KENTUCKY

STATE EMERGENCY REPATRIATION PLAN

(October 2018)
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RESPONSIBLE AGENCIES

Non-Governmental Organizations
American Red Cross
Salvation Army

State Agencies
- Cabinet for Health and Family Services
  - Department for Behavioral Health
    - Division of Developmental and Intellectual Disabilities
  - Department for Medicaid Services
  - Department for Public Health
  - Department for Community Based Services
    - Division of Protection & Permanency
      - Adult Protective Services Branch
    - Division of Family Support
    - Division of Administration and Financial Management
  - Office of Communications
- Department of Agriculture, Office of the State
- Department of Corrections
- Department for Military Affairs
  - Division of Emergency Management
- Justice & Public Safety Cabinet
  - Office of the Chief Medical Examiner (OCME)
- Kentucky State Police
- Kentucky Transportation Cabinet

Federal Agencies
Administration for Children and Families / Office of Refugee Resettlement
Centers for Disease Control and Prevention
Federal Emergency Management Agency
Office of the Assistant Secretary for Preparedness and Response
United States Citizenship and Immigration Services
United States Customs and Border Protection
United States Department of Agriculture
United States Department of Health and Human Services
United States Department of Homeland Security
United States Department of Housing and Urban Development
United States Public Health Services
United States Department of State
United States Substance Abuse and Mental Health Services Administration
United States Department of Transportation
1.0 INTRODUCTION

1.1 Purpose
The purpose of this plan is to describe the State systems for coordination, notification, deployment and delivery of emergency repatriation services, in support of the U.S. Health and Human Services (HHS) Repatriation Program, during an emergency repatriation event in the Kentucky. These services assist private U.S. citizens, their dependents and other U.S. Department of State (DOS) authorized persons once they have arrived in the U.S. as a result of a coordinated evacuation or repatriation from a foreign country.

This plan defines state emergency repatriation roles and responsibilities and establishes procedures for implementation of state coordinated emergency repatriation operations in the Kentucky. In addition, this plan describes how the State will play a critical support role in establishing an Emergency Repatriation Center (ERC), coordinating with other state and local agencies (including the designated airport entity), and providing for the reception, temporary care, and onward transportation of evacuees and repatriates returned to the United States, via the Kentucky Port of Entry (POE), during a DOS-organized evacuation or repatriation event.

1.2 Scope and Applicability
The State Emergency Repatriation Plan (SERP) applies to state agencies and personnel, as well as organizations and individuals, identified as having a support role in coordinating and executing a federally led emergency repatriation operation in the State. Operations under this plan are limited to evacuations of U.S. citizens, their dependents, and other DOS authorized persons from abroad to the State’s POE due to war, threat of war, invasion, civil unrest, or similar crisis occurring in conjunction with:
- A Presidential Declaration of National Emergency; or
- Without a declaration in response to DOS’ notification to the U.S. Department of Health and Humans Services of its authorized evacuation to the Continental United States.

The SERP augments the Kentucky Emergency Operations Plan by addressing the specialized knowledge, skills, and procedures needed to respond to an emergency repatriation operation. In addition, this plan:
- Does not supersede existing local or state emergency management plans, but rather is designed to supplement and support such existing plans.
- Builds on established capabilities, capacities, contracts, and plans that may exist at the local and state level.

2.0 SITUATION AND PLANNING ASSUMPTIONS

2.1 Situation
Large numbers of U.S. citizens and their dependents live, work, study, and travel abroad. In the event, the DOS determines a significant threat to the health and safety of its citizens abroad exists, or is imminent, DOS may recommend citizens leave the foreign country or countries impacted by the event.

In certain situations, DOS may evacuate U.S. citizens, their dependents and other DOS authorized persons to a foreign safe haven or to a Port of Entry (POE) in the Continental United States (CONUS). If the safe haven is in the CONUS, the U.S., Administration for Children and Families is the lead Federal agency responsible for the coordination and provision of reception and temporary services to all non-combatant evacuees returned from a foreign country.

While ACF is responsible for the planning, coordination and implementation of the National Emergency Repatriation Plan (NERP) and Program, states and territories, through ACF established repatriation agreements, carry out the operational responsibilities for the reception, temporary care, and onward transportation of the non-combatant evacuees. During emergency repatriations, whenever necessary and upon state request, ACF, through interagency assignments, works with other federal agencies to assist with the provision of needed temporary services.

In December 2016, ACF signed a Memorandum of Understanding with the HHS Office of the Assistant Secretary for Preparedness and Response (ASPR). Through this MOU, ACF will continue to retain overall decision making authority and responsibility for the U.S. Repatriation Program requirements, and as needed, ASPR will support by leading and performing the emergency and incident management activities related to coordination and operations during certain emergency repatriation incidents.

2.2 Planning Assumptions
The following circumstances have been assumed to be true for purposes of plan development:

- The scope of the event will be beyond the capability of agencies normally involved in repatriations to manage as part of their normal day-to-day operations.
- Agencies involved in the implementation of this plan are familiar with its contents and have developed internal plans and procedures to carry out responsibilities assigned to them as part of the plan.
ACF, directly or through the HHS Secretary’s Operations Center (SOC), will provide advance notice of an impending emergency repatriation event.

DOS evacuations of private U.S. citizens, their dependents, and other DOS authorized persons, under the NERP, may occur without a Presidential Declaration of National Emergency.

The primary POE for the Cincinnati/Northern Kentucky International Airport.

The processing of evacuees may be a 24-hour per day operation and will continue until all evacuees have secured travel to their final destination or otherwise have been processed and provided assistance.

Evacuees may arrive without identification, with little or no money, or with few or no personal items.

Evacuees may be under considerable stress and anxiety, requiring immediate mental health support.

Some evacuees may have an illness or other medical condition requiring medical attention.

Some evacuees may have a disability or other access and functional need (AFN) and may require additional assistance.

Federal regulations do not authorize the evacuation of pets; however, service animals are permitted by law.

Evacuees cannot be required to go to an ERC.

An emergency repatriation operation will be a major media event.

While the state will be reimbursed by HHS for expenses incurred as part of the emergency repatriation process, HHS is not expected to provide funding in advance of emergency repatriation operations.

Temporary financial assistance is not an entitlement but a service loan repayable to the U.S. Government.

The Department of Defense (DOD) will provide temporary services to its personnel and family members. However, if DOD is not present at the ERC, DOD personnel and family members will be treated as regular repatriates for the purpose of establishing eligibility and receiving repatriation temporary assistance.

All evacuees will have appropriate documentation for legal entrance to the United States.

Evacuees may be limited in English proficiency.

The Secretary's Operations Center (SOC) operates 24/7/365. The mission of the SOC is to be the focal point for synthesis of critical public health and medical information on behalf of the United States Government. The SOC maintains real-time situational awareness of incidents and events of public health significance.

3.0 CONCEPT OF OPERATIONS
3.1 General
The concept of operations outlined below describes the systems, operational processes and coordinating structures required to execute this plan.

3.2 Direction and Control
3.2.1 Federal
The coordinating structure for federal operations is detailed in the 2016 National Emergency Repatriation Plan (NERP). The primary coordinating and command entities within this structure are described below.

a. U.S. Department of State (DOS)
Overseas, DOS is the lead for emergency repatriation activities and accomplishes this responsibility through arrangements with federal and non-federal agencies. Evacuations of U.S. citizens, their dependents and other DOS approved persons are arranged through joint agreements with commercial carriers. Evacuations may take place under a Presidential Declaration of National Emergency, due to escalating international tension, or outbreak of hostilities overseas, or they may occur under conditions not involving a Presidential Declaration of National Emergency.

b. Administration of Children and Families, ACF
In the CONUS, ACF acts as the lead federal agency for the planning, coordination and execution of all emergency repatriation activities. In the event of a massive evacuation of U.S. citizens and their dependents from overseas, ACF coordinates, directly or through federal arrangements, the national response and services that need to be provided to eligible repatriates and others. ACF accomplishes this responsibility through; (1) arrangements with federal and non-federal agencies, (2) the agreements it holds with all states and applicable U.S. territories to assist with operations during repatriation emergencies, and (3) MOU with HHS/ASPR to assist, as needed, with the emergency and incident management activities related to coordination and operations during an event.

c. National Emergency Repatriation Unified Coordination Group (NER UCG)
The National Emergency Repatriation (NER) Unified Coordination Group (UCG), based in Washington D.C., is the body responsible for coordination and management of the federal interagency response consistent with the National Emergency Response Plan (NERP) and principles of the National Incident Management System (NIMS). The NER UCG exercises overall authority and direction for federal emergency repatriation activities in the U.S. during the event. In addition:
- Field operations, which are managed by the State at the ERC, functions as a NER UCG Branch.
- The NER UCG clears all information gathered before, during and/or after the event for internal and external distribution. This information includes, but is not limited to:
  - Number of evacuees
  - Number of flights and destination with the U.S.
o Demographics, if available
o Flight in formation and manifest
o Federal resources being activated and/or deployed

d. National Emergency Repatriation Operations Sections Chief

Oversees the operation executed at the NER UCG Branch (State POE/ERC), and supervises the execution of the NER UCG Incident Action Plan for Operations. The Operations Section Chief is responsible for the direct management of all incident-related operational activities.

e. Federal Emergency Repatriation Branch Supervisor (FERS)

HHS will deploy a federal person to serve as a Federal Emergency Repatriation Branch Supervisor at the State’s POE/ERC to coordinate and oversee all federal emergency repatriation activities performed at the field level.

i. In addition, HHS will assign federal personnel (e.g. ERC Loan Approving Officer), to manage each activated Division under this Branch. A description of each federal coordinating structure is described in the NERP Base Plan. These positions will fold into the State’s ERC Incident Command Structure (see Section 3.4 of this plan).

3.2.2 State

The Department for Community Based Services is designated as the lead state agency responsible for assisting HHS/ACF in coordinating emergency repatriation activities in Kentucky. The primary coordinating and command entities required to support the SERP are described below.

a. State Emergency Repatriation Coordinator (SERC)

The SERC is the State designated person responsible for coordinating the development, implementation, and execution of the SERP. In the event the SERP is activated, Division of Protection & Permanency Assistant Director or designee shall serve as the SERC. He/she will also serve in the State’s Unified Command Group (UCG), providing direction and control to both the SEOC and ERC. In addition the SERC:

- Serves as the State’s main Point of Contact (POC) before, during, and after an emergency repatriation event.
- Ensures proper planning and coordination of all involved local and state agencies.
- As required, advises the Governor on the need to declare a State of Emergency
- Ensures the State’s resources are efficiently used in responding to an emergency repatriation operation.
- Assures each involved element of the State and other local support, including designated commercial airports, is alerted and positioned to carry out its duties under the SERP.
Serves as a liaison between HHS and the State during emergency repatriation activities.

b. Unified Command Group (UCG)

An emergency repatriation operation will require coordination and collaboration among the key stakeholder agencies involved in emergency repatriation activities. In order to facilitate a coordinated and unified approach to the event, a Unified Command Group (UCG) will be established. The UCG will be comprised of the following persons or positions, or executive level representatives of the following agencies and organizations:

- Cabinet for Health and Family Services
  - Department for Behavioral Health
    - Division of Developmental and Intellectual Disabilities
  - Department for Medicaid Services
  - Department for Public Health
  - Department for Community Based Services
    - Division of Protection & Permanency
      - Adult Protective Services Branch
    - Division of Family Support
    - Division of Administration and Financial Management
  - Office of Communications
- Department of Agriculture, Office of the State
- Department of Corrections
- Department for Military Affairs
  - Division of Emergency Management Justice & Public Safety Cabinet
    - Office of the Chief Medical Examiner (OCME)
  - Kentucky State Police
  - Kentucky Transportation Cabinet

As circumstances require, the SERC or designee in consultation with the UCG may include other state and federal agency representatives in the UCG. The primary UCG communications and coordination protocol will be face-to-face engagement meetings while physically co-located at the SEOC or other designated site.

c. State Emergency Operations Center Manager (SEOC Manager)

The Governor or designee will designate a State Emergency Operations Center (SEOC) Manager to serve as the lead coordinating and command authority for the SEOC. In addition, the SEOC Manager provides guidance and direction to the Emergency Repatriation Center (ERC) Manager.

d. Emergency Repatriation Center Manager (ERC Manager)

The ERC Manager exercises overall direction and control of ERC operations and activities.

3.2.3 Emergency Repatriation Support Facilities

a. State Emergency Operations Center (SEOC)
The SEOC will serve as the central hub for command and control, communications, coordination and resource support. In addition, it will serve as a central clearinghouse for information collection, assessment and analysis, and will be responsible for maintaining a common operating picture (COP) and providing timely and accurate situational awareness for the duration of the event.
b. Joint Information Center (JIC)

Consistent with the National Incident Management System (NIMS), local, state and federal agencies involved in emergency repatriation will coordinate the release of information through a Joint Information Center (JIC).

In the event the SERP is activated, the JIC will be established at Cincinnati/Northern Kentucky International Airport (the specific location of the JIC will be determined by The Division of Protection and Permanency). The function of the JIC will be to monitor issues and activities of the emergency repatriation operation, and share data and information via the Joint Information System (JIS). In addition:
- No information will be released publically unless cleared with designated federal staff.
- Information released by the JIC will be done in collaboration with the NER JIC.
- General access to the JIC will be determined by the policies, rules and regulations of the NER UCG JIC.
- SERC, SEOC, or Governor will designate a separate area, on the grounds of Cincinnati/Northern Kentucky International Airport for the media.

In terms of staffing the JIC, Director or designee will assign a State Public Information Officer (PIO) or designee to the JIC. Local and state agency PIO’s assigned to the JIC will work in collaboration with the State PIO.
- The federal PIO will generally work from their assignment location in Washington D.C. and may not travel to the State JIC.

3.3 Activation and Notification

3.3.1 Types of Activation Notices: General Overview

Upon the Department of State’s (DOS) formal notification to HHS of an imminent evacuation of U.S. citizens and their dependents from overseas, HHS will send an activation notice to selected states. Through existing ACF state agreements, states designated as potential POE’s will be asked to activate their state emergency repatriation plan.

In the event the Kentucky selected as a POE there may be different types of notices being provided to the state. The types of notices are as follows:
a. Stand By

Upon receipt of information from DOS advising that a large-scale repatriation may materialize, HHS will send a standby notice to the State Emergency Repatriation Coordinator. This is not an activation notice. Upon receipt of this notice, the state must provide a formal response to HHS indicating their ability to support emergency repatriation operations. Conference calls will be scheduled by HHS as needed.

b. Cancel Previous Notice

HHS will provide this notice to the State Emergency Repatriation Coordinator if the state has subsequently not been selected as a POE, or if a federal decision has been made not to use the U.S. as a safe haven.

c. Activate the State Emergency Repatriation Plan (SERP)

HHS will provide this notice to the Governor's Office, SEOC and the State Emergency Repatriation Coordinator (SERC) after sufficient information is obtained from DOS advising that an evacuation has materialized and HHS has selected the state as a POE for repatriates. The notice will contain information regarding the Initial National Emergency Repatriation Coordination meeting, which will take place shortly after the notice is issued.

d. Demobilization

This notice will be provided (1) after sufficient information is obtained from DOS advising that the emergency has ended, or (2) the State requests closing of the ERC due to other State contingencies or upon reaching service capacity, or (3) a Federal decision is made by an authorized NER UCG official to close the ERC. This notice will come from the NER UCG to the Governor's office, SERC, and SEOC.

3.3.2 Notification

In the event Kentucky is designated as a Port of Entry (POE) by HHS, an internal HHS meeting will be scheduled with designated Regional and Headquarters' staff to share information and determine federal operational direction. Following this meeting, HHS authorized staff will send an activation notice to the SERC, SEOC, and the Governor’s Office notifying that Kentucky has been designated as a POE for an emergency repatriation operation.

i. Upon receipt of the activation notice, the Governor’s office, will request a meeting or conference call with the State’s UCG to determine if Kentucky can serve as a POE for an emergency repatriation operation. The Governor or designee will notify HHS of the Kentucky decision.

Should the State’s Emergency Repatriation Plan (SERP) be activated, the Governor or designee will:

- Establish direct contact with the Director of the Cincinnati/Northern Kentucky International Airport or designee to:
  - Secure proper establishment of the Emergency Repatriation Center (ERC).
  - Request notice of incoming evacuee flights (the NER UCG will also provide incoming flight information to designated state personnel).
Request HHS to deploy federal personnel to Massachusetts to support SEOC and ERC operations. At a minimum, the following functions would need to be staffed by federal personnel, who have decision making authority:

- HHS representative to serve in the state’s UCG
- ERC Travel Officer
- ERC Loan Approving Officer
- ERC Referral Officer

3.3.3 SEOC ACTIVATION

The Commonwealth Emergency Operations Center (CEOC) is activated based on the level of operations scheme as listed below. CEOC activation does not need to be sequential.

Level I: This is the lowest level of incident or event and can be generally managed using the Duty Officers, the Manager-On-Call (MOC), and does not require deployment of more than one state resource as a normal requirement. The incident or event is of limited duration and is closed out within one operational period (12-hours). Level I is the normal, day-to-day, ECIC duty status.

Level II: This is the next level of incident or event and requires a higher level of management than just the Duty Officer and MOC. This level of incident or event requires multiple resources, but is not a long-term event. A limited formal activation of CEOC structures may be required, but only to maintain situational awareness and adequately report actions taken by deployed assets. The incident or event is of a limited duration and is closed out within two operational periods.

Level III: This level of incident or event is of greater complexity than the previous levels and requires immediate activation of the CEOC structure to manage multiple resources over an extended period to meet significant needs of local first-responders and emergency management agencies. This requires activation of ESF representatives and has a significant impact on KYEM Frankfort Staff. The incident is of an extended duration and is managed through three or more operational periods.

Level IV: This level of incident or event requires all actions taken under a Level III plus activation of all the CEOC structure. Resources are drawn from multiple regional assets across the Commonwealth and may include the introduction of federal resources. The incident is of an extended duration, cannot be closed out within a clearly defined number of operational periods, and may require the activation of local/county incident management teams (IMTs) to supplement the CEOC staff. Level V: This incident or event may be considered a catastrophic incident or of high impact, that requires the full activation of all local, county, and state assets and the full integration of the CEOC with federal resources. The incident is of an unknown duration and cannot be closed out within a clearly defined number of operational periods.

Level 0: The CEOC is no longer able to function, KYEM is implementing its COOP plan, and efforts are under way to relocate and/or transfer statutory authorities to an alternate location.
3.3.4 ERC Activation
Upon activation of this plan, the Governor or designee will coordinate with the Cincinnati/Northern Kentucky International Airport to activate the ERC. Cincinnati/Northern Kentucky International Airport will determine the location of the ERC. Local and state personnel assigned to the ERC will report directly to the ERC as directed. HHS, in coordination with the Governor or designee, will be responsible for designating and assigning federal personnel to the ERC.

3.4 ERC Incident Command Structure

The ERC will operate under a basic Incident Command Structure (ICS). Federal and state personnel, and Non-Governmental Organizations (NGOs), will be assigned to serve in activated positions. The ERC ICS may consist of the following organizational elements:

- Command
- Operations
- Planning
- Logistics
- Finance

As needed, Branches and Divisions/Groups/Units may be added under each section to maintain span of control and organize functional areas of responsibility. See Section 3.4, Figure 2: Sample ERC ICS Organizational Chart.

In general, the following ERC ICS positions and operational elements will be stood up in an emergency repatriation operation.

3.4.1 Command

a. ERC Manager

The ERC Manager will exercise overall direction and control of ERC operations in support of emergency repatriation activities, and will have a direct report to the SEOC Manager.

b. Deputy ERC Manager

The Deputy ERC Manager is responsible for assisting the ERC Manager in implementing the full scope of emergency repatriation activities in the ERC.
3.4.2 General  
a. Operations Section

Managed by the Operations Section Chief, the Operations Section is responsible for the oversight and coordination of temporary assistance and reception services to repatriates, and the allocation of resources to support ERC operations and services. The Operations Section is comprised of the following Branches:

i. Temporary Assistance Branch

This Branch is led by the Branch Director for Temporary Assistance. It may be comprised of Groups, each representing a specific temporary form of assistance by which an evacuees must be deemed eligible by HHS (temporary assistance descriptions are detailed in Section 5.3 of this plan). These Groups will be overseen by a federal representative from HHS and supported by personnel from state agencies and non-governmental organizations. The following Groups may be represented under this Branch:

- Onward Travel Assistance
- Financial Assistance
- Temporary Housing Assistance

ii. Health and Human Services Branch

This Branch is led by the Branch Director for Health and Human Services. It may be comprised of several Groups, each representing a specific health and human service. These services are available to all evacuees despite their eligibility status for temporary assistance (service descriptions are detailed in Section 5.4 of this plan). Each Group will be served by personnel from state agencies and non-governmental organizations. The following Groups may be represented under this Branch:

- Essential Items
- Temporary Child Care
- Health and Medical
  - Crisis Counseling
  - Medical Services
  - Spiritual Care
- Feeding
- Family Reunification
- Communications Assistance

iii. Reception Services Branch

This Branch is led by the Branch Director for Reception Services. It may be comprised of several Groups, each representing a specific service to ensure all evacuees entering and exiting the ERC are appropriately checked in and
Out of the ERC, and provided with general information about ERC services and supports (service descriptions are detailed in Section 5.1 of this plan). Each Group will be served by personnel from state agencies and non-governmental organizations. The following Groups may be represented under this Branch:

- Intake/Assessment
- General Information
- ERC Check-Out

b. Planning Section

Managed by the Planning Section Chief, the Planning Section is responsible for assisting the SEOC Planning Section Chief to develop the ERC staff roster and Incident Action Plan (IAP). In addition, the Planning Section will gather and share information back to the SEOC regarding ERC operations and activities for situational awareness purposes. Depending on the scale of the operation, this section may include a Documentation and Situation Unit.

c. Logistics Section

Managed by the Logistics Section Chief, the Logistics Section is responsible for providing services and support to operate and maintain the ERC facility. The Logistics Section is comprised of the following Branches:

i. Site Services Branch

This Branch is led by the Branch Director for Site Services. It may be comprised of the following Units:

- Security
- Communications and Information Technology (IT)
- Food (ERC staff only)

ii. Support Services Branch

- Facilities
- Ground Transportation (ERC staff and repatriates)
- Supply

d. Finance Section

Managed by the Finance Section Chief, the Finance Section is responsible for ERC operations related finance and administrative support services. The ERC Finance Section coordinates and maintains close communications with the SEOC Finance Section on tracking operational costs, resource procurement and tracking and recording time for ERC personnel and hired equipment. Depending on the scale of the operation, this section may include additional Units.

Figure 2: Sample ERC ICS Organizational Chart
3.5 Health and Medical Response

The State has primary responsibility for meeting the public health and medical needs of the emergency repatriation operation. In the event of an identified shortfall or State request for federal public health and medical assistance, the Office of the Assistant Secretary for Preparedness and Response (ASPR), upon NER UCG approval, will coordinate and provide personnel, teams and other assets as needed. In addition, the CDC will determine if there is any need for additional CDC personnel or other assets at the POE, and will deploy personnel as required.

3.6 Demobilization: Transition to Steady State

Demobilization follows the completion of initial temporary emergency repatriation services to eligible evacuees. The duration of some of the processes in this phase will be variable, particularly financial processes that may unfold over a period of weeks or months. Demobilization notification will occur when:
The SERC or designee, in consultation with the UCG, provides formal notice to the NER UCG indicating that it has reached capacity and/or is facing other contingencies and needs to close the ERC.
NER UCG, in consultation with the State, determines that initial temporary emergency repatriation services in the ERC is complete.

As response phase operations wind down, personnel and other staff will be released from the ERC and SEOC when they are no longer needed to support response efforts. The SEOC Operations Section will continue to track deployed resources and ensure they are returned to their owners or otherwise accounted for. These actions signify the transition from response to steady-state operations (SEOC operations return to Level 1 - Steady State/Monitoring).

4.0 ROLES AND RESPONSIBILITIES

4.1 Federal Agencies and Departments

a. United States Department of State (DOS)

DOS notifies U.S. HHS of an escalating crisis, natural disaster or other event, which may require the evacuation of U.S. citizens from a foreign country. DOS also has responsibility for the following:

☐ Notifies HHS when an evacuation is ordered and provides the method of evacuation and the date operations will begin. Provides a list of the manifests (or equivalent), including times of arrival, and health conditions (if available). Reports the estimated number of potential evacuees in the affected area.

☐ Informs HHS as the situation changes and provides updated information regarding potential evacuees and affected areas.

☐ Discusses with HHS the POEs where evacuees may arrive.

☐ Informs HHS when the operation reaches its completion.

☐ Determines who is eligible to be repatriated from overseas to the US.

b. United States Department of Health and Human Services (U.S. HHS)

U.S. HHS is the lead federal agency in the continental U.S. to provide temporary assistance during emergency repatriation. The U.S. HSS Operating Division in charge of the Repatriation Program is the Administration for Children and Families.

ACF has the primary responsibility for planning, coordination and execution of emergency repatriation under Executive Order 12656, Assignment of Emergency Preparedness Responsibilities. As part of this lead responsibility, ACF/ORR:

☐ Receives, along with the HHS Secretary Operations Center (SOC) information from DOS regarding potential evacuations and the necessity to implement repatriation plans.

☐ Assists states, in coordination with ASPR, in the review of State Emergency Repatriation Plans.

ACF/ORR also provides final approval of SERPs.

☐ Activating the National Emergency Repatriation Plan (NERP).
· Receives information from DOS, and other applicable agencies, regarding potential evacuations and the necessity to implement Emergency Repatriation Plans.

· In consultation with DOS and other applicable federal agencies, determines the different Points of Entry (POE) within the Continental United States.
· Serves, directly or through ASPR, as overall coordinator of the activities of all federal agencies to ensure that the required support is provided.
· Coordinates, approves, and reimburses states for allowable, reasonable, and allocable costs associated to the emergency repatriation.
· Provides cash, advance credit, and reimbursement of State expenses for repatriation operations (contingent on available funds).
· Provides a Federal Emergency Repatriation Branch Supervisor (FERs), when the activation notice is issued.
· Provides the designated state(s) an HHS staff to review and determine final eligibility of repatriates.
· As necessary, establishes initial contact and coordination activities with travel agencies operating under federal contract to provide onward movement assistance to evacuees.
· Provides state ERC staff, directly or through arrangements, with the necessary U.S. HHS repatriation assistance forms.
· Provides, directly or through arrangements, in-time training to state ERC staff on applicable U.S. HHS repatriation assistance forms.
· Assists with public affairs.

i. Other U.S. HHS Divisions provide support to ACF/ORR.

1. Assistant Secretary for Preparedness and Response (ASPR):

Through an MOU with ACF, as needed, ASPR will provide support by leading and performing the emergency and incident management activities related to planning, coordination and operations during steady state and certain emergency or group repatriations. ACF will continue to retain overall decision making authority and responsibility for the U.S. Repatriation Program requirements.

2. Program Support Center (PSC):

PSC is responsible for budgetary assistance in the procurement and administration of funds for emergency repatriation operations.

3. Centers for Disease Control and Prevention (CDC):

Provides public health services, including disease control, epidemiology, medical assessment for infectious diseases, and if required, quarantine operations. Conducts pre-debarkation visual assessment of arriving evacuees to monitor for signs of potential...
public health significance. Assists the State in developing plans for providing medical aid at the ERC.

4. United States Substance Abuse and Mental Health Services Administration (SAMHSA):

SAMHSA coordinates the provision of behavioral health care for evacuees. This role will become active only if requested by an authorized state representative or upon HHS reasonable assessment that the state does not have the necessary mental health resources to respond to such event. Upon finding that the state is in need of this assistance, HHS authorized representative will notify NER UCG to convene a meeting with the state to discuss and possibly arrange for this assistance from U.S. HHS.

The above HHS federal agencies list is not an extensive. The NERP identifies additional HHS agencies that may be able to provide resources as requested.

c. United States Customs and Border Protection (CBP)
   - Performs required customs clearances at the Port of Entry (POE).
   - Unaccompanied minors:
     - Holds unaccompanied minors in CBP custody, and notifies HHS designate field staff and the Department of Children and Families (DCF) of a child in need of care and supervision.
     - Releases child to DCF and shares any pertinent information about the child with DCF and HHS designated field staff.

d. United States Department of Agriculture (USDA)
   - Clears service animals for entry into the U.S. through the designated POE.

e. United States Citizenship and Immigration Services (CIS)

CIS is responsible for the statutory processing of evacuees including the issuance of clearances for U.S. citizens and their alien dependents to proceed to final destination.

f. Federal Emergency Management Agency (FEMA)

FEMA assists in the coordination of emergency communication systems to notify national and local partners of the need for assistance.
   - FEMA will provide support only if requested by HHS. The state can also send a request to HHS requesting assistance.

g. United States Department of Housing and Urban Development (HUD)
HUD identifies available HUD-assisted housing, at or near the POE, which may be used for some evacuees who cannot be moved in a timely manner to a final destination. It also identifies available HUD-assisted housing at or near the point of entry for longer stays, commercial housing facilities, and congregate facilities.

HUD will provide support only if requested by HHS. The state can also send a request to HHS requesting assistance.

h. United States Department of Transportation (DOT)

DOT adds evacuees to the transportation priority list following notification from ACF. It also advises the Federal Aeronautics Administration, the Interstate Commerce Commission, and the Federal Railroad Administration of the priority of movement for evacuees and for inter-city motor services.

DOT will provide support only if requested by HHS. The state can also send a request to HHS requesting assistance.

The federal agencies listed above is not an extensive list of agencies that can provide support. The NERP identifies additional federal agencies that may be able to provide resources as requested.

4.2 State Agencies and Departments

The following state agencies and departments will support ERC and /or SEOC operations as necessary:

a. The Department for Community Based Services

i. General Roles/Responsibilities

Serve as the lead state agency to provide overall command and coordination.

Coordinate the UCG.

Serve within the UCG.

Activation of the SEOC as needed.

Develop the Incident Action Plan/Staff Roster for the event.

Notify local and state partner agencies of plan activation, and where support personnel report for duty (SEOC or ERC).

Coordinate with the Cincinnati/Northern Kentucky International Airport establish a Joint Information Center, and assign the State PIO or designee to the JIC.

Develop and disseminate timely situational awareness products, and maintain a Common Operating Picture (COP) for the duration of the event.

Lead the State repatriation after action report. This report is to be submitted to ACF 60 days after the closing of the ERC. See the NERP Operational Guide for more information.

ii. ERC Support:
Ⅲ. Administrative and Finance Support:
- Coordinate with DTA to establish a method for providing temporary assistance loans to eligible evacuees.
- Assist DTA and HHS with processing repatriates at the ERC assessment/intake area.
o Assist with processing, gathering and filing all completed HHS emergency repatriation forms and supportive documentation (e.g. copies of U.S. passports).
□ Assist DTA in gathering and recording all local and state emergency repatriation operational cost claims.

b. Department of Administration and Financial Management
□ Participate in the UCG.
□ Support SEOC and ERC operations as needed.
□ ERC Assessment /Intake:
  o Assist in interviewing, processing, gathering and filing all completed U.S. HHS emergency repatriation forms and supportive documentation (e.g. copies of U.S. passports).
  o Assist repatriates in applying for temporary assistance (loans).
  o Provide temporary loan assistance to repatriates deemed eligible and approved by the federal ERC Loan Approving Officer.
  o Gather and track emergency repatriation operational cost claims submitted by local and state agencies supporting the operation.
  o Claim administrative expenses from ACF for local and state agencies/organizations appointed to conduct or support emergency repatriation activities.
  o Submit a summary report of state operational expenditures following the completion of repatriation activities, as required by the national Repatriation Plan.

c. Adult Protective Services Branch
□ As requested, coordinate elder services, through the statewide elder network, via Aging Service Access Points (ASAPs) and Councils on Aging (COAs).

d. Kentucky State Police
□ Coordinate and provide security and traffic control for the ERC and the designated Family Reunification Area.
□ As requested, assist federal agencies with routine checks on the plane, gate and at security check points.

e. Department of Behavioral Health, Developmental and Intellectual Disabilities
□ Coordinate the provision of crisis counseling services (Psychological First Aid) as needed to meet the mental health needs of both children and adults.
□ If inpatient hospitalization is necessary, coordinate referral to local emergency services teams for formal impatient evaluation.

f. Department of Agriculture, Office of the State Veterinarian
□ Support the USDA with identifying and contracting veterinary services that can provide facilities for service animal quarantine and care for service animals cleared for entry into the U.S.
□ As needed, coordinated the provision of resources to meet the basic needs of a service animal (e.g. food).

g. Cincinnati/Northern Kentucky International Airport
□ Airfield management.
□ Notify and coordinate with federal partners, to include CBP and the Federal Aviation Administration (FAA), regarding plan activation.
- Determine the location of the ERC.
- Upon plan activation, set-up the ERC with the equipment and resources needed to support the operation.
- Provide staff to support the ERC as needed.
- Provide facility maintenance and logistical support to the ERC as needed.
- Coordinate with the SEOC for resource support as needed.
- Coordinate with MSP (Troop F) to provide security for the ERC.
- Provide timely notice of incoming flights to the SERC and UCG.
- Coordinate parking and ground transportation for ERC staff.
- Arrange deplaning and transport of evacuees to the ERC.
- Provide for secure storage of evacuee baggage.
- Designate a family reunification area (separate from the ERC).
- Designate an area for the JIC.
- Participate in the UCG.
- Designate a media area (separate from the ERC).
- Depending on the type of event, if HHS needs to establish a joint repatriation center with DOD, identify an area within the ERC or nearby, for DOD to process and service their personnel and family members.
i. Department of Children and Families (DCF)
   ☐ Coordinate and provide temporary supervision and care to unaccompanied minors.
   o Temporary care may include coordinating medical care and any other immediate supports and assistance needed.
   ☐ Coordinate and share information with HHS regarding each minor’s case.
   ☐ Coordinate and facilitate reunification of minors with parents or legal guardians.
   o As needed, coordinate and provide short-term care should family reunification be prolonged.
   o If the minor is being reunified with parents or legal guardians in another state, coordinate with HHS designated field person.

j. Office of the Chief Medical Examiner (OCME)
   ☐ Assist POE with deceased repatriates in accordance with existing airport procedures and in compliance with federal, state and locals laws.

k. Department for Public Health
   ☐ Coordinate with POE Fire and EMS to provide emergency medical transportation to area hospitals as needed.
   ☐ Coordinate and provide medical related resources and services to the ERC, to include medical staff (e.g. deployment of MRC volunteers) and the provision of emergency pharmaceutical services.
   ☐ Coordinate to identify and request federal health and medical resources that may be needed to support the ERC operation.
   ☐ As needed, coordinate with the Bureau of Substance Abuse Services (BSAS) to support any request from the ERC related to evacuee substance abuse services.
   ☐ Conduct disease assessment and surveillance, consistent with the DPH Infectious Disease Emergency Response Plan, as the situation warrants.
   ☐ Participate in the UCG.

4.3 Non-Governmental Organizations

a. American Red Cross (ARC)
   ☐ As needed, coordinate and provide temporary shelter services. Shelter facilities will be managed and operated by the ARC using standard ARC policies and operating procedures. The need for sheltering will be based on the event. A congregate shelter may be established at Logan Airport or at a nearby facility in close proximity to Logan Airport.
   ☐ Mobile feeding:
      o Provide culturally-sensitive food, snacks and drinks.
      o Provide infant formula as needed.
   ☐ Provide emergency first aid provisions.
   ☐ Provide information and referral services to evacuees as requested.
Provide essential clothing, toiletry and personal hygiene items (to include infant and adult diapers).
As needed, coordinate with DMH to provide psychological first aid services.
Provide family unification assistance to include communications assistance for individuals and families through the ARC Safe and Well system.
Provide assistance at the ERC registration desk.

b. Salvation Army
As needed, assist ARC with ERC feeding operation.
As requested, coordinate for the provision of spiritual/emotional care

5.0 EMERGENCY REPATRIATION PROCESS

5.1 Processing Evacuees

5.1.1 Arrival at the POE
Upon landing at the Cincinnati/Northern Kentucky International Airport a small team of authorized federal officials, and when possible a State representative, will enter the plane to brief evacuees on the repatriation program (to include temporary assistance available to them at the ERC). The State representative will provide a welcome packet to all evacuees. The welcome packet will consist of a welcome letter, and information on ERC services and other amenities and facilities within the POE (e.g. locations of ATMs and currency exchange counters, transportation systems available etc.).
Following the briefing, evacuees will debark and be directed to the U.S. Customs and Border Patrol area.
Evacuees requiring immediate medical attention or hospitalization will be treated on-site or transported to an area hospital.
Deceased evacuees will be managed by the POE and Office of the Chief Medical Examiner (OCME) in accordance with airport regulations and applicable federal, state, and local laws.

5.1.2 U.S. Customs and Border Protection Processing
Based on prior notice regarding evacuee flight time arrivals, and the number of evacuees arriving at the POE, U.S. Customs and Border Protection (CBP) officials at the Cincinnati/Northern Kentucky International Airport will determine the location of the Customs processing area (e.g. Terminal E, the ERC, etc.).
Generally, evacuees will come through Cincinnati/Northern Kentucky International Airport for U.S. CBP processing.

- Identified federal law violators, fugitives from U.S. laws, or military or naval force deserters will be taken into custody by the Federal Bureau of Investigation (FBI).
- U.S. CBP will detain persons without proper immigration clearance.
- Unaccompanied minors will be held at the U.S. Customs and Border area.
  - DCF will be notified of an unaccompanied minor in need of temporary care/supervision.
  - There is no requirement that evacuees make use of services or temporary assistance offered at the ERC.
  - If the evacuee refuses ERC services they will need to sign the Refusal of Service form (RR-06).

Evacuees who do not need assistance/services may retrieve their baggage and proceed to their final destination.

5.1.3 ERC Intake and Assessment

- In the event a welcome packet was not provided to evacuees upon debarkation, it will be provided to evacuees upon their arrival to the ERC.
- State personnel assigned to the intake/assessment area will assist the Federal Loan Approval Officer with processing and assessing evacuees for temporary assistance eligibility by utilizing the appropriate U.S. HHS form. Section 5.2 of this plan describes how eligibility for temporary assistance is determined.

5.1.4 General Information

Following the intake/assessment process, evacuees will be directed to a General Information area, within the ERC, where they will be provided with information on the ERC facility and services, the Family Reunification Area, and Logan International Airport facilities and amenities (e.g. locations of ATMs, etc.).

5.1.5 ERC Services

Services provided at the ERC comprise of both temporary assistance and reception services. The types of temporary assistance and other services that may be available at the ERC are detailed in Sections 5.3 through 5.5 of this plan.

5.1.6 ERC Checkout

Before exiting the ERC, evacuees will go through a brief checkout process. This process ensures proper documents are retained and necessary copies are provided to evacuees who have sought temporary emergency repatriation assistance (e.g. travel itinerary, signed U.S. HHS repayment Agreement Form, etc.).
5.1.7 Baggage Retrieval
- Luggage will be deposited and secured in a baggage holding area.
- Evacuees will not be allowed to bring their luggage into the ERC.
- Designated agency will take custody of any unclaimed baggage and handle it according to established lost and found procedures.

5.1.8 Onward Travel
- Onward travel from the ERC may take place via automobile, bus/train, or air travel.
  - OMEGA will be available for individuals in need of onward travel available through OMEGA (e.g. air and Amtrak).
  - Evacuees who are being picked up at the airport will be directed to a designated pickup area or family reunification area outside of the ERC.
  - For evacuees wishing to rent a car to travel to their final destination, shuttle will run between the ERC and Cincinnati/Northern Kentucky International Airport rental car center on a regular basis.
  - For evacuees traveling onward by air, a shuttle will run between the ERC and the rest of Cincinnati/Northern Kentucky International Airport on a regular basis.
- As needed, transportation services will be made available to accommodate individuals with disabilities and others with access and functional needs.
- For unaccompanied minors reunifying with their parent(s) or legal guardian, either in state or out of state, the Department of Children and Families (DCF) will coordinate the necessary release of unaccompanied using established state laws and procedures.
  - Parents/guardians will be responsible for the cost of arranged escort services and other associated travel costs. If the parent/guardian does not have the resources to travel to the ERC or pay for the minor's onward travel, DCF will coordinate travel services (with assistance from DTA and HHS), to include escort services where appropriate, through the HHS contracted travel agency (OMEGA).

5.2 Determining Eligibility for Temporary Assistance
Some evacuees may have the financial means to arrange their own transportation (etc.), and may not need temporary assistance or other services upon arrival to the U.S. For those evacuees who do not have sufficient resources, they may apply for temporary assistance at the ERC intake/assessment area.
- At the intake/assessment area, no investigation will be performed to confirm that an evacuee has resources. The U.S. HHS Emergency and Group Repatriation Processing Form (RR-01) will be completed by evacuees, with assistance from state personnel, to determine their eligibility for temporary assistance.
- The Federal Loan Approving Officer will make final eligibility decisions based on the information provided on the RR-01 form.
- Copies of completed RR-01 forms, and any copies of supportive documentation (e.g. copy of U.S. passport), will be filed and maintained by the assisting state personnel.
Evacuees who are not eligible for temporary assistance will be able to access the ERC reception services.

5.3 Temporary Assistance
Temporary assistance, requiring approval from the Federal Loan Approving Officer, may take the form of emergency cash loans, temporary accommodations costs, hospitalizations, referral to state of final destination for continuation of repatriation services, and onward travel costs and other goods and services needed for the health and welfare of evacuees. Assistance provided at the ERC usually covers emergency services for up to the first 24 hours. Depending on the type of evacuation, evacuee’s condition and unforeseen circumstances (e.g. weather conditions), there may be a need for evacuees to remain at the immediate POE/ERC for more than 24 hours. Continuation of Program temporary assistance, up to 90 days of services, is generally provided at the State of final destination through non-emergency activities of the Program.

Temporary assistance will be provided to eligible evacuees after the Federal Loan Approving Officer approves the emergency repatriation case. The loan must be repaid to the U.S. Government.

The The Division of Protection and Permanency will be responsible for coordinating and providing temporary assistance to eligible evacuees. The general types of temporary assistance are listed below. For additional information, see the 2016 NERP Operational Guide and Appendix B: Matrices of Emergency Repatriation Services of this plan.

1. Onward Travel Assistance
- HHS will provide State personnel assigned to the onward travel assistance area with in-time training and authorizations needed to make remote travel reservations with an HHS/ACF contracted travel agency (OMEGA).
- State personnel will confirm the evacuee’s final destination as identified during the initial ERC intake process, and will be responsible for arranging for onward transportation to the final destination.
- Information on transportation systems available in the area will be provided.
- For onward travel to final destinations via plane or Amtrak, state personnel will coordinate with the federal contracted travel company (OMEGA) to provide remote booking assistance to eligible repatriates.
- Telephones, computers and printers will be made available to evacuees to make travel arrangements or print itineraries and boarding passes.

2. Financial Assistance
- The Loan Approving Officer will indicate and approve the amount of cash to be provided to eligible individual or family in need of emergency cash assistance.
  - The Loan Approving Officer will sign off on the form authorizing the evacuee to receive all temporary services available. For cash assistance, HHS/ACF will determine the amount of cash that will be provided by
Financial assistance will be provided in a nominal amount based on the needs of the individual/family.
- In the event commercial facilities for lodging and food are necessary, the amount of cash provided will take these costs into consideration.
- Cash may also be provided for meals and lodging while traveling to the final destination.
- Medical care will be provided and paid by the U.S. Repatriate Program if the evacuee does not have medical insurance or other available resources to pay for the care.

3. Temporary Housing Assistance
- Evacuees may be eligible for housing (shelter) assistance costs if they are unable to continue to their final destination on the date of arrival and are without available resources to secure their own lodging.
- State personnel will assist by arranging short-term accommodations at a nearby hotel generally for no longer than one day.
- The duration of short-term accommodations may be extended on a case-by-case basis depending on the evacuee’s individual situation, subject to HHS approval.

5.4 Health and Human Services
Various health and human services will be available to all evacuees who arrive at the ERC, regardless of their eligibility status. *The agencies and organizations responsible for health and human services are detailed in Appendix B of this plan.*

5.4.1 Health and Medical
a. Medical Services

A Medical area will be established within the ERC and supported by Medical Services staff. This area will operate as the central point of service to meet the health and medical needs of both children and adults who enter the ERC.
Basic medical services will be provided and may include services such as:
- First aid (e.g. treating minor wounds)
- Provision of basic health and medical services including first aid materials (bandages, etc.) and as resources are available, provision of equipment and supplies such as durable medical equipment, consumable medical supplies, health information and urgent prescription medications.
- Providing a refrigerated area to keep prescriptions
- Support with administering medication
- Monitoring glucose
Oxygen oversight and monitoring

Assessing individuals with acute onset of signs and symptoms related to injury or disease to determine if additional care and/or Emergency Medical System (EMS) transportation to an area hospital is necessary.

The level and type of medical services offered will depend on available staff and material resources. As additional resources and staff are obtained, the level and types of health and medical services may expand.

Any requests for additional staffing assistance will be made to the Health and Medical Group Supervisor.

Any requests for additional staffing assistance outside of the Health and Medical Group will be requested and coordinated through Emergency Support Function (ESF) #8 – Public Health and Medical Services at the SEOC, as needed.

Individuals with critical needs, or needs that surpass the capability of the Medical Services Staff, will transported to an area hospital. Staff assigned to the Medical Services area will coordinate with POE and EMS for patient transport to an area hospital or other suitable facility. In all instances, the Medical Services Staff will defer to their specific level of training when responding to an emergent case to determine the appropriate course of action and care.

i. Isolation

In the event an evacuee(s) exhibits signs or symptoms of infectious or communicable disease at the ERC, personnel assigned to the ERC medical area will report the concern immediately to the ERC Branch Director and HHS FERS for Reception Services and MA ESF 8 (Public Health & Medical Services) at the SEOC. Guidance and response activities will be consistent with the MA DPH Infectious Disease Emergency Response Plan.

ii. Pharmaceutical Services (pharmacy or pharmacy cache)

A limited supply of on-site medications for emergency short-term use may be available and provided by licensed and credentialed medical personnel.

iii. Temporary Substance Abuse Support

If substance abuse, addiction, or addiction recovery support services are disclosed/observed, the Medical Services Staff is responsible for coordinating with ESF 8 at the SEOC. ESF 8 will coordinate any requests as needed. If services are located offsite, transportation will be provided to the location(s) whenever possible.

- BSAS is the single state authority in charge of funding, licensing, and overseeing substance abuse prevention and treatment services across the state. BSAS does not, however, provide these services directly. The role of BSAS in the event of an emergency is twofold: (1) ensuring that the substance abuse service needs of the community continue to be met, and (2) coordinating substance abuse services for
affected individuals as part of the state behavioral health disaster response.

b. Crisis Counseling

A Crisis Counseling area will be established within the ERC, staffed by Crisis Counselors. This station will function as the central point of service to meet the mental health needs of evacuees who enter the ERC. As needed, crisis counselors will provide support and services to meet the emotional and mental health needs of both children and adults. Crisis counseling services will be provided through the provision of Psychological First Aid (PFA).

i. Additional Mental Health Services and Emergency Services

There may be individuals with needs that exceed the services provided by the Crisis Counseling Staff within the ERC. In the event an individual presents with critical mental health needs, or needs that surpass the capabilities of the Crisis Counseling staff, the staff will defer to their specific level of training in responding to a request/need for additional assistance and determine the appropriate next steps.

If an individual is experiencing a mental health crisis, the Crisis Counseling Staff will coordinate with the ERC Medical Services Staff and if needed, local Emergency Medical Services or local Mobile Crisis Intervention (if available), to further evaluate the individual and provide transport to an alternate care facility. Crisis Counseling Staff will communicate and coordinate with ERC on-site security personnel as needed if an individual poses a danger to themselves or others.

d. Spiritual Care

Evacuees who request spiritual care and counseling will be informed or connected to any such accessible services, either in person or remotely.

5.4.2 Feeding

A feeding station, to include a meal feeding area, will be established in a designated area of the ERC, accessible to everyone in the ERC. It will be sourced to provide snacks, beverages, and potentially “ready to serve” meals (depending on throughput time of evacuees through the ERC) to evacuees. Considerations will be made for food and food preparation restrictions, guidelines, and the needs of:

- People with medically necessary dietary requirements.
- People with allergies and food sensitivities.
- Cultural and religious groups.
- Children and infants (e.g., formulas and foods).
Feeding services at the ERC may be provided by pre-positioned resources, mobile kitchens brought to the ERC, food transported from other locations to the ERC, or a combination of these options. If the capacity of initially activated feeding resources is exceeded, requests for additional or expanded feeding services will be made to the SEOC. Additional resources may include:

- Food supplies and vendor support.
- Private sector vendors, including caterers and restaurant and hotel associations.

5.4.3 Essential Items
Some evacuees may have been unable to secure adequate clothing or personal toiletry articles and hygiene items before departure. These items will be made available to all evacuees.

5.4.4 Temporary Onsite Childcare
Onsite temporary child care will be provided to evacuees who wish to leave their child in a supervised, safe and secure area while they navigate through the ERC. Personnel supervising children must have child care related training and a current Background Record Check (BRC); within the last year. Unaccompanied minors will not be left in this area.

5.4.5 General Information
An area will be established within the ERC where evacuees can access general information on the ERC, the Family Reunification Area, and Cincinnati/Northern Kentucky International Airport facilities and amenities (e.g. locations of ATMs, etc.). General information will be provided to evacuees and for evacuee use through the following means:

- An information desk
- General information announcements
- Message boards to post information to evacuees

5.4.6 Communications Assistance and Accommodations
Communications assistance and accommodations will be provided as a service at the General Information Area. Cell phones, charging stations, and wired and wireless Internet will be made available at the ERC for the evacuees. Individuals with disabilities and others with access and functional needs who require access to effective communications will be provided with effective communications aids and services as needed. They may include, but are not limited to:

- Auxiliary aids and services;
- Materials in accessible formats;
- Access to language interpreters or translators
- American Sign Language interpreters; and
- Assistive technology.

Communications aids and services may be accessed by other ERC service areas to accommodate both evacuee and personnel needs (e.g. request for a magnifying reader at the
Intake area). All equipment temporarily leaving the area will be tracked; “checked-in/checked-out”.

5.5 Other Services
There are other types of emergency repatriation services that may not have a designated service area within the ERC. These services may be located elsewhere on the grounds of Logan International Airport, or only activated upon need/request.

5.5.1 Veterinary Assistance
Generally, pets are not authorized during an emergency repatriation evacuation. However, service animals may be evacuated. The State will follow its procedures on how to care for service animals during emergency situations.

5.5.2 Mortuary Services
Deceased individuals will be addressed in accordance with POE and mortuary affairs existing procedures and in compliance with Federal, state and local laws. Assistance with mortuary services will not be reimbursed by HHS/ACF. It is beyond the purview of the Repatriation Program. OCME will provide death notification to a family on an evacuee when identity is known.

5.5.3 Temporary Care of Unaccompanied Minors
In the event children are returned to the U.S. without their parent(s) or legal guardian, it will be necessary for the designated state agency with roles and responsibilities for this population, to make arrangements for the temporary care and protection of this population while attempting to locate the minors parents, legal guardian, or while making plans under state child welfare policies for more permanent arrangements in accordance with state law. HHS will work with the designated state agency, on a case-by-case basis, to gather pertinent information on the child, and facilitate any assistance or services needed (e.g. onward travel assistance).

5.5.4 Family Reunification
A family reunification area will be established at a location outside of the ERC. This area will be utilized to:
- Facilitate evacuee pick-up
- Protect families from the media and curiosity seekers
- Facilitate information sharing to support family reunification

5.5.5 Temporary Shelter
If large numbers of evacuees require temporary sheltering or if lodging at commercial establishments is unavailable, the ERC Operations Sections Chief will coordinate with MA ESF 6 (Mass Care, Emergency Assistance, Housing, and Human Services) at the SEOC to establish a congregate shelter facility.
6.0 FINANCE

6.1 General
Administrative and finance duties begin upon ACF activation of the SERP and end when all repatriates have left for their final destination. During an emergency repatriation operation, administrative and finance functions will be coordinated by the ERC Finance Section and supported by the SEOC Finance Section.

The main function of the ERC Finance Section will be tracking emergency repatriation operational costs, to include accepting requests for reimbursement from state and local government and volunteer agencies.

If advance funds for emergency repatriation operations are needed, the ERC Finance Section Chief will consult with the ERC Manager, SEOC Finance Section Chief and State Coordinator to determine the funds needed. Once funding needs are determined, the ERC Finance Section will be responsible for requesting such funds through HHS.

Costs will be reimbursed to state and local government and volunteer agencies following guidance from ACF.

6.2 Repatriation Program Finances and Funding

6.2.1 Available Funds
Title XI, Section 1113 of the Social Security Act authorizes U.S. HHS to provide federal funds to states for the reception, temporary care, and onward transportation of U.S. citizens and their dependents returned from a foreign country due to destitution, illness, war, threat of war, or similar crisis. For most emergencies, HHS will reimburse the state for reasonable, allowable, and allocable costs associated with emergency repatriation.

6.2.2 Repayment for Temporary Assistance
Monies and temporary services provided to eligible evacuees must be repaid. All funds will be provided directly to repatriates in the form of temporary services which must be repaid to the U.S. Government. Repayment by a recipient or recovery from subsequently available resources must be made to U.S. HHS for deposit to the U.S. Treasury. States are not involved during the collection process but are responsible for providing HHS/ACF with all the necessary forms, supporting documents, and information necessary for the timely and accurate collection of repatriation loans.

6.3 Administration and Financial Responsibilities
Will work with participating local and state agencies and non-governmental organizations to ensure all claims for reimbursement are complete and accurate. Staff will prepare all state claims and submit to U.S. HHS for reimbursement using the U.S. HHS specified form(s). In addition, will be responsible for managing any humanitarian donation received from individuals and/or entities. Humanitarian donations in the form of cash
or in-kind will not be considered a donation to the Federal Government. Agencies or individuals seeking to make a donation to the U.S. Repatriation Program will need to contact ACF.

6.3.1 Case Records Management
An individual or family case record shall be maintained for each individual or family provided cash loan assistance, onward transportation, or any other temporary assistance for which they must repay the federal government. Utilize the RR-01 form and other available forms to track the services provided.

Personal resources to be considered will be only those which are immediately accessible to the repatriate at the time temporary assistance and services are required at the ERC, or when arrangements are made for onward transportation to final destination. Resources are considered as immediately accessible only when they are in the possession of, and under the control of, the repatriate, and he/she can draw upon them to meet immediate or temporary needs.

The individual’s declaration that he/she is without available resources will be accepted, unless the initial assessment reveals that resources are available.

Many of the repatriates will have their own resources at their final destination or through their public or private employing organizations or agencies, which are not immediately accessible to them at the ERC. Such persons shall be eligible for temporary assistance as needed for onward transportation. However, these individuals shall be required to repay to the United States the cost of such assistance and services once their own resources become accessible to them.

6.3.2 Cost Tracking
Each supporting agency will document and track their SERP-related costs from the onset of the operation. The tracking of costs will include time sheets, travel vouchers, invoices, etc. that document the agency’s total expenditures.

To ensure all support agencies are reimbursed for actual costs incurred, it will be the responsibility of each agency to track and document all of its SERP-related costs and provide this information as required/requested.

6.3.3 Reimbursable Expenses
Repatriation Program funds will cover all reasonable, allowable and allocable costs associated with the provision of temporary assistance to eligible evacuees. Temporary assistance includes cash payments, medical care, temporary lodging, transportation, and other goods and services necessary for the health and welfare of individuals, including guidance, counseling, and other social services.

In addition, the State can claim administrative expenses, provided that the state performs the following:

- Identifies the time spent;
- Converts identified time into an equivalent amount of money;
Deducts this amount from staff providing services in connection with other programs; and
Follows procedures for allocation of joint expenses.

is responsible for requesting reimbursement from U.S. HHS for all approved costs associated with an emergency repatriation operation in the Commonwealth.

Each agency, supporting SERP activities and operations, that expects reimbursement of repatriation operational costs should have a Memorandum of Agreement (MOA) in place ahead. The MOA should include guidance regarding; (1) requirements for tracking costs, (2) preparing invoices, (3) requesting reimbursement, and (4) maintenance of records. Upon activation of the SERP, Interdepartmental Service Agreements (ISAs) would be executed to identify and support the reimbursement of costs to each agency.

6.3.4 Submittal of Claims for Reimbursement
Shall submit a summary report of expenditures to U.S. HHS within thirty (30) days following the completion of an emergency repatriation operation. The summary report will show the amount of funds advanced, amount of funds expended, an estimate of outstanding debts, and the balance to be returned to U.S. HHS, or the amount due the state. All applicable processing reports must be attached to substantiate expenditures. Procedures to return funds to U.S. HHS will be negotiated at the time of submission of the summary report. For additional information see Section 12.7 of the 2016 NERP Operational Guide.

6.4 Emergency Repatriation Forms
ACF will provide all necessary HHS forms and documents required for an emergency repatriation operation. The State will need to make copies of these forms as appropriate. The State will be responsible for safeguarding signed forms. In-time training will be provided by HHS on all applicable forms.
The following HHS forms listed below are to be used during emergency repatriation activities:
a. Privacy and Repayment Agreement Form (RR-05):
This form is used to obtain consent from eligible evacuees on privacy and repayment of the repatriation loan.
- Completed upon arrival to the U.S., and before any temporary assistance is provided.
Exemptions may apply to unaccompanied minors and persons with a mental health or medical condition that limited their ability in making personal decisions.
- Completed by the evacuee or an authorized legal representative (e.g. the repatriate’s legal guardian).
- State representative(s) provides information to the evacuee and collects the signed form prior to providing repatriation services.
No supportive documentation is required, however a signature from the evacuee or authorized legal representative is needed.

b. Refusal of Temporary Assistance Form (RR-06):

This form is used to maintain record of evacuee’s refusal decision for temporary assistance.
- Completed upon arrival to the U.S. and before any temporary assistance is provided.
- Completed by evacuee or authorized legal representative.
- State representative(s) provides timely information and a copy of the form for signature.
- State representative(s) maintains a copy of the signed form to submit with the request for reimbursement.
- Is completed by repatriates who do not want to go to the ERC or after being determined eligible, refuse to accept the services.

c. Emergency and Group Repatriation Processing Form (RR-01):

This form is used to determine evacuee’s eligibility for reparation assistance during an emergency evacuation.
- Completed upon arrival to the U.S., and before receiving repatriation assistance.
- Completed by U.S. citizens or dependents of U.S. citizens who have returned to the U.S. during an authorized DOS evacuation, and do not have resources immediately accessible to meet their needs.
- State representative(s) performs the initial eligibility assessment using this form.
- State representative(s) assists evacuee in completing this form, and will gather any necessary supportive documents (e.g. copy of passport).
- Processed and approved by an authorized federal staff for final eligibility determination.

d. State Request for Federal Support Form (RR-08):

This form is used by the state to request support and assistance from any federal agency using appropriate HHS channels.
- An authorized state representative will gather and submit timely requests.
- Can be submitted prior to or during an emergency repatriation operation.
- Completed by an authorized state representative.
- Must be signed by a state authorized official, and must include supportive documentation.

e. Emergency and Group Repatriation Financial Form (RR-02):

This form is to be used by the state to request reimbursement for all reasonable, allowable and allocable costs incurred during an emergency repatriation operation.
- Completed by a state authorized representative after the evacuation has commenced.
- The appointed/authorized state agency will gather financial information and provide a comprehensive financial summary, of actual costs, to ACF.
Supportive documentation and a signature from the state authorized official is required.

All forms listed above include instructions. PDF’s of these forms can be accessed through the Office of Refugee Resettlement webpage at http://www.acf.hhs.gov/programs/orr/programs/repatriation

6.5 Temporary Assistance (Final Destination)
When an eligible evacuee claims residency in Massachusetts, the case must be cleared and closed with the repatriation program before temporary cash assistance, medical assistance, and related social services are provided under established state standards and policies. Temporary assistance may be continued for a period of ninety (90) days following arrival in the United States. If situations arise where a evacuee still has insufficient resources after 90 days, and is unable to attain self-support or self-care because of age, physical condition or lack of vocational preparation, and does not qualify for aid under an federal, state or local assistance program, refer the case to U.S. HHS/ACF for authorization to continue temporary assistance for up to an additional nine months. All requests for extensions of assistance beyond 90 days must be submitted to HHS at least two weeks prior to the 90 days eligibility expiration.

7.0 PLAN MAINTENANCE
This section discusses the overall approach to the planning process and the assignment of plan development and maintenance responsibilities. Kentucky’s State Emergency Repatriation planning process includes consultation with Kentucky’s child welfare agency leadership, consultation with Kentucky’s Department for Public Health and through the receipt of technical assistance received by The Administration for Children and Families. Plan development has been assigned to the State Emergency Repatriation Coordinator (SERC) and back-up coordinator, in consultation with necessary partnering agencies. Maintenance responsibilities will be the responsibility of the SERC and back-up SERC, to include ensuring SERP review occurs regularly for familiarity with the plan, to ensure any necessary SERP updates occur timely, and to ensure any necessary cross agency communication and/or updates occur timely.

7.1 SERP Maintenance
LEAD STATE AGENCY will facilitate the development and maintenance of the SERP. This plan will be reviewed and updated periodically, taking the following elements into consideration:

- Formal updates of planning guidance or standards
- Change in agencies/personnel assigned to the Unified Command Group
- Changes in response resources (e.g. policies, personnel, organizational structures, leadership/management processes, facilities, or equipment)
- After-action reports and improvement plans from exercises or actual events
- Enactment of new or amended laws or Executive Orders
- SERP distribution to local, state and federal stakeholders.
7.2 Training and Exercise

7.2.1 Training
Real time training for certain positions within the ERC can be conducted at the time of the event/incident. Homeland Security Exercise and Evaluation Program (HSEEP) compliant training on SERP operations should to be conducted annually.

7.2.2 Exercise
The SERP should be exercised periodically. All exercises will follow HSEEP standards for development and evaluation.

8.0 AUTHORITIES AND REFERENCES

8.1 Authorities

8.1.1 Federal Laws, Executive Orders, and Homeland Security Presidential Directives
- 45 C.F.R. Part 212 - Assistance for United States Citizens Returned from Foreign Countries;
- HHS/ACF U.S. Repatriation Program agreements with all the U.S. States and some U.S. Territories;
- ACF/ORR U.S. Repatriation Program agreement with non-for-profit organizations;
- Executive Order 12656 - Assignment of Emergency Preparedness Responsibilities, as amended;

8.1.2 State Laws and Executive Orders
- KRS CHAPTER 39 A-G
- KRS CHAPTER 72
- KRS 315.500
- 106 KAR 5:040

8.2 References

8.2.1 Federal
- National Incident Management System (NIMS)
- National Response Framework (NRF)
- Homeland Security Exercise and Evaluation Program (HSEEP)

8.2.2 State
Appendix A: Abbreviations and Agency Acronyms

ACF Administration for Children and Families
AMTRAK National Railroad Passenger Corporation
ARC American Red Cross
ASPR Office of the Assistant Secretary for Preparedness and Response
CBP U.S. Customs and Border Protection
CDC Centers for Disease Control and Prevention
CEMP Comprehensive Emergency Management Plan
CFR Code of Federal Regulations
CMS Consumable Medical Supplies
DCF Department of Children and Families
DME Durable Medical Equipment
DMH Department of Mental Health
DOS U.S. Department of State
DOT U.S. Department of Transportation
DPH Department of Public Health
DTA Department of Transitional Assistance
EMS Emergency Medical Services
EOEA Executive Office of Elder Affairs
ERC Emergency Repatriation Center
FEMA Federal Emergency Management Agency
HHS U.S. Department of Health and Human Services
JIC Joint Information Center
NGO Non-Governmental Organization
Appendix B: Matrices of Emergency Repatriation Services

Matrix 1: Emergency Repatriation Center Services
A list of emergency repatriation services to be provided within the Emergency Repatriation Center (ERC). These services will require support from state agencies and non-governmental organizations. Note: There may be other services needed which are not listed.

Matrix 2: Other Emergency Repatriation Services
A list of other potential emergency repatriation services that will require support from state agencies and non-governmental organizations. These services may or may not be assigned to a service area or group within the ERC. Some of these services may be located in other designated areas on the grounds of the airport.

Emergency Operations Center

- The ERC will be accessible to all evacuees. Services and supports will be provided to meet their immediate needs.

- The ERC facility and all ERC service areas will require logistics support from (e.g. provide tables, chairs, phones etc.). Additional resources may be requested through the State Emergency Operations Center (SEOC).

- Most ERC service areas will not have a designed federal representative present however a HHS FERS will be assigned to the ERC.

Attachment 1: Emergency Repatriation Center Services
<table>
<thead>
<tr>
<th>Reception and/or Temporary Services</th>
<th>Description</th>
<th>Primary Entity</th>
<th>Services Available To</th>
<th>Comments</th>
<th>Alternative Federal Agency or NGO</th>
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<tbody>
<tr>
<td><strong>Baggage</strong></td>
<td>Arrange for repatriates’ luggage to be deposited directly to a secured baggage holding area, with the understanding that appropriate clearance and inspection procedures may take place in front of the repatriate. If necessary, States should coordinate with the airport to designate an area to maintain repatriate’s baggage. It is not recommended for evacuees to bring their luggage to the ERC.</td>
<td>State (Airport)</td>
<td>All evacuees</td>
<td>Work with Cincinnati/Northern Kentucky International Airport</td>
<td>NGO, NER UCG designated agency</td>
</tr>
<tr>
<td><strong>Briefing</strong></td>
<td>Repatriates will receive an informational briefing in a designated area or inside the aircraft. A welcome package can be provided on the plane, at the gate, or upon entering the ERC. The welcome package should contain a welcome letter, Program information, information about the ERC, services available, HHS forms, U.S. postal service forms for change of address, and other relevant information.</td>
<td>Inside the plane (Federal Program representative) At the ERC (State)</td>
<td>All evacuees</td>
<td>State should coordinate with airport, ACF, and applicable Federal partners</td>
<td>CDC, U.S. Commissioned Corps, NER UCG representative</td>
</tr>
<tr>
<td>Cash</td>
<td>Cash will only be provided to eligible individuals. ACF will provide guidance regarding the amount that will be provided per person and family.</td>
<td>State (Department of Administration &amp; Financial Management)</td>
<td>Eligible repatriates</td>
<td>This service might be available to non-eligible repatriates through other programs that are managed by the State and/or non-for-profit organizations.</td>
<td>NER UCG designated USG, or NGO</td>
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<tr>
<td>Case Management</td>
<td>For certain evacuees who are not able to access the ERC due to immediate transportation to an outside POE facility, the authorized ACF staff will make Repatriation Outside POE Assessment (ROPA) decisions on a case by case basis. For approved cases, the State will coordinate for case managers to meet the individual at the designated facility (e.g., hospital) in order to perform initial assessment using applicable Program form/s, provide eligibility recommendations to ACF, and potentially offer and coordinate the temporary assistance.</td>
<td>State (Division of Family Support)</td>
<td>Eligible repatriates</td>
<td>It is important to note that the Program is the payee of last resort. Case managers are to work with the applicable facility (e.g., hospital social worker) to assist the repatriate to timely apply for all available and applicable services (e.g., Medicaid, Medicare, SSI, TANF)</td>
<td>U.S. Commissioned Corps, ACF/OHSEPR, NGO, NER UCG designated agency</td>
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<tr>
<td><strong>Care of Unaccompanied Children and Fragile Elderly</strong></td>
<td>It is likely in a mass evacuation that unaccompanied children and fragile elderly will be returned to the United States without their caretakers, if one is unavailable. It will be necessary for State agencies to make arrangements for the care and protection of this population at the ERC, temporary shelter, and/or other suitable location while attempting to locate the parents, family member, legal guardian/custodian, or while making plans under State child welfare or adult protective services policies for more permanent arrangements in accordance with applicable State laws.</td>
<td>State (Division of Protection &amp; Permanency)</td>
<td>All evacuees</td>
<td>State, NER UCG designated agency, or NGO</td>
<td></td>
</tr>
<tr>
<td><strong>Communication with Family, Friends, Employers, and Others</strong></td>
<td>Many evacuees will need to make contact with their families, friends or employers in the United States or overseas. Additional telephone and telecommunication services will be required at the ERC locations to provide the needed communication services. FEMA may provide assistance to the State agencies in obtaining additional communication needed resources or services. Prior to an event, the States will need to consult with ACF/ORR or during an event with the</td>
<td>State (Red Cross and/or Kentucky State Police)</td>
<td>All evacuees</td>
<td>NER UCG designated agency, FEMA, ARC, NGO,</td>
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<tr>
<td><strong>Direction and Information</strong></td>
<td>Ensure that accurate and clear directions and information are provided to the evacuees. Whenever necessary, States should post translated signs and have interpreters.</td>
<td>State (Department for Community Based Services)</td>
<td>All evacuees</td>
<td>NGO, private companies, NER UCG designated USG</td>
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<tr>
<td><strong>Emergency Medical Assistance</strong></td>
<td>Some evacuees may have minor medical/psychological needs that occurred prior or following their arrival at the ERC. Those individuals will be referred to the appropriate ERC medical location. When there is a medical emergency that cannot be handled at the ERC, medical personnel will make arrangements for transporting the evacuee to a hospital or other suitable facility in the vicinity. Emergency medical services may include first aid assessment, provision of first aid (including materials [e.g., bandages]), provision of health information,</td>
<td>State (Department for Public Health)</td>
<td>All evacuees</td>
<td>This assistance is only provided within the ERC</td>
<td>U.S. Commissioned Corps, ASPR, NER UCG designated agency</td>
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</table>
special costs of caring for individuals with chronic conditions, supervision of paid and volunteer medical staff, medical staff for emergency and immediate life stabilizing care (including mental health and special needs evacuee populations).

<table>
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<tr>
<th>i. Medical Assistance Provided: ERC staff will direct repatriates requesting or requiring medical attention to the health screening unit that will perform a more in-depth medical assessment or examination. Whenever necessary, staff will provide pharmaceuticals and a resting area for those requiring these services.</th>
<th>State (Department for Public Health)</th>
<th>All evacuees</th>
<th>This assistance is only provided within the ERC</th>
<th>U.S. Commissioned Corps, ASPR, NER UCG designated agency</th>
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<tr>
<td>ii. Hospitalization: ERC staff will refer repatriates who require hospitalization to a local hospital according to the State SERP. Ensure information and timely follow-ups are performed to all eligible repatriates. Look at the case management column for other evacuees in need of hospitalization will need to pay out of packet or through.</td>
<td>State (Department for Public Health)</td>
<td>Eligible repatriates. Other evacuees in need of hospitalization will need to pay out of packet or through</td>
<td>Hospital will be responsible for providing timely notifications to the designated Federal and State staff on the discharge and/or transfer of eligible repatriates who</td>
<td>U.S. Commissioned Corps, ASPR, NER UCG designated agency</td>
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</table>
more information regarding ROPA.

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<tr>
<th>III. Ambulance Services:</th>
<th>State (Department for Public Health)</th>
<th>All evacuees</th>
<th>U.S. Commissioned Corps, ASPR, NER UCG designated agency</th>
</tr>
</thead>
<tbody>
<tr>
<td>States should coordinate with ambulance services to be available at the POE as needed. States should consult with designated NER UCG official regarding the potential number of ambulances that might be necessary during a particular operational period. This number may vary based on need.</td>
<td>State (Department for Public Health), CDC</td>
<td>All evacuees</td>
<td>CDC, U.S. Commissioned Corps, State public health departments</td>
</tr>
<tr>
<td>iv. Isolation: State staff will direct repatriates who exhibit signs or symptoms of infectious or communicable disease to appropriate CDC representatives or designated staff. If a quarantine condition is warranted, CDC or its agent will be responsible for providing guidance to evacuees, responders and all response agencies.</td>
<td>State (Department for Public Health), CDC</td>
<td>All evacuees</td>
<td>SAMHSA, U.S. Commissioned Corps, NER UCG designated agency, NGO</td>
</tr>
<tr>
<td>vi. Behavioral health services and psychological first aid: States are responsible for the provision of aids, counseling, or referral of mental health clients to appropriate institutions.</td>
<td>State (Department for Public Health)</td>
<td>All evacuees</td>
<td>This assistance is only provided within the ERC</td>
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</table>

They may also qualify for other State, Federal and/or NGO program.

have accepted assistance through the Program.

his/her insurance.
<table>
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<tr>
<th><strong>Entrance to the ERC</strong></th>
<th>Keep track of those evacuees who enter the ERC. Not all evacuees will want to go to the ERC. Some may have their own arrangements and will continue with their onward travel.</th>
<th>State (Kentucky State Police)</th>
<th>All evacuees</th>
<th>NGO, NER UCG designated agency</th>
</tr>
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<tbody>
<tr>
<td><strong>Escort Services for Unaccompanied Minors</strong></td>
<td>For unaccompanied minors in need of reunification with their parents or legal guardian (hereinafter P-LG) in another State, the State will coordinate with the P-LG the necessary release of minors using established State laws and procedures. P-LG will be required to pay for the cost of arranged escort services and other associated costs. For those P-LG who are without resources to travel to the ERC or pay for the minor’s onward travel, the State will coordinate services through OMEGA World Travel8, including the escort services. If the airline or air carrier is not able to offer escort services and P-LG have no resources to pay for the cost of service, the State will obtain approval from the deployed loan approving officer for approval of escort arrangements. P-LG must authorize this service and should sign the repayment agreement form prior to services being rendered.</td>
<td>State (Division of Protection &amp; Permanency)</td>
<td>Unaccompanied minors</td>
<td>P-LG will need to sign the repayment agreement form</td>
</tr>
<tr>
<td>Essential Clothing and Toilet Articles Suitable for Immediate Needs</td>
<td>Some evacuees will be unable to secure adequate clothing or personal toilet articles before departure. Following their arrival at the ERC, these needs will be identified and provided according to the SERP.</td>
<td>State (Red Cross and/or Department of Corrections)</td>
<td>All evacuees</td>
<td>NGO, NER UCG designated agency</td>
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<tr>
<td>Exit Services</td>
<td>The Program case files with all signed forms and supporting documents are to be kept by the State. Before the repatriate leaves the ERC, the State must ensure necessary documents are kept and copies are provided to the repatriate (e.g., travel itinerary, signed Program forms).</td>
<td>State (Division of Protection &amp; Permanency)</td>
<td>All evacuees</td>
<td>NGO, NER UCG designated agency</td>
</tr>
<tr>
<td>Family Reunification</td>
<td>Locate an area outside the ERC for evacuees who will be met by their relatives or other individuals. Meeting place for reunification could be the established airport greeting area. Only evacuees should be allowed to the ERC. Exemptions should be given to P-LG of minors, certain fragile elderly, and mentally ill evacuees. Some family members may become separated during the evacuation overseas and may be transported to different POEs. When such circumstances are identified by the State during the interview with the evacuees, the State, in coordination with the designated Federal staff,</td>
<td>State (Airport)</td>
<td>All evacuees</td>
<td>NGO, NER UCG designated agency</td>
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</tbody>
</table>
will assist in determining the whereabouts of the separated family Member/s. After the family member/s is located, the State agency will assist in establishing telephone contact and if necessary, arrangements for onward movement to final destination. In the United States, all actions should be taken not to separate families, unless it is required.

**Feeding**

Food will generally be provided to evacuees in conjunction with and following their arrival at the ERC. Consideration must be given to special feeding requirements of many evacuees such as diabetics, infants, and hypertensive. Planning should involve consultation with specialists such as clinicians, dieticians, and nutritionists. Food should also be culturally sensitive. Food may be provided at the ERC and the temporary shelter with the assistance of non-for profit organizations. In some

**State (Red Cross and/or Volunteer Organizations Active in Disaster)**

**All evacuees**

**NGO, USDA, NER UCG designated agency**
exceptional cases, standby catering contracts for augmentation of existing congregate feeding capabilities may be indicated.

<table>
<thead>
<tr>
<th>Finance and Banking</th>
<th>Provide information regarding locations within the airport where evacuees are able to obtain cash and/or exchange money to U.S. currency.</th>
<th>State (Airport)</th>
<th>All evacuees</th>
<th>NGO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Information Center</td>
<td>Information should be provided to both ERC staff and evacuees. Information to evacuees may include resources and assistance available through Federal, State, and NGOs not currently offered at the ERC. States may want to maintain applicable Federal programs’ information for interested evacuees.</td>
<td>State (Department for Community Based Services)</td>
<td>All evacuees</td>
<td>NGO</td>
</tr>
<tr>
<td>Service Type</td>
<td>Description</td>
<td>Responsible Agency</td>
<td>Beneficiaries</td>
<td>Reimbursement Agency</td>
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<tr>
<td>Interpreters and translation services</td>
<td>As needed, provide interpretation (including remote services) and translation services.</td>
<td>State (Office of Human Resource Management, Language Access Section)</td>
<td>All evacuees</td>
<td>Signs may need to be translated into the main language spoken by the majority of the evacuees. If the State translates any document and intends to bill ACF/ORR for the cost of translation, an electronic copy of the translated materials will need to be submitted to ORR as supporting documentation.</td>
</tr>
<tr>
<td>Mortuary Services</td>
<td>Deceased individuals will be addressed in accordance with existing airport procedures and in compliance with Federal, State and local laws. Assistance with mortuary services will not be reimbursed by ACF/ORR. It is beyond the purview of the Program. This also applies to pets.</td>
<td>State (Office of Coroner and Medical Examiner)</td>
<td>All evacuees</td>
<td></td>
</tr>
<tr>
<td>Other Services</td>
<td>As circumstances permit other services might be provided as needed.</td>
<td>State (Department for Public Health)</td>
<td>All evacuees</td>
<td></td>
</tr>
<tr>
<td>Pharmaceuticals</td>
<td>Prescriptions required for stabilizing the life of an evacuee - supply not to exceed 30 days.</td>
<td>State (Department for Public Health)</td>
<td>All evacuees</td>
<td>This assistance is only provided within the ERC</td>
</tr>
<tr>
<td>Religious and pastoral care</td>
<td>Evacuees who request spiritual first aid should be informed or connected to any such accessible services, either in person or remotely.</td>
<td>State (Volunteer Organizations Active in Disaster)</td>
<td>All evacuees</td>
<td>NGO, NER UCG designated agency</td>
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<tr>
<td>Referral to State of Final Destination</td>
<td>ACF designated staff or agency (e.g., State) will coordinate the referral to the State of final destination. If the State is to perform this task, just-in-time training will be provided. The State of final destination is responsible for providing the appropriate temporary assistance to referred eligible individuals and families for up to 90 days. State of final destination should use establish Program non-emergency activities policies and procedures when providing services.</td>
<td>ACF designated staff or agency</td>
<td>Eligible repatriates</td>
<td>State, NGO, NER UCG designated agency</td>
</tr>
<tr>
<td>Registration and Interview</td>
<td>In determining the needs of individuals and families, State intake staff retrieves basic information using appropriate HHS forms to determine need. During the intake process, repatriates are to be advised of the HHS repatriation loan and all services offered at the ERC. If the repatriate accepts the loan, the intake person should ask to sign the HHS Privacy and Repayment Agreement Form. In addition, information regarding the HHS financial waiver and</td>
<td>State (Department for Community Based Services) and federal</td>
<td>All evacuees</td>
<td>States will utilize the RR-01 form to make initial eligibility determinations. Repatriate’s signed form will be given to the designated Loan Approving Officer to make final eligibility determination.</td>
</tr>
</tbody>
</table>
deferral process should be provided. As needed, just-in-time training will be provided to all intake staff.

| Security and pre-ERC medical assessment | Applicable Federal agencies will perform routine checks on the plane, gate, and/or security points. Attention will be given to any medical emergency of the repatriates. If repatriate needs to be transported to a hospital before arriving to Customs, routine clearance must be performed and notice provided to the FERS and State designated person. Notice should include evacuee biographical information, time of transportation, and hospital location. States are to follow-up on these cases as instructed by the FERS. | Authorized Federal (e.g. CBP, CDC) and State (Kentucky State Police) | All evacuees | Authorized Federal agency |
| Temporary Shelter | This assistance may be provided at commercial establishments (hotels and motels) or it may be necessary to provide shelter at a congregate location, such as a gymnasium. If the evacuee is eligible for the Program and unable to continue to his/her final destination on the date of arrival, the State should assist by providing one day of temporary shelter. Temporary shelter assistance may be extended depending on the situation and upon the FERS’ approval. | State (Red Cross and/or Department for Public Health) | Eligible repatriates will be able to receive temporary shelter assistance at a commercial establishment. The state may work with non-for-profit organizations and other applicable agencies to provide assistance with accommodations at commercial establishment to non-eligible repatriates. If services are provided at a congregate shelter location, both eligible and non-eligible evacuees may be able to | Following expenses are reimbursable under the Program: (1) Commercial establishment services (e.g. hotel room) provided to eligible repatriates. (2) Congregate shelter expenses for all evacuees. Identification of shelter will be performed under the direction of the NER UCG. Approval of shelter will be made by the NER UCG in consultation with the ACF Assistant Secretary. | NGO, GSA, HUD, NER UCG designated agency |
| **Transportation to Temporary Shelter** | Primary means of transportation will include school buses or public transit buses that may be available under the State emergency operations plan. If the temporary shelter is at a commercial establishment, States are to work with the hotels to potentially coordinate free shuttle services to and from the POE. | State (Department for Public Health) | Eligible repatriates will be able to receive transportation assistance through OMEGA. For non-eligible evacuees, if he/she has a credit card or an acceptable method of electronic payment, State can book the onward | OMEGA will bill ACF directly for eligible repatriates’ transportation costs. | NGO, NER UCG designated agency |
travel through OMEGA utilizing the non-eligible evacuee payment mechanism. Look at Attachment #3 for a copy of the OMEGA protocol.

| Veterinary Assistance | Generally, pets are not authorized during an evacuation. However, service animals may be evacuated. State will follow its procedures on how to care for service animals during emergency situations. If the procedure is to maintain service animals with owners, the State is to take into consideration other evacuees’ potential conditions, such as allergies and fear of animals. Airlines will also need to follow their established protocols and procedures. | State (Department of Agriculture, Office of State Veterinarian) | All evacuees | Evacuees will be responsible for the cost associated to the care and treatment of pets. Authorization should be obtain from the evacuee before becoming separated from the service animal. State will bill non-eligible evacuees directly for the service cost. | ASPR, NER UCG designated agency |

Appendix C: ERC Equipment and Supplies

SECTION 1: ERC SUPPLIES AND EQUIPMENT
Categorized lists of supplies and equipment needed to support ERC operations are listed below.
A. Supplies and Equipment
- Locking file box (for selected service areas that compile and save repatriate forms and supportive documentation, e.g. copies of passports)
- Tables
- Chairs
- Sign boards (for ERC facility and each ERC service area)
- Standard printing paper
- Belt barriers (to section off/define service areas)

Other items to consider:
- White board (with dry erase markers and eraser)

B. Box of General Office Supplies for each ERC Service Area:
- Box of pens-black or blue
- Steno notebooks
- Box of paper clips (large size)
- Box of letter size manila files folders
- Clip boards

Other items to consider:
- Box of 2” binder clips
- Highlighters
- Box of rubber bands
- Stapler/w staples
- Pair of scissors
- Role of transparent tape
- Pad of post-it notes

C. Cleaning, Sanitation and Maintenance Supplies
- Brooms and mops
- Dust pans
- Garbage bags (heavy duty)
- Garbage bag ties
- Garbage cans
Liquid cleaning detergent or similar
Hand sanitizer

Other items to consider:
Water hose and shovel (to clean outdoor service animal relief area)

D. Electronics and Communications Equipment
- Power strips and power cords
- Multifunction printer/scanner/fax/copier
- Laptops and mouse
- Wireless network routers
- Paper shredder
- Cell phones
- Cell phone chargers
- Hand held radios (for Command and General Staff)

E. Rest/Respite
- Chairs
- Cots

Other items to consider:
Blankets and pillows

F. Medical/Access and Functional Needs Equipment and Supplies
- Standard and medical cots
- Mini refrigerator (for medication storage in medical service area)
- ADA height table (accommodate wheelchairs)
- Portable privacy screens (for medical and mental health service areas)
- Magnifying readers
- Standard and heavy duty manual wheelchairs
- Walkers
- Crutches
- Communications devices and equipment
  - Telephone with large dial buttons
  - Hearing aid batteries
  - iPad 3 – This device has many apps to provide enlarged text for people with low vision, picture symbols for people with low literacy or communication disabilities, immediate access to sign language interpreters for people who are deaf and many other tools for immediate communication access.
G. Service Animal Supplies
- Bowls for food and water
- Dog food

H. Child Care
- Cribs
- Cots
- Blankets and sheets
- Diapers and wipes
- Changing table (unless provided in public bathroom area)

SECTION 2: ALLOCATION OF SUPPLIES AND EQUIPMENT
Categorized lists detailing how supplies and equipment should be allocated within the ERC are below.

A. ERC Command and General Staff Area
This area may need the following general supplies/equipment:
- Telephones (a telephone system with phone numbers for the ERC must be established)
- General office supplies (pens, paper clips etc.)
- Tables
- Chairs
- Paper shredder
- Sign board (to designate the area)
- White board (with dry erase markers and eraser)
- Laptops (with internet access)
- Multifunctional Printer/scanner/fax/copier machine
- Standard printing paper
- Trash can and bags
- Locking file box
- Hand held radios

B. ERC Service Areas (including the ERC Intake and Exit Desks)
ERC service areas may need the following general supplies/equipment:
- Tables
- Chairs
- General office supplies (pens, paper clips etc.)
- Telephone
- Trash can/trash bags
- Hand sanitizer
Sign board (to display service type, e.g. “Medical Service Area”)
Belt barrier (to section off the service area)

Based on the type of service provided, select service areas (e.g. onward travel desk) may also need:
- Locking file box
- Laptop (with internet access)

C. Allocation of Miscellaneous Supplies and Equipment
- 1-2 printer/scanner/copier/fax machines will be stationed at various locations within the ERC for all Service Areas to utilize as needed.
- Medical Area will need a mini refrigerator for medication storage.
- Items listed under “Medical/Access and Functional Needs Equipment and Supplies” may be needed at the Medical, Mental Health and Communications services areas. In addition, these items can be shared with all of the ERC service areas as needed.
- The Feeding service area (supported by ARC) will need additional chairs and tables to include the appropriate number of ADA height table.
- Onsite Child Care area will need basic items appropriate for the care of infants, toddlers and older children.

SECTION 3: REQUEST FOR SUPPLIES AND EQUIPMENT
Some supplies and equipment may not be immediately available at the ERC, or additional items may be needed. Request for resources can be made SEOC Operations Section.
Appendix E: Definitions of Terms

**Congregate Shelter:** Any private or public facility that provides short term lodging in an aggregate capacity for evacuees and/or repatriates to sleep and/or rest while waiting for their onward travel to final destination. Examples include schools, stadiums, military facilities, churches, etc.

**Eligible Person:** For the purpose of the HHS U.S. Repatriation Program, a U.S. citizen and his/her dependent/s identified by the Department of State (DOS) as having returned or being brought to the United States due to destitution, illness, war, threat of war, invasion, or similar crisis, and is without resources immediately accessible to meet his/her needs. For the purpose of DOS evacuation from overseas to a safe haven, eligible person is a U.S. citizen, U.S. non-citizen national, or certain non-U.S.
citizens identified by the DOS as meeting eligibility requirements of one or more loan programs to travel to the United States due to destitution, illness, war, threat of war, invasion, or similar crisis.

**Emergency Repatriation Activities:** Department of State coordinated repatriations and/or evacuation of individuals from overseas to the United States. Emergency activities are characterized by contingency events such as civil unrest, war, threat of war or similar crisis, among other incidents. Depending on the type of event, number of evacuees and resources available, ACF/ORR responds utilizing two scalable mechanisms, group repatriations (evacuations or repatriations of 50 to 500 individuals) and emergency repatriations (evacuations or repatriations of more than 500 individuals).

**Emergency Repatriation Center (ERC):** A joint service center established and managed by the State on behalf of ACF/ORR. This site is used for processing non-combatant evacuees and for the provision of temporary assistance as defined by Program regulations. ERCs are usually located at commercial service airports and/or military bases. Under rare circumstances, ERCs may be located in facilities or areas outside an airport or military base (e.g. hotel, seaport.).

**Evacuees:** Individuals evacuated during a DOS authorized or ordered departure. This term includes but is not limited to U.S. citizens, dependents of U.S. citizens, lawful permanent residents (i.e. “LPRs” or green card holders), third country nationals, and other individuals with proper documentation to enter the United States (e.g., visa holders).

**Evacuation:** The act of moving designated eligible persons from an area usually of danger to a safer area.

**Port of Entry (POE):** Place of debarkation where one may lawfully enter the United States. The POE can be a commercial service airport, military base, border, seaport, or other federally authorized entry point.

**Reasonable and Allowable Costs:** See definition for temporary assistance or assistance.

**Reception Services:** Emergency services provided at the ERC to evacuees and repatriates following their evacuation and/or repatriation from overseas by DOS. During emergency repatriation activities, reception services are generally provided at the ERC for up to the first 24 hours and do not include U.S. Repatriation Program temporary assistance.

**Repatriation:** The procedure whereby private U.S. citizens and their dependents are officially processed back into the United States subsequent to DOS facilitated/coordinated evacuation.

**Safe Haven:** A place where NCEs under the U.S. Government’s responsibility may be evacuated during an emergency. This location can be in the United States or outside the United States.

**State:** The terms United States and States are defined by 45 C.F.R. 212.1(g) to include the District of Columbia, Puerto Rico, the Virgin Islands, and Guam along with the fifty (50) States. These are the only geographical areas where ACF may provide repatriation assistance during emergencies and non-emergency activities.

**State Emergency Repatriation Coordinator (SERC):** State-designated staff responsible for coordinating the development, implementation, and execution of the State emergency repatriation plan (SERP). This person is the main State POC before, during, and after an emergency evacuation.
Supporting Agency: Government (e.g., Federal, State) and non-government agency or organization with which ACF/ORR or the State has entered into an agreement to assist with specific U.S. Repatriation Program functions. Also referred to “Partners” or “Service Providers.”

Temporary Services or Assistance: Services provided to eligible HHS repatriates and include cash payment, medical care (including counseling), temporary billeting (e.g., shelter), transportation, and other goods and services necessary for the health or welfare of individuals. It is given to eligible individuals upon arrival to the United States for up to 90 calendar days. Services are provided in the form of a loan repayable to the United States Federal Government.

Unaccompanied Minors: U.S. citizen minor or dependent of U.S. citizens from 0 – 17 years who are traveling alone.

Appendix F: Types of Evacuees

In emergency repatriation activities, it is anticipated that large number of U.S. citizens, dependents of U.S. citizens, and others will be evacuated to designated U.S. POEs within a short time frame. Below is a non-exhaustive list of potential categories of individuals who may be evacuated during a DOS coordinated evacuation from overseas.

1. U.S. Citizens: Include USG employees, tourists, business people, commercial travelers, employees of U.S. non-federal agencies working on foreign projects, students, missionaries, and other U.S. citizens residing in a foreign country such as retirees. Generally eligible for Program temporary assistance.

2. Dependents of U.S. Citizens: Dependents may include spouse, parents, unmarried minor children (including adopted and stepchildren), unmarried adult children (who are dependent because they are disabled or with qualifying access and functional needs), grandparents, spouse’s parents, and minor siblings of the U.S. citizen. These evacuees may be eligible for Program temporary assistance if able to prove to be a dependent of the U.S. citizen.

3. Third-Country Nationals: Citizens of other countries may be evacuated along with U.S. citizens. Some may come with a visa (e.g., humanitarian assistance), paroled, or other immigration status. These evacuees may be utilized by DOS as escorts for U.S. citizens. DOS will ensure timely communication, planning, and coordination with pertinent USG agencies, including HHS and Department of Homeland Security (DHS), to ensure evacuees have proper documentation to lawfully enter the United States, and to address proper U.S. coordination and potential impact (both at the Federal and local levels) of these evacuees. These evacuees may be eligible for Program temporary assistance only if determined a dependent of a U.S. citizen. However, most reception services will be available to this group. The number of these evacuees is expected to be low.
4. Lawful Permanent Resident (LPR): Any person not a citizen of the United States who is residing in the U.S. under legally recognized and lawfully recorded permanent residence as an immigrant. Eligible only if determined a dependent of a U.S. citizen.

5. U.S. Nationals: For the purpose of this Program, individuals who were born in American Samoa or in the Commonwealth of the Northern Mariana Islands are generally eligible during emergency repatriations.

6. U.S. Tribal Member: A member of a group or community of Indigenous peoples in the United States. For the purpose of the HHS U.S. Repatriation Program, these evacuees are considered U.S. citizens.

7. Refugees and Asylees: Not expected to be part of an evacuation. However, if an evacuee meets the definition of refugee or asylee, he or she will not be eligible to receive Program temporary assistance, unless determined to be a dependent of a U.S. citizen. They may separately qualify for ORR refugee assistance, in which case, after leaving the ERC the State of final destination may provide assistance according to its approved State refugee assistance plan.

**Appendix G: OMEGA and Protocol**

**Booking Ongoing Travel**

The Office of Refugee Resettlement (ORR), State or other agency acting on behalf of ORR will be responsible for booking onward travel for eligible repatriates. Onward travel will be processed through the Repatriation Program contracted travel agency. At the Emergency Repatriation Center, States will provide the necessary space, equipment, and resources needed for the processing of onward travel of eligible repatriates. Necessary authorizations, information, and training (e.g., in-time) will be provided by HHS deployed staff to the identified state personnel in order to assist with onward travel services.

Eligible repatriates will be provided with onward transportation in the form of a loan that will be repaid to the Federal Government. Non-eligible repatriates who desire to book their onward travel through the Repatriation Program contracted agency, will have to utilize a valid payment method, not including cash and/or personal checks, to pay for their onward travel at the time of booking.

1. ORR will be billed directly for the transportation tickets.
2. Presently, OMEGA is the agency that ORR will utilize to book travel. OMEGA is not a system but the contracted HHS/ACF travel agency. Important to know:

3. State personnel will staff the onward travel section. OMEGA personnel will be remotely available 24/7 for the duration of the event,

4. A list containing the state staff names and other identifiable information (e.g. state ID number) will be provided to HHS Travel Officer at the ERC in order to provide authorization to contact OMEGA.

5. OMEGA representatives will be available via phone to assist with booking. Once the ticket is issued an e-mail or fax will be sent to the authorized state person. A copy of the itinerary will be provided to the repatriate and a copy will be maintained in their file.

6. Timely OMEGA booking training and instructions will be provided to the State or other agency acting on behalf of HHS by the HHS Travel Officer and/or HHS delegated agency.

7. Evacuees who are determined to be ineligible for repatriation assistance and in need of onward travel may be assisted utilizing OMEGA utilizing a valid payment method.

8. States should have a system to track non-eligible repatriates assisted through OMEGA.

**BOOKING ONWARD TRAVEL**

- Workstations should be equipped with a phone, printer, fax, and copy machine.

- Greet evacuees as they arrive to your area.

- Your job is to facilitate the necessary travel accommodations for each evacuee that arrives to your station whether they are eligible for repatriation assistance or not.

- For each evacuee or repatriation unit (family) you will need to dial the OMEGA 1800 number provided. The OMEGA representative will ask for your name and provided identifier. Please confirm the email...
address with the representative before ending the call. You need to make sure reservation is sent to the appropriate e-mail or fax number.

Eligible repatriates should have a copy of their RR-01 with them before booking is made.

For repatriates with no RR-01, ask if he or she has had the opportunity to be assessed for repatriation assistant by an intake person. If not, please direct them to the intake area/table. If they have the form completed indicating that they are eligible for services, begin booking their travel using OMEGA. Confirm their passport number and Government issued ID. Some repatriates may not have an extra ID, the passport will be sufficient.

Give the OMEGA travel agent all the information regarding the travel itinerary. You will need to get either the Social Security number or passport number of each evacuee to the OMEGA travel agent. **PLEASE NOTE: Social security numbers and passport numbers should not be given electronically. Please communicate this sensitive information via phone ONLY.**

Once you have confirmed the flight information, names of travelers, among other information, you will receive an email/fax confirmation. Please print out this document twice. Give one copy to the evacuee. Keep one copy with Repatriation Form as a paper back-up.

If a person wants to cancel the flight and/or decides they do not want to go to the location that was booked, information has to be provided to the repatriate advising that they might be able to change their tickets, but may need to pay a fee. You will need to speak with the HHS Travel Officer to assist with these cases.

Cancellation will be contingent upon the possibility of being able to cancel the ticket. No guarantees will be made that a ticket will be canceled once purchased.

If the repatriate requests cancellation within a timely manner, call one of the HHS Travel Officer for them to approve the cancellation. Call OMEGA and cancel the flight. Keep a copy of the cancellation e-mail on the repatriate’s file and provide the repatriate with a copy. At any time consult with the HHS Travel Officer for guidance and instructions, as needed.
some individuals may have a return ticket with an airline. The state person will generally assist the repatriate in contacting the airline to work a potential change in the schedule. In most cases a fee will be required. If the repatriate has the resource and is willing to pay, the ticket will generally be changed by the airline. If the repatriate does not have resource, he/she will need to get a new ticket through OMEGA.

**Note:** It is important that the name you give OMEGA, matches the RR-1 Form, which matches the exact name as it appears on the government issued ID. If at any point you realize that the name does not match on all three documents, then you will need to take the person to the assessment table for a revision of the person’s documents.
APPENDIX I

Figure 148: ERC Concept

Typical Structure of JRPCs

![JRPC Structure & Operational Concept (Up to 10 locations with 130 personnel per JRPC for 24/7 Ops)](image)

Figure 229: JRPC Concept