

## Disaster Case Management (DCM)

Disaster Case Management (DCM) is defined by the U.S. Department of Health and Human Services (HHS) Administration for Children & Families as “the process of organizing and providing a timely coordinated approach to assess disaster-related needs as well as existing healthcare, mental health and human services needs that may adversely impact an individual’s recovery if not addressed” (2009).

Disaster case management may play an important role in ensuring that victims of disasters receive the appropriate resources to meet their needs, particularly those who have been most impacted. Disaster Case Management is most effective when implemented by local partners as part of a coordinated effort for community recovery.

### Human Services Providers

Following a disaster, it is necessary to provide and restore human services support *quickly* for those persons already in a health care or congregate care facility or to provide support for those who need these services as a result of the disaster. Human services providers provide essential economic and social support for families, children, individuals, and communities

Individuals with special needs may already interact with different human services and medical organizations to help maintain their independence, supplement their financial resources, and receive medical care.

#### **These organizations may include:**

- Home health
- Child support
- Economic assistance
- Food stamps
- Health care
- Rehabilitation
- Social services
- Welfare
- Other assistance

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These providers include private and non-profit entities, as well as local, state, tribal, and federal governments. A regional incident may tax the capacity of human services agencies to deliver critical services including medical transportation, childcare, social services programs, and aging services among other sustaining services. Instances that delay mail delivery or require relocation of people may interrupt services such as economic assistance, prescription services, Medicare, or Medicaid.

## **Individuals who need this type of human services support include those who:**

- Depend on in-home care that becomes limited because of the incident (including dependent children and people with chronic medical conditions)
- Develop a disability because of the incident
- Have been separated from their familiar cultural support networks
- Have cognitive or mental health conditions that, depending on the nature and extent of the disaster, may require long-term services
- Have health conditions that become aggravated by the incident
- Have limited English proficiency and need linguistic help to obtain services
- Are members of Alcoholics Anonymous and similar support groups

## **Plan for the Availability and Coordination of DCM Services**

Emergency managers and human services must plan for the availability and coordination of these services with minimal interruption during and after a disaster. Pre-and post-incident planning and collaboration between emergency planners and providers are critical to ensure continuation of services during and after a disaster.

Based on the circumstance, some people may require help arranging for continuity of services, choosing from different assistance options, obtaining information, filling out forms, determining eligibility status for benefits, understanding civil rights and other legal obligations, and finding other resources.

Be sure to consider how to make assistance available in multiple languages based on the demographic makeup of the community.

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## Case Management Process

In the Federal Emergency Management Agency National Disaster Housing Strategy (2009), the case management process begins with case managers meeting with an individual or household to do an assessment. During the assessment, the case manager identifies:

- the impact of the disaster on the victims
- the types and amounts of assistance that have been received
- what the individuals and households perceive as their immediate and ongoing disaster-related needs

Next, the case manager and the client collaboratively develop a comprehensive disaster recovery plan. The plan is meant to assess and coordinate services and resources that address unmet needs. Additionally, it outlines the steps necessary for the individual or household to recover from the disaster. This is a process that can last from one month to beyond 18 months.

Research has noted that after Hurricane Katrina, there was no plan in place to properly support the return of Louisiana's citizens to their homes or to provide for the needs of residents once they arrived. As a result, thousands of the most vulnerable populations continue to suffer a long recovery process. This underscores the need for a more comprehensive understanding with respect to the level of case management required by these populations after a major disaster and the urgency to coordinate across local, state, and federal public, non-profit, and private organizations to most appropriately meet the need (Sizer, 2009).

### **Develop an Approach that Anticipates Diverse Needs**

After a community is impacted by a disaster, State, tribal, and local government agencies, together with the private sector, begin repairing the damaged infrastructure and restoring essential services (Federal Emergency Management Agency, 2009).

This has to be part of a larger recovery strategy to ensure people's lives are also being repaired. People with diverse needs, disabilities, or low-income are often especially impacted. Developing an approach to disaster case management that anticipates the needs of the city supports reducing the long-term recovery efforts of socially vulnerable populations thereby strengthening their resilience.

### **Federal Disaster Assistance - Emergency Support Function #6**

During a presidential disaster declaration, the Federal Emergency Management Agency (FEMA) will coordinate federal disaster assistance for mass care, emergency assistance, and housing and human services through Emergency Support Function #6 (ESF #6) depending on the extent of the assistance requested by the state.

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## **ESF #6 includes assistance with:**

- Coordination of care (case management services)
- Coordination of donated goods and services
- Coordination of voluntary agency assistance
- Crisis counseling
- Disaster loans
- Disaster-related dental and medical costs
- Disaster unemployment
- Food stamps
- Housing, including specialized and medical shelters
- Legal services
- Non-conventional shelter management
- Pet evacuation and sheltering
- Replacement of personal property
- Reunification of families
- Support to evacuations
- Support to medical shelters
- Support to specialized shelters
- Other federal and state benefits

U.S. Department of Homeland Security/FEMA & West Virginia University. Emergency Planning for Special Needs Communities. Version 1.0.

