Integrating Emergency Management and Mobility Management

July 2020
About the National Center for Mobility Management (NCMM)

The National Center for Mobility Management is a national technical assistance center funded through a cooperative agreement with the Federal Transit Administration, and operated through a consortium of three national organizations—the American Public Transportation Association, the Community Transportation Association of America, and Easterseals Inc. The mission of the Center is to promote customer-centered mobility strategies that advance good health, economic vitality, self-sufficiency, and community.
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Introduction

With the onset of the COVID-19 pandemic in communities across the United States, emergency management has received renewed interest and importance in the work of mobility management practitioners. Long before disasters and other events hit, local communities, states and the federal government must continuously reassess plans and responses to all kinds of emergencies. Transportation is a critical component of these efforts, particularly for non-drivers and people who need mobility assistance during emergency situations or require other means to have access to essentials such as food, medical care, prescriptions, among other services.

From the transportation perspective, emergency response plans typically include an inventory of available vehicles and transportation resources, and the response to emergencies requires significant coordination between various agencies, transportation providers, hospitals, etc. While hopefully your community never experiences a situation that requires emergency transportation, one of the potential functions of a mobility management practice could be to coordinate with emergency management staff as needed before, during, and after emergencies.

This information brief is intended to support mobility managers make connections with emergency management colleagues in their community.

This information brief is divided into three sections:

I. Overview of Emergency Management and Synergies with Mobility Management

II. What can Mobility Managers Do to Address Transportation Challenges During and After Emergencies?

III. Examples of Integrated Emergency and Mobility Management

Emergency Management Defined

According to the Federal Emergency Management Agency (FEMA), emergency management is defined as the “managerial function charged with creating the framework within which communities reduce vulnerability to hazards and cope with disasters.” The mission of emergency managers is often to “protect communities by coordinating and integrating all activities necessary to build, sustain, and improve the capability to mitigate against, prepare for, respond to, and recover from threatened or actual natural disasters, acts of terrorism, or other man-made disasters.”

This information brief is intended to support mobility managers make connections with emergency management colleagues in their community.
I. Overview of Emergency Management and Synergies with Mobility Management

The Concept of Emergency Management

According to the Federal Emergency Management Agency (FEMA), emergency management is defined as the “managerial function charged with creating the framework within which communities reduce vulnerability to hazards and cope with disasters.” The mission of emergency managers is often to “protect communities by coordinating and integrating all activities necessary to build, sustain, and improve the capability to mitigate against, prepare for, respond to, and recover from threatened or actual natural disasters, acts of terrorism, or other man-made disasters.” Another definition provided by the Urban Assembly School for Emergency Management states that “emergency management is a dynamic process of preparing for, mitigating, responding to and recovering from an emergency. Planning, though critical, is not the only component. Effective emergency management relies on the integration of emergency plans at all levels of government and non-government, including individuals and community organizations.”

Figure 1 illustrates that the phases of emergency management are not linear, but circular with interrelated phases and continuous.

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1 Emergency Management Definition, Vision, Mission, and Principles, FEMA. 
https://training.fema.gov/hiedu/docs/emprinciples/0907_176%20em%20principles12x18v2f%20johnson%20w-o%20draft).pdf

2 What is Emergency Management? The Urban Assembly School for Emergency Management. 
http://uasem.org/what-is-emergency-management
What does an Emergency Manager Do?

According to the Department of Labor, “Emergency Management Directors prepare plans and procedures for responding to natural disasters and other emergencies. They also help lead the response during and after emergencies, often in coordination with public safety officials, elected officials, nonprofit organizations, and government agencies.” The Department of Labor also lists other activities of emergency manager professionals:

- Assess hazards and prepare plans to respond to emergencies and disasters in order to minimize risk to people and property.
- Meet with public safety officials, private companies, and the general public to get recommendations regarding emergency response plans.
- Organize emergency response training programs and exercises for staff, volunteers, and other responders.
- Coordinate the sharing of resources and equipment within the community and across communities to assist in responding to an emergency.
- Create communication and support networks that serve and identify the most vulnerable people that may require differing levels of support during emergencies.
- Prepare and analyze damage assessments following disasters or emergencies.
- Review emergency plans of individual organizations, such as medical facilities, to ensure their adequacy.
- Apply for federal funding for emergency management planning, responses and recovery and report on the use of funds allocated.
- Review local emergency operations plans and revise them if necessary.
- Maintain facilities used during emergency operations.

What is the emergency management planning process?

The cornerstone for emergency management professionals is the development of emergency operations plans (EOPs). This plan is comprehensive, incorporating differing approaches and techniques for integration and synchronization of strategies detailed in these plans. At a minimum the EOP describes what the local government will do when conducting emergency operations. The EOP:

- Assigns responsibility to organizations and individuals for carrying out specific actions that exceed routine responsibility at projected times and places during an emergency
- Sets forth lines of authority and organizational relationships and shows how all actions will be coordinated

To learn more about emergency management professionals, common terminology and their roles, FEMA’s Higher Education Program prepared a resource titled “Learning More About The Emergency Management Professional” by David A. McEntire, PhD.

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• Describes how people (including unaccompanied minors, individuals with disabilities, others with access and functional needs, and individuals with limited English proficiency) and property are protected
• Identifies personnel, equipment, facilities, supplies, and other resources available within the jurisdiction or by agreement with other jurisdictions
• Reconciles requirements with other jurisdictions.\(^4\)

National policies and planning initiatives, such as the **National Response Framework (NRF)** and the **National Incident Management System (NIMS)**, call for a coordinated response to incident management through a network approach. Like the transportation planning process, planning for emergencies must be community-based, representing the whole population and its needs.

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**Figure 2 - The Emergency Planning Process. Source: CPG 101, FEMA.**

**Synergies between Emergency Management and Mobility Management**

The above functions bear striking resemblance with the activities of mobility managers, albeit within different spheres of professional expertise. The synergies between emergency management and mobility management are also evident within the basic principles of emergency management, as defined by FEMA below:

1. **Comprehensive** emergency managers consider and take into account all hazards, all phases, all stakeholders and all impacts relevant to disasters. Mobility managers similarly look at all kinds of transportation available in the community and understands the needs of various rider groups and their functional needs.

2. **Progressive** emergency managers anticipate future disasters and take preventive and preparatory measures to build disaster-resistant and disaster-resilient communities. Likewise, mobility managers seek to create sustainable programs that meet community transportation needs over the long term.

3. **Risk-Driven** emergency managers use sound risk management principles (hazard identification, risk analysis, and impact analysis) in assigning priorities and resources.

4. **Integrated** emergency managers ensure unity of effort among all levels of government and all elements of a community. Mobility managers are dedicated to incorporating efforts from all levels of transportation funding and service delivery to leverage resources for their community.

5. **Collaborative** emergency managers create and sustain broad and sincere relationships among individuals and organizations to encourage trust, advocate a team atmosphere, build consensus, and facilitate communication. Mobility managers must creatively manage a broad range of stakeholders in order to move towards transportation initiatives that meet local community needs.

6. **Coordinated** emergency managers synchronize the activities of all relevant stakeholders to achieve a common purpose. Mobility managers contribute to the local coordination process, develop priorities for coordination, and collaborate within small and large groups.

The National Center for Mobility Management has developed competencies that apply to the practice of mobility management. Competencies list the specific knowledge sets, skills, and tasks required to successfully perform “critical work functions” typically associated with mobility manager positions. Learn more about these competencies on [NCMM’s web page](#).

7. **Flexible** emergency managers use creative and innovative approaches in solving disaster challenges. Mobility managers are inherent problem solvers and “think outside the box” when it comes to addressing transportation challenges.

8. **Professional** emergency managers value a science and knowledge-based approach based on education, training, experience, ethical practice, public stewardship and continuous improvement. Mobility managers are likewise continuously learning new skills and developing tools to improve their practice.

With an understanding of the roles and responsibilities of emergency managers, mobility managers can leverage their skillsets to be a crucial stakeholder in responding to an emergency. Among other needs, emergency managers must ensure that citizens have vital transportation in emergencies, support regarding accommodations & communications for vulnerable populations, and ensure that people with disabilities and older adults must be at the table when designing emergency management plans. Section II of this brief will explore some potential strategies for mobility managers to assist emergency managers with coordinating transportation in emergencies. Section III shares some examples of integrated emergency management and mobility management in the field.
II. What can Mobility Managers Do to Address Transportation Challenges Before and During Emergencies?

There are two guiding questions that can serve as the basis for action by a mobility manager in emergency management discussions:

1. How can we help emergency management partners assess the roles, capabilities and needs of transportation partners in emergency situations?

2. How will my customers be served in an emergency?

The following strategies seek to address these questions and help mobility managers brainstorm activities in all stages of emergency management planning processes including preparedness, response, recovery and mitigation.

I. Build Relationships

   a. With emergency management professionals. Find out the contact information of your local emergency management agency through your state emergency management directory, found here. Underscore the synergies outlined in Section I of this brief. Get to know your EMS colleagues by inviting them to community meetings. Similarly, make yourself available to serve on review panels or in advisory capacities. The goal of working with emergency management partners is to identify needs and a common language.

   b. With transportation providers in the community. Leveraging partnerships with existing transportation providers is important to identify their essential services. Help providers think about what their essential services are and how their organization will serve clients and/or the broader community in an emergency. As part of your environmental scans to develop a community transportation inventory, ask providers about preparedness for emergency situations. This can help providers think about handling the disruptions of an emergency or major disaster and help emergency management understand the capabilities and limitations of your transportation program.

   c. With local elected officials. Consider the need to have a champion or leadership buy-in to encourage several government entities to prepare for the next disaster.

II. Bring Your Expertise to the Table

   a. Engage customers with disabilities and other access and functional needs in the emergency planning process. Develop plans to provide basic mobility under all conditions. Ensure that emergency planning considers people with special needs (physical disabilities, low incomes, English language learners, etc.). Develop communication and support networks that serve vulnerable people via community outreach. Each neighborhood should have an inventory of people who may need
assistance, ways to contact them, directions for their evacuation, and a list of their friends and family who can provide emergency support. If possible, social service agency staff or volunteer community leaders should travel with vulnerable evacuees to provide information and reassurance to people who may be frustrated and frightened. Implementing such a system requires that mobility managers work with a broad range of community groups, professionals and social service organizations. Leverage your network of community organizations to identify their needs and maintain effective communications with vulnerable groups. This involves a system to identify and contact vulnerable people, provide individualized directions for their care and evacuation, and establish a chain of responsibility for caregivers.

b. Amend your transportation asset inventories to include information about transportation agency preparedness for emergency response. Perform a “Resource Capabilities Assessment,” which is a detailed inventory of what resources your organization could utilize to support your own customers during an emergency, as well as to participate in community-wide emergency response efforts. It includes an inventory of transit vehicles and their specific characteristics, transit facilities and their capacity to support emergency response, specialized transit equipment and tools that can assist emergency operations, and transit staff and the skill sets they possess. This assessment is not just the sum total of your assets; it also considers limitations. For example, if you plan to continue delivering essential services to your regular customers during an emergency, what is the spare capacity of vehicles and drivers that you can contribute to community emergency response? How long will it take to mobilize them? What could you provide if you cancel all but life-sustaining medical transportation? Once mobilized, can

<table>
<thead>
<tr>
<th>Must-Read Resources to Assist Vulnerable Populations in an Emergency</th>
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<tbody>
<tr>
<td><strong>Enhancing Public Health Emergency Preparedness for Special Needs Populations: A Toolkit for State and Local Planning and Response</strong> This interactive tool helps state and local health departments better identify, plan for, and respond to at-risk individuals with access and functional needs. The toolkit provides web-based GIS tools that uses US Census data to identify at-risk populations with access and functional needs, ranging from frail older adults, children, populations with limited English proficiency, and populations with limited resources.</td>
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<tr>
<td><strong>ADA Best Practices Tool Kit for State and Local Governments, Chapter 7 Addendum 2: The ADA and Emergency Shelters: Access for All in Emergencies and Disasters</strong></td>
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<tr>
<td><strong>Capacity-Building Toolkit for including Aging &amp; Disability Networks in Emergency Planning.</strong></td>
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<tr>
<td><strong>Centers for Disease Control and Prevention Public Health Workbook: To Define, Locate, and Reach Special, Vulnerable, and At-risk Populations in an Emergency</strong></td>
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<td>This CDC workbook is intended to provide public health and emergency preparedness planners with better ways to communicate health and emergency information to at-risk individuals with access and functional needs for all-hazards events through step-by-step instructions, resources guides and templates.</td>
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you maintain a maximum effort for the next 12, 24, or 48 hours? What will it take to return to normal after the emergency is over?

c. Strive for diversity, flexibility and redundancy in the community transportation network. Mitigate the failure of one link of transportation by advocating for a multi-modal transportation system that provides a variety of mobility options.

d. Assist emergency managers with developing an action plan that identifies specifically who will do what with regards to transportation during disasters. Update the plan regularly, particularly after a disaster event tests its effectiveness. Develop performance measures related to the coordination that apply to partner agencies.

e. Include disaster response as part of all transportation planning efforts (local, regional, state transit plans, human service transportation coordination plans, etc.). Consider the widest possible range of possible disasters and stresses on the transport system and consider the widest possible range of possible solutions.

III. Continuously Improve and Respond to New Hazards

a. Participate in planning and tabletop exercises, frequently hosted by emergency management agencies.

b. Participate in coordinating and planning meetings, as well as activities designed to establish and improve interagency and public communication before, during, and after an event.

c. Include a focus on emergency management planning and resiliency in your mobility management grant applications.

d. Assess agency resources- current plans, committees, staff, vehicles.
   i. Review emergency management plans and look for opportunities to integrate transportation focus;
   ii. Review human service transportation coordination plans and look for opportunities to integrate an emergency management focus;
   iii. Provide public information to support rapid and effective implementation of response measures.

e. Assess hazards & community vulnerability. Learn from emergency managers and ask them how they assess population risk.

f. Preserve institutional memory by documenting successes and failures and updating emergency plans while the experience is still fresh. There are often years or even decades between major disasters.

g. Maintain and update a contact list.

As a mobility manager, you can ensure that emergency managers are part of your work developing human service transportation coordination plans and conversely, ensure that you are part of an emergency manager’s plan. Your contribution to emergency transportation plans should include:

• Communication and support networks that serve the most vulnerable people. This involves a system to identify and contact vulnerable people, provide individualized directions for their care and evacuation, and establish a chain of responsibility for caregivers.

• Planning to allow quick deployment of buses, vans and trains. This requires an inventory of such vehicles and their drivers, and clearly established instructions for their use.

• A system to prioritize evacuations based on factors such as geographic location (evacuate the highest risk areas first), and individual need and ability.

• Emergency evacuation information distributed to at-risk populations and all officials, including instructions on pickup locations and what evacuees should bring. This information should be distributed regularly, not just during major emergencies.

• Coordination of fuel, emergency repair and other support services.

• Priority for buses and other high occupancy vehicles where critical resources (road space, ferry capacity, fuel, etc.) are limited.

“Making local connections between EMA and the mobility management network was essential through the COVID-19 pandemic. It didn’t take much time at all for them to take on challenging issues because the range of service was even stronger as a team.”

- Olivia Hook, Statewide Mobility Coordinator, Ohio DOT

III. Examples of Integrated Emergency and Mobility Management

In developing this information brief, NCMM found several examples of mobility management programs working to promote coordination between transportation and emergency management fields. These case studies are presented to share experiences and results of mobility management working in tandem with emergency management. If your mobility management program has a case study worth sharing, please contact jtheunissen@easterseals.com to be considered as a case study in this information brief.

1) **Hopelink Mobility Management**, based in King County, Washington provides staff support for the Regional Alliance for Resilient and Equitable Transportation (RARET) workgroup, which serves Snohomish, King, and Pierce Counties. RARET seeks to increase the critical transportation services available to older adults, people with disabilities, low income individuals and other vulnerable populations in the event of an emergency in the Puget Sound region. Hopelink is a community action agency whose mission is to promote self-sufficiency for all members of the community with the vision of a community free of poverty. Hopelink
has always been the fiscal sponsor of RARET and is the mobility management center for all of King County.

RARET came together in response to Urban Area Security Initiative (UASI) conference in response to the 9/11 terrorist attacks. Out of that conference came the idea of a regional effort to promote regional safety and resilience for vulnerable populations. In practice, this can mean responding to the person who lives in a rural area and needs dialysis daily but will not be able to due to an earthquake damaging roads, or a person with a wheelchair who can’t get to their job because a massive snowstorm suspended transit service.

Over the years, RARET has convened regional partners through a combination of coalition work, education, and outreach efforts. Through the alliance, RARET has gotten involved in the comprehensive emergency management planning process. RARET’s position as a nexus of emergency planning and transportation allows it to influence preparation of transportation’s inclusion in comprehensive emergency management plans. In addition, RARET has had success in identifying opportunities for collaboration and resource sharing by building a network of over 45 transportation providers of all sizes. RARET plans to formalize this transportation provider’s alliance this year whereupon RARET will offer training and resources in exchange for providers’ willingness to operate in an emergency. Stakeholders like human service agencies and community aging and disability advocates are another crucial piece of the puzzle and have been instrumental in identifying the transportation needs faced by populations with access and functional needs in a regional emergency. The workgroup features representation from emergency management, transportation, human services, tribes, and community advocates from King, Pierce and Snohomish counties, including Rooted in Rights.

During COVID-19, RARET has been reaching out to various transportation providers and compiling weekly impact summaries that are updated and shared weekly. This resource sharing via RARET’s established workgroup has helped the coalition track emergent needs in emergencies and address them directly. For example, weekly meetings revealed that a school district was looking to extend feeding into the summer but due to the way contracts worked they were going to run out of funding at the end of the school year. RARET was able to bring them to the attention of the coalition members, and they were able to find a solution to ensure that the feeding program continued.

“Disasters are a great way to find new partners, because everybody is figuring out exactly what they need and who they need to talk to.” - Nathan Emory, RARET Coordinator for Hopelink

RARET Resources

RARET developed a Business Continuity Planning Guide for Transportation Providers to increase the preparedness and ability of special needs transportation providers to assist in the evacuation of access and function-al needs populations, transportation to emergency shelters, and/or maintaining access to life-sustaining medical services and other necessary trips.

RARET also developed a work plan for 2020 with specific, measurable, assignable, relevant, and time-based objectives which can serve as a model for mobility management programs considering similar initiatives.

Program link: https://www.kcmobility.org/raret
onboard and connect them with Pierce County emergency management and got them talking about emergency funding available to continue service moving forward.

Looking ahead, RARET is preparing for the Cascadia Subduction Zone Earthquake, which is expected to be a 9.0+ magnitude earthquake, and emergency plans for this will be tested in 2022. RARET will work with partners to develop individual county and regional emergency transportation plans in preparation for this. Additionally, RARET is working with the King County Mobility Coalition (KCMC) to support a One-Call/One-Click system that is like a 211 for transportation booking, with an eventual ideal of using this system to streamline emergency efforts. Inroads have been made through the process of compiling COVID-19 impact summaries. Nathan Emory, RARET’s coordinator for Hopelink said that “disasters are a great way to find new partners, because everybody is figuring out exactly what they need and who they need to talk to.” The next steps for RARET is to formalize a transportation provider alliance that can leverage technology to streamline the process of coordinated emergency response.

Program contact: Nathan Emory, RARET Coordinator for Hopelink

2) The Ohio Department of Transportation (ODOT), via its Ohio Mobility Management Program, has partnered with the Ohio Emergency Management Agency (EMA). The coordination efforts with EMA and mobility managers was done on a case per case basis during COVID-19 stay at home order from March 2020-June 2020. As a result of working with EMA to communicate real-time information on transportation resources, ODOT has developed an online database of transportation services for everyone to access, including state agencies and beyond. A screenshot of the online database in Figure 3 shows how the database displays information on transportation providers and at what capacity they are operating while Ohio recovers from the shelter in place order. Currently, ODOT is scrubbing data from coordinated plans as well as updated service changes from mobility managers to populate the database. Each county will have a point of contact (POC) for transportation resources. Most of them are Mobility Managers and counties without a mobility manager has either lead agency or the MPO as the county’s point of contact. The goal is to release the database mapping in July 2020.

Figure 3 - ODOT’s Database of Transportation Providers Available During COVID-19. Image credit: ODOT
Beyond partnerships with EMA, ODOT has worked with the Ohio Department of Health (ODH) to utilize mobility managers to coordinate transportation and site locations for COVID-19 testing sites around the state. ODH also is distributing cloth face masks to local vulnerable populations. Mobility managers are partnering with ODH and enduring the cost using CARES Act funding to assist in bringing those face masks to the local agencies that serve elderly, disabilities and low-income support organizations. This will reduce cost in shipping from ODH, develop a relationship between the agencies and the mobility management program, and elevate the importance of mobility managers.

Program contact: Olivia Hook, Statewide Mobility Coordinator, ODOT

3) Des Moines Area Regional Transit Authority (DART) has seen the value of both new and long-standing local and regional partnerships that have been helpful in meeting the region’s needs as it responded to COVID-19. One partnership with local area food pantry, Des Moines Area Religious Council (DMARC), emerged a few years ago when they started offering mobile food pantries, where they go out to local senior centers and apartment complexes. DART began partnering with DMARC to host a mobile food pantry every Thursday at DART Central Station, allowing DART riders to pick up food while they are at the station—making the food pantry more accessible to DART riders. Amidst the COVID-19 pandemic, DMARC began shifting its service model to offer delivery of food pantry items. Overwhelming demand led to DART offering the assistance of its paratransit fleet for deliveries that could not be met by DMARC’s volunteer network.

![Figure 4 - DART's bus operators one of our bus operators assisted with a DMARC food delivery. Image credit: DART](image)

DART also has a longstanding partnership within Polk County to provide a myriad of services. This includes partially funding DART’s mobility coordinator role to provide resource coordination and public education. For many years, DART has worked with Polk County Emergency Management on multiple initiatives to respond to emergencies, including
transportation during fires and floods, and setting up warming centers during frigid winters, cooling centers during hot summers. When COVID-19 began, the county was quick to set up an isolation center for its homeless residents at the Iowa State Fairground. These were sites where COVID-19 patients could isolate after being discharged from the hospital. Many people had no way to get to these sites because they were dropped off at the hospital by an ambulance or were driven by friends and family. Several DART bus operators volunteered and have assisted, with additional safety precautions in place, with transporting COVID-19 positive residents to the isolation center.

Another partnership that emerged out of the COVID-19 pandemic was through Des Moines’ Transportation Advisory Group, a committee of transportation providers, human service agencies, state and local government agencies, health care providers, and other interested stakeholders that work to coordinate human service transportation in central Iowa. Stakeholders from the Iowa Cancer Consortium, with input from the American Cancer Society, sought to provide transportation for cancer center patients in a manner that was safe. Before COVID-19, ICC and ACS partnered with Uber/Lyft in Polk County, but the ICC and ACS were hesitant to send their patients in a cab with protocols that were not suitable for highly vulnerable cancer patients. ICC, with funding from ACS, partnered with DART paratransit to provide direct service to cancer patients. This partnership provided transportation to cancer patients through the end of the fiscal year, resulting in over 60 trips provided in a two-month span.

Catlin Curry, DART’s Mobility Coordinator, shared, “Each of the partnerships we sought during emergencies reminded the DART team about the importance of intentional and strategic relationship building. None of these efforts sprang up overnight and happened organically after spending time fostering relationships and collaborating with community partners.”

Program contact: Catlin Curry, Mobility Coordinator, Des Moines Area Regional Transit Authority (DART)

4) Outreach Mobility Management Center (MMC), in the 2-1-1 California Rural Mobility Management Planning Study (2-1-1 CRMMPS), published in February 2009, identified several tasks to improve coordination between mobility management and emergency management services:

• Identification of existing rural human service transportation providers;

• Access to information and referral and real-time transit, traffic and transportation information;

• Working with emergency services to identify service gaps in order to respond to the emergency-preparedness needs of the elderly, disabled, and low-income individuals in the rural areas;

• Public participation through focus groups, stakeholder meetings, and coordinated plan documentation; and

• Strategies for interfacing 2-1-1 call centers with mobility management concepts through technologic advances.
The MMC’s web-based tools allow multiple entities to include their vehicles and drivers in a comprehensive fleet inventory system for coordinating in the event of a community emergency or disaster. Other data in the emergency-planning system include GIS mapping of at-risk individuals who will need transportation assistance in an emergency, location of accessible shelters, location of evacuation routes, and links to emergency communication systems. These resources can be accessed by first responders and public agency partners during an emergency.

Program link: https://www.transit.dot.gov/sites/fta.dot.gov/files/docs/Attachment_2__CalTrans_211_MobMgt_Study.pdf


5) In the event of, and subsequent to the onset of an emergency/disaster condition, the San Juan County Department of Emergency Management convenes objective based planning coordination using teleconference and in person meetings. Participants may include: responders, public works, NGOs, Human Services and other providers/stakeholders related to the emergent incident, or consequences of the incident/event/condition.

This includes offices/representatives of Human Services and NGOs responsible for provision of services for residents with special transportation needs. In 2005, San Juan County adopted the National Incident Management System (NIMS) for All Hazard Incident Management. Consequently, an Incident Management Team may be convened to plan for a long notice event, or for response and long term recovery from an emergency or disaster event. Participants in this planning structure may be assigned a position/role and area of responsibility under the NIMS Incident Command System.

A member of Health & Community Services may be called upon to serve as a “Transportation Branch Director” when participating as a member of a local Incident Command Team. These roles and areas of responsibility are outlined in the County Comprehensive Emergency Management Plan and further detailed in the County Departments Emergency or Operations Plans.

Working within this structure allows assessment specific to the situation to best utilize existing resources, identify gaps at the time of need, identify existing resources available for sharing to address the need, and source outside resources if needed. These resources may include programs, people and equipment. Specific plans to identify where vulnerable populations may be located in the event of a disaster include:

- Using existing Senior Services contact lists for seniors/vulnerable residents, including the list of “Meal on Wheels” delivery addresses.
- Using client contact lists from existing NGOs/non-profits in the county providing services to these residents.
- Working with the Assessor’s Office and County GIS for list of properties and addresses which qualify for special consideration for disability or senior citizen tax programs.
- Using provisions of SB 5346 effective 7/24/2015 to provide first responders with contact information for subscribers to Life Alert services during an emergency.
Working within the limits allowed by HIPAA to obtain information from local EMS, Health Dept and health care providers to locate residents with known special needs.


Key Takeaways

This document and the supporting examples underscore the importance of partnership and collaboration with emergency management. The following are important factors to consider when integrating emergency management concepts in your mobility management practice:

1. Inclusive planning is essential. Be sure to include representatives of and advocates for diverse groups of vulnerable people in the planning and exercises. Leverage your contact and client lists to recruit and invite input from those with mobility devices, service animals, those who have limited English skills, are deaf/hard of hearing, blind / with limited vision, and with moderate cognitive disabilities. Inclusion in the emergency management process will provide much more realistic trials and clearance times and will help figure out “what is missing” before the emergency.

2. All successful planning for emergencies is local. All phases of emergency management require active engagement with partners in the community that have the capacity to quickly and nimbly understand and respond to local needs. As a mobility manager in your region, this is another arena where you can bring your expertise about local transportation options to assist in your community’s response to all kinds of emergencies.

3. Remember the outcomes you are seeking to achieve By increasing transportation providers’ ability to operate during and respond to emergency situations, improving providers’ preparedness, and informing customers about expectations, the following community needs may be met:
   - reliable transportation
   - safe and secure transportation
   - clear information on available transportation options
   - culturally relevant information resources
   - accessible transportation infrastructure
References


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The National Center for Mobility Management (NCMM; [www.nationalcenterformobilitymanagement.org](http://www.nationalcenterformobilitymanagement.org)) is a national technical assistance center created to facilitate communities in adopting mobility management strategies. The NCMM is funded through a cooperative agreement with the Federal Transit Administration, and is operated through a consortium of three national organizations - the American Public Transportation Association, the Community Transportation Association of America, and Easterseals. Content in this document is disseminated by NCMM in the interest of information exchange. Neither the NCMM nor the U.S. DOT, FTA assumes liability for its contents or use.