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DEPARTMENT OF HEALTH & HUMAN SERVICES

ADMINISTRATION FOR CHILDREN AND FAMILIES
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Case No. 17-F-0092

March 9, 2017

This is in response to your March 2, 2017, Freedom of Information Act (FOIA) to the Administration for Children and Families (ACF). In your request, you sought a copy of the ACF Deployment Guide.

The Office of Human Services Emergency Preparedness & Response (OHSEPR) conducted a search and located 48 pages of responsive documents, which are enclosed, in their entirety.

There are no fees for FOIA services, in this instance, as the billable costs are less than our $25 threshold for billing purposes.

Sincerely yours,

Kimberly Epstein
FOIA Officer
Administration for Children and Families

Enclosure

ADMINISTRATION FOR CHILDREN & FAMILIES

Office of Human Services Emergency Preparedness & Response
OHSEPR

Deployment Guidebook
For

ACF Personnel

March 2012

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Introduction.

Emergency response and support are essential for providing continuous human services support in disaster situations. We know that deployments, even in similar disasters, are always different. The magnitude of devastation and many other variables directly affect the traumatized Region, which in turn directly impacts deployment conditions. Normal and ample accommodations may be available in some areas, whereas other areas may present more austere and challenging conditions. Flexibility and personal preparedness are the key elements to success while deployed.

This Guidebook provides information for ACF personnel preparing for deployment as Human Services Subject Matter Experts, Technical Assistants, Shelter Assessment Team members or Disaster Case Management Liaisons. The Guidebook is divided into two main sections:

- ◆ Section 1 discusses the technical aspects of deployment such as, the HHS disaster response structure, notification, travel, deployment roles, and concerns while in deployment status and more.

- ◆ Section 2 provides practical information on preparing for deployment. It is essential that you are physically fit, adequately prepared for deployment and that your, personal and family needs will be met while you are deployed.

Section1. Technical Aspects of Deployment.

HHS Response Structure.

A disaster sets off a chain of events and assessments that may lead to the request for personnel and resources from ACF. In the initial stages of an emergency or disaster, or when a disaster such as a hurricane is predicted, ACF's priorities are to develop situational awareness, collect and disseminate information on the status of HHS human services programs, analyze information regarding human services and needs, identify potential requests for Federal assistance, and develop response options, including deployment of ACF personnel.

The Federal Emergency Management Agency (FEMA) is the Federal agency responsible for coordinating Emergency Support Function – 6 (ESF-6): Mass Care, Emergency Assistance, Housing, and Human Services under the National Response Framework. HHS is designated as a support agency under this function. HHS also leads the national medical and public health response under ESF-8 and disaster

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recovery under ESF-14. ACF's Emergency Preparedness and Response mission includes coordination of human services preparedness, planning, and response for the Department. ACF's Regional Offices are the primary HHS component responsible for supporting FEMA during ESF-6 activations.

ACF personnel may be deployed in a variety of roles and across a wide spectrum of missions related to human services needs for individuals, families, and communities impacted by disasters and public health emergencies. In addition to deployments in support of FEMA's ESF-6 function, ACF personnel may deploy in missions as human services liaisons to an ESF-8 mission, as part of a Disaster Case Management mission, as part of a State Department-declared Emergency Repatriation, or as an element of a human services recovery mission under the National Disaster Recovery Framework's Health and Social Services Recovery Support Function (RSF).

Various other ACF offices and agencies within HHS contribute to disaster preparedness and response. The roles and responsibilities of some of these key agencies and components are described below.

Assistant Secretary for Preparedness and Response (ASPR).

The Office of the Assistant Secretary for Preparedness and Response (ASPR) serves as the Secretary's principal advisory staff and leads the nation in preventing, preparing for and responding to public health emergencies and disasters. The ASPR is the overall coordinator for all HHS response activities during an emergency.

Secretary's Operation Center (SOC) and the Emergency Management Group (EMG).

The SOC (located at the HHS Secretary's headquarters in Washington, DC) is a facility that provides a single focal point for information sharing, command and control, communications, and information collection for all of HHS during routine and emergency operations.

The Emergency Management Group (EMG) consists of key HHS leaders that oversee the HHS response. These staff and others are part of the EMG and support routine surveillance and monitoring functions as well as the preparedness infrastructure for larger operations. The EMG receives and processes information related to public health and medical threats or emergencies and coordinates decisions, including the deployment of HHS response assets such as the Incident Response Coordination Team (IRCT)). The EMG also manages all Federal public health and medical response

operations. The EMG is always active; remaining in a surveillance and monitoring posture when not in a response mode.

Administration for Children and Families (ACF), Office of Human Services Emergency Preparedness and Response (OHSEPR).

OHSEPR oversees the implementation and coordination of ACF program and human services emergency planning, preparedness, and response during nationally declared emergencies. OHSEPR coordinates with ACF Central and Regional Offices, ACF State- and local grantee-funded programs, ACF program partner organizations, and ASPR. OHSEPR coordinates, through the EMG and SOC, with FEMA on human services emergency planning and response. The Director of OHSEPR or designee serves as the ACF liaison for human services on the EMG. The OHSEPR Director will focus on response policy and planning issues. A designated ACF lead in the field, such as the Human Services Branch Director or designee, maintains daily contact with OHSEPR through coordination calls in order to ensure situational awareness and information flow.

Incident Response Coordination Team (IRCT).

The IRCT serves as the HHS Secretary's tactical unit at the disaster site and is activated by ASPR once a response is deemed necessary. The IRCT directs and coordinates the activities of all HHS personnel deployed to the emergency site.

Regional Emergency Coordinator (REC).

The REC is ASPR's representative in the field and serves as the IRCT Commander during disasters. RECs are stationed in each of the ten Regional offices.

IRCT Human Services Branch Director.

During a disaster response, in which HHS stands up an Incident Response Coordination Team, an ACF Regional Administrator (RA) or designee serves as the IRCT Human Services Branch Director and reports through the IRCT Operations Branch Chief to the IRCT Commander. The IRCT Human Services Branch Director coordinates support for State agencies, grantees, and government contractors that administer HHS programs and, where appropriate, for activities of other Federal agencies that provide critical human services. This support may include technical and policy assistance to State agencies, grantees, government contractors, voluntary organizations, and partners in the private sector. The IRCT Human Services Branch Director also has tactical and operational control of all HHS human services team members deployed in the disaster area. In some instances the Human Services Branch Director may be located at a FEMA Joint Field Office (JFO) to directly support the FEMA ESF-6 Branch.

Regional Emergency Management Specialist (REMS).

ACF REMS are responsible for coordinating HHS human services preparedness and response activities in the Region by working with other HHS agencies, Federal partners (including FEMA), tribal, State and local governments, and voluntary organizations to coordinate support to partner agencies in the provision of essential human services. The REMS will typically deploy to the FEMA Joint Field Office (JFO), the IRCT, or a State Emergency Operations Center as a Human Services Liaison officer (LNO) during a disaster. The REMS works with Regional and Central Office officials to assist with the HHS human services response.

Human Services Liaisons, Subject Matter Experts, Technical Assistance Experts, Shelter Rapid Needs Assessment Teams and Disaster Case Management Liaisons.

The circumstances of each disaster will shape the ACF response and determine the need for personnel with specific training and skill sets. Deployed ACF personnel may serve in a variety of roles in response activities including Human Services IRCT Liaison and/or Branch Director, Human Services Liaison to FEMA Regional or National Operations Center (ROC/NOC), Human Services Liaison to FEMA's Joint Field Office

(JFO) or Joint Task Force (JTF), Human Services Liaison to the a Disaster Recovery Center (DRC), member of a Shelter Rapid Needs Assessment Team and Disaster Case Management (DCM) Liaison.

ACF Personnel may join staff from other agencies, such as FEMA, the American Red Cross, State Disabilities Offices and other agencies on response teams. ACF employees may deploy with other HHS employees as a member of an Emergency Response Readiness Force (ERRF).

ACF personnel deploy to the FEMA JFO, a State Emergency Operations Center (EOC), or to State or local human services agencies. You may be asked to work in a Disaster Recovery Center (DRC), which is a readily accessible facility or mobile office where disaster survivors go for information about FEMA assistance programs and other human service assistance programs. In some instances, ACF personnel may be asked to conduct assessments of disaster victims living in temporary shelters to rapidly identify needs and work to mobilize services to help disaster survivors recover.

Subject Matter Experts (SMEs) have expert knowledge about needs of specific populations, including children, the elderly, people with disabilities, etc. and may also be experts in social service programs such child welfare, aging, early childhood, etc. They may assess survivor's needs in the disaster area and provide guidance to the State or other key partners providing recommendations regarding the most appropriate methods to address disaster-caused human service needs or methods to restore service delivery. SMEs may also provide recommendations on how to connect families and individuals with resources and programs that address their disaster needs.

Technical Assistance Experts work with Federal and non-Federal partners to solve problems during disasters that might prevent survivors from applying for services and benefits or reenrolling in programs to continue eligibility and service delivery.

Deployments are generally for periods of 14 days; travel orders are issued to reflect the deployment period. In some cases and depending on the role or individual assignment, the deployment period may be up to 30 days. These time periods include a day of travel at the beginning and end of the deployment period. Employees should generally plan for 14 day deployments. Deployment length may be shorter due to the favorable resolution of factors that prompted the request for ACF assistance. Extensions beyond 30 days while possible are not likely.

Training and Other Requirements/Considerations.

Training.

The Incident Command System (ICS) is used during a disaster response, and employees that volunteer to work in a disaster must be familiar with the major components of the Incident Command System to be deployed. Five FEMA online training courses listed below must be completed prior to deploying:

- IS-100.b, Introduction to the Incident Command System;
- IS-200.b, ICS for Single Resources and Initial Incident Actions;
- IS-700.a, Introduction to the National Incident Management System (NIMS); and
- IS-800.b, National Response Framework, an Introduction (NRF).
- IS-806. Emergency Support Function (ESF) #6 – Mass Care, Emergency Assistance, Housing and Human Services.

The courses are available at FEMA's on-line training site, the Emergency Management Institute (EMI), located on the Internet at http://training.fema.gov/. An additional course that is strongly recommended includes Deployment Basics for FEMA Response Partners, IS-102.a. Contact your Regional Emergency Management Specialist or OHSEPR for additional information and guidance on training requirements.

In addition to the mandatory trainings required of all ACF emergency responders, ACF personnel are strongly encouraged to pursue further training and education regarding disaster human services, the emergency response and recovery operations systems of the United States, psychological resilience on deployment, and emergency management science. For additional suggested trainings, please contact the ACF Watch Desk at hswatchofficer@acf.hhs.gov to be routed to available training opportunities.

Additionally, participation in emergency preparedness and response in-service training opportunities provided by OHSEPR or your Regional Emergency Management Specialist are highly recommended as these training sessions will help you better understand ACF's role in coordinating the Department's human service disaster response and the FEMA ESF-6 Human Services mission.

Personal Physical and Health Considerations.

The physical requirements for individuals deployed to disasters or emergencies will be based on the functional requirements of the job to be performed, the deployment environment, and/or any other requirement specified by the senior representative within the support area. Employees that volunteer for deployment must be physically capable

of performing their assigned duties. Each volunteer must consider how their personal health may be affected by potentially austere working and living conditions during a deployment -- including the possibility of limited air conditioning or heat, lack of hot water; as well as the possibility of working in dusty, dirty, and smoke-filled environments; noise, insects, crowded conditions, and limited food selection/availability. A physical condition or limitation (e.g. a back condition aggravated by long periods of vehicle travel, standing or walking) would not by itself disqualify an employee from being deployed during a disaster, but all volunteers with health issues should carefully consider and assess their physical stamina as well as tolerance for physically demanding work, including walking long distances, lifting and carrying supplies & equipment. (A more detailed discussion of physical and other considerations that volunteers should consider when assessing their physical fitness for deployment can be found in Section 2. under *Personal Affairs*.)

Of course, volunteers should always have with them all required medications (30-day supply) since there may be pharmaceutical shortages in the disaster area. In some cases, employees may be asked to obtain immunizations before deployment. Volunteers are encouraged to maintain their tetanus immunization and annual influenza vaccination.
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Activation, Notification, and Deployment.

When a declared disaster requires the activation of ESF-6, FEMA officials will notify HHS. When the IRCT is activated, the IRCT Human Services Branch Director, together with the IRCT Commander, is responsible for assessing the potential need for the deployment of ACF personnel to support the disaster human services mission. In general, ACF responders are deployed at the request of the affected State, with a formal request (Mission Assignment) made to HHS by FEMA. HHS reviews the mission assignment from FEMA and issues a sub-task assignment for HHS assets and personnel. This sub-task serves as the HHS mission assignment for HHS personnel.

When it has been determined that there is a need for Human Services Subject Matter and Technical Assistance Experts, the Human Services Branch Director will notify OHSEPR and the Human Services Lead in the EMG. Upon receipt of a HHS sub-task mission assignment, OHSEPR will identify deployable ACF personnel from the ERRF. ERRF personnel will be chosen based on their availability and skill set.

Travel.

In general, deploying personnel will use GovTrip for travel arrangements, travel orders and travel vouchers. ASPR may occasionally coordinate travel for hard to reach locations, or when large teams are requested. Travel must be approved before a Travel Authorization is created. Please note: Travel Authorizations (via GovTrip) must be obtained before traveling. A Mission Assignment is not a Travel Authorization and if an individual travels without a Travel Authorization, travel expenses can be denied.

To ensure proper processing of your travel orders, please use the CAN number: 12G9909DR when creating a GovTrip travel authorization and include the Mission Assignment number in the travel authorization request.

Questions about entering or processing a GovTrip travel can be answered via the ACF Watch Officer at hswatchofficer@acf.hhs.gov or the Regional Emergency Management Specialist (REMS) in your region.

ACF will reimburse deployed personnel for airfare, rail travel, lodging, rental cars, per diem, and other authorized expenses. Expenses are reimbursed through the travel voucher system upon return home just as with any other government travel. Deployed personnel must have a government travel card. Travel, per diem, lodging and overtime, if authorized and approved, are paid or reimbursed by funds appropriated under the Stafford Act. And not from ACF funds. Allowable expenses may include:

- Ground transportation (taxi, airport shuttle, bus, etc.);
- Lodging and Per Diem;
- Air Fare and train fare;
- Personally-owned vehicle (POV) mileage reimbursed at the approved General Services Administration (GSA) rate, tolls, and rental cars;
- Business telephone calls related to deployment;
- ATM fees for cash withdrawals during the deployment period, and,
- Laundry expenses, as defined by the General Services Administration.

Receipts for reimbursement follow GSA policy requirements. The authorized per diem amount and maximum allowed for lodging will be specified in the travel order. Additional essential information on travel requirements, pertinent contact information, methods of reimbursement, reporting instructions, and directions will be provided during the deployment period. Questions can also be directed to your Team Leader or another ACF emergency preparedness and response representative located at the IRCT or JFO. You are not authorized to change your lodging or air travel without prior approval.

Upon completion of your deployment, employees submit expenses via the GovTrip travel voucher within 5 days of return to their office. The ACF-A-16Rev1 Over Time Form should be submitted to the employee's deployment supervisor for signature and then forwarded to the OHSEPR Financial Officer within 7 business days of return to duty station. The ACF Over-Time Form can be found in Appendix D and at http://intranet.acf.hhs.gov/nformsite/docs/ACF-A-16-Rev1%20Fillable%20Request%20for%20CH%20CT%20CTT%20%20OT.pdf. If you have any questions, contact your Regional Emergency Management Specialist.

Unforeseen events and changes in itineraries and/or duty locations may occur. It is very important for deployed employees, to maintain close contact with their office Supervisor and/or Team Leaders for specific information pertaining to each deployment. When you receive notice that you will be deployed, it is your responsibility to notify your Supervisor of the date/time of departure, the Temporary Duty Location (TDY), expected arrival at TDY, anticipated length of deployment, and when you are released from your TDY for travel to your home. .

Deployment Process in Review.

1. Receive mission assignment from ASPR/FEMA through ACF HQ.
2. Create travel authorization through GovTrip, using reimbursable CAN number: 12G9909DR.
3. Include Mission Assignment number in Gov Trip travel authorization request.
4. Notify ACF Watch Officer, Field Supervisor and Home Station Supervisor of travel arrangements.
5. Once travel authorization is approved by Supervisor and OHSEPR Financial Officer, retrieve Travel Orders from GovTrip.
6. Travel to destination.
7. Notify ACF Watch Officer, Field Supervisor/Team Leader and Home Station Supervisor upon arrival at destination.
8. Record overtime on ACF Form ACF-A-16Rev1.
9. Upon completion of assignment:
    a. Submit expenses through GovTrip voucher;
    b. Submit ACF-A-16Rev1 Overtime form to Field Supervisor/Team Leader for signature; and,
    c. Submit signed ACF-A-16Rev1 Overtime Form to the OHSEPR Financial Officer.

At the Deployment Site.

On every deployment, you will be assigned to ICS Supervisor (not to be confused with your home station Supervisor who oversees your day-to-day work at ACF) who will direct your work while on deployment. Depending on the type of mission and the number of other ACF or HHS personnel in the disaster zone, this may be an IRCT Human Services Branch Director or other responsible individual, and may not necessarily be an ACF or even HHS staff member. You should always contact your designated ICS Supervisor, either in person or by phone, as soon as possible upon arriving at the designated deployment site. You should also notify your home station Supervisor and family that you have arrived safely at the deployment location.

During a deployment, you remain an HHS employee even though you may be taking day-to-day direction from other Federal departments or agency staff. On-site supervisors will issue task assignments and instructions. In missions for which an HHS IRCT is activated in-theater, the designated IRCT Human Services Branch Director or designee will be your link with the IRCT and is responsible for ensuring that your administrative requirements are met. These may include timekeeping for payroll purposes, message transmittals, internal team scheduling, performance oversight, and the resolution of operational and any other problems. You will receive your work assignments and direction from the IRCT Human Services Branch Director, Team Leader, or other designated ICS Supervisor. Any changes to work location, schedule, or work assignments must be coordinated directly with the ICS Supervisor. While in travel status and at the deployment site, it is extremely important that team members carry their official HHS Identification Badge at all times.

For additional information on what to expect at the deployment site, see the following appendices:

- *Appendix A: FEMA Joint Field Office Organization, Individual Assistance Branch* provides a visual detail of the organizational and reporting structure of the FEMA Human Services Group. Team members who report to a JFO will find knowledge of this structure helpful for understanding FEMA's human services operations.

- *Appendix B: HHS Human Services Assessment and Response Checklist* and *Appendix C: HHS Human Services Deployed Personnel Checklist* provide additional guidance on possible duties and tasks to complete upon arrival at the deployment site, specifically if the site is a JFO or EOC. Examples of tasks/duties include notifying the appropriate individuals of arrival, checking in equipment, determining reporting and recurring conference call schedules (referred to as battle rhythm), and so on. This list is intended as a guideline and teaching tool, as

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the actual requirements of your deployment will vary depending upon the requirements of the mission, the circumstances of the disaster, and the role to which you are assigned.

Time, Attendance and Pay.

Deployed ACF personnel usually work more than a normal 8 hour tour of duty. Deployed personnel often work 12-hour shifts and on weekends to provide intensive support for relief and recovery efforts. The form of overtime compensation, Premium Pay or Compensatory Time-Off will be determined by the specific disaster or emergency that activated the deployment. General questions regarding compensation for overtime hours worked are addressed in Appendix H. Specific questions about overtime compensation can be addressed by OHSEPR. Under an HHS sub-task for a FEMA mission assignment, overtime is reimbursed to the individual's agency via submission of the ACF Overtime Form to the OHSEPR Financial Officer who certifies and forwards to ASPR/FEMA for agency reimbursement (Please see *Deployment Process in Review* on page 7). Employees receive overtime Premium Pay through the regular payroll process.

ACF employees can be deployed to support a Stafford Act event upon receipt of an approved Mission Assignment from FEMA. They may also be deployed to non-Stafford Act events by direction of the Secretary of the Department of Health and Human Services. When deployed to support a Stafford Act event a Mission Assignment is the funding mechanism from FEMA to cover deployment costs including overtime. Overtime is compensated in Stafford Act events with Premium Pay rather than compensatory time-off. The rate of Premium Pay for overtime is identified on each employee's Leave and Earnings Statement, currently in block 6, "Basic/OT Rate". Conversely, when ACF employees are deployed to support non-Stafford Act events, compensation for overtime is generally awarded through compensatory time-off rather than Premium Pay.

To ensure receipt of appropriate pay, employees are responsible for keeping track of their time (including overtime hours) and for reporting the hours to their deployment Supervisor/Team Leader and agency time keeper. Employees are also responsible for obtaining timesheets signatures from their Field Supervisor/Team Leader and providing the signed time sheets to their home station timekeepers at the regularly scheduled pay period cut-off date while deployed (see *Appendix D: ACF-A-16Rev1).* You should also provide your Team Leader or the IRCT Human Services Branch Director with a copy of the signed timesheet (include both regular hours worked and any overtime hours).

Illness and Injuries During Deployment.

If you become ill or you are injured while on deployment, the HS Branch Director, in conjunction with your medical professional and/or FOH or other medical personnel, will determine if you can remain deployed while taking sick leave or whether you should return home. Report all illnesses and injuries immediately to your Field Supervisor/Team Leader, the IRCT Safety Officer (or in non-IRCT missions, the designated Safety Office in your chain of command) and the IRCT Human Services Branch Director.

If injured while deployed, you should stop work immediately and report the incident to our Field Supervisor/Team Leader, the IRCT Safety Officer and IRCT Human Services Branch Director. It is important to report injuries in a timely manner in the event Worker's Compensation issues arise. You should obtain copies of all supporting documentation prior to leaving the disaster deployment site. If you experience a work-related injury or illness you may want to consider seeking evaluation and care from your agency's Occupational Health Clinic or personal health care provider once you return home.

Likewise, all employees and supervisors/Team Leaders should immediately report all occupational injuries, illnesses, or incidents that could have resulted in injury to the IRCT Safety Officer and the IRCT Human Services Branch Director for instructions and guidance on recording and reporting. Reporting injuries immediately helps preserve your rights and benefits and could help protect other workers.

Additionally, keep in mind that you can contact your Employee Assistance Program (EAP) upon returning from a deployment if you are experience unusual emotional stress including symptoms such as sleeplessness, irritability, inability to concentrate, etc. Most responders describe their deployment experiences as challenging, interesting, and highly meaningful, but on each disaster response or recovery mission there are stressors that affect different responders differently. Having a plan for your own psychological resilience is a very important part of preparing to deploy, so that you can have a positive deployment experience. Responders are encouraged to pursue additional training in psychological resilience while on deployment as part of their preparation.

Health, Medical, and Other Benefits.

When you are deployed, all of your regular benefits continue as if you were in your regular workplace.

Demobilization.

When deployment is completed and prior to your return to home station, you will be required to complete the following activities:

- Timesheets have been filled out and signed;
- Transportation arrangements home have been coordinated via GovTrip;
- Necessary forms have been completed, directions for providing an "after action" report or complete an emergency management report regarding your deployment have been obtained, and all necessary debriefings have been completed;
- Transfer/return of vehicle keys and property such as laptops and printers and property receipts have been obtained; and,
- Administrative or logistical requirements are accomplished (e.g., return of any specialized equipment, badges, complete check out from deployment site, briefing out to replacement personnel, etc.).

Upon return to home station, you will be asked to complete the following activities:

- Notification to the Team Leader/HS Branch Director and home station Supervisor of a safe return from deployment.

- Completion of a travel voucher within 5 days following return to home station.

- Submission of ACF Overtime Form to home duty station supervisor and OHSEPR watch desk.

- Completion of an After Action Report. Employees will be asked to complete a short questionnaire outlining their observations during the deployment as a part of the After Action Reporting and Improvement Plan process. This information will be used to assist ACF in improving future deployment.

Section2. Personal and Family Deployment Preparation.

Personal Affairs.

Deployment duty can be physically and emotionally challenging. Hours can be long (usually 12 or more hours per day) and circumstances difficult, requiring complete attention while on duty. It is easy to become physically or emotionally exhausted. Pacing yourself including sufficient time to relax will help minimize stress.

Before deploying, it is essential that you make arrangements for your family and others who rely on you for financial and/or emotional support. You are the best judge of specific requirements and should consider them carefully before accepting a deployment offer. Items for consideration include personal and financial obligations, special projects (personal and professional) that may be adversely affected by the deployment.

Personal circumstances and work situations may change from time to time making it difficult to deploy for a specific event; there is no penalty for turning down a deployment request. Inability to deploy for one event will not disqualify you from being considered for the next event.

Some questions to ask before volunteering or accepting a deployment assignment are included in Appendix G: Disaster Volunteer's Self-Assessment Tool.

A *Family Care Plan* template and *Pre-Deployment Checklist* are also included as appendices to this document.

- *Guide for Development of a Family Care Plan for ACF Deployed Personnel* (Appendix E) is a helpful tool to ensure that family affairs will be handled during a deployment. Completing the Guide prior to deployment can give you the peace of mind that family responsibilities are in order especially when you share it with your family as part of the pre-deployment process.

- The *HHS Pre-Deployment Checklist* (Appendix F) provides a list of items to pack as well as a list of activities to complete before deployment.

Clothing and Packing for Deployments.

Deployments are considered an extension of your normal duties. You should dress casually (jeans or other comfortable pants, polo shirts, blouses, closed toe shoes and similar "civilian" attire is appropriate. Clothing should be easy to launder and can be air dried, if necessary. Unique or unusual uniform requirements will be discussed prior to deployment. You should bring work and off duty clothing, but off-duty clothing should not be taken at the expense of duty attire. Weight and the number of pieces of luggage should be considered. Individuals must be able to carry their own luggage. Plan to travel comfortably but efficiently. Taxis and buses may not be available.   IRCT personnel will make every effort to help with arrival and departure, but deployed employees are responsible for their personal needs.

In packing for deployment, you should strive to include items that will enable you to be both effective with minimal outside support and resilient in the face of unfamiliar settings and unusual stressors. It is a good idea to develop a personalized packing list well in advance of notification of deployment, Questions about packing or other elements of pre-deployment preparation can be directed to the Regional Emergency Management Specialist for your Region or to OHSEPR (at hswatchofficer@acf.hhs.gov).

Appendix A: FEMA Joint Field Office Organization, Individual Assistance Branch.

Organization: Operations Section- Individual Assistance Branch
Position: Human Services Group Supervisor

Joint Field Office (JFO) Structure

FCO / Deputy FCO

External Affairs Officer
Assistant External Affairs Officers
Joint Information Center
Congressional Affairs
Community Relations
State, Local, Territorial, & Tribal Affairs
Planning & Products

Chief of Staff
FCO Exec. Specialist
Legal Advisor
Equal Rights Specialist
Lead security Specialist

Safety Officer

| Operations Section Chief | Planning Section Chief | Logistics Section Chief | Finance/Admin Section Chief |

Operations Section Chief

Individual Assistance Branch Director

IA Information Management Group Supervisor

| Housing Group Supervisor | Disaster Recovery Center Group Supervisor | Voluntary Agency Group Supervisor | Mass Care Group Supervisor | IA TAC Management Group Supervisor | Human Services Group Supervisor |

CC/DUA/DLS Specialist

Joint Field Office Hierarchy Structure 1.

Appendix B: HHS Human Services Assessment and Response Checklist.

HHS HUMAN SERVICES ASSESSMENT & RESPONSE CHECKLIST.
For use by deployed personnel at IRCT, RRCC, JFO, EOC.

ASSESSMENT OF HUMAN SERVICES INFRASTRUCTURE.

How are the following programs, grantees, and organizations affected and what unmet needs are anticipated?
- ❍ Are staff OK?
- ❍ Are facilities affected?
- ❍ Are clients OK? How many clients are affected?
- ❍ Is grantee/provider able to continue services?
- ❍ If not, is there a COOP plan activated with alternate location or alternate service provider?
- ❍ Can grantee/provider communicate with clients?
- ❍ What urgent needs do clients have? (shelter, food, etc.)
- ❍ What other assistance does grantee/provider need?

☐ **State offices**
- ❍ Child welfare/foster care
- ❍ Child support enforcement
- ❍ Child care
- ❍ Economic assistance (TANF)
- ❍ Aging & Disability
- ❍ Public health & mental health

☐ **Tribal organizations**
- ❍ Contact Indian Health Service (IHS)-area director – or Emergency Manager designee
- ❍ Contact area Indian Health Board
- ❍ IGA or ACF RA contact tribal leaders
- ❍ Contact Tribal Head Start

☐ **ACF Regional grantees**
- ❍ Head Start
- ❍ Runaway & Homeless youth
- ❍ Faith-based & community initiatives
- ❍ Healthy marriage

☐ **ACF Central Office grantees**
- ❍ OCS: CSBG, JOLI, SSBG, LIHEAP
- ❍ ADD: DDCs, P&A, Family Support 360
- ❍ ANA

- ❍ Tribal and Migrant Head Start
- ❍ ORR: DUCs/URMs (Division of Unaccompanied Children's Services and Unaccompanied Refugee Minors)

☐ **City/county offices**
- ❍ Human services
- ❍ Aging & disability
- ❍ Public health and mental health
- ❍ Child care

☐ **Major human service providers**
- ❍ AAAs, senior centers, & contractors
- ❍ Immigrant/refugee service agencies
- ❍ Community Action Agencies
- ❍ 211
- ❍ Voluntary Organizations Active in Disasters (VOADS)

☐ **How are special populations affected and what unmet needs are anticipated?**
- ❍ Home-bound elderly and disabled
- ❍ Institutionalized populations
  - ◆ Nursing homes/SNFs*
  - ◆ Hospitals*
  - ◆ Dialysis centers*
  - ◆ Developmentally disabled facilities
  - ◆ Residential mental health/substance abuse facilities
  - ◆ Juvenile detention facilities
  - *In coordination with ESF-8*
- ❍ Independent living special populations
  - ◆ Assisted living facilities
  - ◆ Retirement homes
  - ◆ Adult foster care
  - ◆ Home care providers
  - ◆ Homeless shelters
  - ◆ Domestic violence shelters
  - ◆ Low-income housing units
  - ◆ Senior housing units
- ❍ Children
- ❍ Limited English populations
- ❍ Is TTY operational? Other modes of communication?
- ❍ Is there a special needs registry of some kind?

☐ **Are other key HHS providers affected?**
- ❍ HRSA clinics

☐ **Are there power outages?**
☐ **Are schools closed?**
☐ **Are businesses closed? (food, cash, gas, critical medicines and supplies).**
☐ **Are there evacuation issues?**

- [ ] **How many people have been displaced and to where?**
- [ ] **How many injuries and fatalities? (and a process for sharing those numbers).**
- [ ] **Are there transportation issues?**
- [ ] **Are there housing issues?**

HUMAN SERVICES RESPONSE.

What actions are needed and what actions are the state, HHS and FEMA undertaking to respond?

ESF-6 Human Services Issues
- [ ] **Status of shelters**
  - ○ Where are the shelters?
  - ○ How many in the shelters?
  - ○ Is assessment tool being used?
  - ○ Where are special medical needs population diverted to?
  - ○ What special needs can be accommodated at the shelter?
  - ○ Protocols for unaccompanied children
  - ○ Protocols for communication-challenged, LEP, etc.
  - ○ Protocols for sexual predators
  - ○ Protocols for service animals

- [ ] **Are NEFRLS and NECLC activated?**
  (Nat'l Emergency Family Registry and Locator System/
  Nat'l Emergency Child Locator Center) or other child/family reunification systems

- [ ] **Is Crisis Counseling anticipated?**
- [ ] **Is Direct Federal Case Management anticipated?**
- [ ] **Are VOADS/VOLADS available? How can they help?**
- [ ] **Are DRCs or other assistance centers set up?**
- [ ] **Are there civil rights issues?**
- [ ] **What MA's may be anticipated?**

Overlap with ESF-8 Issues
- [ ] Evacuations of special needs populations
- [ ] Federal Medical Station (FMS) needs
- [ ] Mental health needs
- [ ] Interpreter services/translator needs for medical personnel
- [ ] Needs for special pharmaceuticals and availability of instructions in different languages

Appendix C: HHS Human Services Deployed Personnel Checklist.

HHS HUMAN SERVICES DEPLOYED PERSONNELCHECKLIST.

IRCT Human Services Branch Director.

Notification and Setup
- ☐ Check in with IRCT for rostering, briefing, reporting structures and instructions.
- ☐ Assess electronic/communications capabilities.
- ☐ Determine WebEOC connectivity.
- ☐ Notify ACF team (OHSEPR, HS Watch Officer, and HS LNOs) of arrival.
- ☐ Notify State contact(s) of arrival.
- ☐ Notify RD and other Regional staff as needed.
- ☐ Determine timing/tempo of conference calls, briefings, and meetings.
- ☐ Request relevant maps and demographic info from IRCT, SOC, JFO or other sources.
- ☐ Check ARFs, MAs and participate in IAP development.

Reporting and Communication
- ☐ Reports to IRCT Team Lead and ACF RA if different
- ☐ IRCT Human Services Operations Branch Director (or designee) sends situation report updates to:
  - ○ IRCT Planning and Operations
  - ○ SOC HS Watch Officer
  - ○ OHSEPR
  - ○ ACF RA
  - ○ Regional Director
  - ○ IRCT PIO
  - ○ HS LNOs at JFO, EOC, etc.
- ○ HS Workgroup

Joint Field Office/Regional Response Coordinator Center/Emergency Operations Human Services Liaison Officer.
- ☐ Check in with IRCT Admin/Finance for rostering and instructions.
- ☐ Notify IRCT Human Services Operations Branch Director of arrival and receive briefing.
- ☐ Check in with appropriate ESF-6 lead.
- ☐ Check in laptop and any other IT ACF equipment, if required.
- ☐ Assess electronic/communications capabilities; determine if other equipment is available.
- ☐ Determine WebEOC connectivity.
- ☐ Notify ACF team (OHSEPR, HS Watch Officer, and HS LNOs) of arrival.
- ☐ Notify State contact(s) of arrival.
- ☐ Notify RD and other Regional staff as needed.
- ☐ Notify ESF-8 at JFO/RRCC/EOC staff of arrival.
- ☐ Determine timing/tempo of ESF-6 conference calls, briefings, and other meetings

Reporting and Communication

☐ ESF-6 LNO reports to IRCT Human Services Operations Branch Director and Human Services Group Supervisor.

☐ The ACF/OHSEPR daily Situation Report (Sit Rep) template – Appendix J

☐ ESF-6 LNO sends information and updates to:
- ❍ IRCT Human Services Operations Branch Director
- ❍ SOC HS Watch Officer
- ❍ OHSEPR
- ❍ HS LNOs at JFO, EOC, etc.
- ❍ WebEOC
- ❍ ESF-6 IA Coordinator
- ❍ ESF-6 Human Services Lead
- ❍ Other ESF-6 representatives, as appropriate

ESF-8 LNO at JFO

Appendix D: Time Sheet Log.
Administration for Children and Families
REQUEST TO EARN CREDIT HOURS, COMPENSATORY TIME, COMPENSATORY TRAVEL TIME AND OVERTIME REPORT
OF APPROVED CREDIT HOURS, COMPENSATORY TIME, COMPENSATORY TRAVEL TIME AND OVERTIME

REQUEST TO EARN CREDIT HOURS, COMPENSATORY TIME, COMPENSATORY TRAVEL TIME AND OVERTIME

Employee Name:

Reason for Request:

I am requesting approval to earn no more than [ ] **credit hours(CR),** [ ] **compensatory time (C)**

or [ ] **overtime (O) for pay period** [ ]

Employee Signature   **Date**

Approving Official   **Date**

Proposed number of credit, comp or overtime hours should be approved by your supervisor in advance. Actual hours worked should be recorded on the same form and submitted to your supervisor for approval before the end of pay period or no later than 10 days business after the return from a review.

REPORT OF ACTUAL HOURS WORKED – APPROVED CREDIT HOURS, COMPENSATORY TIME, COMPENSATORY TRAVEL TIME AND OVERTIME

WEEK 1	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
Date							
Credit From/To							
Comp From/To							
Travel Comp From/To							
OT From/To							

TOTALS   CREDIT [ ]   **COMP** [ ]   **COMP TRAVEL** [ ]   **TIME OVERTIME** [ ]

WEEK 2	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
Date							
Credit From/To							
Comp From/To							
Travel Comp From/To							
OT From/To							

TOTALS   CREDIT [ ]   **COMP** [ ]   **COMP TRAVEL** [ ]   **TIME OVERTIME** [ ]

Employee Signature   **Date**

Approving Official   **Date**

NOTE: Employees can earn no more than 3.5 credit hours per day. Employees must earn credit hours within flexible time bands. Employees on approved compressed work schedules (5 4/9 or 4-10) are not permitted to earn credit hours. Full time employees can forward 24 credit hours from one pay period to the next. Part time employees cannot carryover more than one fourth the equivalent of their hours work as credit hours. Credit hours must be earned before they are used. Consult ACF Administrative delegation matrix for information on FLSA as it relates to overtime and compensatory time. ITAS leave request must be submitted to document use of credit hours and compensatory time. Compensatory time must be used within 26 pay periods or it converts to overtime. Supervisory approval to earn additional hours must be obtained in advanced. Approval will be based on employee workload considerations and agency workload priorities   A**CF-A-16(Rev. ACF-A-2 5/11/07)**

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Appendix E: Guide for Development of a Family Care Plan for ACF Deployed Personnel.

This Guide can be used to document family circumstances. The completed Guide can be left with family members for information about your family and household during deployment.

MEDICAL & HEALTH

1. Where is the health records kept for each member of the family?
2. Who is contacted if medical assistance is needed?
3. Where are your health insurance policies?
4. Do your family members know how to file health insurance claims?
5. Does your caregiver for children or other family members know whom to contact in a medical or other emergency?
6. Do you and all eligible family members have current health insurance (FEHB) cards?
7. Are you covered under an HMO? If so, are you being deployed outside of your HMO service area? Did you contact your HMO for prior plan approval for health care services out of your service area?

FINANCIAL

1. Will there be any disruption of income during your absence?
2. Do you need a bank allotment or direct deposit to provide for all the necessities to maintain our household?
3. Does the family have a safety deposit box and where is the key?
4. Are all the credit card numbers written down and in a safe place? What are the credit card company numbers and addresses in case of loss?
5. Is your spouse/partner prepared to take complete control of the family's bank accounts and financial requirements?
6. What payments must be made, when, and to whom? Consider the following:
    a. Mortgage/rent
    b. Telephone
    c. Water and sewage
    d. Electricity
    e. Trash
    f. Insurance
    g. Taxes
    h. Gas (home heating/cooking)
    i. Credit cards
    j. Auto payment
    k. Childcare
    l. Investments
    m. Other debts

HOME SAFETY

1. Does your spouse/partner know where and how to use the following?
   a. The electrical control box (fuse or breaker box)?
   b. The water control valve for shutting off the water?
   c. The gas control valve for shutting off the gas?
   d. The name and telephone numbers of someone to call in case repairs are needed (including utility companies)?
   e. Intruder alarm/detection systems?
   f. Location of service contracts?
2. Does the family have a duplicate set of house keys?
3. Are there special requirements at home such as seriously ill relatives, pending personal business, etc., that needs your attention?

TRANSPORTATION/AUTOMOBILE

1. Is your spouse/partner familiar with the maintenance and other responsibilities of the automobile?
2. Where is the vehicle title?
3. Are the registration and the insurance card in the vehicle?
4. Is a duplicate set of keys available and where?
5. Who can be called for emergency transportation?
6. Do you have a towing or emergency road service? If so, is the number available to all drivers in your family?

LEGAL/ADMINISTRATIVE ISSUES

1. Does your spouse/partner have a Power of Attorney? Is it "full" or "limited?" (Generally a "limited" power of attorney is recommended.) (I would delete that last comment, since we don't want to give legal advice)
2. Does the family have copies of all birth certificates?
3. Does your spouse/partner know your social security number?
4. Where are the insurance policies and beneficiary forms kept?
5. Are family members aware of government benefits/entitlements?
6. Are all-important papers safeguarded? Does your spouse/family know where they are and have access?
7. Do you and your spouse/partner have updated wills, including Living Wills?
8. Have you provided your child's/children's caregiver(s) with a health care power of attorney to authorize medical treatment of your child in your absence or if you cannot be contacted? Do the caregiver(s) have a list of your child's/children's health issues, prescriptions, etc.?
9. Checklist of Important Documents that should be available during your absence:

   a. Marriage Certificate
   b. Divorce decrees
   c. Automobile/tag registrations

d. Powers of Attorney
e. Insurance policies (auto, home, health, life)
f. Adoption papers
g. Letters of naturalization
h. Passports
i. Bank Books
j. Copies of mortgage/lease
k. Stocks, bonds, and other securities
l. Wills, including living will
m. Phone and contact lists, including out-of-area contact

BENEFICIARIES

1. Are your beneficiary forms current? (SF-2823, Life Insurance (FEGLI); SF-2808, Retirement
2. (CSRS); SF-3102, Retirement (FERS); SF-1152, Unpaid Compensation; TSP-3, Thrift Saving Plan)
3. Do your family members know where copies of your beneficiary forms are?
4. Do your family members know how to contact your local Human Resources office for assistance?

EMERGENCY NOTIFICATION

The families of deployed HHS employees should always know emergency telephone numbers of the ambulance, police, fire department, poison control center, and family doctor/ health professional. They should also know your specific work organization, your supervisor's telephone number, and an emergency contact number where you may be reached during your deployment.

Appendix F: HHS Human Services Pre-Deployment Checklist.

<table>
<tr><td colspan="2">HHS HUMAN SERVICES PRE-DEPLOYMENT CHECKLIST.</td></tr>
</table>

Work Preparation (To Do).

☐ Consult with manager and/or staff to discuss essential work items needing attention while deployed.
☐ Arrange back-up for essential assignments, presentations, meetings.
☐ Check out laptop, Go Phone, pre-paid cards, satellite phone, GPS as needed (make sure you know log on passwords).
☐ Charge batteries for cell phones, Blackberries, etc.; pack extra batteries.
☐ Turn on out-of-office assistant/change voicemail greeting.
☐ Monitor e-mails for situational updates, information on travel, reporting location, POC, etc.
Obtain name and contact information of IRCT Human Services Operations Branch Chief, ESF-6 LNO, and IRCT
☐ Monitor news sources.
☐ Order 30 day refills of personal prescriptions; pack sufficient cash (get travel advance if needed), credit cards as ATMs may not be working.
☐ Pay personal bills due within the next three weeks.
☐ Arrange for childcare, pet sitters, house sitters, etc.
☐ Notify essential contacts of your deployment.
☐ Prescription, over the counter medications (pain relief, antacids); medical alert, allergy info.

Work Preparation (To Pack).

☐ Team Leader.
☐ Essential deployment related documents (in addition to flash drive, , WebEOC survival guide, contact lists (office, Regional Team, members, OHSEPR), essential phone numbers (Omega, GovTrip), etc., may be useful).
☐ Laptop, Go Phone and prepaid cards, satellite phone, GPS as needed, Blackberry (don't forget chargers),
☐ Essential office supplies (paper, pens, highlighter, FedEx account number and mailers, file folders). It may take a couple of days for the JFO/EOC/RRCC to be set up.
☐ HHS Identification, valid driver's license, Government travel card.
☐ Flashlight/batteries (can be found in emergency kits).
☐ Maps of area deploying to.
☐ Business cards.
☐ Contact lenses and supplies, eye glasses, sunglasses.
☐ Sunscreen, insect repellent, antibacterial gel or wipes, first aid kit, toiletries.
☐ Appropriate (comfortable) clothing and shoes. Keep essentials in a carryon bag (2 days worth of clothes, cosmetics) in case your luggage gets lost. Include seasonal attire (rain gear, etc.) and swimsuit (in case there are public showers.

Travel and Arrival.

☐ Monitor e-mail for information on flights, address of JFO/EOC/RRCC, phone contacts, POC, etc.
☐ Be prepared to deploy knowing only your flight information (pack travel orders).
☐ You may experience travel delays and changes. Work with travel coordinator. Keep the IRCT Human Services

Operations Branch Chief/ESF-6 LNO informed of delays and changes.

- [ ] Remember, you are traveling to a disaster area; hundreds of other responders are trying to get to the same place.
- [ ] When you reach your final destination, buy water and snacks.
- [ ] **Carry your Federal Identification with you at all times.** It will provide you with access to JFO/RRCC/EOC.
- [ ] Notify IRCT Human Services Operations Branch Chief/ESF-6 LNO, IRCT leader, other essential contacts of your arrival; determine whether to report to hotel or JFO/EOC/RRCC.
- [ ] Upon arrival at JFO/EOC/RRCC, check-in with FEMA or State safety and security. (Don't forget to check out when demobilized.)
- [ ] Check in laptop and any other IT ACF equipment, if required.

<div align="center">Other Things to Consider.</div>

- Consult with your healthcare provider about immunizations and boosters including tetanus, Hepatitis A and B, and Influenza.
- The JFO/EOC/RRCC may not have eating facilities; your shifts may get you to the hotel after eating establishments are closed. Pack meals ready to eat and/or nutrition bars, nuts, dried fruit, and other snacks/substitute meals.

 If you are deploying to an area where there are adverse conditions, you may need to pack additional gear and safety equipment. Consult with the IRCT Human Services Operations Branch Chief, ESF-6 LNO, or your Regional Emergency Management Specialist for additional information. See FEMA's *Media Access Suggested Gear List* at http://www.fema.gov/media/resources/gear_list.shtm

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Appendix G: Disaster Volunteer's Self-Assessment Tool
For HHS Human Services Staff Responding to Emergencies.
For Personal Use Only

This checklist is a self-assessment tool to help you determine if you are ready and able to deploy.

STRESSFUL WORKING ENVIRONMENTS	WHAT IS MY COMFORT LEVEL? COMMENTS.
1. I can *work* in an environment that is noisy and crowded and may have unusual odors or smells.	
2. I can sleep in an environment that may be noisy and uncomfortable. *(Note: volunteers are generally not expected to respond in austere conditions.)*	
3. I can work in an office setting where I don't have all the tools I am used to (phones, internet, office supplies, and personal desk space).	
4. I am willing to bring my own personal equipment when I deploy (e.g., cell phone, laptop). (*Note: no one is expected or required to bring personal devices, but you may find it helpful if equipment is not available).*	
5. I can work 12 hours or more a day without regular breaks.	
6. I can handle requests to do things outside of my normal job description (clerical work, note-taking, research, report-writing, etc.).	
7. I can work in an environment where the procedures change often, there is little structure, no set routine, and priorities change regularly.	
8. I can adapt to varying workloads, including short deadlines or long periods of waiting for information.	
9. I am comfortable working on tasks without a lot of specific instruction.	
10. I can live in an environment without access to many of the amenities I am used to (easy access to coffee, variety of foods, groceries, etc.).	
11. I can work in an austere environment without heat or air conditioning or comfortable chairs. I can carry equipment and supplies, and I can sleep on cots and in unisex tents. (*Note: Volunteers will not be sent into danger zones or knowingly exposed to harm.)*	
12. Typically, volunteers do not provide direct services or immediate assistance to people who need help; I am comfortable with work that may not show concrete results.	

	COMFORT LEVEL/COMMENTS
13. I can work with people who are very stressed and may be expressing extreme reactions such as screaming, crying, anger, frustration or withdrawal.	
14. I can work in an environment that may provoke different emotions in me, such as frustration at not being able to help more, guilt, or fatigue.	
PERSONAL HEALTH	**COMFORT LEVEL/COMMENTS**
1. I don't have any known health conditions or treatments that would preclude me from working in difficult environments or conditions.	
2. I can get enough medications to last me at least three weeks.	
3. I don't have any dietary restrictions that would preclude me from working where I may not have access to special foods.	
4. Sometimes it is hard for people who have experienced a recent emotional event such as death or divorce to be around others who are experiencing stress. Are there any significant emotional losses, changes or challenges recently that might interfere with my ability to work in a stressful environment or with people experiencing grief and loss?	
5. I feel I am physically and mentally able to perform duties that may require good physical stamina including standing or walking for long periods of time, 12 hour days, and weekend work	
PERSONAL AND FAMILY PREPAREDNESS	**COMFORT LEVEL/COMMENTS**
1. I feel comfortable leaving my family and/or loved ones for 2-3 weeks.	
2. I can quickly make arrangements for care for my pet(s).	
3. I don't have any family, community or other obligations that preclude me from being unavailable for 2-3 weeks OR I have others who can undertake them in my absence.	
4. I have a strong support system that can help me while I'm gone and when I return, including emotional support.	
5. My supervisor is fully supportive of my decision to volunteer and will support me if I deploy.	

6. I can leave my job for 2-3 weeks and not worry that things won't get done.	
7. I can leave my job for 2-3 weeks and my coworkers will support me.	
8. If I have any spiritual needs that could affect my ability to respond (such as dietary restrictions, service attendance, lack of days off, sharing my faith, etc.), I know what they are and how to address them.	
9. Are there other responsibilities I have that would be affected if I deploy?	
OTHER THINGS TO THINK ABOUT	
1. Why do I want to volunteer?	
2. What skills and abilities do I bring to this job?	
3. What concerns me most about deploying in a crisis?	
4. What else do I need to do to prepare?	

Appendix H: Guide for Employee Overtime Compensation On Deployment.

Background

This document addresses issues related to deployment and compensation. In general, most ACF deployments last for two week periods to provide human services support during disasters, public health or special events. Because of the nature of emergency preparedness and response missions, deployed staff generally work 12 hour shifts seven days a week. Because deployed staff generally work more than eight hours each day or more than 40 hours a week, this document covers such matters as compensation for overtime, time and attendance reporting while deployed. The Guide also includes other important information about procedures for overtime approval.

ACF employees can be deployed to support a Stafford Act event following receipt of an approved Mission Assignment from FEMA. They may also be deployed to non-Stafford Act events by direction of the Secretary of the Department of Health and Human Services. When deployed to support a Stafford Act event, a Mission Assignment is the funding mechanism from FEMA is used to cover deployment costs including overtime. Overtime is compensated in Stafford Act events with Premium Pay rather than compensatory time-off. When ACF employees are deployed to support non-Stafford Act events, compensation for overtime is generally awarded through compensatory time-off rather than Premium Pay.

While there are various types of Premium pay, Premium Pay for deployed staff is generally limited to Overtime and Holiday Pay. Other types of Premium Pay such as hazardous duty, night differential, and Sunday pay are almost never authorized.

Employees will always be provided with information about the type of compensation they will receive for overtime prior to deployment.

Overtime Compensation on Deployment from the Human Resources Manual Instruction 550 – 1 Premium Pay.

Subject: 550 – 1 – 00   Premium Pay: Purpose
Subject: 550 – 1 – 10   Premium Pay: References
Subject: 550 – 1 – 20   Premium Pay: Scope
Subject: 550 – 1 – 30   Premium Pay: General Definitions
Subject: 550 – 1 – 40   Premium Pay: Responsibilities
Subject: 550 – 1 – 50   Premium Pay: Overtime, Compensatory Time Off and Holiday Pay
Subject: 550 – 1 – 60   Premium Pay: Pay Limitation
Subject: 550 – 1 – 70   Premium Pay: Documentation and Accountability

550 – 1 – 00 Purpose

The purpose of this document is to provide general information about premium pay policies and issues pertaining to Overtime, Compensatory Time-Off, and Holiday Pay when ACF employees are deployed during Stafford Act and non-Stafford Act events. This Guided is based on Department of Health and Human Services Instruction 550-1, Premium Pay, dated January 26, 2009.

550 – 1 – 10 References

5 USC, Chapter 55, Subchapter IV (Premium Pay)
5 USC, Chapter 61, Subchapter II (Flexible and Compressed Work Schedules)
5 CFR, Part 550 [Pay Administration (General) Subpart A – Premium Pay]
5 CFR, Part 551 (Pay Administration under the Fair Labor Standards Act)
5 CFR, Part 610 (Hours of Duty)
HHS Guide to Timekeeping
    A. HHS collective bargaining agreements & DHHS HUMAN RESOURCES MANUAL Instruction 550-1: Premium Pay Issuance Date: 1/26/2009

550 – 1 – 20 Scope

Coverage: This guidance covers ACF employees under 5 USC, Section 5541(2) including General Schedule (GS) employees.
A. Exclusions: This guidance does not apply to Commission Corps Officers assigned to ACF; they remain under PHS compensation rules. Policies governing compensatory time for religious observances are also excluded from this guidance.

550 – 1 – 30 General Definitions

Administrative workweek. Any period of seven consecutive days (most typically Sunday through Saturday) designated in advance by the head of the OPDIV.

Biweekly Pay Limitation. A cap on basic and premium pay during a pay period limiting pay to the greater of the biweekly rate payable for (1) GS-15, step 10 (including any applicable locality payment or special rate supplement), or (2) the rate payable for level V of the Executive Schedule; whichever is greater.

    A. Compensatory Time Off. See Section 550-1-50.

Holiday Premium Pay. See Section 550-1-50.

Overtime. See Section 550-1-50.

Premium Pay. The dollar value of earned hours and additional pay authorized by the relevant statute and regulation for overtime, night, Sunday or holiday work; or for standby duty, administratively uncontrollable overtime work, or availability duty. This excludes overtime pay paid to Fair Labor Standards Act (FLSA) non-exempt employees and compensatory time off earned in lieu of such overtime pay.

Regular overtime work. Overtime work that is part of an employee's regularly scheduled administrative workweek.

Regularly scheduled administrative workweek. The period within an administrative workweek during which the employee (including full-time and part-time) is regularly scheduled to work.

Regularly scheduled work. Work that is scheduled *in advance* of an administrative workweek for purposes of establishing workweeks. The 40 hour work schedule and flexible or compressed work schedules are typical pre-scheduled work tours of duty. All work performed by an employee within the pre-scheduled work tour of duty is considered regularly scheduled work for premium pay and hours of duty purposes.

B. Tour of Duty. The hours of a day (a daily tour of duty) and the days of an administrative workweek (a weekly tour of duty) that constitute an employee's regularly scheduled administrative workweek.

C. Deployment Tour of Duty. ACF personnel deployed to a disaster site will generally be expected to work a 12-hour tour of duty each day unless directed otherwise by the employee's Field Supervisor/Team Leader. When 12 hour Tour of Duty shifts are required, employees are compensated for 3.5 hours of overtime (4.0 hours less 30 minutes for lunch) during each 12 hour tour of duty. Overtime compensation for approved 12 hour Tour of Duty shifts is provided without additional employee or deployment supervisor requests unless otherwise stated in writing. Time worked beyond the 12 hour Deployment Tour of Duty always requires advance approval by the Field Supervisor/Team Leader.

550-1-40 Responsibilities

ACF personnel when deployed do so under the Incident Command System (ICS), a standardized emergency management approach which includes an integrated

organizational structure and a defined chain of command. While deployed, ACF personnel function as a member of an ICS team and fill positions having clear roles and responsibilities. Until deactivated, ACF personnel follow designated reporting relationships, regardless of their ACF position and ACF chain-of-command. Deployed personnel can be assigned to various incident locations or facilities, such as an Incident Response Coordination Team, FEMA Joint Field Office, Alternate Field Office or a Human Services Team. Deployed personnel are expected to work shifts as directed by the Incident Commander and their Field Supervisor/Team Leader.

Deployment overtime requires authorization as well as documentation since expenditures must stay within established budgetary limits. A process for managing overtime has been established including required approvals from ACF's Director, Office of Human Services Emergency Preparedness and Response (OHSEPR) for each instance of overtime worked beyond the 12 hour Deployment Tour of Duty. Key roles and responsibilities for managing overtime and assuring that deployed personnel are compensated for authorized overtime are spelled out in this manual.

A. Director Office of Human Services Emergency Preparedness and Response (or designee) is responsible for:

1. Assisting with determinations regarding the applicability and qualifications of specific situations for overtime and premium pay eligibility;
2. Assuring that deployed personnel are paid the correct rate of premium pay;
3. Reviewing overtime requests in advance and approving or denying requests for overtime beyond the Deployment Tour of Duty within 12 hours of receipt.;
4. Reviewing overtime requests not submitted in advance of the overtime work when emergency circumstances precluded advance notice or when employees were ordered to work overtime beyond the Deployment Tour of Duty without prior approval. In such cases documentation must be provided to the OHSEPR Director or designee the next workday;
5. Establishing a process to ensure that all requirements for authorizing or denying overtime and premium pay are properly recorded, documented; and, as appropriate, approved or denied within 12 hours of receipt. and,
6. Maintaining overtime and premium pay documentation as well as time and attendance reports for six years.

B. ACF deployed personnel are responsible for:

1. Complying with overtime documentation and supervisor's requirements;
2. Submitting overtime requests in advance and in writing to the OHSEPR Director or designee for all overtime that exceeds the daily Deployment Tour of Duty;

3. Submitting overtime requests for hours beyond the Deployment Tour of Duty on the next workday that were not requested in advance or in writing to the OHSEPR Director or designee or when ordered by the deployment supervisor to work overtime beyond the Deployment Tour of Duty without prior approval;

4. Recording, documenting, and maintaining a copy of their own time and attendance records from activation until deactivation, including all overtime and premium pay authorizations and requests whether approved or denied;

5. Validating and signing their own time and attendance records; and

6. Providing information as requested by the OHSEPR Director or designee as necessary to help determine whether an overtime request should be approved.

C. Deployment Field Supervisor/Team Leader is responsible for:

1. Supervising assigned personnel and directing their work including the employee's schedule and Unit log;

2. Determining when a situation is an emergency which poses a direct threat to life or property;

3. Determining when overtime beyond the Deployment Tour of Duty is required;
   a. Ensuring authorization from OHSEPR, the ACF LNO or the FEMA JFO is obtained in advance and in writing for all overtime that will exceed the Deployment Tour of Duty;
   b. Ensuring that written authorization from the OHSEPR the ACF LNO or the FEMA JFO is obtained on the next workday for overtime that occurred during emergency circumstances that precluded requesting overtime in advance or when ordered by the deployment Field Supervisor/Team Leader to work overtime without prior approval in excess of the Deployment Tour of Duty;

4. Documenting requests for overtime beyond the Deployment Tour of Duty;

5. Maintaining a team roster, schedule and Unit log; and,

6 Validating and signing employees' time and attendance forms.

550 – 1 – 50   Overtime, Compensatory Time Off and Holiday Pay

A. Overtime. Overtime is work approved or officially ordered, and performed by an employee in excess of 8 hours a day or in excess of 40 hours in an administrative workweek

Overtime Pay. The overtime rate of Premium Pay for every employee is specified in Block 6, "Basic/OT Rate" in the Civilian Leave and Earnings Statement.

Employees may not be compensated for overtime unless the work is approved and authorized in advance except in the case of an emergency. In

emergencies, employees may be ordered to work overtime without prior approval. When overtime beyond the Deployment Tour of Duty is required, the overtime approval must be submitted to the OHSEPR Watch Officer within 48 hours at hswatchofficer@acf.hhs.gov.

B. Compensatory Time Off is time off with pay in lieu of Premium Pay for irregular or occasional overtime work.

1. Except for compensatory time off for religious observances or compensatory time off related to travel, compensatory time may only be substituted for pay for irregular or occasional overtime, i.e., overtime work that is not part of an employee's regularly scheduled administrative workweek.

2. FLSA-exempt employees whose basic rate of pay exceeds GS-10, step 10 may be compensated for irregular or occasional overtime with an equivalent amount of compensatory time off instead of overtime pay if the employee's deployment is not under a Mission Assignment and supported by Stafford Act funds.

3. An employee must use accrued Compensatory Time Off by the end of the 26th pay period after the pay period during which it was earned. If accrued Compensatory Time Off is not used by an employee within 26 pay periods or if the employee transfers to another agency or separates from Federal service before the expiration of the 26 pay period time limits, the employee must be paid for the earned compensatory time off at the overtime rate in effect when earned.

4. An employee must be paid for Compensatory Time Off not used by the end of the 26th pay period after the pay period during which it was earned at the overtime rate in effect when earned if the employee is unable to use the compensatory time off because of placement in a leave without pay status (LWOP). The LWOP status may be a result of: 1) The performance of duties in a uniformed service; or 2) An on-the-job injury with entitlement to injury compensation.

5. Compensatory time is subject to the same maximum pay limitation as is overtime.

B.   Holiday Premium Pay. Holiday Pay is pay for work performed on a holiday, during which hours correspond to regularly scheduled hours of duty.

1. Double time is the basic pay normally received for the holiday. Overtime work performed in excess of eight hours on a holiday is paid on the basis of time and

one-half for full-time employees in accordance with 5 U.S.C. § 5542(a). An employee who is required to report for work on a holiday is paid for at least two hours, whether or not work is actually performed.

2. Employees on flexible schedules may not receive holiday pay for more than eight hours.

3. All holiday work must be approved in advance and in writing. OHSEPR, the ACF LNO or the FEMA JFO is required to ensure that holiday premium pay is properly approved, recorded, and documented.

C. Compensatory Time for Travel may be authorized in conjunction with travel during deployments.

1. Time in a travel status includes time an employee actually spends traveling between the official duty station and a temporary duty station or between two temporary duty stations and the "usual" waiting time that precedes or interrupts such travel. There may be other circumstances in which travel time is compensable which should be examined and approved on a case basis by the appropriate OPDIV or designee.

2. Travel between home and a temporary duty station outside the limits of the employee's official duty station is creditable as time in a travel status. However, the normal home-to-work or work-to-home commuting time must be deducted from the creditable travel hours.

3. In situations where employees are permitted to use an alternate mode of transportation other than the mode of transportation offered, or travel at a time or route other that the time or route selected by their organization, the lesser of the estimated time in a travel status or the actual time in a travel status must be credited.

4. For employees who are on multiple-day travel assignments who choose not to use temporary lodging at the temporary duty station and return home at night or on a weekend, only the travel from home to the temporary duty station on the first day and travel from the temporary duty station to home on the last day is qualifying as time in a travel status subject to the deduction of normal commuting time, unless an exception is approved by an authorized designated official. However, employees may receive credit for travel to and from home on other days if the authorizing official in his or her discretion, determines that there is a net savings to the Government from reduced lodging costs considering the value of lost labor time attributable to Compensatory Time for Travel.

5. Travel time between home and a transportation terminal (e.g., airport or train station, etc.) outside the limits of an employee's official duty station and outside his/her regular working hours is creditable as time in a travel status subject to a deduction for the time an employee would have spent in a normal home-to-work or work-to-home commute.

The following scenarios are not creditable as time in a travel status:

a) Time spent at a temporary duty station between arrival and departure; and

b) "Unusual" or extended waiting time between actual periods of travel when an employee is free to rest, sleep, eat, or otherwise use the time for his or her own purposes.

550 – 1 – 60   Pay Limitations

A. Biweekly pay. Biweekly pay is limited by the amount of premium pay that can be paid during a biweekly pay period. Premium pay cannot be paid to General Schedule employees that would cause an employee's basic pay, overtime pay, the dollar value of compensatory time off, holiday or premium pay to exceed the greater of the biweekly rate for:

1. GS-15, step 10 (including any applicable special salary rate or locality rate of pay); or

2. Level V of the Executive Schedule.

B. Emergency situations. The limitation for a pay period may be exceeded in emergency situations, which pose a direct threat to life or property. The Field Supervisor/Team Leader, ACF LNO or OHSEPR LNO has the authority to make emergency determinations in the field. Even when an emergency determination is made, the annual maximum earnings limitation cannot exceed the greater of the annual rate (1) for a GS-15 (including any applicable locality payment or special rate supplement), or (2) for level V of the Executive Schedule in effect on the last day of the calendar year.

C. Compensatory time. The biweekly pay limitation also places a ceiling on compensatory time off. Compensatory time off is merely an alternative form of payment for overtime work. An employee may not exceed the biweekly pay limitation by choosing compensatory time off as a substitute for monetary overtime pay.

1. For FLSA-exempt employees, an employee's total biweekly pay (the basic pay plus premium pay, plus the compensatory hours earned, plus the compensatory hours balance already accrued which was carried over) cannot exceed the greater of the biweekly rate (1) for a GS15, step 10 (including any applicable locality payment or special rate supplement), or (2) for level V of the Executive Schedule.

2. At no time may the number of compensatory hours accumulate beyond the number that would allow the FLSA-exempt employee's biweekly pay to exceed GS-15, Step10 pay. For FLSA non-exempt employees, the dollar value of compensatory time off when it is liquidated, or for the purpose of applying pay limitations, is the amount of overtime pay the employee otherwise would have received for the hours of the pay period during which compensatory time off was earned by performing overtime work.

550 – 1 – 70   Documentation and Accountability

A. Documentation

1. The OHSEPR LNO, ACF LNO or the FEMA JFO is required to ensure that overtime compensation is properly approved, recorded, and documented.

2. Copies of all overtime compensation documents for deployed ACF employees must be submitted to OHSEPR Watch Officer at hswatchofficer@acf.hhs.gov

3. The Field Supervisor/Team Leader will justify requests for overtime beyond the Deployment Tour of Duty for overtime and request the overtime in advance and in writing. When employees are ordered to work overtime without prior approval, the deployment supervisor will describe the circumstances that necessitated the overtime work.

4. The Field Supervisor/Team Leader will document all determinations of emergency situations which pose a direct threat to life or property.

5. ACF deployed personnel must provide written time and attendance documentation using the ACF- A-16 form. It must be signed by the employee and the Field Supervisor/Team Leader daily and submitted to the ACF employee's timekeeper.

B. Time and Attendance Reporting

1. ACF deployed employees, document time and attendance using the ACF-A-16 form. Time and attendance will be recorded each day on the ACF-A-16 form and must be signed by the employee and the employee's Field Supervisor/Team Leader. ACF-A-16 forms are to be forwarded each day to the employee's home station timekeeper and to the OHSEPR Watch Officer hswatchofficer@acf.hhs.gov. (Under approved circumstances, forms may be forwarded to the OHSEPR Watch Officer weekly.)

Appendix I: Acronyms.

Acronym	Abbreviation for:
ADD	Administration on Development Disabilities
ACF	Administration for Children and Families
ACYF	Administration for Children, Youth and Families
AHRQ	Agency for Healthcare Research and Quality
ANA	Administration for Native Americans
AoA	Administration on Aging
ARC	American Red Cross
ASH	Assistant Secretary for Health
ASL	Assistant Secretary for Legislation
ASPA	Assistant Secretary for Public Affairs
ASPR	Assistant Secretary for Preparedness and Response
BPT	Be Prepared To
CBP	Customs and Border Protection
CDC	Centers for Disease Control and Prevention
CFBCI	Center for Faith Based and Community Initiatives
CMS	Centers for Medicare & Medicaid Services
CO	Central Office
COCA	Consent Order and Compliance Agreement
COP	Common Operating (Operational) Picture
DHS	Department of Homeland Security
DoD	Department of Defense
DOS	Department of State
DRC	Disaster Recovery Center
EMAC	Emergency Management Assistance Compact
EMG	Emergency Management Group
EMS	Emergency Medical System
EMTALA	Emergency Medical Treatment and Labor Act
ESAR-VHP	Emergency System for Advance Registration of Volunteer Health Professionals
ESF	Emergency Support Function
FCC	Federal Coordinating Center
	Federal Communications Commission
FDA	Food and Drug Administration
FEMA	Federal Emergency Management Agency
FMS	Federal Medical Station
FIRST	Federal Incident Response Team
HAN	Health Alert Network
HHS	Department of Health and Human Services
HIPAA	Health Insurance Portability and Accountability Act
HRSA	Health Resources and Services Administration
HSAS	Homeland Security Alert System
HSC	Homeland Security Council
HSIN	Homeland Security Information Network
HSPD	Homeland Security Presidential Directive
IAC	Interagency Advisory Council

Acronym	Abbreviation for:
ICE	Immigration and Customs Enforcement
ICS	Incident Command System
IGA	Office of Intergovernmental Affairs
IHS	Indian Health Service
INS	Immigration and Naturalization Service
IRCT	Incident Response Control Team
JFO	Joint Field Office
JIC	Joint Information Center
MOU	Memorandum of Understanding
MRC	Medical Reserve Corps
MTF	Mission Task Force
NDMS	National Disaster Medical System
NICCL	National Incident Communications Conference Line
NIH	National Institute of Health
NIMS	National Incident Management System
NOAA	National Oceanic and Atmospheric Administration
NRCC	National Response Coordination Center
NRF	National Response Framework
OCR	Office for Civil Rights
OCS	Office of Community Services
OD	Office on Disability
OEM	Office of Emergency Management
OFA	Office of Family Assistance
OGC	Office of the General Counsel
OGHA	Office of Global Health Affairs
OHS	Office of Head Start
OHSEPR	Office of Human Services Emergency Preparedness and Response
OMSPH	Office of Medicine, Science and Public Health
OPDIV	Operating Division
OSHA	Occupational Safety and Health Administration
PFO	Principal Federal Officer
PHS CC	Public Health Service Commissioned Corps
PPE	Personal Protective Equipment
RD	Regional Director
REC	Regional Emergency Coordinator
RHA	Regional Health Administrator
RNA	Rapid Needs Assessment
RO	Regional Office
RRCC	Regional Response Coordination Center
SAMHSA	Substance Abuse and Mental Health Services Administration
SCHIP	State Children's Health Insurance Program
SME	Subject Matter Expert
SOC	Secretary's Operations Center
STAFFDIV	Staff Division
TANF	Temporary Assistance for Needy Families
TSA	Transportation and Security Agency

Acronym	Abbreviation for:
U.S.	United States
USCG	United States Coast Guard
USDA	United States Department of Agriculture
USFWS	United States Fish and Wildlife Service
USG	United States Government
VA	Department of Veterans Affairs
VTC	Video Teleconference

Appendix J: ACF OHSEPR Daily Situation Report Template.

All-Hazards Situation Report (SitRep)
Event (Include DR #):
Report #:
Information current as of:
Submitted by:
Location (i.e. JFO, NRCC, etc):

New information is presented in RED TEXT
Important/alert information is presented in BLUE TEXT
Background / Historical Information BLACK TEXT

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1. **Current Situation:**

2. **ACF Program Impacts (Runaway & Homeless Youth; Child Welfare; Head Start/Early Head Start; Child Care; OFA; TANF; Domestic Violence Prevention & Services; ADD):**

3. **Personnel status:**

4. **DCM National Coordinator / Significant Events (if DCM):**

5. **Upcoming Events:**

6. **Action Items:**

Submit report via e-mail to the ACF Human Services Watch Officer: HSWatchOfficer@acf.hhs.gov

Instructions for Completing ACF All-Hazards Situation Report (SitRep).

The Situation Report (SitRep) is a tool to collect accurate and timely information critical to ACF's role in emergency preparedness and response. The information collected in this report should provide a comprehensive overview of the situation, actions being taken by ACF and response partners, resource needs, programmatic impacts and issues to be addressed.

SitReps should be submitted by the ACF Regional Emergency Management Specialist (REMS) or ACF Liaison at the initial onset of a significant event. Subsequent SitReps should be submitted on a daily basis until the conclusion of an event. Reports should be submitted no later than 16:00 Eastern to the ACF Human Services Watch Officer unless otherwise instructed.

Event (Include DR #): Enter the name of the event – including location and s state, when available, use the declaration number in the event name (i.e. Wildfires – ST – DR 1234).

Report #: Beginning report numbers at 1, enter the report number in sequence.

Information current as of: Include date and time in *DD – Month – Year, 24:00* format.

Submitted by: Enter the name and position of the person completing the report.

Location (i.e. JFO, NRCC, etc): Include location name and complete address.

Current Situation: Describe the ongoing situation and the nature of the event. This information should include the nature of the event (i.e. severe weather, hurricane, wildfires, etc.), impact to human services programs and infrastructure, the population being impacted (i.e. area with high rates of poverty, children, etc.), actions being taken by state, local government, tribal government or other response partner, actions being taken by ACF and other information as deemed necessary.

ACF Program Impacts: Describe the impact to ACF-funded programs and interests including: Child Care (OCC); Child Support Enforcement (OCSE); Child Welfare/Foster Care System (CB); Domestic Violence Prevention & Services (FVPSA); Head Start/Early Head Start (OHS); Refugee Assistance (ORR); Runaway and Homeless Youth Services (RHY); Services for Individuals with Developmental Disabilities (ADD); Temporary Assistance for Needy Families (OFA/TANF); Unaccompanied Alien Children's Services (ORR/DUCS). Information should be specific and where possible, actionable providing numbers of clients served, anticipated duration of disruption and potential requests for ACF assistance.

Personnel status: Include names, positions and agencies of personnel currently deployed in response. For Disaster Case Management (DCM) deployments, include names and positions of personnel deployed under basic and comprehensive teams.

DCM National Coordinator / Significant Events (if DCM): Should follow standard format of National Partner providing specific information on total clients contacts, number of current open cases, total cases processed as information and referral, total cases closed and ongoing operations.

Upcoming Events: Describe significant upcoming events in the next 24, 48 and 72 hours (and beyond).

Action Items: List action items to be addressed in the next 24 hours providing specific information on the action, person responsible and the timeframe for completion.