

Memorandum of Understanding

Between

The American National Red Cross and

The U.S. Department of Health and Human Services



American Red Cross

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I. Purpose

The purpose of this memorandum of understanding between the U.S. Department of Health and Human Services and the American Red Cross (“the parties”) is to endorse the use of the Red Cross – Health and Human Services Initial Intake and Assessment Tool to facilitate triage for functional support at Red Cross shelters and Health and Human Services Federal Medical Shelters during an Incident of National Significance or Public Health emergency response in which the Department of Health and Human Services and the Red Cross are engaged in supporting state, local or tribal authorities.

II. Background

Under the *National Response Plan*, the Secretary of Health and Human Services, principally through the Assistant Secretary for Preparedness and Response, is responsible for coordinating all federal Public Health and Medical Services assistance to supplement state, local and tribal resources in response to public health and medical care needs for potential or actual Incidents of National Significance. Executive Order (EO) 13347 calls for the federal government to appropriately support safety and security for individuals with disabilities in all types of emergency situations through a coordinated effort among federal agencies.

The *National Response Plan* also identifies the Red Cross as having the Primary Agency role for the mass care section of Emergency Support Function (ESF) # 6 Mass Care,

Housing and Human Services. In this role, the Red Cross coordinates federal mass care assistance in support of state and local mass care efforts. The Red Cross is also a designated Support Agency to Health and Human Services under ESF #8 Health and Medical Services. Additionally, the Red Cross is recognized as the major mass care service provider for the nation.

III. Authority

Under section 2811 of the Public Health Service Act, the Assistant Secretary for Preparedness and Response is authorized to coordinate, on behalf of the Secretary, interagency interfaces between the Department of Health and Human Services and other departments, agencies and offices of the United States with respect to bioterrorism and public health emergencies. 42 USC 300hh-11(a).

The American Red Cross was chartered by the Congress of the United States in 1905 (U.S. Congress, act of January 5, 1905, as amended, 36 U.S.C. 1 et.seq.) to “*continue and carry on a system of national and international relief in time of peace and apply the same in mitigating the sufferings caused by pestilence, famine, fire, floods, and other great national calamities, and to devise and carry on measures for preventing the same.*”

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IV. Actions to which the Department of Health and Human Services and the Red Cross Commit to Ensure the Mutual Use of the Guidelines in the Red Cross – Health and Human Services Shelter Client Interview and Assessment Form

The Department of Health and Human Services agrees to use the Assessment Tool and the guidelines included therein in all deployed Health and Human Services Federal Medical Shelters. Department of Health and Human Services teams will be trained in how to use the Assessment Tool and apply said guidelines to sheltering determinations. The Department of Health and Human Services agrees to monitor the Assessment Tool's usage to ensure compliance with the guidelines and facilitate feedback about how to improve the Assessment Tool.

The Red Cross agrees to use the assessment tool in all shelters opened in response to Incidents of National Significance and other disasters to which the organization responds. Red Cross employees and volunteers with responsibility for using the tool will be trained in its use in accordance with current Red Cross policies and implement it accordingly.

V. Funding

This memorandum of understanding is not an obligation nor a commitment of funds, but rather a statement of understanding between the parties.

VI. Points of Contact

The review, request for changes and interpretation of the general provisions of this memorandum of understanding will be coordinated through the senior point of contact designated below.

For the Department of Health and Human Services:

Mr. Joseph Forsha

Senior Program Analyst
Office of Preparedness and Planning
Office of Public Health Emergency
Preparedness

US Department of Health and Human
Services

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For the Red Cross:

Ms. Carol Hall

Director, Homeland Security and Federal
Coordination

Federal Response Unit
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**VII. Amendment, Termination, Entry
into Force and Duration**

Both agencies agree to review the Initial Intake and Assessment Tool annually, or otherwise as required, to incorporate recommended changes agreed to by both parties. This memorandum of understanding remains valid regardless of mutually agreed upon changes to the Intake and Assessment Form.

Except as otherwise provided, this memorandum of understanding may be amended by the mutual written consent of the authorized representatives for the Department of Health and Human Services and the Red Cross.

Either party may unilaterally request renegotiation of this memorandum of understanding. Such renegotiations shall commence not later than 14 days after such request is made.

Either party may terminate this memorandum upon thirty (30) days written notification to the other party. Such notice will be the subject of immediate consultation by the parties to decide upon the appropriate course of action.

This memorandum of understanding will enter into effect upon signature of both parties and will remain in effect for a period of five years.

VIII. Effect on Procedures

Nothing in this agreement shall be construed so as to prohibit or restrict either party from taking necessary actions, either on its own, in conjunction with the other party or in coordination with other agencies, to respond to the emergency.

IX. No Private Right Created

This document is an agreement between the U.S. Department of Health and Human Services and the Red Cross and does not create or confer any right or benefit on any other person or party, private or public.

None of the obligations undertaken in this agreement are intended to conflict with or override any pre-existing statutory or regulatory obligation of the Department of Health and Human Services or the Red Cross, including any of its components.

Signature page follows.

