to acquire not only additional liaisons to meet the coordination requirements, but mass care subject matter experts.
- 2) From other states or territories via the Emergency Management Assistance Compact (EMAC).
- 3) Through mutual aid or from employees with State agencies supporting the mass care operation if they are available for training before the disaster.
- 4) From private industry through industry associations (e.g., Lodging Association), vendors, or specialized emergency management contractors. Contractors should not be placed in a position to create task orders for their own work.

Additional personnel serving on the task force will vary. Whenever possible, assign a local representative who is aware of existing plans, capabilities, and geographies to support the response.

Roles within Task Force

Task Force Leader. The Task Force Leader reports to the Mass Care Coordinator and leads the Task Force toward completion of assigned operating priorities and goals.

Situation Reporter. A Situation Reporter is assigned for all task forces and reports to the Task Force Leader. The Situation Reporter maintains a log of task force activities, estimates, recommendations and prepares the task force's situation report.

Subject Matter Experts. Technical specialists are assigned to the task force in areas needed to address the problem statement such as sheltering. This may include adjacent topic areas such as case management or housing that influence the problem statement, or include program experts or Points of Contact (POC) when required e.g., program specific knowledge such as Rapid Unsheltered Survivor Housing, Transitional Sheltering Assistance, or other forms of assistance. Examples of technical specialists could include representatives from:

Mass Care NGOs. NGOs with mass care capabilities provide one or more individuals to liaise with their field headquarters. These liaison activities can be conducted virtually or by phone.

State Agencies. State Agencies identified in the State Mass Care Plan provide staff to the task force when the Operating Priorities and Goals assigned to the task force fall within their designated area of responsibility.

Federal Agencies. During disasters that may require federal assistance, representatives from FEMA and other federal agencies are assigned to the State EOC to work alongside their state counterparts. Customarily a federal ESF 6 representative is assigned to work with the State Mass Care Coordinator. Depending on the event and the type of task force established, one or more additional FEMA representatives may be requested to support the state task force.

Private Sector Representatives. Private vendors providing significant resources for the disaster provide representatives at the State EOC. At times coordination is required with these vendors to facilitate or verify the deployment of resources to or within the disaster area. When vendors are not represented in the State EOC the coordination is conducted by telephone or by email.

Reporting

Upon activation, the task force is responsible for submitting a summary for each operational period of the task force's activities for the previous day. This task force situation report is a historical record of the actions of the task force and should include a roster of task force members by name and agency.

Duration

Standing mass care task forces can be created during blue-sky periods. Operational task forces are often established for a two-week initial timeframe. The operation of the task force may be extended as required. The duration for task force members assigned through an Emergency Management Assistance Compact is specified in their individual deployment order.

Mass Care Coordinator's Responsibilities to the Task Force(s)

The first and most important responsibility of the Mass Care Coordinator is to provide the task force with a capable task force leader. The demands of the disaster response will provide little time for the Mass Care Coordinator to deal directly with the task force members. The task force leader must assume the role of directing the task force under the direction of the Mass Care Coordinator.

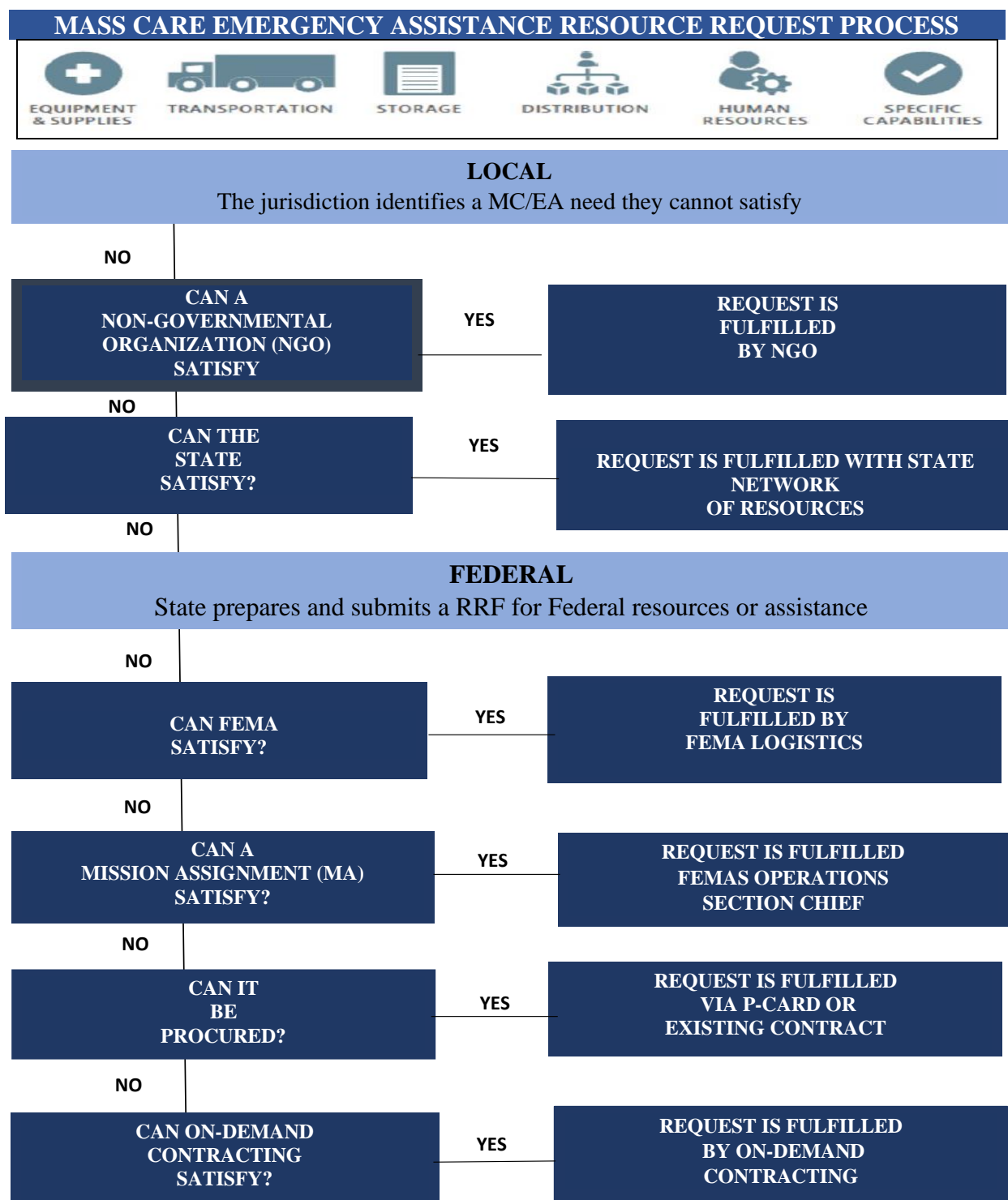
The Mass Care Coordinator must provide to the task force, orally or in writing, the following information related to their task:

- Problem statement/task
- Task Force model (Operational, Planning or Hybrid)
- Priorities and Goals
- Reporting requirements
- Access to crisis management systems for situational awareness and reporting e.g., WebEOC

- Existing plans

A problem statement/task may be general. The Mass Care Coordinator typically activates a task force for something that needs more attention than they can provide currently e.g., develop a long-term feeding plan. Once this is provided, the Task Force can sort through the data and draw out the critical information and requirements for the Mass Care Coordinator.

Appendix 1 – Mass Care / Emergency Assistance Resource Request Process



Appendix 2 - Mass Care Task Force Leader Checklist

The overall responsibility of the Mass Care Task Force Leader is to support the State Mass Care Coordinator by directing the State Mass Care Task Force to assist the State EOC in planning and coordinating assigned Multi-Agency Mass Care operating priorities and goals.

Additionally, the Mass Care Task Force maintains situational awareness through monitoring, analyzing, validating, and making resource recommendations to support the State based upon the incoming information.

Initial Actions		
	Action	Comments/ Notes
	Review relevant State Emergency Operations Plan, Mass Care Plans and Mass Care MCTF Operational Procedures.	
	Obtain briefing from the State Mass Care Coordinator: <ul style="list-style-type: none"> On the scale of the disaster and potential impact Estimated MCTF size and staffing Operational priorities and/or goals and objectives for MCTF. 	
	Establish MCTF work space and connectivity (some or all of MCTF members may be virtual) <ul style="list-style-type: none"> Adequate seating and table space Network connections Telephone Conference call line Access to power/ sufficient power outlets. 	
	Obtain Table of Organization, rosters, and contact information for EOC staff and TF.	
	Determine the Battle Rhythm for the EOC and the MCTF <ul style="list-style-type: none"> Conference Calls Meetings/ Briefings Report Schedule. 	
	Brief incoming MCTF staff on the facility, event and the roles and responsibilities of the MCTF.	
	Brief MCTF members on the state system for processing resource requests.	
Recurring Actions per Operational Period		
	Action	Comments/ Notes
	Review available situation reports and other reliable data sources focusing on the status of mass care operations.	
	Review reports for current and impending weather conditions and other environmental conditions that may affect service delivery.	
	Attend scheduled meetings and briefings: <ul style="list-style-type: none"> EOC Briefing Human Services Mass Care Conference Call Logistics Meeting VOAD/ Volunteers & Donations. 	
	In coordination with MC/EA desk in the EOC, acquire daily mass care numbers from the Red Cross, Salvation Army, Food Banks, and other partners.	
	Follow-up and track any resource requests recommended by the TF.	
	Develop and update Mass Care Situation Analysis.	

	Meet with State Mass Care Coordinator to identify any outstanding issues to be addressed by the MCTF.	
	Prepare mass care statistical and other required sheltering reports for the State Mass Care Coordinator.	
	Prepare briefing for State Mass Care Coordinator: <ul style="list-style-type: none"> • Current situation • Expected and current requirements • Potential shortfalls • Recommendations for resource support. 	
Short Term Actions		
	Action	Comments/ Notes
	Determine prior and ongoing mass care actions: <ul style="list-style-type: none"> • Trends for mass care activities • Past and ongoing activities of mass care partners • Shelter locations. 	
	Establish planning timeline for the next 72 hours: <ul style="list-style-type: none"> • Determine mass care requirements and/or requests • Analyze ongoing mass care activities <ul style="list-style-type: none"> ○ Size, scope, and impact of event ○ Requirements ○ Available resources ○ Identified shortfalls. 	
	Review any information available on the present mass care situation.	
	Determine in-state human and material resources available to support mass care.	
	Determine type, quantity, and location of any mass care resources pre-staged by FEMA logistics.	
	Discuss any private sector human and material resource capabilities/assets and process for obtaining the resources, if needed.	
	Discuss federal partner human and material resource capabilities/assets and process for obtaining the resources, if needed.	
	Identify potential resource shortfalls.	
Sustained Actions		
	Action	Comments/ Notes
	Continue to monitor, analyze, validate, and support mass care activities.	
	Assess resource requirements and recommend to the State Mass Care Coordinator the need, if indicated, for federal support.	
	Maintain situational awareness on the status of power outages/ restoration, commercial food distribution channels and other factors that will influence mass care requirements.	
Long Term Actions		
	Action	Comments/ Notes
	Assess ongoing need for mass care resources.	
	Recommend demobilization of MCTF members as MCTF activity declines.	
	Ensure that the MCTF members provide a summary of their activities and recommendations for improvement prior to demobilizing.	
	Prepare a final report (After Action Recommendations) for both issues and successes that can be included in the sheltering documents.	

Appendix 3 – Mass Care Task Force Information Requirements Matrix

Mass Care Situation Analysis

The Mass Care Situation Analysis is a logical and orderly examination of the factors affecting achievement of the mass care operating priority outcomes. Once established, the Mass Care Task Force produces an initial Mass Care Situation Analysis as a basis for planning and dissemination of information. The MC/EA response must be monitored continuously for changing needs and the methods and organizations that support them. The analysis provides decision makers with the mass care situation in the affected area and the capabilities of the mass care resources assigned to the event. Information and data must be analyzed and validated to ensure accuracy and legitimacy. The Mass Care Situation Analysis is compiled by the Situation Reporter with input from the other members of the Task Force.

Operating Priorities and Metrics

Operating priorities for the MCTF are taken from the Mass Care Activity Plan. If a Plan does not exist, then operating priorities are developed by the Task Force Leader in coordination with the State Mass Care Coordinator. Each operating priority has a defined outcome, target date for achievement and metrics. The stated target dates would be established and revised during the event by the State Mass Care Coordinator in consultation with the other MC/EA partners.

Mass Care Information requirements

The Mass Care Situation Analysis format addresses 3 questions: 1) what are we trying to accomplish and when will it be done? 2) How are we doing? And 3) Do we need to do anything different? The Information Requirements Matrix to perform the analysis and answer these questions is collected and updated by the Mass Care Planner in the table below.

<u>Information Requirements</u>	<u>Source of Information in an actual event</u>
Shelter population, by county, and trend	Current population reported by State.
	Shelter trend info available from ARC National Shelter System: coordinate with ARC MCTF liaison for information.
Current and projected Shelter resources available, by type and kind	Summary ARC shelter resources available to DRO sent to ARC MCTF liaison daily.
	For projected resources available from ARC coordinate with ARC TF liaison for information.
	For current and projected shelter resources available from Health Department coordinate with Health Department MCTF liaison.
	For current and projected federal shelter resources available coordinate with FEMA MCTF liaison.

	For current and projected shelter resources available from the private sector or other voluntary agencies coordinate with State VOAD.
Projected or actual peak evacuation shelter population	Projected peak evacuation shelter population estimated in consultation with sheltering partners.
	Actual peak evacuation shelter population available from ARC National Shelter System: coordinate with ARC MCTF liaison for information.
Target date for all post event short term shelters assessed to be safe, secure & accessible.	Estimated in consultation with sheltering partners.
Target dates for opening of schools, by county	Coordinate with Education State liaison in State EOC
Estimate date short-term shelters will close	Estimate in consultation with sheltering partners..
Power outages, by county, and projected restoration times	Available from Emergency Support Function 12, State EOC power agency representatives, or through online resources.
Current and impending weather conditions that will affect shelter operations	EOC briefings and State Situation Reports.
Reported shelter issues	County Situation Reports.
	Reports from American Red Cross.
	Reports from the media.
Census population, by county	Census.gov
Meal counts, by county	Meal counts, by county, provided by feeding organizations.
Current and projected Feeding resources available, by type and kind	Summary ARC feeding resources available to DRO emailed to ARC MCTF liaison daily.
	Summary Salvation Army feeding resources available to TSA IC emailed to TSA MCTF liaison daily.

	Summary Southern Baptist Convention feeding resources available to disaster emailed to SBC MCTF liaison daily,
	For projected resources available from ARC coordinate with ARC MCTF liaison for information.
	For projected resources available from TSA coordinate with TSA MCTF liaison for information.
	For projected resources available from SBC coordinate with SBC MCTF liaison for information.
	For current and projected feeding resources available from USDA coordinate with USDA MCTF liaison.
	For current and projected federal feeding resources available coordinate with FEMA MCTF liaison.
	For current and projected state feeding resources available coordinate with Emergency Support Function 11 MCTF liaison
	For current and projected food bank feeding resources available coordinate with Food Bank MCTF liaison.
	For current and projected feeding resources available from the private sector or other voluntary agencies coordinate with State VOAD.
Projected meals/day feeding requirements	Projected meals/day feeding requirements estimated in consultation with feeding partners.
Estimate date/time start of sustained feeding	Estimate in consultation with feeding partners.
Estimate date/time end of sustained feeding	Estimate in consultation with feeding partners.
Estimate # of food boxes required for long term feeding.	Estimate 10% of Meals/Day requirement will need to be prepared and distributed over 15 days, beginning on estimated date/time end of sustained feeding.
# of residences destroyed/severe/moderate/minor from HAZUS, damage assessments or actual damage reports	HAZUS projections are generated from State Planning or FEMA.
	County damage assessments and reports are collected at the State EOC using established procedures.
	For damage assessments conducted by ARC coordinate with ARC MCTF liaison.
Reported feeding issues	County Situation Reports.

	Reports from voluntary agencies conducting feeding operations.
	Reports from the media.