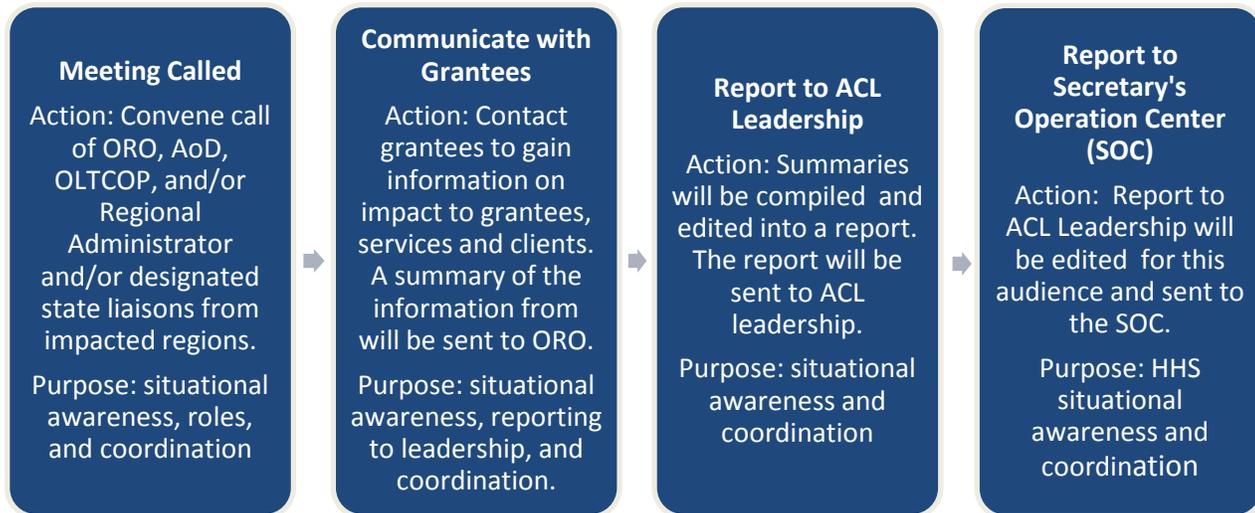# Administration for Community Living's Crisis Management and Emergency Response Capabilities

Disaster Response

Administration for Community Living (ACL) is not a first-responder organization. ACL's role in disaster response activities, whether it is a disaster, pandemic or domestic terrorism event, is limited to situational awareness and coordination with grantees and other federal offices and agencies. ACL works closely with the Office of the Secretary, particularly the Office of the Assistant Secretary for Preparedness and Response (ASPR), and through ASPR, with the Federal Emergency Management Agency (FEMA), to make sure that the needs of older Americans and persons with disabilities are addressed when a disaster occurs. The Administration on Aging also has limited grant resources that are available to reimburse State Units on Aging and eligible Tribal Organizations for costs related to disaster response.

COORDINATION WITH GRANTEES

ACL provides limited technical assistance and guidance on disaster response to grantees upon request and works with grantees when a disaster occurs to collect information on response efforts. Additionally, ACL disseminates available tools and resources to grantees, depending on the event, from many relevant government entities, including FEMA's ready.gov, CDC and ASPR. The Office of Regional Operations (ORO), working with the Regional Support Centers on behalf of the Administration on Aging, and the Administration on Disabilities (AoD) determine the best method (whether email and/or telephone) of communication with their grantees, which may vary by grantee or program. Depending on the scope and severity of the disaster, the Office of Long-Term Care Ombudsman Programs (OLTCP) may also contact the State Long Term Care Ombudsman in the affected state. The following graphic presents the basic process, which is described in greater detail below:

Meeting Called	**Communicate with Grantees**	**Report to ACL Leadership**	**Report to Secretary's Operation Center (SOC)**
Action: Convene call of ORO, AoD, OLTCOP, and/or Regional Administrator and/or designated state liaisons from impacted regions. Purpose: situational awareness, roles, and coordination	Action: Contact grantees to gain information on impact to grantees, services and clients. A summary of the information from will be sent to ORO. Purpose: situational awareness, reporting to leadership, and coordination.	Action: Summaries will be compiled and edited into a report. The report will be sent to ACL leadership. Purpose: situational awareness and coordination	Action: Report to ACL Leadership will be edited for this audience and sent to the SOC. Purpose: HHS situational awareness and coordination

Only those grantees that have a role in disaster response and/or provide services (either directly and/or through providers) are typically contacted. During these situations, it is important to balance ACL's need for information from our grantees with the grantees' priority of responding to the disaster and ensuring their clients' welfare, and to recognize that grantees may not always be able to respond in a timely manner to requests for information due to conditions on the ground.

Since ACL grantees provide a broad array of activities and services, information from grantees will focus on situational awareness and coordination, including:

- impact to grantee (which may include information that the grantee has from their service providers), which may include structural damage, power or communications outage, and staffing capacity;

- impact to services and/or activities including those provided directly by the grantee and/or their providers;

- impact to clients, which may include evacuations, shelter-in-place, impact to housing, impact to family caregivers, and unmet needs identified;

- any other information that may help with situational awareness and coordination, which may include activities related to shelters and response activities within disaster coalitions; and

- resources that may be helpful, as related to the HHS Disaster Human Services Concept of Operations/Essential Elements of Information.

Based on information obtained from grantees, summaries are compiled and reports are provided to ACL leadership and to the Secretary's Operations Center.

As the disaster moves into recovery phase, other program offices may become involved depending on the scope and severity of the disaster and the nature of various requests for assistance that may come from the state and the grantees that serve the access and functional needs of the aging and disability populations.

AOA DISASTER ASSISTANCE GRANTS
Under Section 310(a) of the Older Americans Act, up to 2% of the funding appropriated for activities authorized under Title IV of the Act may be used to provide disaster reimbursement and assistance funds to those State Units on Aging (SUAs) and federally recognized Tribal organizations who are currently receiving a grant under Title VI of the Older Americans Act (OAA), as amended. These funds only become available when the President declares a National Disaster and may only be used in those areas designated in the Disaster Declaration issued by the President of the United States through the Stafford Act. Eligible SUAs and Title VI grantees must apply for funds and applications should reflect the amount of funds expended. Applicants are directed to work with their ACL regional state liaison to determine what funds may be available through other resources before applying for OAA funding.

Continuity of Operations

OVERVIEW
If part or all of the ACL Central Office located in the Switzer Federal Office Building in Washington, D.C. is unsafe to use as a base of operations, then a Continuity of Operations (COOP) Plan is activated. If the ACL Central Office COOP Plan cannot be implemented for any reason, the Region IV Office in Atlanta, GA, will assume responsibility for ACL's essential functions, as identified in the COOP plan.

For the Regional Offices, the decision to activate the region's COOP plan is the responsibility of the corresponding HHS Regional Director. In the event of a Regional COOP event, ACL Regional Administrators will notify the ACL Central Office.

OBJECTIVES
The objectives of the ACL Central Office COOP Plan are to ensure the execution of essential ACL functions and to provide for the safety and well-being of employees during any emergency in which our primary operating facility and/or other occupied space is threatened or inaccessible. Specific objectives include the following:

- Ensure continuous performance of essential ACL functions in an emergency;
- Protect essential facilities, equipment, vital records, and other assets;
- Reduce or mitigate disruptions to operations;
- Provide for safety of personnel and minimize damage and losses; and
- Achieve an orderly recovery from an emergency and resume full service.

CONTINUITY OF OPERATIONS (COOP) PHASES:

In the event an incident is so severe that normal operations are interrupted, or if such an incident appears imminent and it would be prudent to evacuate the Washington, D.C. metropolitan area as a precaution, the Secretary of HHS or the ACL Administrator may direct full or partial activation of the ACL Central Office COOP Plan. Events of this nature can occur with or without warning. When the COOP Plan is activated, the pre-selected COOP Team deploys to the alternate site (located in Frederick, MD) to carry out essential functions of the agency. All other employees remain at, or return, home to await further instructions from their supervisors. There are three phases to ACL's COOP plan.

- *Phase I:* Activation and Relocation (12 Hours)
    - Initial response and assessment of an incident at the ACL Building is made by the Director of the Office of Administration and Personnel (Safety Officer) and Deputy Administrator for Management and Budget, who advise the ACL Administrator.
    - Decision to notify employees to work from home is made by the ACL Administrator.
    - Administrator and assigned COOP Team deploy to work from Frederick COOP Facility until Central Office is declared open for regular operations.

- *Phase II:* Alternate Facility Operations (24 Hours to Termination) Emergency team focuses on:
    - Any national event that may be in progress.
    - Continuing the daily essential functions of each Center.
    - The immediate crisis at the ACL Central Office Building and recovery of the facility.
    - Information for the employees, public and the media and legal issues. ACL Public Affairs Liaison to ASPA.

- *Phase III:* Reconstitution Termination and Return to Normal Operations
    - Reconstitution activities in this phase begin in Phase II and continue until the occupation of the existing or refurbished facility is complete.
    - Atlanta Regional Offices are the Devolution Site for the Office of the Secretary and ACL, with the Centers for Disease Control and Prevention as the lead for reconstitution in the case both HHS and ACL cannot utilize the Frederick alternative location.

Information Technology, Security, and Privacy

ACL uses a holistic approach to governing and managing information and technology. Decisions are closely integrated with ACL's Program Funding Plan Process, which is used to manage the development and execution of spending plans consistent with ACL's authorizing legislation and appropriations. This helps ensure that data required by, and information produced by, ACL systems is consistent with the administrative and program needs of our agency.

Because ACL is a relatively new organization, we have not developed our own set of unique policies and practices to govern and manage information and technology. Our authority for the management and governance of information technology derives from the Clinger-Cohen Act, the Federal Information Security Management Act, the Federal Information Technology and Acquisition Reform Act, and other legislation defining the requirements for the management of data, information, and systems. ACL also leverages the work done by the HHS Office of the Chief Information Officer as well as other operating divisions to support our architecture, project and portfolio management (including capital planning and investment control), and security practices. In addition, we draw from standards and practice setting organizations including the World Wide Web Consortium and the National Institute of Standards and Technology to apply to our portfolio of systems to ensure the highest possible levels of accessibility, usability, privacy and security.

PRIVACY AND SECURITY

The privacy of information, in particular personally identifiable information and personal health information, and the security of all of our information and systems is critically important. ACL manages a portfolio of approximately 30 IT systems and web sites in support of both program and administrative activities. The Office of Information Resources Management works constantly with ACL staff and program offices to inform them of the use of appropriate privacy and security practices and controls.

As a result of emerging cybersecurity threats, and a number of high profile breaches of Federal information systems, including loss of personal identifiable information, ACL has begun the process of actively reviewing the management and security controls in place for all of our information system. We are also engaged in updating the documentation required to comply with Federal and HHS requirements for operating Federal information systems. ACL recognizes and acknowledges that all systems for the collection and management of information have risks. ACL seeks to manage those risks by carefully assessing the impact of the risk on our business, the business of our partners at HHS, and the business of our stakeholders – grantees and the people and organizations to which they provide services – and develop mitigation strategies and controls to minimize the occurrence and impact of the risks.