

U.S. DEPARTMENT OF HOMELAND SECURITY

Office of Intergovernmental Affairs



FEMA

March 27, 2020

Administrator Gaynor Sends Letter to Emergency Managers

The coronavirus disease 2019 (COVID-19) pandemic has transformed our daily lives and our profession in a matter of weeks. Together with our public health colleagues, we work as a team to battle the nationwide effects of this virus. Today, Administrator Gaynor sent the following letter to emergency managers outlining critical steps to help the nation respond to COVID-19:

Fellow Emergency Managers,

The coronavirus disease 2019 (COVID-19) pandemic has transformed our daily lives and our profession in a matter of weeks. Together with our public health colleagues, we work as a team to battle the nationwide effects of this virus. I thank you for your tireless efforts under these unprecedented and very demanding circumstances.

I write to you today as the Administrator of FEMA and a former state and local emergency manager. Now more than ever, we must work as a team to deliver locally executed, state-managed, and federally supported solutions on behalf of the American people. The best and the brightest emergency managers, public health officials, private industry partners, scientists, and medical doctors and nurses are assembling at FEMA Headquarters and in our regional offices; in your state and local emergency operations centers; and in hospital operations centers across the country. This is truly a whole-of-nation response. Rest assured, the full weight of our Nation is supporting all of us to overcome the pandemic and I have no doubt that we will be successful in defeating the spread of COVID-19.

To be successful across the nation – from the smallest town, tribal nation, island, and to the largest city – we must act decisively and immediately. Today, many of you are at the center of the battle, in places like New York, Washington, California, and Louisiana. Others of you may only have a few cases. It is our collective responsibility to do our very best today, so we can continue to blunt the spread of COVID-19. If you have excess capacity, please consider using EMAC to offer resources that your peers from around the country may need.

As the Nation’s lead emergency manager, I want to be completely transparent about our national response and your responsibility to respond proactively and aggressively. To that point, I would like to share seven critical steps that I ask you to **immediately** consider and act upon.

First, mitigation works. Ensure you preserve your “force” while maintaining the ability to respond in a COVID-19 degraded environment without access to the tools typically used in an emergency or disaster like mutual aid and EMAC. Ensure that your communities, small or large embrace mitigation efforts. Every American has a role to play in defeating COVID-19, including good hygiene and social distancing. Follow the President’s [15 Days to Slow the Spread](#).

Second, integrate all emergency management and public health operations. Identify and integrate your leading health official into your Emergency Operations Center and Unified Command Group at every level of government. You must form a unified Emergency Management – Public Health Team. Ensure that the entire state political leadership team understand the emergency management process. All requests to the Federal government must be formally communicated by the state’s emergency manager to the FEMA Regional Administrator. This is the same process as natural disasters.

Third, collect public, private, and government hospital bed capacity data, if you haven’t already – total beds, acute care beds, normal occupancy, predicted surge occupancy. This data will assist you in crafting requests for high demand, low density critical resources should the time come that you may need it. We must use all data wherever possible to allocate scarce resources, including consideration of population size, demographics, and vulnerability.

Fourth, actively plan to stand-up Alternate Care Sites. Be creative in identifying facilities that can support low acuity patients and require a minimal amount of medical staff, already in short supply. Consider locations such as convention centers, hotels, shuttered hospitals, college or university dormitories, or vacant open space in commercial buildings. Ask your FEMA Regional Administrator to brief you on the US Army Corps of Engineers “Hotel to Healthcare” initiative. If you need a plan, here is a [link](#) to a plan.

Fifth, maintain situational awareness of ventilators that may be used across your area. Check hospitals, acute care sites, outpatient locations, and any other location that may use these devices, especially those that may be a source for reallocation to an area of greater need. Like hospital bed capacity, this data will help you understand what you have and what you may need, informing your resource management strategy for these high demand, low

density critical resources should the time come that you may need it. Just as we are moving resources nationally, you should also be moving resources within your state.

Sixth, identify all sources to surge medical professionals. Look for retirees, medical contract services, nurses, respiratory therapists, medical students, and emergency medical technicians or local equivalents. You will need them to support the increased hospital surge and management of patients on ventilators and you should be cataloging and training them now, as appropriate.

Seventh, manage Personal Protective Equipment (PPE) carefully. We have stood-up the *Supply Chain Stabilization Task Force* within FEMA with the purpose of increasing the flow of critical medical supplies such as N95 masks, surgical masks, and ventilators. We are using four guiding principles: 1) preserve what we have; 2) locate medical stockpile around the globe; 3) distribute them to locations most in need; and 4) build capacity in America through partners with industry. While some of these strategies will yield near-term benefits, it must be your highest priority to carefully manage what you have available to you now.

To help you with this, the CDC produced a [Personal Protective Equipment \(PPE\) Burn Rate Calculator](#). This spreadsheet-based model provides information for healthcare facilities to plan and optimize the use of PPE for response to COVID-19. Similarly, non-healthcare facilities (e.g., correctional facilities) may find this tool useful for planning and optimizing PPE use as part of the response to COVID-19. This tool can also be used for planning PPE use outside the context of COVID-19, where PPE shortages may also occur due to supply chain issues related to the COVID-19 response (e.g. manufacturing facilities).

FEMA will reimburse all eligible expenses for emergency protective measures under the Stafford Act; however, do not wait for the PPE from the Federal government to show-up. Take aggressive action now to source your own. Because of the actions the Administration and federal government is taking, you will begin to see PPE supplies come online in the weeks ahead as the commercial distribution chain adapts as well as the quantities of shipments from the Strategic National Stockpile continue to move. Continue to be resourceful, ask the building trades to donate PPE or that they allow you access to their supplier; and, ask dental and outpatient offices that are closed to donate PPE to local hospitals and care critical care sites. And finally, I ask you to review and utilize the guidance the *Supply Chain Stabilization Task Force* released regarding guidance for PPE.

Lastly, some [external communication](#) resources that may be helpful:

- **[Best Practices](#):** This page provides a platform for sharing best practices and lessons learned by the government, private sector, academic institutions, professional associations, and other organizations to support the whole of community response.
- **[Rumor Control](#):** This page is to help the public distinguish between rumors and facts regarding the response to COVID-19.
- **[How to Help](#):** This page provides guidance on how to **donate** critical resources & supplies; how to **do business** with FEMA; and, how to **volunteer**.

These are unprecedented times and many lives are potentially at stake. We are doing things many of us have never imagined, especially at this scale. As professional emergency managers,

we are built for this – this is what we do best; coordinate, problem-solve, and act. I ask all of you to lead, innovate, and be resourceful. This is a whole of nation response and I need every emergency manager to be an active participant.

We are emergency managers and America needs us at our best.

Respectfully,

Pete Gaynor
Administrator

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