



LEADING FROM THE FRONTIER TO THE FUTURE

**KENTON  
COUNTY**  
HOMELAND SECURITY  
EMERGENCY MANAGEMENT

# Kenton County Kentucky Emergency Operations Plan

## Mass Care and Shelter Plan



# Kenton County Homeland Security Emergency Management



# KENTON COUNTY EOP - SUPPORT PLAN

## MASS CARE AND SHELTER PLAN

# MASS CARE AND SHELTER PLAN

## PURPOSE AND DEFINITIONS

This plan is a supporting document to the Kenton County Emergency Operations Plan and has been created to provide structure and guidance to the public safety agencies of Kenton County, Kentucky in situations where Mass Care And Sheltering is required. This plan specifically addresses the roles and responsibilities outlined in ESF 6 – Mass Care and Sheltering to set up and manage:

Mass Care Shelters - provide shelter, feeding, sleeping and sanitary accommodations to the general population and those with functional needs which can be assisted in general population shelter.

Medical Shelters - provide shelter, feeding, sleeping, sanitary accommodations and support care to the medical needs population who do not require hospitalization but their medical needs require greater attention than can be provided for in a general population shelter.

Feeding Operations - provide food and water to citizens in the impacted area and in shelters which may be established.

Additionally, mass care and shelter for the general population and medical needs population involves management of:

Companion Animals - A domesticated animal, such as a dog, cat, bird, fish or rodent that is traditionally kept in the home for pleasure rather than for commercial purposes.

Service Animals - Any guide dog, signal dog, or other animal individually trained to provide assistance to an individual with a disability.

## SCOPE

This plan addresses activation and management of shelters and feeding operations in Kenton County and it's cities. Mass care and sheltering, as defined in this plan, includes the following activities:

Coordination between agencies, non-governmental organizations, the business community and private-non-profits

The selection of pre-designated and pre-inspected shelter facilities

The inspection and acquisition of additional shelter facilities

Management of mass care shelters

Registration of shelter population

Provision of services to shelter clients

Status reporting of shelter and feeding operations



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### RESPONSIBILITIES AND AUTHORITIES FOR MASS CARE AND SHELTER

The following agencies and organizations are responsible for mass care and shelter:

When the Kenton County Emergency Operations Center (EOC) has been activated, mass care and sheltering will be coordinated by the ESF 6 Coordinator with assistance from Kenton County Homeland Security Emergency Management (KCHSEM). Management of mass care and sheltering operations in Kenton County will be completed through a partnership between local government, the American Red Cross, the Salvation Army, the private sector business community, other Voluntary Organizations Active in Disaster (VOADs), and other private-nonprofits organizations.

By Congressional Charter, the American Red Cross is chartered to undertake activities for the purpose of mitigating human suffering caused by all natural disasters and emergencies. This includes assistance with Mass Care And Sheltering.

Local Government Employees: The provision of emergency services falls within the authority of the Chief Elected Official. In case of a declared local state of emergency, public employees can be considered as disaster service workers and may support mass care and shelter operations.

Schools: Kenton County HSEM, in cooperation with the American Red Cross, has assessed the use of school buildings, grounds, and equipment for shelters during disasters or other emergencies. School district administrative personnel will cooperate as necessary to meet the needs of the community.

Faith based and private facilities: Kenton County HSEM, in cooperation with the American Red Cross, has assessed the use of some faith-based and private facilities, grounds, and equipment for shelters during disasters or other emergencies. Those who have executed a shelter agreement with the American Red Cross will cooperate as necessary to meet the needs of the community.

### SITUATION AND ASSUMPTIONS

The planning basis for sheltering is for approximately 20% of an affected population to seek shelter in a public shelter. This percentage increases when catastrophic events force exhaustion of or damage to resources which might normally be occupied by persons with means. 80% of the affected population will stay with friends or family, leave the area, or stay at their residences.

Statistics from the 2010 US Census applicable to Mass Care And Sheltering:

The population of Kenton County is 118,811

Of the 43,216 households in the County, 12,000 have household incomes of less than \$62,000.00.

93.6 % of the households are owner occupied, and 2.5% renter occupied.



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16,000 individuals over the age of 5 speak English “less than very well”. Of those 16,000, 14,000 are Spanish speaking.

The bulk of the housing stock (1/2) is single family detached which includes approximately 4,000 mobile homes.

It is estimated that 2,000 households have no vehicle available.

20% of the affected population will require some level of special care (personal care assistance, sign language interpreter, mobility assistance, behavioral health care, etc.)

The American Red Cross maintains Memoranda of Agreements with pre-inspected facilities in all of the counties they cover, including Kenton County. This list changes from time to time and they have the ability to utilize other facilities as needed in a disaster situation.

Capacity for animal care will be coordinated through agreements between Kenton County Animal Services, veterinarians, and private-nonprofits.

In the event of a major earthquake, or other catastrophic event in the Commonwealth of Kentucky, additional host sheltering capacity may be required.

Following an incident it will be necessary to provide for feeding operations for citizens in the impacted area and in shelters.

In earthquakes, hazmat, explosion or other incidents, previously identified shelter facilities may be unavailable due to being damaged beyond operability or contamination.

60% of the affected population has companion animals.

Along with the full-time residential population, transient populations (tourists, students, visiting foreign nationals and commuters) may also require assistance.

Individuals may arrive at shelter locations without essential medicines, medical equipment, mobility assistance devices and other critical supportive supplies.

## OPERATIONS

### OPERATIONAL POLICIES

During small scale or isolated events the American Red Cross, Salvation Army and other voluntary organizations will respond to requests for assistance from a single jurisdiction’s law enforcement, fire service or emergency management agency.

Requests for Mass Care- Feeding and Shelter assistance during significant events will be coordinated by the ESF 6 Coordinator at the Kenton County Emergency Operations Center (EOC). ESF 6, Kenton County HSEM, and the American Red Cross will coordinate shelter location and operation, and will mutually support shelter operations with shared personnel and support services when possible.

School Districts will want to return students to school as soon as possible following an incident. Returning students to the schools is an important step in the recovery



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process. For these reasons schools should be used as a shelter only when absolutely necessary.

Additional, authorized shelters required by ESF 6, Kenton County HSEM or the American Red Cross will be inspected by KCHSEM and/or ARC staff and an agreement for use of the facility will be secured before the shelter is opened and occupied. **Neither Kenton County HSEM nor the American Red Cross assumes responsibility for staffing or supplying unauthorized shelter openings during or following an incident.**

All shelters established and maintained by the American Red Cross will utilize the standards and policies contained in the current American Red Cross policy and procedures.

Public and private health care facilities are responsible for evacuation plans for their facilities and populations and arranging for the shelter needs of their clients, including reciprocal agreements with like facilities.

When facilities are used as shelters, ESF 6, Kenton County HSEM, and the American Red Cross in coordination with the facility owner/operator or management will determine the need for shelter consolidation and the timing for shelter closure(s).

Persons believed to be contaminated by hazardous materials will not be admitted into shelters until they have been decontaminated.

Individuals or households are responsible for the care of their companion and service animals (e.g. feeding, walking, grooming, cage cleaning).

New prescriptions for lost medications will not be written at shelters operated under the American Red Cross, but ARC case workers may determine the suitability of the provision of vouchers for existing prescriptions at participating pharmacies.

Special dietary needs are considered feasible during the long-term portion of the shelter operation. Special dietary needs include low fat/salt/carbohydrate meals; and cultural, ethnic and vegetarian preferences.

The Shelter Manager, after consultation with Kenton County HSEM and/or the ESF 15 Coordinator at the Kenton County EOC approves all requests from the media for interviews. Shelter staff, when interviewed by the media, may provide answers to questions about operations in which they are assigned. The staff will refer the media to the Shelter Manager for answers to other questions. Questions regarding the overall care and shelter operation will be referred to the ESF 15 coordinator at the Kenton County EOC.

Closing shelters and locating alternate housing resources for shelterees is a high priority.

Procedures to activate and manage public information and materials used in communication are described in the Kenton County EOP.

County employees working as disaster service workers at shelters will receive their normal compensation, including overtime, if required.



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#### MASS CARE AND SHELTER LOCAL RESPONSIBILITIES

Providing mass care and shelter to the population of Kenton County requires a coordinated and cooperative effort among jurisdictions, disciplines, emergency management, and public and private agencies. Responsibilities for this response include:

AGENCY	RESPONSIBILT Y
<p>ESF 6 – Mass Care and Sheltering</p> <p>Kenton County HSEM</p> <p>Northern Kentucky Health Department</p>	<p>Implement this Plan</p> <p>Develop projections and priorities for the EOC Action Plan (Mass Care and Shelter components)</p> <p>Assist the ARC to train shelter staff, if needed.</p> <p>Coordinate with the ARC on locations, openings, maintenance, and closing of shelters</p> <p>Coordinate with the ARC, private-non-profits, and the public health Logistics Section to obtain needed support for the shelter population (food, water, sanitary conveniences, transportation services, etc.)</p> <p>Gather and provide community assistance resource information to the sheltered population</p> <p>Assist the ARC in coordination of feeding operations in the impacted area and in the shelter(s)</p> <p>Update ESF 6 status reporting in WebEOC</p> <p>Request mutual aid and make resource requests through the Logistics Section, if necessary.</p> <p>Coordinate with Finance Section and ensure that record-keeping of all care and shelter costs is documented by all participants</p>
<p>Northern Kentucky Health Department</p>	<p>Inspect shelter locations prior to opening</p> <p>Provide staff to assist with shelter registration that can assess functional and medical needs.</p> <p>Provide outreach health education teams</p> <p>Provide disease outbreak assessment and control Teams</p> <p>Coordinate with Mental, Behavioral Health, and Substance Abuse programs for assistance at shelters</p> <p>Coordinate with Environmental Health for any ongoing food safety, sanitation or waste disposal concerns</p>



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<p>Kenton County EOC Staff</p> <p>Kenton County HSEM</p>	<p><u>Logistics Section:</u></p> <p>Provide assistance in obtaining supplies, equipment, food, water and transportation to support the sheltered population.</p> <p><u>Planning Section:</u></p> <p>Update shelter information within Web EOC</p> <p><u>ESF 4 and ESF 3/12</u></p> <p>Assist with inspections of potential additional shelter facilities</p>
<p>ESF 13 – Law Enforcement</p>	<p>Provide security at shelters.</p> <p>Provide advice, support and protection in instances when known criminals or known sex offenders require shelter</p> <p>Coordinate with ESF 6 Coordinator to perform investigative, warrant service and other law enforcement activities within the shelter population</p>
<p>Other City or County Departments, Agencies or Organizations</p>	<p>Provide assistance in obtaining supplies, equipment, food, water and transportation to support the sheltered population</p> <p>Inspect pre-designated shelter facilities following events with damage</p> <p>Assist with inspections of potential additional shelter facilities</p>
<p>Kentucky Division of Emergency Management</p>	<p>Review sheltering operations within the Region</p> <p>Assist with maximizing Regional response and resource allocation</p> <p>Support requests for assistance received through the EOC</p>

#### COORDINATION WITH RESPONSE PARTNERS

When multiple shelters are opened, the American Red Cross will send a representative to the Kenton County EOC to assist the ESF 6 Coordinator. The Salvation Army, owners/operators of shelter facilities, the Northern Kentucky Health Department and/or other necessary parties may also be asked to send a representative(s) to the Kenton County EOC to assist the ESF 6 Coordinator, if needed.

ESF 6 staffing will expand as needed, to meet the needs at all shelters. The ESF 6 Coordinator will coordinate with the EOC Logistics Section for staffing,



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communication, supplies and facilities; and with the Finance Section for procurement of supplies and services.

#### SHELTER STAFFING

The American Red Cross – Cincinnati Region maintains Shelter Management Teams through chapter staff and volunteers. The ARC takes the lead on shelter openings and staffing.

#### VOLUNTEERS

The Kenton County Citizen Corps programs and the NKY Health Department Medical Reserve Corps have volunteers who may be made available to assist with Mass Care and Shelter operations. The ARC recruits, trains and employs volunteers for assistance with shelter operations. Volunteer positions in shelters include: shelter manager; nurse; registrant; case worker and others as needed.

In a large event it may be necessary to control the influx of volunteers by establishing a Volunteer Reception Center to receive, identify, provide training, and credential volunteers.

#### SHELTER ACTIVATION – SEQUENCE OF EVENTS

KCHSEM determines there is a need for, or receives requests for, a shelter(s) from jurisdiction(s) in the County.

KCHSEM may activate the Kenton County EOC and/or the ESF 6 Coordinator. KCHSEM will also consider the need for a declaration of emergency.

KCHSEM will notify the American Red Cross (ARC) Cincinnati Region of the shelter request(s).

Based on the estimated number of people needing shelter and their geographic location, the ARC and the ESF 6 Coordinator will select the number and locations of shelters to open. Should the incident impact the entire region, the best course may be for neighboring counties to share shelters. This would be especially practical if the number of those requesting shelter is low. Care should be taken to avoid stretching the sheltering resources too thin by establishing too many shelters or establishing shelters in areas where there is little or no need.

The ARC reviews Mass Care and Sheltering staffing needs and activates their Mass Care volunteers. The ARC will identify any shortfalls and continue to supplement staff as personnel are available.

Short term additional staffing needs may be met by ARC requests to the Citizen Corps for volunteers, or establishment of a Volunteer Reception Center offering “just in time training” to citizen volunteers.



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Long term additional ARC staffing needs will be met by their Disaster Services Human Resources (DSHR) national system of volunteers.

The ARC will determine resource needs for Mass Care and Sheltering operations. These immediate needs will be met by supplies stored and warehoused in the region. ARC has trucks and small trailers containing cots, blankets and other support commodities.

KCHSEM and/or the EOC are notified of the shelter locations, and support needs (quantity estimates) are communicated.

ARC reviews shelter feeding resources and if the need is significant may contact the Southern Baptist Convention Disaster Relief or other Voluntary Organizations Active in Disaster (VOAD) volunteers to assist with mass feeding. For locations or occasions where these resources are not available, the ARC may request assistance from the ESF 6 Coordinator to identify feeding resources.

Local law enforcement will provide security at the shelter(s). If local law enforcement resources are unavailable to handle security needs at the shelter(s) or if the ARC requests additional security, then such requests will be made through KCHSEM or ESF 13 if the EOC is activated.

The Kenton County Animal Services department will assist with management of animal issues which arise following an incident. Animal Services maintains lists of local resources that may be able to provide or assist with pet care concerns. (See the Kenton County Animal Disaster Response Plan for details.)

Availability of communications equipment at shelters will be reviewed as shelters are established. Any requirement for additional equipment will be referred to KCHSEM or the EOC Logistics Section for fulfillment.

The Fire/EMS agencies and/or the ESF 4 Coordinator will be notified of shelter location(s) for population shift awareness.

When shelters are activated and opened, KCHSEM or the ESF 6 Coordinator will receive requests for resources and/or assistance from the shelters. They will periodically poll shelters for supply shortfalls, transportation needs, staffing needs, waste management requirements and status reports. Requests for resources and assistance are managed by KCHSEM or the EOC Logistics Section.

Shelters will need to be surveyed by the Northern Kentucky Health Department using their Environmental Surveillance Form for Shelters (see Appendix 1). If shelters are anticipated to be open for three or more days, Public Health assessment teams are requested to visit each shelter daily or on a regular schedule (determined by the Health Department).

The ARC and the ESF 6 Coordinator assemble referral information for housing, food, household supplies, minor repair, transportation, employment, behavioral health providers, etc., and ensure that this referral information is available to caseworkers and staff at all shelters.



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The ESF 6 Coordinator works with the ESF 14 Coordinator on referral information and planned location for the Local Assistance Center (LAC). The ESF1 Coordinator ensures that transportation is available for shelter residents if the LAC is located away from shelters.

As the shelter population diminishes, shelters will be consolidated if geographically feasible.

The American Red Cross will arrange for the following during demobilization/shelter closings:

- ✓ restocking inventory and supplies
- ✓ return borrowed and rented equipment
- ✓ write letters of appreciation to staff, volunteers, shelter facilities and donors.

#### REGISTRATION

Volunteers may assist with the registration process. During registration, information is recorded regarding medical conditions, functional needs and dietary needs. The ARC and/or the NKY Health Department will ensure that a nurse is available to the shelter. Whenever possible, the nurse will be present during intake and registration of shelterees to assist in screening. The nurse will attempt to ensure that all persons requesting shelter are medically appropriate and either can care for themselves or have a care-giving attendant or companion. Whenever possible those with functional needs should be sheltered in the general population shelter.

Persons not able to perform “activities of daily living” and those needing medical care or specialized medical equipment or oxygen, are admitted when accompanied by their caregiver unless medical needs shelters have been activated.

If available, the ARC Registration form is used. If unavailable, 3 x 5 index cards are utilized to record the following information:

- Family last name (at the top of the card)
- First, and middle names for husband and wife (include wife’s maiden name)
- Names and ages of all other family members
- Pre-disaster address
- Note any health concerns or special needs
- Date arrived in the shelter; date departed shelter
- Post disaster address

All shelter residents sign in and out at the front desk. The registration information is used to reply to ARC Disaster Welfare Inquiries according to the client driven privacy release of information statement.



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#### FEEDING OPERATIONS

Feeding operations will be required in the impacted area and in any shelters which may be opened. ESF 6 will coordinate with the ARC, Salvation Army and other volunteer disaster relief agencies to plan for feeding operations.

The ARC has an Emergency Response Vehicle (ERV) mobile feeding vehicle in the region and additional ERV's staged throughout the nation. The Salvation Army has a mobile canteen vehicle in the region and additional such vehicles staged throughout the nation. The ARC and Salvation Army also have assistance agreements with other volunteer organizations to assist in feeding operations. For instance, the ARC has an agreement with the Southern Baptist Convention to provide tractor-trailer kitchen trucks and volunteers to staff them.

Food and water should be delivered directly to those in need whenever possible. This ensures that limited supplies get to those who are in need. However, in large events Points of Distribution (PODs) may be required (see the Points of Distribution Plan).

#### HEALTH CARE SERVICES FOR SHELTERS

ARC volunteer shelter nurses, NKY Health Department, and NKY Medical Reserve Corps nurses are trained in the administration of first aid and can provide referrals to further medical assistance. For medical emergencies, EMS should be notified immediately.

Shelter operations lasting longer than 3 days will require a visit from the Public Health Shelter Assessment Team to assess current disease conditions, determine the need for additional mental and behavioral health counselors, assist with medical referrals and provide information to shelterees on reducing the spread of disease. Public Health Assessment Teams will visit shelters daily or as otherwise determined by the NKY Health Department as long as the shelters remain open.

Refrigerators should be provided for storage of client owned prescription drugs in a secure area of the shelter, when possible. Under certain circumstances the ARC can work with pharmacies to secure medications for shelterees. Participating pharmacies are responsible for verifying the existence of an existing prescription for lost medications, either with the client's medical care provider, or with the client's usual pharmacy, or by the presence of a prescription bottle and retrieving the patient's prescription data.

Individuals with contagious diseases (common colds, influenza or intestinal illness) are separated from the other shelter guests when feasible in the smaller shelters. Public Health is consulted if these separation actions do not appear to be effective. Other solutions involve the transfer of individuals among shelters to protect those who are well and provide for centralized care of the ill, or the establishment of medical needs shelters.



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#### TRANSPORTATION

KCHSEM or the ESF 1 Coordinator assists with coordination of transportation assistance when required for shelter operations. Transportation assets which may be requested include local government vehicles or busses from the school districts or the Transit Authority of Northern Kentucky (TANK). Temporary bus stops may need to be added at the shelter locations. ARC caseworkers may be able assist shelter clients with special transportation needs.

#### RECORD KEEPING

Reimbursement for local government Mass Care And Shelter expenses may be available pursuant to the Public Assistance provisions of the Stafford Act, as amended by the Post Katrina Emergency Management Reform Act 2006. The Stafford Act can provide reimbursement of public funds only subsequent to jurisdictional declarations of emergencies (local, state, and federal). Consultation is required with Kenton County HSEM to ensure that the local declarations and damage assessment are appropriate and adequate. Reimbursement may be available for emergency sheltering operations and emergency medical services provided at shelters, depending upon the type and intensity of the emergency. As it may not be known if reimbursement is available until well after these services are underway, documentation of expenses must begin immediately. Documentation should include:

- Employee Classification

- Disaster Assignment

- Date and place assigned, specific work performed

- Release date from temporary disaster assignment

- Days and hours worked

- Travel costs (transportation, lodging and meals)

- Purchases of supplies, services (cots, food and water, linens, blankets, pillows, personal care items, towels, washcloths, televisions, radios, washers, dryers)

- Rental of equipment, vehicles or facilities

- Minor modifications to make facility habitable

- Utilities, generator fuel

- Security

- Cleaning and restoration

- Animal shelters (companion and service animals)



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#### **AFTER ACTION REVIEW**

At each shelter location, an After Action Review should be conducted and a report compiled for submission to KCHSEM or the ESF-6 Coordinator. The report should include response actions taken, issues identified, and recommendations for corrective action. KCHSEM and the ESF-6 Coordinator will assign individuals or agencies responsibility for follow-up on the corrective actions and designate an individual responsible for updating this plan based on the findings. Topic areas may include:

- General Information (location of shelter, staffing, number of clients, shelter open/close dates)
- Security issues, unpleasant events
- Adequacy of Supplies (cots, blankets, admin supplies, medical supplies, feeding)
- Recreation activities, childcare, client volunteerism
- Staffing shortfalls
- Training needs
- Public Information, referral information
- Communication with response levels

#### **PLANNING FOR ADDITIONAL SHELTER FACILITIES**

The ARC has pre-inspected and identified three (3) shelter facilities in Kenton County from which selections are made following specific events. This section of the plan is used when additional shelter sites are required because existing shelters are at capacity and more individuals are requiring care and shelter.

##### SHELTER SITE SELECTION CRITERIA

Ideal characteristics of shelter facilities include space for parking and space for sleeping (40 square feet per person). Additional space is required for:

- Registration Area
- Shelter Manager's Office
- Health Services and Mental Health Services Areas
- Food Preparation or Serving Areas (including space for a snack table)
- Recreation Area
- Toilet and Shower Facilities (one toilet per 40 people)
- Kitchen / Cooking Facilities
- Emergency Generator on Site
- Safety Features (e.g., fire extinguisher, fire sprinklers, and fire alarm)
- Building Heating and Cooling Capacity



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Telephones

Accessibility for People with Disabilities.

Refrigeration

Potential sites lacking all of the above features may be utilized with logistical or construction support to meet the deficiency (i.e. generator, mobile kitchen, shower trailer or tent, portable toilets). The six-page Red Cross facility survey form is located in Appendix 1. Aside from buildings already identified within the county, potential site consideration may include:

Commercial / industrial buildings (contact real estate agencies)

Churches or community centers

Dual facilities in proximity to each other (warehouse near a gym – showers)

Convention centers, arenas, retreat centers, college dorms when school is out of session

As a last resort large tents may be used in parks or open areas.

A chart can be developed following the facility inspections to compare logistical and construction support requirements and to serve as a worksheet for support task assignment. See example below.

Site Name	Indoor Sq. Ft.	Toilets	Showers	Generators	Access	Cooking Facilities	Telephones	Lighting	Climate Control

#### REQUESTING ADDITIONAL ASSISTANCE

In large events the American Red Cross (ARC) may draw upon its national capability via their Disaster Services Human Resources (DSHR) to augment shelter and feeding staff and commodities to assist the Chapter. In events in which all capability is overwhelmed at the county level for shelter and feeding, requests are forwarded to the Kentucky Emergency Operations Center, if activated, or through the KyEM Region 6 Manager. When more than one local EOC requests assistance, the Regional EOC may forward requests to the State EOC. If requests may not be filled within the State, and the National Response Plan Framework is activated, requests are forwarded to Emergency Support Function #6.



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## APPENDIX 1 – ARC SHELTER FACILITY SURVEY FORM



### Shelter Facility Survey

#### BASIC SHELTER INFORMATION

Site Name/ School District \_\_\_\_\_ NSS ID# \_\_\_\_\_ Date \_\_\_\_\_

Name of building \_\_\_\_\_ Building # \_\_\_\_\_ of \_\_\_\_\_

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ Website \_\_\_\_\_

Shelter address \_\_\_\_\_

Town/ City \_\_\_\_\_ County/ Parish \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_

Town/ City \_\_\_\_\_ County/ Parish \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Agency operating shelter (check one)  Red Cross  FEMA  DHS  TSA  SBC  Other \_\_\_\_\_

Shelter agency type (check one)  Red Cross managed  Red Cross partner  Red Cross supported  Independent \_\_\_\_\_

Shelter type (check all that apply)  Evacuation  General  Medical  Other \_\_\_\_\_

General facility notes \_\_\_\_\_

#### Shelter Capacity

Use the calculations to calculate the capacity for sleeping space.

Total sq feet \_\_\_\_\_  Evacuation \_\_\_\_\_ usable sq ft + 20 sq ft/person = \_\_\_\_\_ person capacity

Sq feet usable for sleeping space \_\_\_\_\_  Post Impact \_\_\_\_\_ usable sq ft + 40 sq ft/person = \_\_\_\_\_ person capacity

\_\_\_\_\_  Other \_\_\_\_\_ usable sq ft + \_\_\_\_\_ sq ft/person = \_\_\_\_\_ person capacity

#### Geographic Information

Use major landmarks (e.g. highways, intersections, rivers, railroad crossings, etc.) that will be easily recognizable in a disaster. Latitude and longitude coordinates can be found at online web sites, using a global positioning system device, or will auto populate when the address is entered into the National Shelter System.

Latitude \_\_\_\_\_ Longitude \_\_\_\_\_ Elevation \_\_\_\_\_

In storm surge/evacuation  Yes  No Hurricane category or evacuation area \_\_\_\_\_  No In flood plain  Yes  No year flood impact  No

Directions to facility \_\_\_\_\_



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## Shelter Facility Survey

### Point of Contact to *Authorize Use* of Facility

Name \_\_\_\_\_ Title \_\_\_\_\_ Phone # \_\_\_\_\_  
 24 hour # \_\_\_\_\_ Fax # \_\_\_\_\_ Email \_\_\_\_\_  
 Contact notes \_\_\_\_\_

### Point of Contact to *Open* Facility

Name \_\_\_\_\_ Title \_\_\_\_\_ Phone # \_\_\_\_\_  
 24 hour # \_\_\_\_\_ Fax # \_\_\_\_\_ Email \_\_\_\_\_  
 Contact notes \_\_\_\_\_

### Alternate Point of Contact

Name \_\_\_\_\_ Title \_\_\_\_\_ Phone # \_\_\_\_\_  
 24 hour # \_\_\_\_\_ Fax # \_\_\_\_\_ Email \_\_\_\_\_  
 Contact notes \_\_\_\_\_

### Pet Shelter

Pet shelter space available on site  Yes *answer questions below*  No nearest location \_\_\_\_\_  
 Separate ventilation system  Yes  No | Cement or tile floors with drains  Yes  No | Outdoor space to relieve pets  Yes  No  
 Agency that will operate the pet shelter \_\_\_\_\_ Phone # \_\_\_\_\_ 24 hour # \_\_\_\_\_

### ADDITIONAL INFORMATION

Shelter agreement signed  Yes  No Date signed \_\_\_\_\_ Notes \_\_\_\_\_  
 Pre-designated shelter team assigned  Yes Team name \_\_\_\_\_  No  
 Current facility floor plans available  Yes Location of copies \_\_\_\_\_  No  
 International Association of Venue Managers (IAVM) facility  Yes  No  
*Use the Standards for Selection of Hurricane Evacuation Shelters to select hurricane evacuation shelters. In this document, you will find a planning process that involves many factors (e.g. technical information for storm surge and flood mapping). This process requires close coordination with local officials for technical information to make decisions about hurricane shelter suitability. Use the Facility Construction section to assist with determining whether this can be a hurricane evacuation shelter.*  
 Shelter can be a hurricane evacuation shelter  Yes  No Notes \_\_\_\_\_



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### Shelter Facility Survey

#### Survey Conductors *(List all who participated in the survey)*

Name	Title	Organization	Phone #

#### LIMITATIONS OF FACILITY USE

Check one  This facility will be available for use at any time during the year  This facility is only available for use during the time periods listed below  This facility is not available for use during the time periods listed below

Dates (mm/dd/yyyy) Times (hh:mm)                      Dates (mm/dd/yyyy) Times (hh:mm)

From \_\_\_\_\_  AM  PM From \_\_\_\_\_  AM  PM

To \_\_\_\_\_  AM  PM To \_\_\_\_\_  AM  PM

List any recurring dates that the facility is not available (e.g. every sunday) \_\_\_\_\_

Areas of the facility that are restricted during use \_\_\_\_\_

#### FACILITY CONSTRUCTION & SAFETY

##### Facility Construction

Construction material  Wood  Masonry/Brick  Pre-fab  Bungalow  Concrete  Metal  Trailer  Pod  Other \_\_\_\_\_

# stories/floors \_\_\_\_\_ Notes \_\_\_\_\_

Elevator  Yes Location \_\_\_\_\_  No Notes \_\_\_\_\_

Open roof-spans (see *Standards for Selection of Hurricane Evacuation Shelters* for current standards)  Yes Length \_\_\_\_\_  No

Windows in sleep area  Yes  No      If yes, shatter protected  Yes  No      If yes, protected with shutter  Yes  No

##### Fire & AED Safety

*Some facilities may not meet fire codes based on building capacity. The questions below are a general reference. Contact your local fire department with questions or for more information.*

Fire alarms & systems (check all that apply)  Working smoke detectors  Inspected fire alarm system  Functional sprinkler system  Functional direct fire department alert

Comments from fire department \_\_\_\_\_

AED(s) on site  Yes Location \_\_\_\_\_  No



# KENTON COUNTY EOP - SUPPORT PLAN

## MASS CARE AND SHELTER PLAN



### Shelter Facility Survey

#### Facility Inspection Point of Contact

If requested, who would inspect this facility post-impact to determine it is safe to occupy?

Name \_\_\_\_\_ Title \_\_\_\_\_ Phone # \_\_\_\_\_

24 hour # \_\_\_\_\_ Fax # \_\_\_\_\_ Email \_\_\_\_\_

Contact notes \_\_\_\_\_

#### SANITATION, FEEDING & UTILITIES

##### Sanitation, Utilities & Power

The recommended ratio for toilet facilities is a minimum of 1 toilet for 20 people. The optimum scenario for showers is 1 shower for every 25 residents. Count all facilities that will be available to shelter residents and staff.

Showers available  Yes # of showers \_\_\_\_\_  No | Toilets available  Yes # of toilets \_\_\_\_\_  No

Check all that apply Heating  Electric  Natural Gas  Propane  Fuel Oil | Cooling  Electric  Natural Gas  Propane

Check all that apply Cooking  Electric  Natural Gas  Propane | Water  Municipal  Well(s)  Trapped

Self-sufficient power  Yes Type \_\_\_\_\_  No

Note fuel requirements, generator capacity, facility areas supported by generator(s), and other relevant information.

Emergency generator on site  Yes  No Notes \_\_\_\_\_

#### Feeding

Food Prep (check all that apply)  Warming oven kitchen  Full service  Central kitchen (delivery)

Food stock stored on site  Yes # meal can be served \_\_\_\_\_  No | Refrigeration units on site  Yes # units \_\_\_\_\_  No

Seating capacity  Cafeteria \_\_\_\_\_  Snack Bar \_\_\_\_\_  Other indoor seating \_\_\_\_\_ Total estimated seating capacity for eating \_\_\_\_\_

Notes on feeding \_\_\_\_\_

#### ACCESSIBILITY

See accompanying Shelter Facility Survey-Accessibility Instructions.

**Facility Construction** Facility built in 1993 or later, or extensively altered in 1992 or later. \_\_\_\_\_  Yes  No

**Parking Areas** Parking available. \_\_\_\_\_  Yes  No  
Answer below if parking is available

Accessible parking space(s)  Yes  No Notes \_\_\_\_\_

Van accessible parking space(s)  Yes  No Notes \_\_\_\_\_

**Drop-off/Loading Area** Permanent drop-off area/loading zone with marked access aisle or space available to designate as temporary drop-off area/loading zone. \_\_\_\_\_  Yes  No

# KENTON COUNTY EOP - SUPPORT PLAN

## MASS CARE AND SHELTER PLAN

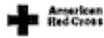


### Shelter Facility Survey

<b>Facility Entrance</b>	Sidewalk connects parking area and any drop-off area to at least one facility entrance. <input type="checkbox"/> Yes <input type="checkbox"/> No
	Route from accessible parking spaces and any drop-off area/loading zone to at least one facility entrance has no steps or curbs without curb cuts. <input type="checkbox"/> Yes <input type="checkbox"/> No
	Where route crosses curb, curb cuts are at least 36" wide. <input type="checkbox"/> Yes <input type="checkbox"/> No
	Automatic doors or doors without knob hardware. <input type="checkbox"/> Yes <input type="checkbox"/> No
	Doorways at least 32" wide when door is open. <input type="checkbox"/> Yes <input type="checkbox"/> No
	Level landings on interior and exterior sides of entry door. <input type="checkbox"/> Yes <input type="checkbox"/> No
	No objects protrude from the side more than four inches into the route to the facility entrance. <input type="checkbox"/> Yes <input type="checkbox"/> No
	If the main facility entrance does not appear to be accessible, another entry is accessible. <input type="checkbox"/> Yes <input type="checkbox"/> No
	A sign identifies the location of the accessible entrance. <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Routes to Service Delivery Areas</b>	A route without steps is available to access each service delivery area, as well as restrooms and showers or service can be provided in area that can be accessed by route with no steps. <input type="checkbox"/> Yes <input type="checkbox"/> No
	Using a yard stick held horizontally at your waist level, walk from the facility entrance to each service delivery area, as well as restrooms and showers. Except at doorways (which must be only 32" wide), no part of the route is less than 36" wide. <input type="checkbox"/> Yes <input type="checkbox"/> No
	Route has vertical clearance of at least 80". <input type="checkbox"/> Yes <input type="checkbox"/> No
	No objects protrude from the side more than 4" into the routes to the various service delivery areas. <input type="checkbox"/> Yes <input type="checkbox"/> No
	Automatic doors or doors without knob hardware. <input type="checkbox"/> Yes <input type="checkbox"/> No
	Doorways at least 32" wide when door is open along routes to each service. <input type="checkbox"/> Yes <input type="checkbox"/> No
	If a service delivery area is accessible only by elevator, there is back-up power for the elevator(s). <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Ramps</b>	Ramps are at least 36" wide, have handrails on both sides 34"-38" above the ramp surface, and have level landings at least 60" long. <input type="checkbox"/> Yes <input type="checkbox"/> No
	If yes, type of ramp <input type="checkbox"/> Fixed <input type="checkbox"/> Portable <input type="checkbox"/> Not provided
	If ramps are longer than 30 feet, a level landing at least 60" long is provided every 30 feet. <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Restrooms</b>	Area where person in a wheelchair can turn around (60-inch diameter circle or T-shape turn area). <input type="checkbox"/> Yes <input type="checkbox"/> No
	Doorways at least 32" wide when door is open. <input type="checkbox"/> Yes <input type="checkbox"/> No
	Doors without knob hardware. <input type="checkbox"/> Yes <input type="checkbox"/> No
	Toilet seat is 17"-19" high. Flush control is automatic or manual control on the open side of the toilet and no higher than 48". <input type="checkbox"/> Yes <input type="checkbox"/> No
	Toilet's centerline is 16"-18" from the nearest side wall. <input type="checkbox"/> Yes <input type="checkbox"/> No
	Stall at least 60" wide and 56" deep (wall-mounted toilet) or 59" deep for (floor mounted toilet). <input type="checkbox"/> Yes <input type="checkbox"/> No
	Space at least 9" high is provided beneath the front and one side of the stall. <input type="checkbox"/> Yes <input type="checkbox"/> No
	Appropriate grab bars. <input type="checkbox"/> Yes <input type="checkbox"/> No
	Toilet paper dispenser is within 36" of the rear wall. <input type="checkbox"/> Yes <input type="checkbox"/> No
	At least one accessible sink. <input type="checkbox"/> Yes <input type="checkbox"/> No

# KENTON COUNTY EOP - SUPPORT PLAN

## MASS CARE AND SHELTER PLAN



### Shelter Facility Survey

<b>Showers</b>	Showers available. <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>
	<i>Answer below if showers are available</i>
	At least one accessible shower stall with appropriate grab bars. <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>
	Stall type <input type="checkbox"/> Transfer stall <input type="checkbox"/> Roll-in shower <input type="checkbox"/> Not provided
	Showers seat 17"-19" high. If in transfer stall, seat is on the wall opposite the shower controls. If in roll-in shower, seat is on wall adjacent to the shower controls. <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>
	Hand-held shower spray with ability to mount at 48" (typically via a mount that can be adjusted along a fixed vertical bar), or alternatively a fixed shower head at 48". <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>
	Controls do not require tight grasping, pinching or twisting and are mounted 38"-48" high and no more than 18" from the front of the shower. <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>

<b>Eating areas</b>	At least some tables have tops 28"-34" high and space underneath at least 27" high, 30" wide and 19" deep. <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>
	Serving line or counter no higher than 34". <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>

<b>Assessment</b>	Relevant areas of the facility are accessible to people with disabilities without adjustments. <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>
	Facility has at least one accessible entrance and one accessible restroom, and otherwise is capable of being made accessible during a disaster with minor adjustments. <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>
	Facility would require extensive adjustments to be accessible during a disaster. <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>

Adjustments for Accessibility (*Identify any adjustments or enhancements that should be made to make the relevant areas of the facility accessible during a disaster*) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### OTHER CONSIDERATIONS

<b>Additional Facilities &amp; Space</b>			
Isolated care areas <input type="checkbox"/> Yes <input type="checkbox"/> No	Type of area <input type="checkbox"/> Rooms <input type="checkbox"/> Shelter area <input type="checkbox"/> Separate facility/area		Shelter registration area <input type="checkbox"/> Yes <input type="checkbox"/> No
Laundry facilities <input type="checkbox"/> Yes <input type="checkbox"/> No	# of washers _____ # of dryers _____	Who can access the laundry facilities <input type="checkbox"/> Shelter workers <input type="checkbox"/> Shelter residents	
Special conditions or restrictions for laundry _____			

### Available Materials

*One cot and two blankets per shelter resident is recommended. Note all available materials for shelter use in the notes section.*

Cots available <input type="checkbox"/> Yes <input type="checkbox"/> No	# of cots _____	<input type="checkbox"/> No	Location _____
Blankets available <input type="checkbox"/> Yes <input type="checkbox"/> No	# of blankets _____	<input type="checkbox"/> No	Location _____
Children's supplies (e.g. cribs & changing table) <input type="checkbox"/> Yes <input type="checkbox"/> No	Chairs & tables available <input type="checkbox"/> Yes <input type="checkbox"/> No	# of chairs _____	# of tables _____

Notes \_\_\_\_\_







# KENTON COUNTY EOP - SUPPORT PLAN MASS CARE AND SHELTER PLAN

## APPENDIX 2 – ARC SHELTER REGISTRATION FORM

BCEM

Mass Care/Shelter Plan ESF-6 SOG

**AMERICAN RED CROSS** Incident / DR Number & Name: \_\_\_\_\_  
**SHELTER REGISTRATION FORM** Shelter Name: \_\_\_\_\_  
*Please print all sections* Shelter City, County Parish, State: \_\_\_\_\_

Family Name (Last Name):		Total family members registered: Total family members sheltered:
Pre-Disaster Address (City/State/Zip):	Post-Disaster Address (if different) (City/State/Zip):	Identification verified by (Record type of ID, if none, write none):
Home Phone:	Cell Phone/Other:	Primary Language: If primary language is not English, please list any family members who speak English.
Method of Transportation: If personal vehicle—plate #/State: <i>(for security purposes only)</i>		

**INFORMATION ABOUT INDIVIDUAL FAMILY MEMBERS** (for additional names, use back of page)

Name (Last, First)	Age	Gender (M/F)	Rm./Cot #	Arrival Date	Departure Date	Departing? Relocation address and phone

Are you required by law to register with any state or local government agency for any reason?  
 Yes  No If Yes, please ask to speak to the shelter manager immediately.

I acknowledge that I have read been read and understand the Red Cross shelter rules and agree to abide by them.

Signature \_\_\_\_\_ Date: \_\_\_\_\_

**CONFIDENTIALITY STATEMENT**  
 American Red Cross generally will not share personal information that you have provided to them with others without your agreement. In some circumstances disclosure could be required by law or the Red Cross could determine that disclosure would protect the health or well-being of its clients, others, or the community, regardless of your preference.

Below, please initial if you agree to release information to other disaster relief, voluntary or non-profit organizations and/or governmental agencies providing disaster relief.

I agree to release my information to other disaster relief, voluntary or non-profit organizations \_\_\_\_\_  
 I agree to release my information to governmental agencies providing disaster relief \_\_\_\_\_

By signing here, I acknowledge that I have read the confidentiality statement and understand it.

Signature \_\_\_\_\_ Date: \_\_\_\_\_

Shelter Worker Signature \_\_\_\_\_

After registration, each family should go through the Shelter Initial Intake Form to determine if further assistance or accommodation is needed.

<small>For Red Cross Use Only</small>		<small>Form 5972 Rev 02-07</small>
<small>Copy Distribution</small>		
<small>1. Shelter registration on-site file - Mass Care</small>	<small>2. Information Management (Data Entry)</small>	<small>3. Client (if requested)</small>



# KENTON COUNTY EOP - SUPPORT PLAN

## MASS CARE AND SHELTER PLAN

### APPENDIX 3 – PUBLIC HEALTH ENVIRONMENTAL SURVEILLANCE FORM FOR SHELTERS

Kentucky Department for Public Health  
Environmental Surveillance Form for Shelters

<b>Immediate Needs Identified?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
--

Completed forms should be faxed to: DPH Operation Center  
Fax: 502-564-0477

**I. ASSESSING AGENCY**  
 Name of Inspector: \_\_\_\_\_ Inspector ID: \_\_\_\_\_ Phone: (\_\_\_\_)\_\_\_\_-\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**II. FACILITY IDENTIFICATION**  
 Shelter Name: \_\_\_\_\_ Street Address: \_\_\_\_\_ City: \_\_\_\_\_  
 County Name or Number: \_\_\_\_\_  
 Name of Shelter Manager: \_\_\_\_\_ Phone: (\_\_\_\_)\_\_\_\_-\_\_\_\_  
 Name of Environmental Manager: \_\_\_\_\_ Phone: (\_\_\_\_)\_\_\_\_-\_\_\_\_  
 Name of Medical Station Contact: \_\_\_\_\_ Phone: (\_\_\_\_)\_\_\_\_-\_\_\_\_  
 Shelter Sponsoring/Managing Agency: \_\_\_\_\_  
 Type of Facility: School \_\_\_ Church \_\_\_ Convention/Arena/Expo Center \_\_\_ Other \_\_\_\_\_  
 Food Preparation:  On-Site  Off-Site Off-Site Preparation Location \_\_\_\_\_  
 Water:  Municipal  Private Sewage:  Municipal  Private Refuse Disposal:  Municipal  Private  
 If private, type: \_\_\_\_\_ If private, type: \_\_\_\_\_

**III. CENSUS**  
 ≤ 2 yrs \_\_\_\_\_ 3-17 yrs \_\_\_\_\_ 18-64 yrs \_\_\_\_\_ ≥ 65 yrs \_\_\_\_\_ Total of all age groups \_\_\_\_\_

\*\*Please mark ONLY those items needing correction or immediate attention with an "X" in the center column\*\*

IV. FACILITY	X	Immediate Needs	/	Comments
Structural damage (Roof, Walls, Windows, etc)				
Security/Law enforcement adequate				
Identification required for entry				
All outside doors adequately secured				
Adequate ventilation				
HVAC system operational				
Hot water available				
Electricity available				
Adequate space per person (30 ft <sup>2</sup> /person)				
Presence of pest /vector issues				
Acceptable level of cleanliness				
Designated smoking area				
Handicap accessibility				
<b>V. FOOD SERVICE DEFICIENCIES</b>				
Approved/Safe food source				
Safe food handling/prep				
Clean kitchen/prep area				
Adequate food holding temperatures (>145°F or <41°F)				
Refrigeration adequate (<41°F)				
Food storage separate from chemicals				
Dishwashing facilities available				
Mop sink/utility sink available				
Adequate hand washing station				
Adequate formula preparation & bottle cleaning area				
Clean baby food/bottle prep area				
<b>VI. DRINKING WATER</b>				
Approved/safe water source				
Adequate water supply (15 liters/person/day)				
Ice from approved source, protected from contamination				
Distilled water to prepare baby formula				
<b>VII. WASTE WATER/SEWAGE</b>				
Sewage system accessible & operational				
Portable Units: pumping & cleaning schedule				
Adequate ventilation				
Adequately cleaned				
Handwashing facilities provided for portable units				



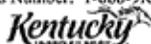
# KENTON COUNTY EOP - SUPPORT PLAN

## MASS CARE AND SHELTER PLAN

Shelter Name \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

VIII. SANITATION	X	Immediate Needs	/	Comments
One hand washing station /20 persons				
One toilet/ 20 persons				
One shower/ 20 persons				
Acceptable level of cleanliness				
Adequate laundry services				
Covered containers in female toilets				
Adequate supply of toilet supplies				
Adequate hand towels				
Toilets maintained according to schedule				
Adequate diapering areas one per 12 infants, clean)				
Adequate handicap facilities				
Adequate cleaning supplies				
IX. SOLID WASTE				
Approved waste containers				
Adequate number of waste containers				
Approved disposal				
Timely removal of trash and debris				
Adequate storage				
Storage area maintained, debris accumulation prevented				
X. SLEEPING AREA				
Separate area for families				
Adequate number of cots/beds/mats				
Adequate spacing of cots/beds/mats (2ft bed-to-bed, 6ft head-to-head)				
Adequate supply of bedding (one set per cot)				
Bedding changed according to schedule				
Acceptable level of cleanliness				
XI. HEALTH/MEDICAL CARE				
Yes <input type="checkbox"/> No <input type="checkbox"/> (If "No" skip this section)				
Type of medical services available				
Adequate handwashing station, accessible & nearby				
Medical supplies separate from food & chemicals				
Separate refrigeration for medicine				
Adequate security for medical supplies				
Biohazard bags & sharps containers available				
Acceptable level of cleanliness				
Adequate security for entry to patient areas				
XII. CHILDREN'S AREA				
Yes <input type="checkbox"/> No <input type="checkbox"/> (If "No" skip this section)				
Hand washing required for children & adults before entering & after leaving play area				
Provided toys easily cleaned, do not pose a choking hazard				
Toys cleaned/disinfected 3X daily				
Adequate child/caregiver ratio				
Adequate monitoring for security				
Acceptable level of cleanliness				
XIII. COMPANION ANIMALS PRESENT				
Yes <input type="checkbox"/> No <input type="checkbox"/> (If "No" skip this section)				
Animal care available				
Designated animal area				
Acceptable level of cleanliness				
Adequate food and water				
Adequate security for safety of animals				

Refer questions about the form or assessment procedures to:  
 Division of Public Health Protection & Safety  
 Division Office # Mon-Fri: (502)-564-7398  
 DOC Telephone #:: 502-564-5460  
 After Hours Number: 1-888-9REPORT



# KENTON COUNTY EOP - SUPPORT PLAN

## MASS CARE AND SHELTER PLAN

### Environmental Health Shelter Assessment Form Instruction Sheet

\*Immediate Needs Box: check yes if immediate needs are present

**I. ASSESSING AGENCY DATA**

- Date Assessed: self-explanatory.
- Assessor Name/Title: self-explanatory
- Assessor ID: self-explanatory.
- Assessor Phone contact: self-explanatory.

**II. FACILITY TYPE, NAME and DATA**

- Location Name and Description. Example: "Rockville Elementary School - brown building next to the police station."
- Street Address: self-explanatory.
- City/County: self-explanatory.
- Shelter Manager: name and phone of responsible contact person, such as a facility manager or designated person in charge, and his or her title.
- Environmental Manager: name and phone of responsible contact for environmental issues.
- Medical Station: name and phone of responsible contact person for medical station
- Shelter Sponsoring Agency: Red Cross, etc.
- Type of Host Facility: School, Church, Arena, Convention Center, or Other
- Water Source, Sewage type and Refuse Disposal (municipal or private)

**III. CENSUS**

- Current Census: estimated number of persons, including workers, in shelter at the time of inspection.

**IV. FACILITY**

- Structural damage: note damage to physical structure (e.g., roof, windows, walls, etc).
- Security/law enforcement adequate: security guards or police officers available at facility site.
- Identification required for entry: self-explanatory
- Adequate ventilation: facility well-ventilated and free of air hazards such as smoke, fumes, etc.
- HVAC system operational: self-explanatory.
- Hot water available: self-explanatory.
- Electrical grid system operational: self-explanatory.
- Adequate space per person in sleeping area:
  - evacuation shelters, 20 ft<sup>2</sup> per person;
  - general shelters, 40 ft<sup>2</sup> per person;
  - special needs shelters, 60-100 ft<sup>2</sup> per person.
- Free of pest/vector issues: note presence of mosquitoes, fleas, flies, roaches, rodents, etc.
- Acceptable level of cleanliness: self-explanatory.
- Designated smoking area: self-explanatory.
- Handicap accessibility: ADA Compliant.

**V. FOOD**

- Adequate supply: self-explanatory. Safe food source: source of the food from a licensed contractor or caterer.
- Preparation on site: self-explanatory.
- Safe food handling: food preparers are using gloves, avoiding cross contamination, using appropriate utensils, etc. -- refer to local code.
- Clean kitchen area: self-explanatory.
- Appropriate temperatures: hot food kept above 145 °F; cold food kept below 41 °F. Or refer to local code or US Food Code.
- Appropriate storage: Adequate refrigeration and ≤41°F.

- Proper dishwashing facilities: Wash, rinse and sanitize.
- Dishwashing facilities available: place to wash, rinse and sanitize kitchen utensils and cooking equipment.
- Hand-washing facilities available: fixed or portable, as long as they are operational.
- Clean formula preparation and bottle cleaning area.

**VI. DRINKING WATER AND ICE**

- Safe water from an approved source.
- Adequate water supply: drinking water in the range of 1-2 gallons/per person/per day, for all uses 3-5 gallons/per person/per day.
- Safe ice from an approved source (permitted facility outside affected area) and protected from contamination.
- Disilled water provided for baby formula preparation: self-explanatory.

**VII. WASTE WATER / SEWAGE**

- Sewerage system accessible and operational: self-explanatory.
- Portable Units: Pumped and cleaned according to a set schedule.
- Adequate ventilation: bathrooms and portables well-ventilated and free of odors.
- Adequately cleaned: self-explanatory.
- Handwashing facilities provided for portables units: self-explanatory
- Mop sink/utility sink: self-explanatory.

**VIII. SANITATION**

- Adequate number of operational hand-washing stations: 1 per 20 persons.
- Adequate number of operational toilets: minimum 1 per 20 persons or as specified by sex.
- Adequate number of operational showers/bathing facilities: 1 per 20 persons.
- Acceptable level of cleanliness: self-explanatory.
- Adequate laundry services: provided with separate areas for soiled and clean laundry.
- Covered containers provided in female toilets.
- Toilet supplies available: toilet paper, feminine hygiene supplies, and dispensers/pads for children and adults.
- Hand-washing supplies available: water, soap, and paper towels
- Toilets cleaned according to schedule: self-explanatory.
- Adequate diapering areas: 1 diapering station per 12 infants, covered waste containers, disposable cleaning wipes and surface coverings, & instructions for cleaning the station posted by the changing tables.
- Adequate handicap facilities: ADA compliant.
- Adequate cleaning supplies: self-explanatory.

**IX. SOLID WASTE GENERATED**

- Appropriate disposal and labeling in approved containers.
- Adequate collection receptacles: minimum 1 (30-gal) container for every 10 persons.
- Approved disposal: self-explanatory
- Timely removal of waste - collected regularly.
- Appropriate storage and separation from common areas.
- Storage area maintained: self-explanatory.

**X. SLEEPING AREA**

- Separate area for families: self-explanatory.
- Adequate cots/beds/mats for each resident/inhabitant (2' bed to bed and 6' head to head).
- Adequate bedding for each cot, bed, or mat: self-explanatory.
- Clean bedding available: self-explanatory.
- Acceptable level of cleanliness: self-explanatory.

**XI. HEALTH/MEDICAL**

- Medical care services available: list type of care available in comments section. (?)
- Adequate handwashing stations available: self-explanatory
- Medical supplies separate from food and chemicals: self-explanatory.
- Adequate security for medical supplies: narcotics in a locked cabinet.
- Biohazard bags and sharps containers available: self-explanatory.
- Acceptable level of cleanliness: self-explanatory.
- Adequate security for entry to patient area: self-explanatory.

**XII. CHILDCARE AREA**

- Play area provided: self-explanatory.
- Hand-washing facilities available: for adults and children with paper towels, soap, and water.
- Toys easily cleaned and do not pose a choking hazard: self-explanatory.
- Adequate toy hygiene: toys cleaned (3X per day) with a non-toxic, approved disinfectant.
- Adequate child/caregiver supervision ratio:
 

0-2	1	0-2	1
3-4	1	3-4	1
5-6	1	5-6	1
7-8	1	7-8	1
- Adequate monitoring or security: self-explanatory.
- Acceptable level of cleanliness: self-explanatory.

**XIII. COMPANION ANIMALS**

- Companion animals present: animals in facility.
- Animal care available: animals have clean, fresh water and food.
- Designated animal area: animals located away from people and separately housed.
- Acceptable level of cleanliness: self-explanatory.
- Adequate food and water: self-explanatory.
- Adequate security for safety of animals:



# KENTON COUNTY EOP - SUPPORT PLAN

## MASS CARE AND SHELTER PLAN

### APPENDIX 4 – ARC INITIAL INTAKE / ASSESSMENT TOOL

**AMERICAN RED CROSS - U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
INITIAL INTAKE AND ASSESSMENT TOOL**

Would you like me to write the questions down?	YES / NO	If Yes, give client paper and pen. If no, go to the next category of questions.
Do you use a hearing aid?	YES / NO	If Yes, ask next two (2) questions. If No, skip next three questions.
Do you have your hearing aid with you?	YES / NO	If Yes, ask next two (2) questions. If No, skip next two questions.
Is the hearing aid working?	YES / NO	If No, identify potential resources for replacement.
Do you need a battery?	YES / NO	If Yes, identify potential resources for replacement.
Do you need a sign language interpreter?	YES / NO	If Yes, identify potential resources in conjunction with shelter manager.
How do you best communicate with others?		Sign language? Lip read? Use a TTY? Other (explain).

**VISION/SIGHT**

Do you wear prescription glasses?	YES / NO	If Yes, ask next two (2) questions. If No, skip next two questions.
Do you have your glasses with you or with your personal belongings?	YES / NO	If No, identify potential resources for replacement.
Do you have difficulty seeing, even with glasses?	YES / NO	If No, skip the remaining Vision/Sight questions and go to Activities of Daily Living section.
Do you use a white cane?	YES / NO	If Yes, ask next question. If No, skip the next question.
Do you have your white cane with you?	YES / NO	If No, identify potential resources for replacement.
Do you need assistance getting around, even with your white cane?	YES / NO	If Yes, determine if accommodation can be made in the shelter.
Do you need help moving around or getting in and out of bed?	YES / NO	If No, skip the remaining Vision/Sight questions and go to Activities of Daily Living section.
Do you rely on a mobility device such as a cane, walker, wheelchair or transfer board?	YES / NO	If No, skip the next question. If Yes, list.
Do you have the mobility device/equipment with you?	YES / NO	If No, consult with HS and shelter manager to determine if accommodation can be made in the shelter.

**ACTIVITIES OF DAILY LIVING** **Ask all questions in category.**

Do you need help getting dressed?	YES / NO	If Yes, explain.
Do you need assistance using the bathroom?	YES / NO	If Yes, explain.
Do you need help bathing?	YES / NO	If Yes, explain.
Do you need help eating? Cutting food?	YES / NO	If Yes, explain.
Do you have a family member, friend or caregiver with you to help with these activities?	YES / NO	If No, consult with HS and shelter manager to determine if general population shelter is appropriate.

**NUTRITION**

Do you wear dentures?	YES / NO	If Yes, ask next question. If No, skip the next two questions.
Do you have them with you?	YES / NO	If No, identify potential resources for replacement.
Are you on any special diet?	YES / NO	If Yes, list special diet and notify Feeding staff.
Do you have any allergies to food?	YES / NO	If Yes, list allergies.

**INTERVIEWER EVALUATION**

<b>Question to Interviewer:</b> Has the person been able to express his/her needs and make choices?	YES / NO	If No or uncertain, consult with DMH and shelter manager.
<b>Question to Interviewer:</b> Can this shelter provide the assistance and support needed?	YES / NO	If No, collaborate with shelter manager on alternative sheltering options.

**NAME OF PERSON COLLECTING INFORMATION:** Signature: Date:



# KENTON COUNTY EOP - SUPPORT PLAN

## MASS CARE AND SHELTER PLAN

### APPENDIX 5 – PRE-EXISTING SHELTER LOCATIONS

#### Kenton County Shelter Locations with signed Red Cross Shelter Agreements

Saint Henry Church And School	3813 Dixie Highway	Erlanger
Marge Schott-Unnewehr BGCGC	30 West 26 <sup>th</sup> Street	Covington
Edgewood Senior Center	550 Freedom Park Drive	Edgewood

**Kenton County, Kentucky**

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**Mass Care and Shelter Plan**

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# 1. INTRODUCTION

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## 1.1 PURPOSE AND DEFINITIONS

This Mass Care and Shelter Plan describes the roles and responsibilities under ESF 6 – Mass Care and Sheltering to set up and manage:

- Mass Care Shelters - provide shelter, feeding, sleeping and sanitary accommodations to the general population and those with functional or medical needs who can be assisted in general population shelter.
- Medical Shelters - provide shelter, feeding, sleeping, sanitary accommodations and support care to the medical needs population who do not require hospitalization but their medical needs require greater attention than can be reasonably provided for in a general population shelter.
- Feeding Operations- provide food and water to citizens in the impacted area and in shelters which may be established.

Additionally, mass care and shelter for the general population and medical needs population involves management of:

- Companion animals. A domesticated animal, such as a dog, cat, bird, fish or rodent that is traditionally kept in the home for pleasure rather than for commercial purposes.
- Service animals: Any guide dog, signal dog, or other animal individually trained to provide assistance to an individual with a disability.

## 1.2 SCOPE

This plan addresses activation and management of shelters and feeding operations in Kenton County. This plan includes coordination with the Cities of Kenton County as well as the unincorporated populations of Kenton County.

Mass care and sheltering, as defined in this plan, includes the following activities:

- Coordination between agencies, non-governmental organizations, the business community and private-non-profits;
- The selection of pre-designated and pre-inspected shelter facilities;
- The inspection and acquisition of additional shelter facilities;
- Management of mass care shelters;
- Registration of shelter population;
- Provision of services to shelter clients; and
- Status reporting of shelter and feeding operations.

### 1.3 RESPONSIBILITIES AND AUTHORITIES FOR MASS CARE AND SHELTER

The following agencies and organizations are responsible for mass care and shelter:

- A. ESF 6 with assistance from Kenton County Emergency Management is responsible for the coordination of mass care and shelter operations during an incident. Management of mass care and sheltering operations in Kenton County will be completed through a partnership between local government, the American Red Cross, the Salvation Army, the private sector business community, other Voluntary Organizations Active in Disaster (VOADs), and other private-non-profits organizations. When the Kenton County Emergency Operations Center (EOC) has been activated, mass care and sheltering will be coordinated by the ESF 6 Coordinator.
- B. The American Red Cross: by Congressional Charter, the American Red Cross is chartered to undertake activities for the purpose of mitigating human suffering caused by all natural disasters and emergencies.
- C. Local Government Employees: The provision of emergency services falls within the authority of the Chief Elected Official. In case of a declared local state of emergency, public employees can be considered as disaster service workers and may support mass care and shelter operations.
- D. School Districts: Kenton County Emergency Management, in cooperation with the American Red Cross, has assessed the use of school buildings, grounds, and equipment for shelters during disasters or other emergencies. School district administrative personnel will cooperate as necessary to meet the needs of the community. It is preferred to avoid the use of school facilities whenever another adequate facility is available. The objective will be to reopen schools and provide for normalcy as soon as possible.
- E. Faith based and private facilities: Kenton County Emergency Management, in cooperation with the American Red Cross, has assessed the use of some faith-based and private facilities, grounds, and equipment for shelters during disasters or other emergencies. Those who have executed a shelter agreement with the American Red Cross will cooperate as necessary to meet the needs of the community.

### 1.4 SITUATION

1. The population of Kenton County is 168,536 (2016 U.S. Census estimate)
2. Demographic information from the 2010 U.S. Census Bureau indicates:
  - Of the 48,239 households in the County, 12,000 have household incomes of less than \$62,000.00.
  - 93.6 % of the households are owner occupied, and 2.5% renter occupied.

## Mass Care/Shelter Plan

- 16,000 individuals over the age of 5 speak English "less than very well". Of those 16,000, 14,000 are Spanish speaking.
  - The bulk of the housing stock (1/2) is single family detached which includes approximately 4,000 mobile homes.
  - It is estimated that 2,000 households have no vehicle available.
3. 20% of the affected population will require some level of special care (personal care assistance, sign language interpreter, mobility assistance, behavioral health care, etc.)
  4. The American Red Cross currently maintains the capacity to shelter approximately 1,500 individuals in 9 pre-inspected facilities with existing Memoranda of Agreement, which historically has been sufficient for local disasters and emergencies.
  5. Capacity for animal care will be through agreements between Kenton County Animal Care and Control Department, veterinarians, and private-nonprofits. See the Kenton Animal Disaster Response Plan.

### 1.5 ASSUMPTIONS

1. The planning basis for sheltering is for approximately 20% of an affected population to seek shelter in a public shelter. This percentage increases when catastrophic events force exhaustion of or damage to resources which might normally be occupied by persons with means. It is anticipated that 80% of the affected population will stay with friends or family, leave the area, and use insurance for "additional living expenses", or stay at their residences.
2. In the event of a major earthquake, or other catastrophic event in the Commonwealth of Kentucky, additional host sheltering capacity may be required.
3. Following an incident it will be necessary to provide for feeding operations for citizens in the impacted area and in shelters.
4. In earthquakes, hazmat, explosion or other incidents, previously identified shelter facilities may be unavailable due to being damaged beyond operability or contamination.
5. 60% of the affected population has companion animals.
6. Along with the full-time residential population, transient populations: tourists, students, visiting foreign nationals and commuters may also require assistance.
7. Individuals may arrive at shelter locations without essential medicines, medical equipment, mobility assistance devices and other critical supportive supplies.

## **2. OPERATIONS**

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### 2.1 OPERATIONAL POLICIES

1. During small scale or isolated events the American Red Cross, Salvation Army and other voluntary organizations will respond to requests for assistance from a single jurisdiction's law enforcement, fire service or emergency management agency.
2. Requests for Mass Care- Feeding and Shelter assistance during significant events will be coordinated by the ESF 6 Coordinator at the Kenton County Emergency Operations Center (EOC).
3. ESF 6, Kenton County Emergency Management and the American Red Cross will coordinate shelter location and operation, and will mutually support shelter operations with shared personnel and support services when possible.
4. School Districts will want to return students to school as soon as possible following an incident. Returning students to the schools is an important step in the recovery process. For these reasons schools should be used as a shelter only when absolutely necessary.
5. Neither Kenton County Emergency Management nor the American Red Cross assumes responsibility for staffing or supplying unauthorized shelter openings during or following an incident.
6. Additional, authorized shelters required by ESF 6, Kenton County Emergency Management or the American Red Cross will be inspected by KCHSEM and/or ARC staff and an agreement for use of the facility will be secured before the shelter is opened and occupied.
7. All shelters established and maintained by the American Red Cross will utilize the standards and policies contained in the current American Red Cross policy and procedures.
8. ESF 6 will work with ESF 8 Public Health and Medical to arrange for the Northern Kentucky Independent District Health Department to inspect all shelters prior to opening. The Health Department will continue daily inspections. On day three (3) of any shelter operations the Health Department Epidemiologists will initiate their efforts.
9. Public and private health care facilities are responsible for evacuation plans for their facilities and populations and arranging for the shelter needs of their clients, including reciprocal agreements with like facilities.
10. County employees working as disaster service workers at shelters will receive their normal compensation, including overtime, if required.
11. When facilities are used as shelters, ESF 6, Kenton County Emergency Management and the American Red Cross in coordination with the facility owner/operator or management will determine the need for shelter consolidation; and the timing for shelter closure(s).

Mass Care/Shelter Plan

12. Persons believed to be contaminated by hazardous materials will not be admitted into shelters until they have been decontaminated.
13. Individuals or households are responsible for the care of their companion and service animals (e.g. feeding, walking, grooming, cage cleaning).
14. New prescriptions for lost medications will not be written at shelters operated under the American Red Cross, ARC case workers may determine the suitability of the provision of vouchers for existing prescriptions at participating pharmacies.
15. Special dietary needs are considered as is feasible during the long term portion of the shelter operation. Special dietary needs include but are not limited to: gluten free, low fat/salt/carbohydrate meals; and cultural, ethnic and vegetarian preferences.
16. The Shelter Manager, after consultation with Kenton County Emergency Management and/or the ESF 15 coordinator at the Kenton County EOC approves all requests from the media for interviews. Without specific approval to speak with the media all questions regarding the mass care and shelter operation will be referred to the ESF 15 coordinator at the Kenton County EOC.
17. Closing shelters and locating alternate housing resources for shelterees is a high priority.
18. Procedures to activate and manage public information and materials used in communication are described in the Kenton County EOP and Kenton County Joint Information Center (JIC) Plan.

2.2 MASS CARE AND SHELTER LOCAL RESPONSIBILITIES

Providing mass care and shelter to the population of Kenton County requires a coordinated and cooperative effort among jurisdictions, disciplines, emergency management, and public and private agencies. Responsibilities for this response include:

AGENCY	RESPONSIBILITY
<p>ESF 6 – Mass Care and Sheltering</p> <p>Kenton County Homeland Security Emergency Management</p> <p>Northern Kentucky Independent District Health Department</p>	<p>Implement this Plan</p> <p>Develop projections and priorities for the EOC Action Plan (Mass Care and Shelter components)</p> <p>Assist the ARC to train shelter staff, if needed.</p> <p>Coordinate with the ARC on locations, openings, maintenance, and closing of shelters</p> <p>Coordinate with the ARC, private-non-profits, and the public health Logistics Section to obtain needed support for the shelter population (food, water, sanitary conveniences, transportation services, etc.)</p> <p>Gather and provide community assistance resource information to the sheltered population</p>

Mass Care/Shelter Plan

AGENCY	Responsibility
<i>CONTINUED</i>	<p>Assist the ARC in coordination of feeding operations in the impacted area and in the shelter(s)</p> <p>Update ESF 6 status reporting in WebEOC</p> <p>Request mutual aid and make resource requests through the Logistics Section, if necessary.</p> <p>Coordinate with Finance Section and ensure that record-keeping of all care and shelter costs is documented by all participants</p>
Northern Kentucky Independent District Health Department	<p>Inspect shelter locations prior to opening</p> <p>Provide staff to assist with shelter registration that can assess functional and medical needs.</p> <p>Provide outreach health education teams</p> <p>Provide disease outbreak assessment and control Teams - Epidemiology will initiate their efforts on day 3 of any shelter operation.</p> <p>Coordinate with Mental, Behavioral Health, and Substance Abuse programs for assistance at shelters</p> <p>Coordinate with Environmental Health for any ongoing food safety, sanitation or waste disposal concerns</p>
Kenton County Emergency Operations Center Staff  Kenton County Homeland Security Emergency Management	<p><u>Logistics Section:</u> Provide assistance in obtaining supplies, equipment, food, water, shower trailers (if needed), and transportation to support the sheltered population.</p> <p><u>Planning Section:</u> Update shelter information within Web EOC</p> <p><u>ESF 4 and ESF 3/12</u> Assist with inspections of potential additional shelter facilities</p>
ESF 13 – Law Enforcement	<p>Provide security at shelters.</p> <p>Provide advice, support and protection in instances when known criminals or known sex offenders require shelter</p> <p>Coordinate with ESF 6 Coordinator to perform investigative, warrant service and other law enforcement activities within the shelter population</p>
Other City or County Departments, Agencies or Organizations	<p>Provide assistance in obtaining supplies, equipment, food, water and transportation to support the sheltered population</p> <p>Inspect pre-designated shelter facilities following events with damage</p> <p>Assist with inspections of potential additional shelter Facilities</p>

## Mass Care/Shelter Plan

AGENCY	Responsibility
Kentucky Division of Emergency Management	Review sheltering operations within the Region, and assist with maximizing Regional response and resource allocation  Support requests for assistance received through the Emergency Operations Center

### 2.3 COORDINATION WITH RESPONSE PARTNERS

When multiple shelters are opened, the American Red Cross will send a Government Liaison to the Kenton County EOC to assist the ESF 6 Coordinator. The Salvation Army, owners/operators of shelter facilities, the Northern Kentucky Independent District Health Department and/or other necessary parties may also be asked to send a representative(s) to the Kenton County EOC to assist the ESF 6 Coordinator, if needed.

ESF 6 staffing will expand as needed, to meet the needs at all shelters. The ESF 6 Coordinator will coordinate with the EOC Logistics Section for staffing, communication, supplies and facilities; and with the Logistics and Finance Sections for procurement of supplies and services.

### 2.4 SHELTER STAFFING

The American Red Cross – Cincinnati Region maintains Shelter Management Teams through chapter staff and volunteers. The ARC takes the lead on shelter openings and staffing.

### 2.5 VOLUNTEERS

Kenton County Voluntary Organizations Active in Disaster (VOAD), Kenton County Community Emergency Response Team (CERT) and the Northern Kentucky Medical Reserve Corps (NKY MRC) have volunteers who may be made available to assist with Mass Care and Shelter operations.

The ARC recruits, trains and employs volunteers for assistance with shelter operations. Volunteer positions in shelters include: shelter manager; nurse; registrant; case worker and others as needed.

In a large event it may be necessary to control the influx of volunteers by establishing a Volunteer Reception Center to receive, identify, provide training, and credential volunteers. (See Kenton County Volunteer Management Plan)

### 2.6 SHELTER ACTIVATION – SEQUENCE OF EVENTS

- KCHSEM determines there is a need for or receives requests for a shelter(s) from jurisdiction(s) in the County.
- KCHSEM may activate the Kenton County EOC and/or the ESF 6 Coordinator. KCHSEM will consider the need for a local declaration of emergency.

## Mass Care/Shelter Plan

- KCHSEM will notify the American Red Cross (ARC) Cincinnati Region of the request.
- Given the estimated number of people needing shelter and their geographic location, the ARC and the ESF 6 Coordinator select the number and locations of shelters to open. Should the incident impact the region the best course may be for neighboring counties to share shelters. This would be especially practical if the number of those requesting shelter is low. Care should be taken to avoid stretching the sheltering resources too thin by establishing too many shelters or shelters in areas where there is little or no need.
- The ARC reviews Mass Care and Sheltering staffing needs and activates their Mass Care volunteers. The ARC will identify any shortfalls and continue to supplement staff as personnel are available.
- Short term additional staffing needs may be met by ARC requests to the Kenton County Citizen Corps programs and/or Northern Kentucky Medical Reserve Corps for volunteers. The establishment of a Volunteer Reception Center offering "just in time training" to citizen volunteers may be required.
- Long term additional ARC staffing needs will be met by the ARC Disaster Services Human Resources (DSHR) national system of volunteers.
- KCHSEM, ESF 6 and the ARC will determine resource needs for Mass Care and Sheltering operations. These immediate needs will be met by supplies stored and warehoused in the County and the region. There are two (2) KCHSEM Shelter Carts staged at St. Timothy Church, one
- (1) KCHSEM Shelter Cart staged at Hebron Lutheran Church and one (1) KCHSEM Shelter Cart staged at Florence Baptist Church. Each KCHSEM Shelter Cart is designed to support twenty-five (25) persons. An ARC supply trailer containing cots and blankets is staged on the lot of Kenton County Emergency Management in Burlington. ARC has trucks and other trailers in the region containing cots, blankets and other support commodities.
- KCHSEM and/or the EOC are notified of the shelter locations and support needs (quantity estimates) are communicated.
- ARC reviews the need for shelter feeding resources and if the need is significant may contact the Southern Baptist Convention Disaster Relief or other Voluntary Organization Active in Disaster (VOAD) volunteers to assist with mass feeding. For locations or occasions where these resources are not available, the ARC may request assistance from the ESF 6 Coordinator to identify feeding resources. A NKY Health Department inspection is required before feeding operations can begin.
- Local law enforcement will provide security at the shelter(s). If local law enforcement resources are unavailable to handle security needs at the shelter(s) or if the ARC requests additional security then such requests will be made through KCHSEM or ESF 13 if the EOC is activated.

## Mass Care/Shelter Plan

- The Kenton County Animal Care and Control Department will assist with management of animal issues which arise following an incident. The Animal Care and Control Department maintains lists of local resources that may be able to provide or assist with pet care concerns. See the Kenton County Animal Disaster Response Plan for details.
- Availability of communications equipment at shelters will be reviewed as shelters are established. Any requirement for additional equipment will be referred to KCHSEM or the EOC Logistics Section for fulfillment.
- The Fire/EMS agencies or the ESF 4 Coordinator when the EOC is opened will be notified of shelter location(s) for population shift awareness.
- When shelters are activated and opened, KCHSEM or if the EOC is activated the ESF 6 Coordinator will receive requests for resources and/or assistance from the shelters and periodically polls shelters for supply shortfalls, transportation needs, staffing needs, waste management requirements and status reports. Requests for resources and assistance are managed by KCHSEM or if the EOC is activated the EOC Logistics Section.
- Shelters will need to be surveyed by the Northern Kentucky Independent District Health Department using their Environmental Surveillance Form for Shelters (see Appendix 1). If shelters are anticipated to be open for three or more days, Public Health assessment teams (epidemiology) are requested to visit each shelter daily or on a regular schedule determined by the NKY Health Department.
- The ARC and the ESF 6 Coordinator assemble referral information for housing, food, household supplies, minor repair, transportation, employment, behavioral health providers and ensure that this referral information is available to caseworkers and staff at all shelters.
- The ESF 6 Coordinator works with the ESF 14 Coordinator on referral information and planned location for the Local Assistance Center (LAC). The ESF1 Coordinator ensures that transportation is available for shelter residents if the LAC is located apart from shelters.
- As the shelter population diminishes, shelters will be consolidated if geographically feasible.
- The American Red Cross will arrange for the following during demobilization/shelter closings:
  - Ø restocking inventory and supplies
  - Ø return borrowed and rented equipment
  - Ø write letters of appreciation to staff, volunteers, shelter facilities and donors.

## 2.7 REGISTRATION

Volunteers may assist with the registration process. During registration, information is recorded regarding medical conditions, functional needs and dietary needs.

The ARC and/or the NKY Health Department will ensure that a nurse is available to the shelter. Whenever possible the nurse will be present during intake and registration of shelterees to assist in screening. The nurse will attempt to ensure that all persons requesting shelter are medically appropriate and either can care for themselves or have a care-giving attendant or companion. Whenever possible those with functional or minor medical needs should be sheltered in the general population shelter. Persons not able to perform "activities of daily living" and those needing medical care or specialized medical equipment or oxygen, are admitted when accompanied by their caregiver unless medical shelters have been activated.

If available, the ARC Registration form is used. If unavailable, 3 x 5 index cards are utilized to record the following information:

- Family last name (at the top of the card)
- First, and middle names for husband and wife (include wife's maiden name)
- Names and ages of all other family members
- Pre-disaster address
- Note any health concerns or special needs
- Date arrived in the shelter; date departed shelter
- Post disaster address

All shelter residents sign in and out at the front desk.

The registration information is used to reply to ARC Disaster Welfare Inquiries according to the client driven privacy release of information statement.

## 2.8 FEEDING OPERATIONS

Feeding operations will be required in the impacted area and in any shelters which may be opened. ESF 6 will coordinate with the ARC, Salvation Army and other volunteer disaster relief agencies to plan for feeding operations.

The ARC has an Emergency Response Vehicle (ERV) mobile feeding vehicle in the region and additional ERVs staged throughout the nation. The Salvation Army has a mobile canteen vehicle in the region and additional such vehicles staged throughout the nation.

The American Red Cross and Salvation Army also have assistance agreements with other volunteer organizations to assist in feeding operations. For instance the ARC has an agreement with the Southern Baptist Convention to provide tractor-trailer kitchen trucks and volunteers to staff them.

Food and water should be delivered directly to those in need whenever possible. This ensures that limited supplies get to those who are in need. However, in large events Points of Distribution (PODs) may be required (see the Points of Distribution Plan).

## 2.9 HEALTH CARE SERVICES FOR SHELTERS

ARC volunteer shelter nurses, NKY Health Department, and NKY Medical Reserve Corps nurses are trained in the administration of first aid and can provide referrals to further medical assistance. For medical emergencies, EMS should be notified.

Shelter operations lasting longer than 3 days will require a visit from the Public Health Shelter Assessment Team to assess current disease conditions (epidemiology), determine the need for additional mental and behavioral health counselors, assist with medical referrals and provide information to shelterees on reducing the spread of disease. Public Health Assessment Teams will visit shelters daily or as otherwise determined by the NKY Health Department as long as the shelters remain open.

Refrigerators should be provided for storage of client owned prescription drugs in a secure area of the shelter, when possible. Under certain circumstances the ARC can work with pharmacies to secure medications for shelterees. Participating pharmacies are responsible for verifying the existence of an existing prescription for lost medications, either with the client's medical care provider, or with the client's usual pharmacy, or by the presence of a prescription bottle and retrieving the patient's prescription data.

Individuals with contagious diseases (common colds, influenza or intestinal illness) are separated from the other shelter guests when feasible in the smaller shelters. Public Health is consulted if these separation actions do not appear to be effective. Other solutions involve the transfer of individuals among shelters to protect those who are well and provide for centralized care of the ill, or the establishment of medical needs shelters.

## 2.10 TRANSPORTATION

KCHSEM or if the EOC is activated the ESF 1 Coordinator assists with coordination of transportation assistance when required for shelter operations. Transportation assets which may be requested include local government vehicles or buses from the school districts or the Transit Authority of Northern Kentucky (T.A.N.K.). Communicate with T.A.N.K. to see if temporary bus stops can be added at the shelter locations. ARC caseworkers may be able assist shelter clients with special transportation needs.

## 2.11 RECORD KEEPING

Reimbursement for local government mass care and shelter expenses may be available pursuant to the Public Assistance provisions of the Stafford Act.

The Stafford Act can provide reimbursement of public funds only subsequent to jurisdictional declarations of emergencies (local, state, and federal). Consultation is required with Kenton County

Emergency Management to ensure that the local declarations and damage assessment are appropriate and adequate.

Reimbursement may be available for emergency sheltering operations and emergency medical services provided at shelters, depending upon the type and intensity of the emergency. As it may not be known if reimbursement is available until well after these services are underway, documentation of expenses must begin immediately.

Documentation should include:

- Employee Classification
- Disaster Assignment
- Date and place assigned, specific work performed
- Release date from temporary disaster assignment
- Days and hours worked
- Travel costs (transportation, lodging and meals)
- Purchases of supplies, services (cots, food and water, linens, blankets, pillows, personal care items, towels, washcloths, televisions, radios, washers, dryers)
- Rental of equipment, vehicles or facilities
- Minor modifications to make facility habitable
- Utilities, generator fuel
- Security
- Cleaning and restoration
- Animal shelters (companion and service animals)

### **3. AFTER ACTION REVIEW**

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At each shelter location, an After Action Review should be conducted and a report compiled for submission to the KCHSEM or the Emergency Operations Center ESF 6 Coordinator. The report should include response actions taken, issues identified, and recommendations for corrective action. KCHSEM and the ESF 6 Coordinator will assign individuals or agencies responsibility for follow-up on the corrective actions and designate an individual responsible for updating this plan based on the findings.

Topic areas may include:

- ü General Information (location of shelter, staffing, number of clients, shelter open/closed dates)
- ü Security issues, unpleasant events
- ü Adequacy of Supplies (cots, blankets, admin supplies, medical supplies, feeding)
- ü Recreation activities, childcare, client volunteerism
- ü Staffing shortfalls
- ü Training needs
- ü Public Information, referral information
- ü Communication with response levels

## **4. PLANNING FOR ADDITIONAL SHELTER FACILITIES**

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The ARC has pre-inspected and identified shelter facilities in Kenton County from which selections are made following specific events. This section of the plan is used when additional shelter sites are required because existing shelters are at capacity and more individuals are requiring care and shelter.

### **4.1 SHELTER SITE SELECTION CRITERIA**

Ideal characteristics of shelter facilities include:

- Space for parking
- Space for Sleeping (40 square feet per person)
- Additional space is required for:
  - § Registration Area
  - § Shelter Manager's Office
  - § Health Services Area
  - § Mental Health Services Area
- Food Preparation or Serving Areas (including space for a snack table)
- Recreation Area
- Toilet and Shower Facilities (one toilet per 20 people)
- Kitchen / Cooking Facilities
- Emergency Generator on Site
- Safety Features (e.g., fire extinguisher, fire sprinklers, and fire alarm)
- Building Heating and Cooling Capacity
- Telephones
- Accessibility for People with Disabilities.
- Refrigeration

Potential sites lacking all of the above features may be utilized with logistical or construction support to meet the deficiency (i.e. generator, mobile kitchen, shower trailer or tent, portable toilets).

The six-page Red Cross facility survey form is located in Appendix 1. Aside from buildings already identified within the county, potential site consideration may include:

- Commercial / industrial buildings (contact real estate agencies)
- Churches or community centers
- Dual facilities in proximity to each other (warehouse near a gym – showers)
- Convention centers, arenas, retreat centers, college dorms when school is out of session
- As a last resort large tents may be used in parks or open areas.

A chart can be developed following the facility inspections to compare logistical and construction support requirements and to serve as a worksheet for support task assignment. See example below.

## Mass Care/Shelter Plan

Site Name	Indoor Sq. Ft.	Toilets	Showers	Generator	Access	Cooking Facilities	Telephones	Lighting	Climate Control

### 4.2 REQUESTING ADDITIONAL ASSISTANCE

In large events the American Red Cross (ARC) may draw upon its national capability via their Disaster Services Human Resources (DSHR) to augment shelter and feeding staff and commodities to assist the Chapter.

In events in which all capability is overwhelmed at the county level for shelter and feeding, requests are forwarded to the Commonwealth of Kentucky Emergency Operations Center (CEOC), if activated or through the KyEM Region 6 Manager. When more than one local EOC requests assistance, the REOC may forward requests to the State Operations Center (SOC). If requests may not be filled within the State, and the National Response Plan Framework is activated, requests are forwarded to Emergency Support Function #6.

## **APPENDICES**

- 1 American Red Cross Shelter Facility Survey
- 2 American Red Cross Shelter Registration Form
- 3 Public Health Environmental Surveillance Form for Shelters
- 4 American Red Cross - U.S. Department of Health and Human Services Initial Intake and Assessment Tool
- 5 Public Health Morbidity Surveillance Individual Form
- 6 Public Health Morbidity Surveillance Tally Sheet
- 7 Potential Shelter Locations
- 8 Food Resources
- 9 Emergency Resources
- 10 CDC Shelter Assessment Tool



# Shelter Facility Survey

## BASIC SHELTER INFORMATION

Site Name/ School District \_\_\_\_\_ NSS ID# \_\_\_\_\_ Date \_\_\_\_\_  
 Name of building \_\_\_\_\_ Building # \_\_\_\_\_ of \_\_\_\_\_  
 Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ Website \_\_\_\_\_

Shelter address \_\_\_\_\_  
 Town/ City \_\_\_\_\_ County/ Parish \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_  
 Town/ City \_\_\_\_\_ County/ Parish \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Agency operating shelter (check one)  Red Cross  FEMA  DHS  TSA  SBC  Other \_\_\_\_\_

Shelter agency type (check one)  Red Cross managed  Red Cross partner  Red Cross supported  Independent \_\_\_\_\_

Shelter type (check all that apply)  Evacuation  General  Medical  Other \_\_\_\_\_

General facility notes \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## Shelter Capacity

Use the calculations to calculate the capacity for sleeping space.

Total sq feet \_\_\_\_\_  Evacuation \_\_\_\_\_ usable sq ft + 20 sq ft/person = \_\_\_\_\_ person capacity  
 \_\_\_\_\_  Post Impact \_\_\_\_\_ usable sq ft + 40 sq ft/person = \_\_\_\_\_ person capacity  
 Sq feet usable for sleeping space \_\_\_\_\_  Other \_\_\_\_\_ usable sq ft + \_\_\_\_\_ sq ft/person = \_\_\_\_\_ person capacity

## Geographic Information

Use major landmarks (e.g. highways, intersections, rivers, railroad crossings, etc.) that will be easily recognizable in a disaster. Latitude and longitude coordinates can be found at online web sites, using a global positioning system device, or will auto populate when the address is entered into the National Shelter System.

Latitude \_\_\_\_\_ Longitude \_\_\_\_\_ Elevation \_\_\_\_\_  
 In storm surge/evacuation  Yes  No Hurricane category or evacuation area \_\_\_\_\_  No  Yes In flood plain  Yes  No year flood impact  No

Directions to facility \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_



# Shelter Facility Survey

## Point of Contact to Authorize Use of Facility

Name \_\_\_\_\_ Title \_\_\_\_\_ Phone # \_\_\_\_\_  
 24 hour # \_\_\_\_\_ Fax # \_\_\_\_\_ Email \_\_\_\_\_  
 Contact notes \_\_\_\_\_

## Point of Contact to Open Facility

Name \_\_\_\_\_ Title \_\_\_\_\_ Phone # \_\_\_\_\_  
 24 hour # \_\_\_\_\_ Fax # \_\_\_\_\_ Email \_\_\_\_\_  
 Contact notes \_\_\_\_\_

## Alternate Point of Contact

Name \_\_\_\_\_ Title \_\_\_\_\_ Phone # \_\_\_\_\_  
 24 hour # \_\_\_\_\_ Fax # \_\_\_\_\_ Email \_\_\_\_\_  
 Contact notes \_\_\_\_\_

## Pet Shelter

Pet shelter space available on site  Yes *answer questions below*  No nearest location \_\_\_\_\_  
 Separate ventilation system  Yes  No Cement or tile floors with drains  Yes  No Outdoor space to relieve pets  Yes  No  
 Agency that will operate the pet shelter \_\_\_\_\_ Phone # \_\_\_\_\_ 24 hour # \_\_\_\_\_

## ADDITIONAL INFORMATION

Shelter agreement signed  Yes  No Date signed \_\_\_\_\_ Notes \_\_\_\_\_  
 Pre-designated shelter team assigned  Yes Team name \_\_\_\_\_  No  
 Current facility floor plans available  Yes Location of copies \_\_\_\_\_  No  
 International Association of Venue Managers (IAVM) facility  Yes  No

*Use the Standards for Selection of Hurricane Evacuation Shelters to select hurricane evacuation shelters. In this document, you will find a planning process that involves many factors (e.g. technical information for storm surge and flood mapping). This process requires close coordination with local officials for technical information to make decisions about hurricane shelter suitability. Use the Facility Construction section to assist with determining whether this can be a hurricane evacuation shelter.*

Shelter can be a hurricane evacuation shelter  Yes  No Notes \_\_\_\_\_



# Shelter Facility Survey

## Survey Conductors *(List all who participated in the survey)*

Name	Title	Organization	Phone #

## LIMITATIONS OF FACILITY USE

Check one  This facility will be available for use at any time during the year  This facility is only available for use during the time periods listed below  This facility is not available for use during the time periods listed below

Dates (mm/dd/yyyy) Times (hh:mm)

Dates (mm/dd/yyyy) Times (hh:mm)

From \_\_\_\_\_  AM  PM From \_\_\_\_\_  AM  PM  
 To \_\_\_\_\_  AM  PM To \_\_\_\_\_  AM  PM

List any recurring dates that the facility is not available (e.g. every sunday) \_\_\_\_\_

Areas of the facility that are restricted during use \_\_\_\_\_

## FACILITY CONSTRUCTION & SAFETY

### Facility Construction

Construction material  Wood  Masonry/Brick  Pre-fab  Bungalow  Concrete  Metal  Trailer  Pod  Other \_\_\_\_\_

# stories/floors \_\_\_\_\_ Notes \_\_\_\_\_

Elevator  Yes Location \_\_\_\_\_  No Notes \_\_\_\_\_

Open roof-spans (see Standards for Selection of Hurricane Evacuation Shelters for current standards)  Yes Length \_\_\_\_\_  No

Windows in sleep area  Yes  No If yes, shatter protected  Yes  No If yes, protected with shutter  Yes  No

### Fire & AED Safety

*Some facilities may not meet fire codes based on building capacity. The questions below are a general reference. Contact your local fire department with questions or for more information.*

Fire alarms & systems (check all that apply)  Working smoke detectors  Inspected fire alarm system  Functional sprinkler system  Functional direct fire department alert

Comments from fire department \_\_\_\_\_

AED(s) on site  Yes Location \_\_\_\_\_  No



# Shelter Facility Survey

## Facility Inspection Point of Contact

If requested, who would inspect this facility post-impact to determine it is safe to occupy?

Name \_\_\_\_\_ Title \_\_\_\_\_ Phone # \_\_\_\_\_

24 hour # \_\_\_\_\_ Fax # \_\_\_\_\_ Email \_\_\_\_\_

Contact notes \_\_\_\_\_

## SANITATION, FEEDING & UTILITIES

### Sanitation, Utilities & Power

The recommended ratio for toilet facilities is a minimum of 1 toilet for 20 people. The optimum scenario for showers is 1 shower for every 25 residents. Count all facilities that will be available to shelter residents and staff.

Showers available  Yes # of showers \_\_\_\_\_  No Toilets available  Yes # of toilets \_\_\_\_\_  No

Check all that apply Heating  Electric  Natural Gas  Propane  Fuel Oil Cooling  Electric  Natural Gas  Propane

Check all that apply Cooking  Electric  Natural Gas  Propane Water  Municipal  Well(s)  Trapped

Self-sufficient power  Yes Type \_\_\_\_\_  No

Note fuel requirements, generator capacity, facility areas supported by generator(s), and other relevant information.

Emergency generator on site  Yes  No Notes \_\_\_\_\_

### Feeding

Food Prep (check all that apply)  Warming oven kitchen  Full service  Central kitchen (delivery)

Food stock stored on site  Yes # meal can be served \_\_\_\_\_  No Refrigeration units on site  Yes # units \_\_\_\_\_  No

Seating capacity  Cafeteria  Snack Bar  Other indoor seating \_\_\_\_\_ Total estimated seating capacity for eating \_\_\_\_\_

Notes on feeding \_\_\_\_\_

## ACCESSIBILITY

See accompanying Shelter Facility Survey-Accessibility Instructions.

Facility Construction Facility built in 1993 or later, or extensively altered in 1992 or later.  Yes  No

Parking Areas Parking available.  Yes  No

Answer below if parking is available

Accessible parking space(s)  Yes  No Notes \_\_\_\_\_

Van accessible parking space(s)  Yes  No Notes \_\_\_\_\_

### Drop-off/ Loading Area

Permanent drop-off area/loading zone with marked access aisle or space available to designate as temporary drop-off area/loading zone.  Yes  No

## Facility Entrance

- Sidewalk connects parking area and any drop-off area to at least one facility entrance.  Yes  No
- Route from accessible parking spaces and any drop-off area/loading zone to at least one facility entrance has no steps or curbs without curb cuts.  Yes  No
- Where route crosses curb, curb cuts are at least 36" wide.  Yes  No
- Automatic doors or doors without knob hardware.  Yes  No
- Doorways at least 32" wide when door is open.  Yes  No
- Level landings on interior and exterior sides of entry door.  Yes  No
- No objects protrude from the side more than four inches into the route to the facility entrance.  Yes  No
- If the main facility entrance does not appear to be accessible, another entry is accessible.  Yes  No
- A sign identifies the location of the accessible entrance.  Yes  No

## Routes to Service Delivery Areas

- A route without steps is available to access each service delivery area, as well as restrooms and showers or service can be provided in area that can be accessed by route with no steps.  Yes  No
- Using a yard stick held horizontally at your waist level, walk from the facility entrance to each service delivery area, as well as restrooms and showers. Except at doorways (which must be only 32" wide), no part of the route is less than 36" wide.  Yes  No
- Route has vertical clearance of at least 80".  Yes  No
- No objects protrude from the side more than 4" into the routes to the various service delivery areas.  Yes  No
- Automatic doors or doors without knob hardware.  Yes  No
- Doorways at least 32" wide when door is open along routes to each service.  Yes  No
- If a service delivery area is accessible only by elevator, there is back-up power for the elevator(s).  Yes  No

## Ramps

- Ramps are at least 36" wide, have handrails on both sides 34"-38" above the ramp surface, and have level landings at least 60" long.  Yes  No
- If yes, type of ramp  Fixed  Portable  Not provided
- If ramps are longer than 30 feet, a level landing at least 60" long is provided every 30 feet.  Yes  No

## Restrooms

- Area where person in a wheelchair can turn around (60-inch diameter circle or T-shape turn area).  Yes  No
- Doorways at least 32" wide when door is open.  Yes  No
- Doors without knob hardware.  Yes  No
- Toilet seat is 17"-19" high. Flush control is automatic or manual control on the open side of the toilet and no higher than 48".  Yes  No
- Toilet's centerline is 16"-18" from the nearest side wall.  Yes  No
- Stall at least 60" wide and 56" deep (wall-mounted toilet) or 59" deep for (floor mounted toilet).  Yes  No
- Space at least 9" high is provided beneath the front and one side of the stall.  Yes  No
- Appropriate grab bars.  Yes  No
- Toilet paper dispenser is within 36" of the rear wall.  Yes  No
- At least one accessible sink.  Yes  No



# Shelter Facility Survey

## Showers

Showers available.  Yes  No

*Answer below if showers are available*

At least one accessible shower stall with appropriate grab bars.  Yes  No

Stall type  Transfer stall  Roll-in shower  Not provided

Shower seat 17"-19" high. If in transfer stall, seat is on the wall opposite the shower controls. If in roll-in shower, seat is on wall adjacent to the shower controls.  Yes  No

Hand-held shower spray with ability to mount at 48" (typically via a mount that can be adjusted along a fixed vertical bar), or alternatively a fixed shower head at 48".  Yes  No

Controls do not require tight grasping, pinching or twisting and are mounted 38"-48" high and no more than 18" from the front of the shower.  Yes  No

## Eating areas

At least some tables have tops 28"-34" high and space underneath at least 27" high, 30" wide and 19" deep.  Yes  No

Serving line or counter no higher than 34".  Yes  No

## Assessment

Relevant areas of the facility are accessible to people with disabilities without adjustments.  Yes  No

Facility has at least one accessible entrance and one accessible restroom, and otherwise is capable of being made accessible during a disaster with minor adjustments.  Yes  No

Facility would require extensive adjustments to be accessible during a disaster.  Yes  No

Adjustments for Accessibility (Identify any adjustments or enhancements that should be made to make the relevant areas of the facility accessible during a disaster) \_\_\_\_\_

## OTHER CONSIDERATIONS

### Additional Facilities & Space

Isolated care areas  Yes  No Type of area  Rooms  Shelter area  Separate facility/area Shelter registration area  Yes  No

Laundry facilities  Yes  No # of washers \_\_\_\_\_ # of dryers \_\_\_\_\_ Who can access the laundry facilities  Shelter workers  Shelter residents

Special conditions or restrictions for laundry \_\_\_\_\_

### Available Materials

One cot and two blankets per shelter resident is recommended. Note all available materials for shelter use in the notes section.

Cots available  Yes # of cots \_\_\_\_\_  No Location \_\_\_\_\_

Blankets available  Yes # of blankets \_\_\_\_\_  No Location \_\_\_\_\_

Children's supplies (e.g. cribs & changing table)  Yes  No Chairs & tables available  Yes # of chairs \_\_\_\_\_ # of tables \_\_\_\_\_  No

Notes \_\_\_\_\_



# Shelter Facility Survey

## Facility Ownership & Proximity Considerations

Does the entity that plans to manage the shelter own the building?  Yes  No

If no, is there a current written plan?  Yes  No

Is this facility within five miles of an evacuation route?  Yes  No

Is this facility within ten miles of a nuclear power plant?  Yes  No

## Groups Associated with the Facility & Training

Facility staff required when using facility?  Yes  No

Paid feeding staff required when using facility?  Yes  No

Church auxiliary required when using facility?  Yes  No

Fire auxiliary required when using facility?  Yes  No

Other required?  Yes  No Other \_\_\_\_\_

Will any of the above groups be trained or experienced in Red Cross shelter operations or support?  Yes  No

If yes, describe capabilities \_\_\_\_\_

Has the facility been trained in Red Cross sheltering (if not Red Cross managed)?  Yes  No

If yes, describe capabilities \_\_\_\_\_

Training requested by facility or group  Yes # of staff to be trained \_\_\_\_\_  No

## ADDITIONAL NOTES & INFORMATION

Multiple horizontal lines for handwritten notes and information.



**AMERICAN RED CROSS  
SHELTER REGISTRATION FORM**  
*Please print all sections*

Incident / DR Number & Name: \_\_\_\_\_  
Shelter Name: \_\_\_\_\_  
Shelter City, County/Parish, State: \_\_\_\_\_

Family Name (Last Name):		Total family members registered: Total family members sheltered:
Pre-Disaster Address (City /State/Zip):	Post-Disaster Address (if different) (City/State/Zip):	Identification verified by (Record type of ID; if none, write none):
Home Phone:	Cell Phone/Other:	Primary Language: If primary language is not English, please list any family members who speak English.
Method of Transportation: If personal vehicle-plate #/State: (for security purposes only)		

**INFORMATION ABOUT INDIVIDUAL FAMILY MEMBERS** (for additional names, use back of page)

Name (Last, First)	Age	Gender (M/F)	Rm./Cot #	Arrival Date	Departure Date	Departing? Relocation address and phone

Are you required by law to register with any state or local government agency for any reason?  
 Yes  No If Yes, please ask to speak to the shelter manager immediately.

I acknowledge that I have read/been read and understand the Red Cross shelter rules and agree to abide by them.

Signature \_\_\_\_\_ Date: \_\_\_\_\_

**CONFIDENTIALITY STATEMENT**  
 American Red Cross generally will not share personal information that you have provided to them with others without your agreement. In some circumstances disclosure could be required by law or the Red Cross could determine that disclosure would protect the health or well-being of its clients, others, or the community, regardless of your preference.

Below, please initial if you agree to release information to other disaster relief, voluntary or non-profit organizations and/or governmental agencies providing disaster relief.

I agree to release my information to other disaster relief, voluntary or non-profit organizations \_\_\_\_\_  
 I agree to release my information to governmental agencies providing disaster relief \_\_\_\_\_

By signing here, I acknowledge that I have read the confidentiality statement and understand it.

Signature \_\_\_\_\_ Date: \_\_\_\_\_

Shelter Worker Signature \_\_\_\_\_

After registration, each family should go through the Shelter Initial Intake Form to determine if further assistance or accommodation is needed.

For Red Cross Use Only		Form 5972 Rev 02-07
Copy Distribution		
1. Shelter registration on-site file - Mass Care	2. Information Management (Data Entry)	3. Client (if requested)

Kentucky Department for Public Health  
Environmental Surveillance Form for Shelters

<b>Immediate Needs Identified?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
--

Completed forms should be faxed to: DPH Operation Center  
Fax: 502-564-0477

**I. ASSESSING AGENCY**

Name of Inspector: \_\_\_\_\_ Inspector ID: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_  
Phone: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_\_

**II. FACILITY IDENTIFICATION**

Shelter Name: \_\_\_\_\_ Street Address: \_\_\_\_\_ City: \_\_\_\_\_  
County Name or Number: \_\_\_\_\_

Name of Shelter Manager: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_  
Name of Environmental Manager: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_  
Name of Medical Station Contact: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_  
Shelter Sponsoring/Managing Agency: \_\_\_\_\_

Type of Facility: School \_\_\_ Church \_\_\_ Convention/Arena/Expo Center \_\_\_ Other \_\_\_\_\_

Food Preparation:  On-Site:  Off-Site    Off-Site Preparation Location \_\_\_\_\_

Water:  Municipal  Private    Sewage:  Municipal  Private    Refuse Disposal:  Municipal  Private  
If private, type: \_\_\_\_\_ If private, type: \_\_\_\_\_

**III. CENSUS**

≤ 2 yrs \_\_\_\_\_ 3-17 yrs \_\_\_\_\_ 18-64 yrs \_\_\_\_\_ ≥ 65 yrs \_\_\_\_\_ Total of all age groups \_\_\_\_\_

**\*\*Please mark ONLY those items needing correction or immediate attention with an "X" in the center column\*\***

<b>IV. FACILITY</b>	<b>X</b>	<b>Immediate Needs</b>	<b>/</b>	<b>Comments</b>
Structural damage (Roof, Walls, Windows, etc)				
Security/Law enforcement adequate				
Identification required for entry				
All outside doors adequately secured				
Adequate ventilation				
HVAC system operational				
Hot water available				
Electricity available				
Adequate space per person (30 ft <sup>2</sup> /person)				
Presence of pest /vector issues				
Acceptable level of cleanliness				
Designated smoking area				
Handicap accessibility				
<b>V. FOOD SERVICE DEFICIENCIES</b>				
Approved/Safe food source				
Safe food handling/prep				
Clean kitchen/prep area				
Adequate food holding temperatures (>145°F or <41°F)				
Refrigeration adequate (<41°F)				
Food storage separate from chemicals				
Dishwashing facilities available				
Mop sink/utility sink available				
Adequate hand washing station				
Adequate formula preparation & bottle cleaning area				
Clean baby food/bottle prep area				
<b>VI. DRINKING WATER</b>				
Approved/safe water source				
Adequate water supply (15 liters/person/day)				
Ice from approved source, protected from contamination				
Distilled water to prepare baby formula				
<b>VII. WASTE WATER/SEWAGE</b>				
Sewage system accessible & operational				
Portable Units: pumping & cleaning schedule				
Adequate ventilation				
Adequately cleaned				
Handwashing facilities provided for portable units				

<b>VIII. SANITATION</b>	<b>X</b>	<b>Immediate Needs</b>	<b>Comments</b>
One hand washing station /20 persons			
One toilet/ 20 persons			
One shower/ 20 persons			
Acceptable level of cleanliness			
Adequate laundry services			
Covered containers in female toilets			
Adequate supply of toilet supplies			
Adequate hand towels			
Toilets maintained according to schedule			
Adequate diapering areas one per 12 infants, clean)			
Adequate handicap facilities			
Adequate cleaning supplies			
<b>IX. SOLID WASTE</b>			
Approved waste containers			
Adequate number of waste containers			
Approved disposal			
Timely removal of trash and debris			
Adequate storage			
Storage area maintained, debris accumulation prevented			
<b>X. SLEEPING AREA</b>			
Separate area for families			
Adequate number of cots/beds/mats			
Adequate spacing of cots/beds/mats (2ft bed-to-bed, 6ft head-to-head)			
Adequate supply of bedding (one set per cot)			
Bedding changed according to schedule			
Acceptable level of cleanliness			
<b>XI. HEALTH/MEDICAL CARE</b> Yes <input type="checkbox"/> No <input type="checkbox"/> (If "No" skip this section)			
Type of medical services available			
Adequate handwashing station, accessible & nearby			
Medical supplies separate from food & chemicals			
Separate refrigeration for medicine			
Adequate security for medical supplies			
Biohazard bags & sharps containers available			
Acceptable level of cleanliness			
Adequate security for entry to patient areas			
<b>XII. CHILDREN'S AREA</b> Yes <input type="checkbox"/> No <input type="checkbox"/> (If "No" skip this section)			
Hand washing required for children & adults before entering & after leaving play area			
Provided toys easily cleaned, do not pose a choking hazard			
Toys cleaned/disinfected 3X daily			
Adequate child/caregiver ratio			
Adequate monitoring for security			
Acceptable level of cleanliness			
<b>XIII. COMPANION ANIMALS PRESENT</b> Yes <input type="checkbox"/> No <input type="checkbox"/> (If "No" skip this section)			
Animal care available			
Designated animal area			
Acceptable level of cleanliness			
Adequate food and water			
Adequate security for safety of animals			

Refer questions about the form or assessment procedures to:

**Division of Public Health Protection & Safety**  
 Division Office # Mon-Fri: (502)-564-7398  
 DOC Telephone #:: 502-564-5460  
 After Hours Number: 1-888-9REPORT



# Environmental Health Shelter Assessment Form Instruction Sheet

\*Immediate Needs Box: check yes if immediate needs are present

## I. ASSESSING AGENCY DATA

- Date Assessed: self-explanatory.
- Assessor Name/Title: self-explanatory
- Assessor ID: self-explanatory.
- Assessor Phone contact: self-explanatory.

## II. FACILITY TYPE, NAME and DATA

- Location Name and Description. Example: "Rockville Elementary School - brown building next to the police station."
- Street Address: self-explanatory.
- City/County: self-explanatory.
- Shelter Manager: name and phone of responsible contact person, such as a facility manager or designated person in charge, and his or her title.
- Environmental Manager: name and phone of responsible contact for environmental issues.
- Medical Station: name and phone of responsible contact person for medical station
- Shelter Sponsoring Agency: Red Cross, etc.
- Type of Host Facility: School, Church, Arena, Convention Center, or Other
- Water Source, Sewage type and Refuse Disposal (municipal or private)

## III. CENSUS

- Current Census: estimated number of persons, including workers, in shelter at the time of inspection.

## IV. FACILITY

- Structural damage: note damage to physical structure (e.g., roof, windows, walls, etc).
- Security/law enforcement adequate: security guards or police officers available at facility site.
- Identification required for entry: self-explanatory
- Adequate ventilation: facility well-ventilated and free of air hazards such as smoke, fumes, etc.
- HVAC system operational: self-explanatory.
- Hot water available: self-explanatory.
- Electrical grid system operational: self-explanatory.
- Adequate space per person in sleeping area:
  - evacuation shelters, 20 ft<sup>2</sup> per person;
  - general shelters, 40 ft<sup>2</sup> per person;
  - special needs shelters, 60-100 ft<sup>2</sup> per person.
- Free of pest/vector issues: note presence of mosquitoes, fleas, flies, roaches, rodents, etc.
- Acceptable level of cleanliness: self-explanatory.
- Designated smoking area: self-explanatory.
- Handicap accessibility: ADA Compliant.

## V. FOOD

- Adequate supply: self-explanatory. Safe food source: source of the food from a licensed contractor or caterer.
- Preparation on site: self-explanatory.
- Safe food handling: food preparers are using gloves, avoiding cross contamination, using appropriate utensils, etc. -- refer to local code.
- Clean kitchen area: self-explanatory.
- Appropriate temperatures: hot food kept above 145 °F; cold food kept below 41 °F. Or refer to local code or US Food Code.
- Appropriate storage: Adequate refrigeration and ≤41°F.

- Proper dishwashing facilities: Wash, rinse and sanitize.
- Dishwashing facilities available: place to wash, rinse and sanitize kitchen utensils and cooking equipment.
- Hand-washing facilities available: fixed or portable, as long as they are operational.
- Clean formula preparation and bottle cleaning area.

## VI. DRINKING WATER AND ICE

- Safe water from an approved source.
- Adequate water supply: drinking water in the range of 1-2 gallons/per person/per day, for all uses 3-5 gallons/per person/per day.
- Safe ice from an approved source (permitted facility outside affected area) and protected from contamination.
- Distilled water provided for baby formula preparation: self-explanatory.

## VII. WASTE WATER / SEWAGE

- Sewerage system accessible and operational: self-explanatory.
- Portable Units: Pumped and cleaned according to a set schedule.
- Adequate ventilation: bathrooms and portables well-ventilated and free of odors.
- Adequately cleaned: self-explanatory.
- Handwashing facilities provided for portable units: self-explanatory
- Mop sink/utility sink: self-explanatory.

## VIII. SANITATION

- Adequate number of operational hand-washing stations: 1 per 20 persons.
- Adequate number of operational toilets: minimum 1 per 20 persons or as specified by sex.
- Adequate number of operational showers/bathing facilities: 1 per 20 persons.
- Acceptable level of cleanliness: self-explanatory.
- Adequate laundry services: provided with separate areas for soiled and clean laundry.
- Covered containers provided in female toilets.
- Toilet supplies available: toilet paper, feminine hygiene supplies, and diapers/pads for children and adults.
- Hand-washing supplies available: water, soap, and paper towels
- Toilets cleaned according to schedule: self-explanatory.
- Adequate diapering areas: 1 diapering station per 12 infants, covered waste containers, disposable cleaning wipes and surface coverings, & instructions for cleaning the station posted by the changing tables.
- Adequate handicap facilities: ADA compliant.
- Adequate cleaning supplies: self-explanatory.

## IX. SOLID WASTE GENERATED

- Appropriate disposal and labeling in approved containers.
- Adequate collection receptacles: minimum 1 (30-gal) container for every 10 persons.
- Approved disposal: self-explanatory
- Timely removal of waste -- collected regularly.
- Appropriate storage and separation from common areas.
- Storage area maintained: self-explanatory.

## X. SLEEPING AREA

- Separate area for families: self-explanatory.
- Adequate cots/beds/mats for each resident/staff (2' bed to bed and 6' head to head).
- Adequate bedding for each cot, bed, or mat: self-explanatory.
- Clean bedding available: self-explanatory.
- Acceptable level of cleanliness: self-explanatory.

## XI. HEALTH/MEDICAL

- Medical care services available: list type of care available in comments section. (?)
- Adequate handwashing stations available: self-explanatory
- Medical supplies separate from food and chemicals: self-explanatory.
- Adequate security for medical supplies: narcotics in a locked cabinet.
- Biohazard bags and sharps containers available: self-explanatory.
- Acceptable level of cleanliness: self-explanatory.
- Adequate security for entry to patient area: self-explanatory.

## XII. CHILDCARE AREA

- Play area provided: self-explanatory.
- Hand-washing facilities available: for adults and children with paper towels, soap, and water.
- Toys easily cleaned and do not pose a choking hazard: self-explanatory.
- Adequate toy hygiene: toys cleaned (3X per day) with a nontoxic, approved disinfectant.
- Adequate child/caregiver supervision ratio:
 

0-12 months (0:1)	4-5 year olds (6:1)
13-30 months (4:1)	6-8 year olds (10:1)
31-35 months (6:1)	9-12 year olds (12:1)
3 years (7:1)	Check with OIG
- Adequate monitoring or security: self-explanatory.
- Acceptable level of cleanliness: self-explanatory.

## XIII. COMPANION ANIMALS

- Companion animals present: animals in facility.
- Animal care available: animals have clean, fresh water and food.
- Designated animal area: animals located away from people and separately housed.
- Acceptable level of cleanliness: self-explanatory.
- Adequate food and water: self-explanatory.
- Adequate security for safety of animals:

**AMERICAN RED CROSS - U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**INITIAL INTAKE AND ASSESSMENT TOOL**

Date/Time: \_\_\_\_\_ Shelter Name/Location: \_\_\_\_\_ DRO Name/Number: \_\_\_\_\_

Name of Person: \_\_\_\_\_ Age: \_\_\_\_\_

Names/Ages of all family members present: \_\_\_\_\_

Age, gender, NOK/guardian: \_\_\_\_\_

Home Address: \_\_\_\_\_

NAME OF STAFF INITIATING ASSESSMENT: \_\_\_\_\_ Contact Number: \_\_\_\_\_

INITIAL INTAKE	Circle	Actions to be taken	Comments (include name of affected family member)
We will now be asking you a series of questions - Will you need assistance with understanding or answering these questions?	YES / NO	If Yes, determine needs in conjunction with shelter manager and Health Services.	
What language are you most comfortable with?		If other than English: refer to shelter manager if interpreter is needed. Once interpreter is available return to initial intake.	
Do you have a medical or health concern or need <b>right now</b> ?	YES / NO	If Yes, stop interview and refer to Health Services immediately.	
How are you feeling? Physically?                      Emotionally?		If life threatening, call 911. Other urgent needs - refer to Health Services (HS) or Disaster Mental Health (DMH) now.	
Do you need any medicine, equipment or other items for daily living?	YES / NO	If Yes, refer to Health Services and ask next question.	
Do you need a caregiver or personal assistant?	YES / NO	If Yes, ask next question. If No, skip next question.	
Is your caregiver present and planning to remain with you?	YES / NO	If Yes, name of person. If No, refer to Health Services.	
Do you use a service animal?	YES / NO	If Yes, ask next two (2) questions. If No, skip next two (2) questions.	
Is the animal with you?	YES / NO	If No, ask next question.	
If No, do you know where the service animal is?	YES / NO	If No, notify local animal control of loss and attempt to identify potential resources for replacement.	
If under the age of 18, do you have a family member or responsible person with you?	YES / NO	If No, refer to Health Services or Disaster Mental Health. If Yes, locate parent or guardian to continue interview.	
<b>This question is only relevant for interviews conducted at HHS medical facilities.</b> Are you presently receiving any benefits (Medicare/Medicaid).	YES / NO	If Yes, list type and benefit number(s) if available.	
Do you have any severe environmental, food, or medication allergies?	YES / NO	If Yes, refer to Health Services.	
<b>Question to Interviewer:</b> Would this person benefit from a more detailed health or mental health assessment?	YES / NO	If Yes, Refer to Health Services or Disaster Mental Health.	<b>*If client is uncertain or unsure of answer to any question, refer to HS or DMH for more in-depth evaluation.</b>

**REFERRED TO HEALTH SERVICES** Yes  No       **REFERRED TO DISASTER MENTAL HEALTH** Yes  No

**HEALTH SERVICES/DISASTER MENTAL HEALTH ASSESSMENT FOLLOW-UP**

ASSISTANCE AND SUPPORT INFORMATION	Circle	Actions to be taken	Comments
Have you been hospitalized or under the care of a physician in the past month?	YES / NO	If Yes, list reason.	
Do you have a condition that requires any special medical equipment/supplies? (EpiPen, diabetes supplies, respirator, oxygen, dialysis, ostomy supplies, etc.)	YES / NO	If Yes, list and list potential sources if available.	
<b>MEDICATIONS</b>	<b>Circle</b>	<b>Actions to be taken</b>	<b>Comments</b>
Do you take any medication(s) regularly?	YES / NO	If No, skip to the questions regarding hearing.	
When did you last take your medication?		Date/Time.	
When are you due for your next dose?		Date/Time.	
Do you have the medications with you?	YES / NO	If No, identify medications and process for replacement.	
<b>HEARING</b>			
Do you need assistance in hearing me?	YES / NO	If Yes, ask next question. If No, skip the next question.	

**AMERICAN RED CROSS - U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**INITIAL INTAKE AND ASSESSMENT TOOL**

Would you like me to write the questions down?	YES / NO	If Yes, give client paper and pen. If no, go to the next category of questions.	
Do you use a hearing aid?	YES / NO	If Yes, ask next two (2) questions. If No, skip next three questions.	
Do you have your hearing aid with you?	YES / NO	If Yes, ask next two (2) questions. If No, skip next two questions.	
Is the hearing aid working?	YES / NO	If No, identify potential resources for replacement.	
Do you need a battery?	YES / NO	If Yes, identify potential resources for replacement.	
Do you need a sign language interpreter?	YES / NO	If Yes, identify potential resources in conjunction with shelter manager.	
How do you best communicate with others?		Sign language? Lip read? Use a TTY? Other (explain).	
<b>VISION/SIGHT</b>			
Do you wear prescription glasses?	YES / NO	If Yes, ask next two (2) questions. If No, skip next two questions.	
Do you have your glasses with you or with your personal belongings?	YES / NO	If No, identify potential resources for replacement.	
Do you have difficulty seeing, even with glasses?	YES / NO	If No, skip the remaining Vision/Sight questions and go to Activities of Daily Living section.	
Do you use a white cane?	YES / NO	If Yes, ask next question. If No, skip the next question.	
Do you have your white cane with you?	YES / NO	If No, identify potential resources for replacement.	
Do you need assistance getting around, even with your white cane?	YES / NO	If Yes, determine if accommodation can be made in the shelter.	
Do you need help moving around or getting in and out of bed?	YES / NO	If No, skip the remaining Vision/Sight questions and go to Activities of Daily Living section.	
Do you rely on a mobility device such as a cane, walker, wheelchair or transfer board?	YES / NO	If No, skip the next question. If Yes, list.	
Do you have the mobility device/equipment with you?	YES / NO	If No, consult with HS and shelter manager to determine if accommodation can be made in the shelter.	
<b>ACTIVITIES OF DAILY LIVING</b>		<b>Ask all questions in category.</b>	
Do you need help getting dressed?	YES / NO	If Yes, explain.	
Do you need assistance using the bathroom?	YES / NO	If Yes, explain.	
Do you need help bathing?	YES / NO	If Yes, explain.	
Do you need help eating? Cutting food?	YES / NO	If Yes, explain.	
Do you have a family member, friend or caregiver with you to help with these activities?	YES / NO	If No, consult with HS and shelter manager to determine if general population shelter is appropriate.	
<b>NUTRITION</b>			
Do you wear dentures?	YES / NO	If Yes, ask next question. If No, skip the next two questions.	
Do you have them with you?	YES / NO	If No, identify potential resources for replacement.	
Are you on any special diet?	YES / NO	If Yes, list special diet and notify Feeding staff.	
Do you have any allergies to food?	YES / NO	If Yes, list allergies.	
<b>INTERVIEWER EVALUATION</b>			
<b>Question to Interviewer:</b> Has the person been able to express his/her needs and make choices?	YES / NO	If No or uncertain, consult with DMH and shelter manager.	
<b>Question to Interviewer:</b> Can this shelter provide the assistance and support needed?	YES / NO	If No, collaborate with shelter manager on alternative sheltering options.	
<b>NAME OF PERSON COLLECTING INFORMATION:</b>	Signature:		Date:

**This following information is only relevant for interviews conducted at HHS medical facilities:** Federal agencies conducting or sponsoring collections of information by use of these tools, so long as these tools are used in the provision of treatment or clinical examination, are exempt from the Paperwork Reduction Act under 5 C.F.R. 1320.3(h)(5).

The authority for collecting this information is 42 USC 300hh-11(b) (4). Your disclosure of this information is voluntary. The principal purpose of this collection is to appropriately treat, or provide assistance to, you. The primary routine uses of the information provided include disclosure to agency contractors who are performing a service related to this collection, to medical facilities, non-agency healthcare workers, and to other federal agencies to facilitate treatment and assistance, and to the Justice Department in the event of litigation. Providing the information requested will assist us in properly triaging you or providing assistance to you.





Natural Disaster Morbidity Surveillance Tally Sheet  
For Active Surveillance with Medical Staff

Form v1.9  
Rev.09/29/2009

Part I: GENERAL INFORMATION			Part II: PATIENT INFORMATION			
Name of Facility: _____ City _____ State _____ Date of Visit ____/____/____ Reporting Period START ____:____ AM PM Reporting Period END ____:____ AM PM			<b>Race</b>	White	Tally (#)	Total(#)
				Black		
				Hispanic		
				Asian		
				Unknown		
			<b>Gender</b>	Male		
Female						
	<b>Tally (#)</b>	<b>Total(#)</b>	<b>Pregnant</b>	Yes		
<b>Patients Seen</b>			<b>Age Category</b>	< 1		
Workers/Volunteers				1 to 17		
				18 to 64		
				65+		

**Part III: REASON FOR VISIT** (For each client, place a tick mark next to the corresponding injury or illness. A single client may have more than one condition ticked)

	Tally (#)	Total(#)		Tally (#)	Total(#)
<b>TYPE OF INJURY</b>			<b>EXACERBATION OF CHRONIC DISEASE</b>		
Any Injury (cut, amputation, concussion, fracture, sprain, etc.)			Cardiovascular (hypertension, congestive heart failure)		
<b>MECHANISM OF INJURY</b>			Diabetes		
Bite/sting (all types)			Immunocompromised		
Burn (chem., fire, sun)			Neurological (seizure, stroke)		
Cold/heat exposure			Asthma		
Electric shock			COPD		
Fall, slip, trip			<b>TOTAL Chronic Disease</b>		
Foreign body			<b>MENTAL HEALTH</b>		
Hit by or against object			Agitated behavior		
Motor vehicle crash			Anxiety or stress		
Near drowning, submersion			Depressed mood		
Poisoning – CO exposure			Drug/alcohol intoxication/withdrawal		
Poisoning – other			Previous mental health diagnosis		
Use of Machinery, tools, or equip.			Psychotic symptoms (i.e. paranoia)		
Violence/assault			Suicidal thoughts or ideation		
<b>TOTAL Mechanism of Injury</b>			<b>TOTAL Mental Health</b>		
<b>ACUTE ILLNESS/SYMPTOMS</b>			<b>ROUTINE/FOLLOW-UP</b>		
Conjunctivitis/eye irritation			Medication refill		
Dehydration			Blood sugar check		
Dermatologic/Skin (includes all dermatologic/skin conditions)			Blood pressure check		
Fever (≥100°F or 37.8°C)			Vaccination		
Gastrointestinal (nausea, vomiting, diarrhea)			Wound care		
Jaundice			<b>TOTAL Routine/Follow-up</b>		
Meningitis/encephalitis			<b>Other</b>		
Neurological (includes all neurological conditions)			All "other"		
OB/GYN (includes all OB/GYN conditions)			<b>Disposition</b>		
Pain (includes all pain symptoms/conditions)			Discharge to self care		
Respiratory (includes all respiratory conditions)			Refer to other care (e.g., clinic or physician)		
Sore throat			Admit/refer to hospital		
<b>TOTAL Acute Illness/Symptoms</b>			Left before being seen		
			Deceased		
			<b>TOTAL Disposition</b>		
<b>Influenza-Like-Illness (ILI)</b> - Fever (temperature of 100°F [37.8°C] or greater) AND a cough or a sore throat in the absence of a KNOWN cause other than influenza					

## POSSIBLE SHELTER LOCATIONS IN KENTON COUNTY

Kenton County Shelter Locations with existing signed Red Cross Shelter Agreements

Saint Henry Church And School	3813 Dixie Highway	Erlanger
Marge Schott-Unnewehr BGCGC	30 West 26th Street	Covington
Edgewood Senior Center	550 Freedom Park Drive	Edgewood



## NKY Food Resources

Agency Name	Address	Available Service (pantry, delivery, etc.)	Toiletries or Cleaning Products	Population Served	Hours	Required Verification
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*Separated by the counties they serve*

### BOONE COUNTY

Baptist Ministires	306 West Main St. Alexandria, KY 41001 (859)-694-1222	Assist with clothing every 60 days, Assist with food every 30 days , Limited furniture selection , Can assist with prescriptions 1x a year	When available	Residents	Tues. 9-2, 6-8; Thurs. 9-2; Sat. 9-12	
Be Concerned*	714 Washington St Covington, KY 41011 (859)-291-6789	Free food pantry with monthly appointments (No Emergency food)	Both, to food program families at Christmas and Easter	Low-income Families & Individuals	New Sign-up Mon. & Tues. 10am-12pm	Photo ID, SS Cards, Proof of Address
Brighton Center, Inc. *	799 Ann St, Newport, KY 41071 (859)-491-8303 ext. 2300	Food Pantry, USDA Commodities Campbell Co.	Both when available	All ages and genders served	Campbell Co. commodities; Tues & Wednesday; 9:00-12:30 & 1:30-4:30 Food Pantry walk in; Mon, Tues, Thurs, Fri 1:30-4:30	ID, Proof of Address, SS Card
Fairhaven	260 W. Pike Street Covington, KY 41011 (859)-491-1027	Pantry & Clothing Voucher	Both when available	Houses homeless men, and helps women & Families	M & F, 11:00 a.m.; Thurs. 9:30 a.m.; Once every 7 days	SS card for each member of household
Faith Christian Center	1101 Amsterdam Road Park Hills, KY 41011 (859)-491-2850	Emergency food assistance	Both	All residents	Last Saturday of each month 10:00am	First come, first served

Family Support Boone Co.	8311 US Highway 42, Florence, KY 41042 (859)-371-6900	Food stamps, medical, welfare, emergency assistance	Sometimes	Families in need of emergency assistance	Mon-Fri 8:00am-4:30pm	Photo ID, SS cards, proof of address
First Assembly Of God	9126 Alexandria Pike Alexandria, KY 41001 (859)-635-1441	Emergency Food Assistance	None	Families in need of emergency assistance	Every day but Friday 9AM-1PM	Photo ID
Freestore Food Bank	112 E. Liberty St. Cincinnati, Ohio (513)-241-1064	Food pantry	When available	All residents	Mon-Fri 8:15am-3:30pm, 3rd Sat of month 10am-12pm	ID, SS card
Garrard St. Church of Christ	218 Garrard St. Covington, KY 41011 garrardstreetcoc.org (859)-431-1613	Food Pantry	Both when available	All ages and genders served	2nd and 4th Wednesday of every month, 4 p.m. - 5 p.m.	None
Hope Ministries	263 Main St. Florence, KY 41042 (859)-371-1887	Food Pantry	Both	Low-income Families & Individuals	<i>By appt. only</i> M - F, 9:00 a.m. to 11:30 a.m.	ID, 2 pieces of mail
Hosea House*	901 York St Newport, KY 41071	Evening Meal, Food Pantry	Both when available	All served	Every day 4pm-5:30pm; Office Hours M-F 9am-5:30pm	None
I Have Wings Breast Cancer Foundation*	P.O. Box 1850 Erlanger, Kentucky 41018	Grocery	GC	All ages and genders served	Apply online: <a href="http://www.ihavewings.org">www.ihavewings.org</a>	Proof of Breast Cancer Diagnosis
Family Promise of NKY	336 West 9th St. Newport, KY 41072 (859)-431-6840	Lodging, resources, food	Both	Families with children under 18 served	7:00-5:00pm	None
Lakeside Christian	195 Buttermilk Pike Lakeside Park, Kentucky 41017 (859)-341-1160	Food bags (last up to 2 days)	None	Families in need	Mon-Fri 9am-5pm	None
Life Line Ministry of NKY	4115 Dixie Hwy Elsmere, KY (859)-727-3733	Food, clothing & furniture (waiting list for furniture)	None	Low-income Families & Individuals	By appt, no walk-ins, Tues 5:30-7:30pm, W 10-1, F 1-6:30	None
New Beginnings	522 5th Ave Dayton, KY (859)-655-9100	Food Pantry, Kid's cafe, free hot meals, senior program	None	Low-income Families & Individuals	Sundays 1pm First come, first served	None
New Hope Christian Center	941 Central Ave Newport, KY (859)-491-5616	Food pantry	None	All	Friday 1pm-2pm	None

NKCAC - Boone Co.	7938 Tanners Gate Florence, KY 41042 (859)-586-9250	USDA Commodities, Senior Commodities, food pantry	None	120% below poverty	Monday – Friday 8:00 AM – 4:30 PM	ID, SS cards, income
O.A.S.I.S.	1016 Greenup Ave. Covington, KY 41011 (859)-655-9800	Rent, emergency food	None	Low-income Families & Individuals	Tuesday-Thursday 11-4	None
Parish Kitchen	141 Pike St. Covington, KY 41011 (859)-581-7745	Soup Kitchen	Both	All ages and genders served	Seven Days a Week, 11:30 a.m. to 1:30 p.m. (even on holidays)	None
Rose Garden Home Mission	2040 Madison Avenue, Covington, KY (859)-491-ROSE	Food pantry, other emergency assistance	None	Everyone	Mon-Thurs 11am-4pm	None
Salvation Army	1806 Scott Blvd Covington, KY 41014 (859) 261-0835	Food pantry	Both when available	All ages and genders served	M - Th., 9 a.m. - Noon and 1:00 p.m. - 3:00 p.m.	ID, proof of address
Senior Services of Northern Kentucky*	1032 Madison Ave Covington, KY 41011 (859)-491-0522	Dry Foods when available	Both when available	Elderly, 60+ years of age	M-F 8:30am-5pm	None
St. Vincent De Paul	3655 Crescent Springs RD Erlanger, KY (859)- 341-3219	Thrift Stores, Salvage Operations, Vehicle Donations, Food Pantry, other Emergency assistance.	If available	All	Mon-Sat 9am-5pm Pantry; Tues, Thurs 9-12	Schedule an appointment to pickup donations
Trinity Baptist Church	510 Park Avenue, Newport, KY (859)-581-9197	Food Pantry;Once in every 30 days	None	All	Wednesday, 11:00 - 1:00 p.m	Photo ID
United Ministries*	525 Graves Ave Erlanger, KY 41018 (859)-727-0300	USDA Commodities, food pantry, thrift shop	Both when available	All ages and genders served	M-F 9am-11:30am	Photo ID, SS Cards for Household, Proof of Address, Proof of Income
Vineyard Christian Church *	7101 Pleasant Valley Road Florence, KY 41042 (859)-689-0777	Community Meal, Food Pantry (Groceries)	Both when available	All ages and genders served	Comm. Meal on site 3rd Thurs. 6:30-8pm; Groceries Thurs. (except 3rd Thurs) 10am-2pm. Groceries also given after monthly meal on 3rd Thurs.	None

## CAMPBELL COUNTY

Baptist Ministires	306 West Main St. Alexandria, KY 41001 (859)-694-1222	Assist with clothing every 60 days, Assist with food every 30 days , Limited furniture selection , Can assist with prescriptions 1x a year	When available	Residents	Tues. 9-2, 6-8; Thurs. 9-2; Sat. 9-12	
Be Concerned*	714 Washington St Covington, KY 41011 (859)-291-6789	Free food pantry with monthly appointments (No Emergency food)	Both	Low-income Families & Individuals	New Sign-up Mon. & Tues. 10am-12pm	Photo ID, SS Cards, Proof of Address
Brighton Center, Inc. *	799 Ann St, Newport, KY 41071 (859)-491-8303 ext. 2300	Food Pantry, USDA Commodities Campbell Co.	Both at Christmas and Easter	All ages and genders served	Campbell Co. commodities; Tues & Wednesday; 9:00-12:30 & 1:30-4:30 Food Pantry walk in; Mon, Tues, Thurs, Fri 1:30-4:30	ID, Proof of Address, SS Card
Care Mission*	11093 Alexandria Pk Alexandria, KY 41001 (859)-635-4500	USDA Commodities, food pantry	Both, sometimes	All ages and genders served	Tues. 9-2, 6-8; Thurs. 9-2; Sat. 9-12	ID, Proof of Address
Fairhaven	260 W. Pike Street Covington, KY 41011 (859)-491-1027	Pantry & Clothing Voucher	Both when available	Houses homeless men, and helps women & Families	M & F, 11:00 a.m.; Thurs. 9:30 a.m.; Once every 7 days	SS card for each member of household
Faith Christian Center	1101 Amsterdam Road Park Hills, KY 41011 (859)-491-2850	Emergency food assistance	Both	All residents	Last Saturday of each month 10:00am	First come, first served
Family Support Campbell Co.	Watertower Sq. 4th Flr 601 Washington Avenue Newport, KY 41071 (859)-292-6700	Food stamps, medical, welfare, emergency assistance	Sometimes	Families in need of emergency assistance	Mon-Fri 8:00am-4:30pm	Photo ID, SS cards, proof of address
<i>First Baptist Church of Highland Heights</i> <b>Pantry of Hope*</b>	2315 Alexandria Pike, Highland Heights, KY 41076 (859)-441-7274	Food pantry, Senior commodities	All	Families in need of emergency assistance	Saturday, 9:00 am - 12:00 pm	None

First Assembly Of God	9126 Alexandria Pike Alexandria, KY 41001 (859)-635-1441	Emergency Food Assistance	None	Families in need of emergency assistance	Every day but Friday 9AM-1PM	Photo ID
Freestore Food Bank	112 E. Liberty St. Cincinnati, Ohio (513)-241-1064	Food pantry	When available	All residents	Mon-Fri 8:15am-3:30pm, 3rd Sat of month 10am-12pm	ID, SS card
Garrard St. Church of Christ	218 Garrard St. Covington, KY 41011 garrardstreetcoc.org (859)-431-1613	Food Pantry	Both when available	All ages and genders served	2nd and 4th Wednesday of every month, 4 p.m. - 5 p.m.	None
Holy Spirit Outreach	809 York St Newport, KY 41071 (859)-261-0818	Emergency assistance and food	When available	All served	Mon & Tues 9-1	Photo ID
Hosea House*	901 York St Newport, KY 41071	Evening Meal, Food Pantry	Both when available	All served	Every day 4pm-5:30pm; Office Hours M-F 9am-5:30pm	None
I Have Wings Breast Cancer Foundation*	P.O. Box 1850 Erlanger, Kentucky 41018	Grocery	GC	All ages and genders served	Apply online: www.ihavewings.org	Proof of Breast Cancer Diagnosis
Family Promise of NKY	336 West 9th St. Newport, KY 41072 (859)-431-6840	Lodging, resources, food	Both	Families and Children under 18 served	7:00-5:00pm	None
Lakeside Christian	195 Buttermilk Pike Lakeside Park, Kentucky 41017 (859)-341-1160	Food bags (last up to 2 days)	None	Families in need	Mon-Fri 9am-5pm	None
Life Line Ministry of NKY	4115 Dixie Hwy Elsmere, KY (859)-727-3733	Food, clothing & furniture (waiting list for furniture)	None	Low-income Families & Individuals	By appt, no walk-ins, Tues 5:30-7:30pm, W 10-1, F 1-6:30	None
Main St. Care Ministry, Inc.	11093 Alexandria Pike, Alexandria, KY (859)-635-4500	Food, Clothing, Rx assistance, USDA commodities	When available	All residents	T & Th 9-2 Tues 6-8pm Sat 9-12	Photo ID, SSN or ID for all in household
New Beginnings	522 5th Ave Dayton, KY (859)-655-9100	Food Pantry, Kid's cafe, fee hot meals, senior program	None	Low-income Families & Individuals	Sundays 1pm First come, first served	None
New Hope Christian Center	941 Central Ave Newport, KY (859)-491-5616	Food pantry	None	All	Friday 1pm-2pm	None

New Hope Ministry Center of Immanuel United Methodist	22 William F. Blatt Southgate, KY 41071 (859)-341-5330	Free Food Pantry	Both when available	All ages and genders served	Last Saturday of each month 10:30 a.m. - Noon	ID
NKCAC - Campbell Co.*	437 W 9th St Newport, KY 41071 (859)-431-4177	Senior Commodities all year, food pantry May-June.	None	120% below poverty	Monday-Friday 8:00am-4:30pm	ID, SS cards, income
O.A.S.I.S.	1016 Greenup Ave. Covington, KY 41011 (859)-655-9800	Rent, emergency food	None	Low-income Families & Individuals	Tuesday-Thursday 11-4	None
Parish Kitchen	141 Pike St. Covington, KY 41011 (859)-581-7745	Soup Kitchen	Both	All ages and genders served	Seven Days a Week, 11:30 a.m. to 1:30 p.m. (even on holidays)	None
Rose Garden Home Mission	2040 Madison Avenue, Covington, KY (859)-491-ROSE	Food pantry, other emergency assistance	None	Everyone	Mon-Thurs 11am-4pm	None
Salvation Army	1806 Scott Blvd Covington, KY 41014 (859) 261-0835	Food pantry	Both when available	All ages and genders served	M - Th., 9 a.m. - Noon and 1:00 p.m. - 3:00 p.m.	ID, proof of address
Senior Services of Northern Kentucky*	1032 Madison Ave Covington, KY 41011 (859)-491-0522	Dry Foods when available	Both when available	Elderly, 60+ years of age	M-F 8:30am-5pm	None
St. Bernard Parish	401 Berry St. Dayton, KY 41074 (859)-291-4393	Food Pantry	None	All residents	Mon & Thurs 10-12, 2-4pm	Photo ID
St. John's United Church Of Christ	415 Park Ave Newport, KY (859)-431-1818	Pantry	Both when available	All ages and genders	Thursdays 9am-Noon	Photo ID
St.Paul's Food Pantry*	7 Ct Place Newport, KY 41071 (859)-581-7640	Choice Pantry	Both	All ages and genders served, Food given based on household size	Wednesday 5:30pm-7pm, Second Saturday 10-12	ID
St. Vincent De Paul	3655 Crescent Springs Rd. Erlanger, KY (859)-341-3219	Thrift Stores, Salvage Operations, Vehicle Donations, Food Pantry, other Emergency assistance.	If available	All	Mon-Sat 9am-5pm Pantry; Tues, Thurs 9-12	Schedule an appointment to pickup donations

Trinity Baptist Church	510 Park Avenue, Newport, KY (859)-581-9197.	Food Pantry;Once in every 30 days	None	All	Wednesday, 11:00 - 1:00 p.m	Photo ID
Vineyard Christian Church *	7101 Pleasant Valley Road Florence, KY 41042 (859)-689-0777	Community Meal, Food Pantry (Groceries)	Both when available	All ages and genders served	Comm. Meal at Newport Comm. Ctr. 4th Sat 11-12:30; Comm. Meal on site 3rd Thurs. 6:30-8pm; Groceries Thurs. (except 3rd Thurs) 10am-2pm	None

## CARROLL COUNTY

Baptist Ministires	306 West Main St. Alexandria, KY 41001 (859)-694-1222	Assist with clothing every 60 days, Assist with food every 30 days , Limited furniture selection , Can assist with prescriptions 1x a year	When available	Residents	Tues. 9-2, 6-8; Thurs. 9- 2; Sat. 9-12	
Brighton Center, Inc. *	799 Ann St, Newport, KY 41071 (859)-491-8303 ext. 2300	Food Pantry, USDA Commodities Campbell Co.	Both at Christmas and Easter	All ages and genders served	Campbell Co. commodities; Tues & Wednesday; 9:00-12:30 & 1:30-4:30 Food Pantry walk in; Mon, Tues, Thurs, Fri 1:30- 4:30	ID, Proof of Address, SS Card
Care Mission*	11093 Alexandria Pk Alexandria, KY 41001 (859)-635-4500	USDA Commodities, food pantry	Both, sometimes	All ages and genders served	All 8 NKY Counties	Tues. 9-2, 6-8; Thurs. 9-2; Sat. 9- 12
Fairhaven	260 W. Pike Street Covington, KY 41011 (859)-491-1027	Pantry & Clothing Voucher	Both when available	Houses homeless men, and helps women & Families	M & F, 11:00 a.m.; Thurs. 9:30 a.m.; Once every 7 days	SS card for each member of household
Faith Christian Center	1101 Amsterdam Road Park Hills, KY 41011 (859)-491-2850	Emergency food assistance	Both	All residents	Last Saturday of each month 10:00am	First come, first served

<i>First Baptist Church of Highland Heights Pantry of Hope*</i>	2315 Alexandria Pike, Highland Heights, KY 41076 (859)-441-7274	Food pantry, Senior commodities	All	Families in need of emergency assistance	Saturday, 9:00 am - 12:00 pm	None
First Assembly Of God	9126 Alexandria Pike Alexandria, KY 41001 (859)-635-1441	Emergency Food Assistance	None	Families in need of emergency assistance	Every day but Friday 9AM-1PM	Photo ID
Freestore Food Bank	112 E. Liberty St. Cincinnati, Ohio (513)-241-1064	Food pantry	When available	All residents	Mon-Fri 8:15am-3:30pm, 3rd Sat of month 10am-12pm	ID, SS card
Garrard St. Church of Christ	218 Garrard St. Covington, KY 41011 garrardstreetcoc.org (859)-431-1613	Food Pantry	Both when available	All ages and genders served	2nd and 4th Wednesday of every month, 4 p.m. - 5 p.m.	None
Hosea House*	901 York St Newport, KY 41071	Evening Meal, Food Pantry	Both when available	All served	Every day 4pm-5:30pm; Office Hours M-F 9am-5:30pm	None
I Have Wings Breast Cancer Foundation*	P.O. Box 1850 Erlanger, Kentucky 41018	Grocery	GC	All ages and genders served	Apply online: www.ihavewings.org	Proof of Breast Cancer Diagnosis
Family Promise of NKY	336 West 9th St. Newport, KY 41072 (859)-431-6840	Lodging, resources, food	Both	Families with children under 18 served	7:00-5:00pm	None
Lakeside Christian	195 Buttermilk Pike Lakeside Park, Kentucky 41017 (859)-341-1160	Food bags (last up to 2 days)	None	Families in need	Mon-Fri 9am-5pm	None
Life Line Ministry of NKY	4115 Dixie Hwy Elsmere, KY (859)-727-3733	Food, clothing & furniture (waiting list for furniture)	None	Low-income Families & Individuals	By appt, no walk-ins, Tues 5:30-7:30pm, W 10 1, F 1-6:30	None
New Beginnings	522 5th Ave Dayton, KY (859)-655-9100	Food Pantry, Kid's cafe, free hot meals, senior program	None	Low-income Families & Individuals	Sundays 1pm First come, first served	None
New Hope Christian Center	941 Central Ave Newport, KY (859)-491-5616	Food pantry	None	All	Friday 1pm-2pm	None

NKCAC-Carroll Co.	1302 Highland Ave Carrolton, KY (502)-567-4660	USDA Commodity, food pantry	None	120% below poverty	Monday-Friday 8:00am- 4:30pm	ID, SS cards, income
O.A.S.I.S.	1016 Greenup Ave. Covington, KY 41011 (859)-655-9800	Rent, emergency food	None	Low-income Families & Individuals	Tuesday-Thursday 11-4	None
Rose Garden Home Mission	2040 Madison Avenue, Covington, KY (859)-491-ROSE	Food pantry, other emergency assistance	None	Everyone	Mon-Thurs 11am-4pm	None
Salvation Army	1806 Scott Blvd Covington, KY 41014 (859) 261-0835	Food pantry	Both when available	All ages and genders served	M - Th., 9 a.m. - Noon and 1:00 p.m. - 3:00 p.m.	ID, proof of address
Senior Services of Northern Kentucky*	1032 Madison Ave Covington, KY 41011 (859)-491-0522	Dry Foods when available	Both when available	Elderly, 60+ years of age	M-F 8:30am-5pm	None
St. Vincent De Paul	3655 Crescent Springs Rd Erlanger, KY (859)-341-3219	Thrift Stores, Salvage Operations, Vehicle Donations, Food Pantry, other Emergency assistance.	If available	All	Mon-Sat 9am-5pm Pantry; Tues, Thurs 9-12	Schedule an appointment to pickup donations
Trinity Baptist Church	510 Park Avenue, Newport, KY (859)-581-9197.	Food Pantry; Once in every 30 days	None	All	Wednesday, 11:00 - 1:00 p.m	Photo ID
Vineyard Christian Church *	7101 Pleasant Valley Road Florence, KY 41042 (859)-689-0777	Community Meal, Food Pantry (Groceries)	Both when available	All ages and genders served	Comm. Meal at Newport Comm. Ctr. 4th Sat 11-12:30; Comm. Meal on site 3rd Thurs. 6:30-8pm; Groceries Thurs. (except 3rd Thurs) 10am-2pm	None

## Gallatin County

Baptist Ministires	306 West Main St. Alexandria, KY 41001 (859)-694-1222	Assist with clothing every 60 days, Assist with food every 30 days, Limited furniture selection , Can assist with prescriptions 1x a year	When available	Residents	Tues. 9-2, 6-8; Thurs. 9- 2; Sat. 9-12	
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Be Concerned*	714 Washington St Covington, KY 41011 (859)-291-6789	Free food pantry with monthly appointments (No Emergency food)	Both	Low-income Families & Individuals	New Sign-up Mon. & Tues. 10am-12pm	Photo ID, SS Cards, Proof of Address
Brighton Center, Inc. *	799 Ann St, Newport, KY 41071 (859)-491-8303 ext. 2300	Food Pantry, USDA Commodities Campbell Co.	Both at Christmas and Easter	All ages and genders served	Campbell Co. commodities; Tues & Wednesday; 9:00-12:30 & 1:30-4:30 Food Pantry walk in; Mon, Tues, Thurs, Fri 1:30-4:30	ID, Proof of Address, SS Card
Care Mission*	11093 Alexandria Pk Alexandria, KY 41001 (859)-635-4500	USDA Commodities, food pantry	Both, sometimes	All ages and genders served	Tues. 9-2, 6-8; Thurs. 9-2; Sat. 9-12	ID, Proof of Address
Fairhaven	260 W. Pike Street Covington, KY 41011 (859)-491-1027	Pantry & Clothing Voucher	Both when available	Houses homeless men, and helps women & Families	M & F, 11:00 a.m.; Thurs. 9:30 a.m.; Once every 7 days	SS card for each member of household
Faith Christian Center	1101 Amsterdam Road Park Hills, KY 41011 (859)-491-2850	Emergency food assistance	Both	All residents	Last Saturday of each month 10:00am	First come, first served
Pantry of Hope* at First Baptist Church of Highland Heights	2315 Alexandria Pike, Highland Heights, KY 41076 (859)-441-7274	Food pantry, Senior commodities	All	Families in need of emergency assistance	Saturday, 9:00 am - 12:00 pm	None
First Assembly Of God	9126 Alexandria Pike Alexandria, KY 41001 (859)-635-1441	Emergency Food Assistance	None	Families in need of emergency assistance	Every day but Friday 9AM-1PM	Photo ID
Freestore Food Bank	112 E. Liberty St. Cincinnati, Ohio (513)-241-1064	Food pantry	When available	All residents	Mon-Fri 8:15am-3:30pm, 3rd Sat of month 10am-12pm	ID, SS card
Garrard St. Church of Christ	218 Garrard St. Covington, KY 41011 garrardstreetcoc.org (859)-431-1613	Food Pantry	Both when available	All ages and genders served	2nd and 4th Wednesday of every month, 4 p.m. - 5 p.m.	None
Hosea House*	901 York St Newport, KY 41071	Evening Meal, Food Pantry	Both when available	All served	Every day 4pm-5:30pm; Office Hours M-F 9am-5:30pm	None

I Have Wings Breast Cancer Foundation*	P.O. Box 1850 Erlanger, Kentucky 41018	Grocery	GC	All ages and genders served	Apply online: <a href="http://www.ihavewings.org">www.ihavewings.org</a>	Proof of Breast Cancer Diagnosis
Family Promises of NKY	336 West 9th St. Newport, KY 41072 (859)-431-6840	Lodging, resources, food	Both	Families with children under 18 served	7:00-5:00pm	None
Lakeside Christian	195 Buttermilk Pike Lakeside Park, Kentucky 41017 (859)-341-1160	Food bags (last up to 2 days)	None	Families in need	Mon-Fri 9am-5pm	None
Life Line Ministry of NKY	4115 Dixie Hwy Elsmere, KY (859)-727-3733	Food, clothing & furniture (waiting list for furniture)	None	Low-income Families & Individuals	By appt, no walk-ins, Tues 5:30-7:30pm, W 10-1, F 1-6:30	None
New Beginnings	522 5th Ave Dayton, KY (859)-655-9100	Food Pantry, Kid's cafe, free hot meals, senior program	None	Low-income Families & Individuals	Sundays 1pm First come, first served	None
New Hope Christian Center	941 Central Ave Newport, KY (859)-491-5616	Food pantry	None	All	Friday 1pm-2pm	None
NKCAC-Gallatin Co.	432 West Main Street Warsaw, KY 41095 (859)-567-4660	Regular Commodities, Senior Commodities, food pantry	None	120% below poverty	Monday-Friday 8:00am-4:30pm	ID, SS cards, income
O.A.S.I.S.	1016 Greenup Ave. Covington, KY 41011 (859)-655-9800	Rent, emergency food	None	Low-income Families & Individuals	Tuesday-Thursday 11-4	None
Rose Garden Home Mission	2040 Madison Avenue, Covington, KY (859)-491-ROSE	Food pantry, other emergency assistance	None	Everyone	Mon-Thurs 11am-4pm	None
Salvation Army	1806 Scott Blvd Covington, KY 41014 (859) 261-0835	Food pantry	Both when available	All ages and genders served	M - Th., 9 a.m. - Noon and 1:00 p.m. - 3:00 p.m.	ID, proof of address
Senior Services of Northern Kentucky*	1032 Madison Ave Covington, KY 41011 (859)-491-0522	Dry Foods when available	Both when available	Elderly, 60+ years of age	M-F 8:30am-5pm	None

St. Vincent De Paul	3655 Crescent Springs Rd Erlanger, KY (859)-341-3219	Thrift Stores, Salvage Operations, Vehicle Donations, Food Pantry, other Emergency assistance.	If available	All	Mon-Sat 9am-5pm Pantry; Tues, Thurs 9-12	Schedule an appointment to pickup donations
Trinity Baptist Church	510 Park Avenue, Newport, KY (859)-581- 9197.	Food Pantry; Once in every 30 days	None	All	Wednesday, 11:00 - 1:00 p.m	Photo ID
Vineyard Christian Church *	7101 Pleasant Valley Road Florence, KY 41042 (859)-689-0777	Community Meal, Food Pantry (Groceries)	Both when available	All ages and genders served	Comm. Meal at Newport Comm. Ctr. 4th Sat 11-12:30; Comm. Meal on site 3rd Thurs. 6:30-8pm; Groceries Thurs. (except 3rd Thurs) 10am-2pm	None

## GRANT COUNTY

Brighton Center, Inc. *	799 Ann St, Newport, KY 41071 (859)-491-8303 ext. 2300	Food Pantry, USDA Commodities Campbell Co.	Both at Christmas and Easter	All ages and genders served	Campbell Co. commodities; Tues & Wednesday; 9:00-12:30 & 1:30-4:30 Food Pantry walk in; Mon, Tues, Thurs, Fri 1:30- 4:30	ID, Proof of Address, SS Card
Care Mission*	11093 Alexandria Pk Alexandria, KY 41001 (859)- 635-4500	USDA Commodities, food pantry	Both, sometimes	All ages and genders served	Tues. 9-2, 6-8; Thurs. 9- 2; Sat. 9-12	ID, Proof of Address
Fairhaven	260 W. Pike Street Covington, KY 41011 (859)-491-1027	Pantry & Clothing Voucher	Both when available	Houses homeless men, and helps women & Families	M & F, 11:00 a.m.; Thurs. 9:30 a.m.; Once every 7 days	SS card for each member of household
Faith Christian Center	1101 Amsterdam Road Park Hills, KY 41011 (859)-491-2850	Emergency food assistance	Both	All residents	Last Saturday of each month 10:00am	First come, first served

<i>First Baptist Church of Highland Heights Pantry of Hope*</i>	2315 Alexandria Pike, Highland Heights, KY 41076 (859)-441-7274	Food pantry, Senior commodities	All	Families in need of emergency assistance	Saturday, 9:00 am - 12:00 pm	None
First Assembly Of God	9126 Alexandria Pike Alexandria, KY 41001 (859)-635-1441	Emergency Food Assistance	None	Families in need of emergency assistance	Every day but Friday 9AM-1PM	Photo ID
Freestore Food Bank	112 E. Liberty St. Cincinnati, Ohio (513)-241-1064	Food pantry	When available	All residents	Mon-Fri 8:15am-3:30pm, 3rd Sat of month 10am-12pm	ID, SS card
Garrard St. Church of Christ	218 Garrard St. Covington, KY 41011 garrardstreetcoc.org (859)-431-1613	Food Pantry	Both when available	All ages and genders served	2nd and 4th Wednesday of every month, 4 p.m. - 5 p.m.	None
Hosea House*	901 York St Newport, KY 41071	Evening Meal, Food Pantry	Both when available	All served	Every day 4pm-5:30pm; Office Hours M-F 9am-5:30pm	None
I Have Wings Breast Cancer Foundation*	P.O. Box 1850 Erlanger, Kentucky 41018	Grocery	GC	All ages and genders served	Apply online: www.ihavewings.org	Proof of Breast Cancer Diagnosis
Family Promises of NKY	336 West 9th St. Newport, KY 41072 (859)-431-6840	Lodging, resources, food	Both	Families with children under 18 served	7:00-5:00pm	None
Lakeside Christian	195 Buttermilk Pike Lakeside Park, Kentucky 41017 (859)-341-1160	Food bags (last up to 2 days)	None	Families in need	Mon-Fri 9am-5pm	None
Life Line Ministry of NKY	4115 Dixie Hwy Elsmere, KY (859)-727-3733	Food, clothing & furniture (waiting list for furniture)	None	Low-income Families & Individuals	By appt, no walk-ins, Tues 5:30-7:30pm, W 10-1, F 1-6:30	None
New Beginnings	522 5th Ave Dayton, KY (859)-655-9100	Food Pantry, Kid's cafe, fee hot meals, senior program	None	Low-income Families & Individuals	Sundays 1pm First come, first served	None
New Hope Christian Center	941 Central Ave Newport, KY (859)-491-5616	Food pantry	None	All	Friday 1pm-2pm	None

NKCAC-Grant Co.	134 N. Main St. Williamstown, KY 41097 (859)-842-4768	USDA Commodities, Senior Commodities, food pantry	None	120% below poverty	Monday-Friday 8:00am- 4:30pm	ID, SS cards, income
O.A.S.I.S.	1016 Greenup Ave. Covington, KY 41011 (859)-655-9800	Rent, emergency food	None	Low-income Families & Individuals	Tuesday-Thursday 11-4	None
Rose Garden Home Mission	2040 Madison Avenue, Covington, KY (859)-491-ROSE	Food pantry, other emergency assistance	None	Everyone	Mon-Thurs 11am-4pm	None
Salvation Army	1806 Scott Blvd Covington, KY 41014 (859) 261-0835	Food pantry	Both when available	All ages and genders served	M - Th., 9 a.m. - Noon and 1:00 p.m. - 3:00 p.m.	ID, proof of address
Senior Services of Northern Kentucky*	1032 Madison Ave Covington, KY 41011 (859)- 491-0522	Dry Foods when available	Both when available	Elderly, 60+ years of age	M-F 8:30am-5pm	None
St. Vincent De Paul	3655 Crescent Springs RD Erlanger, KY (859)-341-3219	Thrift Stores, Salvage Operations, Vehicle Donations, Food Pantry, other Emergency assistance.	If available	All	Mon-Sat 9am-5pm Pantry; Tues, Thurs 9-12	Schedule an appointment to pickup donations
Trinity Baptist Church	510 Park Avenue, Newport, KY (859)-581-9197.	Food Pantry; Once in every 30 days	None	All	Wednesday, 11:00 - 1:00 p.m	Photo ID
Vineyard Christian Church *	7101 Pleasant Valley Road Florence, KY 41042 (859)-689-0777	Community Meal, Food Pantry (Groceries)	Both when available	All ages and genders served	Comm. Meal at Newport Comm. Ctr. 4th Sat 11-12:30; Comm. Meal on site 3rd Thurs. 6:30-8pm; Groceries Thurs. (except 3rd Thurs) 10am-2pm	None

## KENTON COUNTY

Action Ministries, Inc.*	4375 Boron Dr. Covington, KY 41015 (859)-261-3649	Free Food Pantry, USDA Commodities	Both when available	Low-income Families & Individuals	M-F 9-12; 1st Mon & 3rd Mon 6:15-8:15pm	Photo ID, SS cards, Proof of Address, Proof of Income
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Baptist Ministires	306 West Main St. Alexandria, KY 41001 (859)-694-1222	Assist with clothing every 60 days, Assist with food every 30 days , Limited furniture selection , Can assist with prescriptions 1x a year	When available	Residents	Tues. 9-2, 6-8; Thurs. 9-2; Sat. 9-12	
Be Concerned*	714 Washington St Covington, KY 41011 (859)-291-6789	Free food pantry with monthly appointments (No Emergency food)	Both	Low-income Families & Individuals	New Sign-up Mon. & Tues. 10am-12pm	Photo ID, SS Cards, Proof of Address
Brighton Center, Inc. *	799 Ann St, Newport, KY 41071 (859)-491-8303 ext. 2300	Food Pantry, USDA Commodities Campbell Co.	Both at Christmas and Easter	All ages and genders served	Campbell Co. commodities; Tues & Wednesday; 9:00-12:30 & 1:30-4:30 Food Pantry walk in; Mon, Tues, Thurs, Fri 1:30-4:30	ID, Proof of Address, SS Card
Care Mission*	11093 Alexandria Pk Alexandria, KY 41001 (859)-635-4500	USDA Commodities, food pantry	Both, sometimes	All ages and genders served	Tues. 9-2, 6-8; Thurs. 9-2; Sat. 9-12	ID, Proof of Address
Crescent Springs Presbyterian Church	710 Western Reserve RD. Crescent Springs, KY (859)-341-9347	Holiday food help	Sometimes	All residents		None
Emmanuel UCC	110 Boone St. Bromley, KY (859)-261-8858	Food Pantry	None	All residents	4th Tuesday of every month 5-6pm	Current Address, monthly income, Photo ID
Epworth Methodist Church	1229 Highway Ave Covington, KY 41011 (859)-431-2284	Food Pantry	When available	All residents	Last 2 Saturdays of month 9-11am	
Fairhaven	260 W. Pike Street Covington, KY 41011 (859)-491-1027	Pantry & Clothing Voucher	Both when available	Houses homeless men, and helps women & Families	M & F, 11:00 a.m.; Thurs. 9:30 a.m.; Once every 7 days	SS card for each member of household
Faith Christian Center	1101 Amsterdam Road Park Hills, KY 41011 (859)-491-2850	Emergency food assistance	Both	All residents	Last Saturday of each month 10:00am	First come, first served
Family Support Kenton Co.	333 Scott Street, Suite 300 - First Floor Covington, KY 41011 (859)-491-4114	Food stamps, medical, welfare, emergency assistance	Sometimes	Families in need of emergency assistance	Mon-Fri 8:00am-4:30pm	Photo ID, SS cards, proof of address

<i>First Baptist Church of Highland Heights Pantry of Hope*</i>	2315 Alexandria Pike, Highland Heights, KY 41076 (859)-441-7274	Food pantry, Senior commodities	All	Families in need of emergency assistance	Saturday, 9:00 am - 12:00 pm	None
First Assembly Of God	9126 Alexandria Pike Alexandria, KY 41001 (859)-635-1441	Emergency Food Assistance	None	Families in need of emergency assistance	Every day but Friday 9AM-1PM	Photo ID
For His Kids, Inc.*	3819 Turfway Rd Erlanger, KY 41018 (859)-371-3787	Free lunch on Saturdays	Both when available	All ages and genders served	Saturdays 11:30am-1pm	None
Freestore Food Bank	112 E. Liberty St. Cincinnati, Ohio (513)-241-1064	Food pantry	When available	All residents	Mon-Fri 8:15am-3:30pm, 3rd Sat of month 10am-12pm	ID, SS card
Garrard St. Church of Christ	218 Garrard St. Covington, KY 41011 garrardstreetcoc.org (859)-431-1613	Food Pantry	Both when available	All ages and genders served	2nd and 4th Wednesday of every month, 4 p.m. - 5 p.m.	None
Grace Community Church "Sunday Night Live"*	131 East 5th Street Covington, KY 41011 (859)-431-9888	Community Meal, Food Pantry Bag	Both, sometimes	All ages and genders served	Every Sunday 4pm - 5pm	None
Harvest Ministries Erlanger Baptist Church	16 Commonwealth Ave, Erlanger, Kentucky 41018 (859)-727-2588 ext. 335 or 336	Food and a referral service for additional basic needs such as medicine, clothing and household goods	When available	Everyone	Monday, Tuesday, Thursday: 9:00 AM to 12:00 PM Wednesday: 4:30 PM to 7:00 PM	None
Hosea House*	901 York St Newport, KY 41071	Evening Meal, Food Pantry	Both when available	All served	Every day 4pm-5:30pm; Office Hours M-F 9am-5:30pm	None
I Have Wings Breast Cancer Foundation*	P.O. Box 1850 Erlanger, Kentucky 41018	Grocery	GC	All ages and genders served	Apply online: <a href="http://www.ihavewings.org">www.ihavewings.org</a>	Proof of Breast Cancer Diagnosis
Family Promises of NKY	336 West 9th St. Newport, KY 41072 (859)-431-6840	Lodging, resources, food	Both	Families with children under 18 served	7:00-5:00pm	None
Immanuel United Church of Christ	110 Boone Street Bromley, KY 41016	Pantry	Toiletries when available	Low-income Families & Individuals	Fourth Tuesday of every month, 5:00 - 6:00 p.m.	ID, proof of income

Lakeside Christian	195 Buttermilk Pike Lakeside Park, Kentucky 41017 (859)-341-1160	Food bags (last up to 2 days)	None	Families in need	Mon-Fri 9am-5pm	None
Life Line Ministry of NKY	4115 Dixie Hwy Elsmere, KY (859)-727-3733	Food, clothing & furniture (waiting list for furniture)	None	Low-income Families & Individuals	By appt, no walk-ins, Tues 5:30-7:30pm, W 10- 1, F 1-6:30	None
New Beginnings	522 5th Ave Dayton, KY (859)-655-9100	Food Pantry, Kid's cafe, free hot meals, senior program	None	Low-income Families & Individuals	Sundays 1pm First come, first served	None
New Hope Christian Center	941 Central Ave Newport, KY (859)-491-5616	Food pantry	None	All	Friday 1pm-2pm	None
New Hope Ministry Center of Immanuel United Methodist	22 William F. Blatt Southgate, KY 41071 (859)- 341-5330	Free Food Pantry	Both when available	All ages and genders served	Last Saturday of each month 10:30 a.m. - Noon	ID
NKCAC- Kenton Co.	315 East 15th Street Covington, KY 41011 (859)-291-8607	USDA Commodities, Senior Commodities, food pantry	None	120% below poverty	Monday – Friday 8:00 AM – 4:30 PM	ID, SS cards, income
O.A.S.I.S.	1016 Greenup Ave. Covington, KY 41011 (859)-655-9800	Rent, emergency food	None	Low-income Families & Individuals	Tuesday-Thursday 11-4	None
Rose Garden Home Mission	2040 Madison Avenue, Covington, KY (859)-491-ROSE	Food pantry, other emergency assistance	None	Everyone	Mon-Thurs 11am-4pm	None
Salvation Army	1806 Scott Blvd Covington, KY 41014 (859) 261-0835	USDA Commodities, food pantry	Both when available	All ages and genders served	M - Th., 9 a.m. - Noon and 1:00 p.m. - 3:00 p.m.	ID, proof of address
Senior Services of Northern Kentucky*	1032 Madison Ave Covington, KY 41011 (859)- 491-0522	Dry Foods when available	Both when available	Elderly, 60+ years of age	M-F 8:30am-5pm	None
South Side Baptist Church	1501 Holman Ave. Covington, KY 41011 (859)- 431-1314	Food Pantry	None	Low-income Families & Individuals	Every Thurs. 10 a.m. - Noon; client can only come every 2 months	ID, Proof of Address, SS Card

St. Augustine Parish Outreach Center*	2523 Todd Ct. Covington, KY 41011 (859)-491-4584	Food Pantry	Both when available	All registered persons with HAC in City Heights	M, W-F 10:15am-3:00pm	Proof of Address
St. Vincent De Paul	3655 Crescent Springs RD Erlanger, KY (859)-341-3219	Thrift Stores, Salvage Operations, Vehicle Donations, Food Pantry, other Emergency assistance.	If available	All	Mon-Sat 9am-5pm Pantry; Tues, Thurs 9-12	Schedule an appointment to pickup donations
Trinity Baptist Church	510 Park Avenue, Newport, KY (859)-581-9197.	Food Pantry; Once in every 30 days	None	All	Wednesday, 11:00 - 1:00 p.m	Photo ID
United Christian Volunteers*	15 Kenton Street Elsmere, KY 41018 (859)-727-4417	Food Pantry	Both when available	Low-income Families & Individuals	M - F, 9:00 a.m. to 11:15 a.m.	ID, proof of address, SS card for each member of household
United Ministries*	525 Graves Ave Erlanger, KY 41018 (859)-727-0300	USDA Commodities, food pantry, thrift shop, other emergency assistance	Both when available	All ages and genders served	M-F 9am-11:30am	Photo ID, SS Cards for Household, Proof of Address, Proof of Income
Vineyard Christian Church *	7101 Pleasant Valley Road Florence, KY 41042 (859)-689-0777	Community Meal, Food Pantry (Groceries)	Both when available	All ages and genders served	Comm. Meal at Newport Comm. Ctr. 4th Sat 11-12:30; Comm. Meal on site 3rd Thurs. 6:30-8pm; Groceries Thurs. (except 3rd Thurs) 10am-2pm	None
Welcome House	205 Pike St Covington, KY 41011 (859)-431-8717	Pantry, USDA Commodities	Both	Low-income Families & Individuals	M & W 1pm-4pm; F 10am-1pm (By Appointment Only)	Proof Of Address, KY Photo ID

## OWEN COUNTY

Brighton Center, Inc. *	799 Ann St, Newport, KY 41071 (859)-491-8303 ext. 2300	Food Pantry, USDA Commodities Campbell Co.	Both at Christmas and Easter	All ages and genders served	Campbell Co. commodities; Tues & Wednesday; 9:00-12:30 & 1:30-4:30 Food Pantry walk in; Mon, Tues, Thurs, Fri 1:30- 4:30	ID, Proof of Address, SS Card
Care Mission*	11093 Alexandria Pk Alexandria, KY 41001 (859)- 635-4500	USDA Commodities, food pantry	Both, sometimes	All ages and genders served	Tues. 9-2, 6-8; Thurs. 9- 2; Sat. 9-12	ID, Proof of Address
Fairhaven	260 W. Pike Street Covington, KY 41011 (859)-491-1027	Pantry & Clothing Voucher	Both when available	Houses homeless men, and helps women & Families	M & F, 11:00 a.m.; Thurs. 9:30 a.m.; Once every 7 days	SS card for each member of household
Faith Christian Center	1101 Amsterdam Road Park Hills, KY 41011 (859)-491-2850	Emergency food assistance	Both	All residents	Last Saturday of each month 10:00am	First come, first served
<i>First Baptist Church of Highland Heights Pantry of Hope*</i>	2315 Alexandria Pike, Highland Heights, KY 41076 (859)-441-7274	Food pantry, Senior commodities	All	Families in need of emergency assistance	Saturday, 9:00 am - 12:00 pm	None
First Assembly Of God	9126 Alexandria Pike Alexandria, KY 41001 (859)-635-1441	Emergency Food Assistance	None	Families in need of emergency assistance	Every day but Friday 9AM-1PM	Photo ID
Freestore Food Bank	112 E. Liberty St. Cincinnati, Ohio (513)-241-1064	Food pantry	When available	All residents	Mon-Fri 8:15am- 3:30pm, 3rd Sat of month 10am-12pm	ID, SS card
Garrard St. Church of Christ	218 Garrard St. Covington, KY 41011 garrardstreetcoc.org (859)-431-1613	Food Pantry	Both when available	All ages and genders served	2nd and 4th Wednesday of every month, 4 p.m. - 5 p.m.	None
Hosea House*	901 York St Newport, KY 41071	Evening Meal, Food Pantry	Both when available	All served	Every day 4pm-5:30pm; Office Hours M-F 9am- 5:30pm	None
I Have Wings Breast Cancer Foundation*	P.O. Box 1850 Erlanger, Kentucky 41018	Grocery	GC	All ages and genders served	Apply online: www.ihavewings.org	Proof of Breast Cancer Diagnosis

Family Promises of NKY	336 West 9th St. Newport, KY 41072 (859)-431-6840	Lodging, resources, food	Both	Families with children under 18 served	7:00-5:00pm	None
Lakeside Christian	195 Buttermilk Pike Lakeside Park, Kentucky 41017 (859)-341-1160	Food bags (last up to 2 days)	None	Families in need	Mon-Fri 9am-5pm	None
Life Line Ministry of NKY	4115 Dixie Hwy Elsmere, KY (859)-727-3733	Food, clothing & furniture (waiting list for furniture)	None	Low-income Families & Individuals	By appt, no walk-ins, Tues 5:30-7:30pm, W 10-1, F 1-6:30	None
New Beginnings	522 5th Ave Dayton, KY (859)-655-9100	Food Pantry, Kid's cafe, free hot meals, senior program	None	Low-income Families & Individuals	Sundays 1pm First come, first served	None
New Hope Christian Center	941 Central Ave Newport, KY (859)-491-5616	Food pantry	None	All	Friday 1pm-2pm	None
NKCAC-Owen Co.	109 South Madison Owenton, KY (502)-484-2116	USDA Commodities, Senior Commodities, food pantry	None	120% below poverty	Monday-Friday 8:00am-4:30pm	ID, SS cards, income
O.A.S.I.S.	1016 Greenup Ave. Covington, KY 41011 (859)-655-9800	Rent, emergency food	None	Low-income Families & Individuals	Tuesday-Thursday 11-4	None
Rose Garden Home Mission	2040 Madison Avenue, Covington, KY (859)-491-ROSE	Food pantry, other emergency assistance	None	Everyone	Mon-Thurs 11am-4pm	None
Salvation Army	1806 Scott Blvd Covington, KY 41014 (859) 261-0835	Food pantry	Both when available	All ages and genders served	M - Th., 9 a.m. - Noon and 1:00 p.m. - 3:00 p.m.	ID, proof of address
Senior Services of Northern Kentucky*	1032 Madison Ave Covington, KY 41011 (859)-491-0522	Dry Foods when available	Both when available	Elderly, 60+ years of age	M-F 8:30am-5pm	None
St. Vincent De Paul	3655 Crescent Springs Rd. Erlanger, KY (859)-341-3219	Thrift Stores, Salvage Operations, Vehicle Donations, Food Pantry, other Emergency assistance.	If available	All	Mon-Sat 9am-5pm Pantry; Tues, Thurs 9-12	Schedule an appointment to pickup donations

Trinity Baptist Church	510 Park Avenue, Newport, KY (859)-581-9197.	Food Pantry; Once in every 30 days	None	All	Wednesday, 11:00 - 1:00 p.m	Photo ID
Vineyard Christian Church *	7101 Pleasant Valley Road Florence, KY 41042 (859)-689-0777	Community Meal, Food Pantry (Groceries)	Both when available	All ages and genders served	Comm. Meal at Newport Comm. Ctr. 4th Sat 11-12:30; Comm. Meal on site 3rd Thurs. 6:30-8pm; Groceries Thurs. (except 3rd Thurs) 10am-2pm	None

## PENDLETON COUNTY

Brighton Center, Inc. *	799 Ann St, Newport, KY 41071 (859)-491-8303 ext. 2300	Food Pantry, USDA Commodities Campbell Co.	Both at Christmas and Easter	All ages and genders served	Campbell Co. commodities; Tues & Wednesday; 9:00-12:30 & 1:30-4:30 Food Pantry walk in; Mon, Tues, Thurs, Fri 1:30-4:30	ID, Proof of Address
Care Mission*	11093 Alexandria Pk Alexandria, KY 41001 (859)-635-4500	USDA Commodities, food pantry	Both, sometimes	All ages and genders served	Tues. 9-2, 6-8; Thurs. 9-2; Sat. 9-12	ID, Proof of Address
Fairhaven	260 W. Pike Street Covington, KY 41011 (859)-491-1027	Pantry & Clothing Voucher	Both when available	Houses homeless men, and helps women & Families	M & F, 11:00 a.m.; Thurs. 9:30 a.m.; Once every 7 days	SS card for each member of household
Faith Christian Center	1101 Amsterdam Road Park Hills, KY 41011 (859)-491-2850	Emergency food assistance	Both	All residents	Last Saturday of each month 10:00am	First come, first served
<i>First Baptist Church of Highland Heights</i> <b>Pantry of Hope*</b>	2315 Alexandria Pike, Highland Heights, KY 41076 (859)-441-7274	Food pantry, Senior commodities	All	Families in need of emergency assistance	Saturday, 9:00 am - 12:00 pm	None
First Assembly Of God	9126 Alexandria Pike Alexandria, KY 41001 (859)-635-1441	Emergency Food Assistance	None	Families in need of emergency assistance	Every day but Friday 9AM-1PM	Photo ID

Freestore Food Bank	112 E. Liberty St. Cincinnati, Ohio (513)-241-1064	Food pantry	When available	All residents	Mon-Fri 8:15am-3:30pm, 3rd Sat of month 10am-12pm	ID, SS card
Garrard St. Church of Christ	218 Garrard St. Covington, KY 41011 garrardstreetcoc.org (859)-431-1613	Food Pantry	Both when available	All ages and genders served	2nd and 4th Wednesday of every month, 4 p.m. - 5 p.m.	None
Hosea House*	901 York St Newport, KY 41071	Evening Meal, Food Pantry	Both when available	All served	Every day 4pm-5:30pm; Office Hours M-F 9am-5:30pm	None
I Have Wings Breast Cancer Foundation*	P.O. Box 1850 Erlanger, Kentucky 41018	Grocery	GC	All ages and genders served	Apply online: www.ihavewings.org	Proof of Breast Cancer Diagnosis
Family Promises of NKY	336 West 9th St. Newport, KY 41072 (859)-431-6840	Lodging, resources, food	Both	Families with children under 18 served	7:00-5:00pm	None
Lakeside Christian	195 Buttermilk Pike Lakeside Park, Kentucky 41017 (859)-341-1160	Food bags (last up to 2 days)	None	Families in need	Mon-Fri 9am-5pm	None
Life Line Ministry of NKY	4115 Dixie Hwy Elsmere, KY (859)-727-3733	Food, clothing & furniture (waiting list for furniture)	None	Low-income Families & Individuals	By appt, no walk-ins, Tues 5:30-7:30pm, W 10-1, F 1-6:30	None
New Beginnings	522 5th Ave Dayton, KY (859)-655-9100	Food Pantry, Kid's cafe, free hot meals, senior program	None	Low-income Families & Individuals	Sundays 1pm First come, first served	None
New Hope Christian Center	941 Central Ave Newport, KY (859)-491-5616	Food pantry	None	All	Friday 1pm-2pm	None
NKCAC-Pendleton Co.	311 Park Street Falmouth, KY 41040 (859)-654-4054	USDA Commodities, Senior Commodities, food pantry	None	120% below poverty	Monday-Friday 8:00am-4:30pm	ID, SS cards, income
O.A.S.I.S.	1016 Greenup Ave. Covington, KY 41011 (859)-655-9800	Rent, emergency food	None	Low-income Families & Individuals	Tuesday-Thursday 11-4	None
Rose Garden Home Mission	2040 Madison Avenue, Covington, KY (859)-491-ROSE	Food pantry, other emergency assistance	None	Everyone	Mon-Thurs 11am-4pm	None

Salvation Army	1806 Scott Blvd Covington, KY 41014 (859) 261-0835	Food pantry	Both when available	All ages and genders served	M - Th., 9 a.m. - Noon and 1:00 p.m. - 3:00 p.m.	ID, proof of address
Senior Services of Northern Kentucky*	1032 Madison Ave Covington, KY 41011 (859)- 491-0522	Dry Foods when available	Both when available	Elderly, 60+ years of age	M-F 8:30am-5pm	None
St. Vincent De Paul	3655 Crescent Springs RD Erlanger, KY (859)-341-3219	Thrift Stores, Salvage Operations, Vehicle Donations, Food Pantry, other Emergency assistance.	If available	All	Mon-Sat 9am-5pm Pantry; Tues, Thurs 9-12	Schedule an appointment to pickup donations
Trinity Baptist Church	510 Park Avenue, Newport, KY (859)-581- 9197	Food Pantry; Once in every 30 days	None	All	Wednesday, 11:00 - 1:00 p.m	Photo ID
Vineyard Christian Church *	7101 Pleasant Valley Road Florence, KY 41042 (859)-689-0777	Community Meal, Food Pantry (Groceries)	Both when available	All ages and genders served	Comm. Meal at Newport Comm. Ctr. 4th Sat 11-12:30; Comm. Meal on site 3rd Thurs. 6:30-8pm; Groceries Thurs. (except 3rd Thurs) 10am-2pm	None

## OTHER

YWCA Food Pantry	55 South 4th St. Batavia, Ohio (513)-732-0450	Food Pantry, resources	None	Clermont county families	M 8:30am-4:30pm, T 9am-2:45pm, Th 8:30am-4:30pm, F 8:30am-4:30pm	Picture ID
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**NKY EMERGENCY ASSISTANCE  
RESOURCE LIST**

AGENCY	ADDRESS	PHONE	SERVICES PROVIDED	HOURS	DOCUMENTATION REQUIRED
<b>FINANCIAL</b>					
<b>CAMPBELL COUNTY</b>					
Brighton Center, Inc	Family Center 799 Ann St.	491-8303	Rent, utilities, clothing, food, Gift of Sight voucher- <u>all 8 counties</u> , USDA commodities for Campbell County residents only	Walk in hours: M-T-TH-F 1:30pm-4:30pm Appointments: M-F 9am-12	Proof of Identity for everyone in the household, proof of residency and proof of household income
NKCAC- Campbell Co. Center	437 W. 9 <sup>th</sup> Newport	431-4177	Food, disconnection only on electric, oil, gas	8-4:15 Lunch 12-12:30	Photo ID, proof of income & utility bill
Fiscal Court	1098 Monmouth St. Newport	292-3838	Dental, hearing, eye exam, RX, rent, gas & electric, propane, water & sanitation. Must have disconnect.	M-F 8:30-11:30 & 1-4	<b>Campbell Co. Resident for at least 6 mos.</b> verified through current ID or drivers license, proof of all in hh, bill or lease.
Main St. Care Ministry, Inc.	11093 Alexandria Pike Alexandria	635-4500	Food, Clothing, RX assistance – <u>all 8 counties</u> , USDA commodities Campbell County residents only	T & TH 9-2 Tues 6-8 PM Sat 9-12	Photo ID, SS # or ID for all in household
Salvation Army	340 W. 10 <sup>th</sup> St	491-5180	Utilities, rent, clothing	M-TH 1-3:30 F 9-12	Photo ID, SS card, shut off notice
St. John's UCC Newport	415 Park Ave	431-1818	Provide financial for Dayton, Bellevue, Newport		
St Vincent DePaul	2655 Crescent Springs Rd	341-3219	Food, rent, utilities, clothing, <u>All NKY</u>	M – F 9-4	Photo ID, SS Card, Utility Bill
Holy Spirit	809 York St	261-0818	Campbell county rent, utilities		

<b>KENTON COUNTY</b>					
United Ministries	525 Graves Ave Erlanger	727-0300	So. Kenton & Boone (excl Cov.) USDA Commodities, clothing, hh items, food pantry, limited. Financial assist. By appt	M – F 9am -12pm	Photo ID, SS Card, proof of income and current mail
NKCAC-Kenton County Center	315 E. 15 <sup>th</sup> St. Covington	291-8607	Utilities and Rent	8am – 4:15pm Lunch 12pm-1pm	Photo ID, proof of income & utility bill
St. Vincent DePaul	2655 Crescent Springs Rd	341-3219	Food, rent, utilities, clothing, <u>All NKY</u>	M – F 9am – 4pm	Photo ID, SS Card, Utility Bill
United Christian Volunteers	15 Kenton St Elsmere	727-4417	EA to Erlanger/Elsmere area only Rent , utilities, (41018)	M-F 9-12	
Salvation Army	1806 Scott Blvd. Covington	261-0835	Clothing, rent, utilities	M-TH 9-12	Photo ID
<b>BOONE COUNTY</b>					
NKCAC-Boone County Center	7938 Tanners Gate, Florence	586-9250	Utilities and Rent	M – F 8:30-4:30 12-1 Lunch	SS Cards, income, utility bill
St. Vincent DePaul	2655 Crescent Springs Rd	341-3219	Food, rent, utilities, clothing, <u>All NKY</u>	M – F 9am – 4pm	Photo ID, SS Card, Utility Bill
United Ministries	525 Graves Ave Erlanger	727-0300	So. Kenton & Boone (excl Cov.) USDA Commodities, clothing, household items, food pantry, limited. Financial assist. By appt	M – F 9am -12pm	Photo ID, SS Card, proof of income and current mail
Hope Ministries	263 Main St Florence	371-1887	Utilities and Rent Funds April 1		

<b>SHELTERS</b>					
<i>Family Shelter</i>					
Interfaith Hospitality Network	336 W. 9 <sup>th</sup> St. Newport, KY	431-6840	Emergency housing for up to 14 individuals of family, <u>all NKY</u>	Mon – Fri 8am -5pm	Homeless, Birth Certificate, SS Cards, ID, eviction notice
<i>Cold Shelter</i>					
Emergency Cold Shelter of NKY	634 Scott St. Covington, KY	291-4555	Seasonal shelter: Nov-April 1 <sup>st</sup> come, 1 <sup>st</sup> serve (only 32 beds). Hot meals served	Mon-Sun 7pm-8:30am	Must have KY picture ID
<i>Men's Shelters</i>					
City Gospel Mission	1419 Elm St. Cincinnati, OH	513-241-5525	\$15 fee per week (provides bed & locker), 2 meals provided (dinner & breakfast)	Must be in building by 6:45 pm & leave after breakfast	18+ years, no drugs or alcohol, no registered sex offenders
Fairhaven Rescue Mission	260 Pike St. Covington	491-1027	Provides shelter for up to 25 men with access to showers and laundry facilities. Hot meal at 6pm.		Picture ID, must pass breathalyzer
<i>Women's Shelter</i>					
Welcome House	205 Pike St. Covington	431-8717	Food, housing, basic needs for homeless women and children	Mon & Wed 1-4, Fri 10-1 Call Ahead	Current KY state ID, address last 30 days, SS Cards for HH
Women's Crisis Center	835 Madison Ave., Covington; 111 East 3 <sup>rd</sup> St., Maysville; 440 Main St., 3 <sup>rd</sup> Fl., Carrollton, KY; 141 N. Main St, Suite E, Williamstown, KY	24 hr. Hotline 491-3335	Emergency shelter for domestic violence, hospital advocacy for domestic violence & rape 24 hrs. Counseling & group services, pet protection	Walk in offices 9-5	

<b>FOOD, CLOTHING &amp; FURNITURE</b>					
Life Line Ministry of Northern KY	4115 Dixie Hwy. Elsmere	727-3733	Food, Clothing & Furniture (waiting list for furniture)	By appt no walk in T 5:30pm -7:30pm W 10 – 1 F 1-6:30	No Documentation Needed
Be Concerned	714 Washington Covington	291-1340	Food, Clothing & Housewares for Campbell, Kenton, Boone		SS cards for all in hh, photo ID, proof of address
Vineyard Church	7101 Pleasant Valley	689-0777	Food Pantry	Thursday 10-2	Name, address, # in family
New Hope United Methodist Church	22 William F Blatt St., Newport, KY	781-1660	Food pantry 11-12 last Saturday of the month		No documents required
Pantry of Hope	2315 Alexandria PK Alexandria	441-7274	Food, Clothing, Cleaning supplies	Sat 9-12	Once a month
Hosea House	901 York St. Newport	261-5857	Soup Kitchen/Emergency Food Panty/Evening meal - Dinner	7 days a week 4-5:30 PM	None
Parish Kitchen	143 Pike St	581-7745	Meal – Lunch	11:30-1:30	None
Action Ministries	4375 Boron Dr. Covington	261-3649	Government & agency food, No Financial assistance. Excludes Covington, Elsmere.	M – F 9-12 1 <sup>st</sup> & 3 <sup>rd</sup> Mon. evenings 6:30 – 8:00 PM	2 ID's w/name & w/address, proof for all in household & proof of income
Mental Health America/ Recovery Network of NKY	605 Madison Ave., Covington	431-2134	Clothing, food, counseling, police checks, focusing on individuals with mental health issues	M-F 10:30-4:00	None
NorthKey Community Care		331-3293	Mental health, substance abuse & developmental disability services		

<b>MISC. ITEMS</b>					
American Cancer Society	297 Buttermilk Pike	647-2200	Free wigs, bras, prosthesis and referrals for Cancer patients Cancer Diagnosis	M – F 8-5	
American Diabetes		888-342-2383	Diagnosis and treatment info		
American Red Cross	Cincinnati	513-579-3900	Disaster, Youth and senior Services		
Care Net	315 East 15 <sup>th</sup> ST, Covington	431-9178	Materials assistance, Free Pregnancy testing, Parenting Classes , EA assistance once in two months	Call for times and locations	Birth Certificate or Photo ID
Catholic Charities, Inc.	3629 Church Covington	581-8974	Mental health counseling, substance abuse, parenting classes		
Rose Garden Home Mission	1800 Madison Ave	491-7673	Food, housing search, baby items, free pregnancy testing,	M – TH 11-4	Mom’s ID and Child Birth Certificate
Faith Comm. Pharmacy	2655 Crescent Springs Rd	426-7837	RX program agency referrals only with form, <u>all 8 counties</u>	M & TH 9a-3:30p, interviews 9-12	Photo ID & current piece mail & SS Cards
Transportation	Senior Services	491-0522	Transportation- Doctor Appointments		Either disabled or elderly, new client mention “ New Freedom”
<b>GED</b>					
Newport Adult Learning Centers	30 West 8 <sup>th</sup> St.	292-3056	GED, Math, Reading & ESL Classes	M,Tu 9:00a-8:00p W,Th 9:00a-4:00p	
CET- Brighton Center	601 Washington St., Newport	491-8303	GED, Medical Assistance, office Technology	M-F 8:30- 5:00	



