

EMERGENCY SUPPORT FUNCTION (ESF) 8

PUBLIC HEALTH AND MEDICAL SERVICES

Primary Agencies: Chatham Health Department (CCHD)

Support Agencies: American Red Cross
Area Nursing Homes
Chatham Area Transit
Chatham Board Of Education
Chatham Department of Family and Children's Services
Chatham Emergency Medical Service (EMS) Providers
Chatham Mosquito Control
Chatham PIO
Chatham Police Department, Animal Control
GA Department of Agriculture
GA Medical Society
Hospitals
Pharmacies
Medical Examiner's Office
Municipal Law Enforcement/Fire Departments
United Way 2-1-1

Supporting information, documentation, activation instructions and checklists are contained in the Introduction to Emergency Support Functions Annex.

I. Introduction

- A. Purpose: This ESF implements Annex 8 to the Emergency Operations Plan. This ESF provides operational guidance to those who are assigned to work in this ESF. The mission of this ESF is to provide the mechanism for coordinated County assistance to supplement municipal resources in response to public health and medical care needs (to include veterinary and/or animal health issues when appropriate) for potential or actual Incidents of Critical Significance and/or during a developing potential health and medical situation. Additionally, to delineate procedures for the identification, recording, transportation, sheltering and care of persons requiring special needs in anticipation of, or during an emergency or a disaster.
1. ESF #8 will coordinate all resources related to health and medical issues and shall monitor field deployment of medical personnel and resources.
 2. ESF #8 will retain full control over its own resources and personnel.
 3. ESF #8 will not release medical information on individual patients to the general public to ensure patient confidentiality protection.
 4. ESF #8 will appropriate non-specific information on casualties/patients will be provided to the American Red Cross for inclusion in the Disaster Welfare Information System and to ESF #15 for informational releases.

5. ESF #8 will establish clear lines of communication and integration of expectations will be established on a routine basis with the EOC.
- B. Scope: This ESF is structured to oversee in identifying and meeting the public health and medical needs, to include the entire spectrum of special needs transportation, sheltering and care, of victims of an Incident of Critical Significance. The emergency operations necessary for the performance of this function include but are not limited to:
1. Preparedness
 - a. General.
 - (1) Develop mutual support relationships with professional associations and other private services and volunteer organizations that may assist during an emergency or disaster.
 - (2) Participate in exercises and training to validate this annex and supporting SOPs.
 - (3) Ensure all ESF #8 personnel integrate NIMS principles in all planning. As a minimum, primary action officers for all ESF #8 agencies will complete ICS 200, 300, and 700 courses.
 - b. Medical Care.
 - (1) Coordinate the provision of medical and dental care.
 - (2) Identify and coordinate the deployment of doctors, nurses, technicians and other medical personnel to disaster areas.
 - (3) Maintain inventory lists of medical supplies, equipment, ambulance services, hospitals, clinics and first aid units.
 - (4) Plan for establishment of staging areas for medical personnel, equipment, and supplies.
 - (5) When emergency facilities are not available, plan for establishment of emergency medical care centers.
 - (6) Plan for requesting medical assistance teams and coordinate for their support while operating in Chatham County.
 - (7) Assure that health care facilities (i.e. hospitals, nursing homes, youth and adult medical care facilities) develop patient reduction, evacuation, and relocation procedures.
 - c. Public Health and Sanitation.
 - (1) Develop procedures to protect the public from communicable diseases and contamination of food, water, and drug supplies (including veterinary drugs).
 - (2) Develop procedures to monitor public health information.
 - (3) Develop sanitation inspection procedures and protocols to control unsanitary conditions.

- (4) Develop procedures for inspection of individual water supplies.
 - (5) Develop procedures for identification of disease, vector, and epidemic control.
 - (6) Develop emergency immunization procedures.
 - (7) Identify laboratory testing facilities.
- d. Crisis Counseling.
- (1) Develop procedures for rapidly providing crisis counseling and mental health/substance abuse assistance to individuals and families, to include organizing and training crisis counseling teams.
 - (2) Develop support relationships with government agencies, professional associations, private services, and volunteer organizations to provide mental health and substance abuse assistance during disasters.
- e. Deceased Identification and Mortuary Services.
- (1) Develop plans for location, identification, removal and disposition of the deceased.
 - (2) Establish a system for collecting and disseminating information regarding victims and have the operational capability to deliver the information in a field environment in coordination with the EOC Public Information Group.
 - (3) Develop protocols and maintain liaison with Disaster Mortuary Operational Readiness Teams (DMORT).
 - (4) Identify agencies, organizations, and individuals capable of providing support services for deceased identification including the Chatham County Coroner.
 - (5) Maintain a description of capabilities and procedures for alert, assembly and deployment of mortuary assistance assets.
2. Response
- a. General.
- (1) Coordinate information releases to the public with the public information officer in the EOC Public Information Group.
 - (2) Coordinate with State and Federal agencies as required.
 - (3) Maintain records of expenditures and resources used for possible later reimbursement.
- b. Medical Care.
- (1) Coordinate the delivery of health and medical services.
 - (2) Arrange for the provision of medical personnel, equipment, pharmaceuticals, and supplies.
 - (3) Assist the coordination of patient evacuation and relocation.
 - (4) Assist with hazardous materials response.

- c. Public Health and Sanitation.
 - (1) Manage public health and sanitation services.
 - (2) Determine need for health surveillance programs throughout the County.
 - (3) Issue Public Health notice for clean-up on private property.
 - (4)
 - d. Crisis Counseling: Coordinate for the provision of mental health and recovery services to individuals, families, and communities.
 - e. Deceased Identification and Mortuary Services.
 - (1) Initiate the notification of deceased identification teams.
 - (2) Retain victim identification records.
 - (3) Coordinate DMORT services.
 - (4) Coordinate County assistance for next-of-kin notification.
3. Recovery
- a. General.
 - (1) Anticipate and plan for arrival of, and coordination with, GEMA ESF #8 personnel in the EOC and the Joint Field Office (JFO).
 - (2) Ensure ESF #8 members or their agencies maintain appropriate records of activities and costs incurred during the event.
 - b. Medical Care.
 - (1) Assist with restoration of essential health and medical care systems.
 - (2) Assist with restoration of permanent medical facilities to operational status.
 - (3) Assist with restoration of pharmacy services to operational status.
 - (4) Coordinate emergency services staff until local system is self-supporting.
 - (5) Assist with emergency pharmacy and laboratory services.
 - c. Public Health and Sanitation.
 - (1) Monitor environmental and epidemiological surveillance.
 - (2) Continue long-term emergency environmental activities.
 - (3) Crisis Counseling: Coordinate the management of continuous mental health and substance abuse assistance to individuals and families.
 - d. Deceased Identification and Mortuary Services.
 - (1) Continue the operations necessary for the identification and disposition of the deceased and their personal effects.
 - (2) Provide a final fatality report.
 - (3) Request reimbursement for expenditures, if authorized.
 - (4) Receive the required death reports.
4. Mitigation
- a. Support and plan for mitigation measures.

- b. Support requests and directives resulting from the Governor and/or GEMA concerning mitigation and/or re-development activities.
- c. Document matters that may be needed for inclusion in agency or state/federal briefings, situation reports and action plans.

II. Concept of Operations

- A. ESF #8 will be responsible for the coordination of services, equipment, supplies and personnel to meet the health and medical needs resulting from incidents of critical significance.
- B. ESF #8 will coordinate the needs assessment and will assume the lead in monitoring potential health hazards.
- C. Coordinate requests to the EOC for additional health/medical care personnel, equipment and supplies.
- D. Monitor food/drug safety, radiological/chemical/biological hazards.
- E. Coordinate and monitor potability of water, wastewater disposal, solid waste disposal and vector control monitoring.
- F. Coordinate victim identification/mortuary services with the medical examiner.
- G. Monitor medical command and control.
- H. Coordinate the registration, notification, transportation and sheltering of special needs persons in the community who are unable to respond independently to an emergency.
- I. Determine coordination needed with ESF #6 regarding special needs shelter.
- J. Coordinate the identification of in-hospital care resources.

III. Responsibilities

- A. ESF Primary and Support Agencies shall:
 - 1. Attend at least quarterly meetings to ensure planning functions are carried out to support this ESF.
 - 2. Identify and provide staff representatives to support the ESF and other operational information related to these activities
 - 3. Request volunteer agencies and private resources with assets to contribute those assets to the response effort.

4. Participate in drills and exercises to evaluate local capability.
5. Maintain records of expenditures and document resources utilized during recovery in accordance with ESF #7 policies and procedures and report these records to the Primary Agency.

B. Chatham County Public Health Department shall:

1. Coordinate with each Support Agency through at least quarterly meetings to ensure planning functions are carried out to support this ESF.
2. Provide leadership in directing, coordinating and integrating the overall county efforts to provide medical and public health assistance to the affected area
3. Conduct initial assessment of health and medical needs.
4. Determine need for additional personnel and resources and initiate request mutual aid to EOC.
5. Coordinate and direct the activation and deployment of voluntary resources of health/medical personnel, supplies and equipment.
6. Establish, as needed, active and passive surveillance systems for the protection of public health.
7. Coordinate response for:
 - a. Hazardous materials
 - b. Safety of food and drugs
 - c. Radiological hazards
 - d. Mental health problems victims
 - e. Vector control
 - f. Potable water/wastewater/solid waste
 - g. Victim identification/mortuary services
- h. Continuously acquire and assess information about the situation; continue to identify the nature and extent of health and medical problems and establish appropriate monitoring and surveillance of the situation to obtain valid ongoing information.
- i. Coordinate release of appropriate and timely public health information with ESF #15 to include boil water orders, safety issues, etc. The Chatham County Health Department Director has the authority to warn the public of contaminated water supplies. All informational releases will be through the lead PIO in coordination with the command group.
- j. Establish a protocol for prioritizing response activities.
- k. Coordinate activities with other ESFs.
- l. Maintain records of expenditures and document resources utilized during response and recovery efforts.

C. Chatham Emergency Medical Service Providers shall:

1. Coordinate the evacuation of patients from the disaster area as requested.

2. Coordinate the transport of victims to medical facilities outside the county in accordance with approved trauma transport protocols.
3. Provide the coordination of the following resources:
 - a. Advance Life Support/Basic Life
 - b. Emergency Medical Technicians
 - c. Paramedics
 - d. Emergency medical equipment procurement
 - e. Aircraft (fixed/wing/rotary/medical evacuation)
4. Establish mental health crisis counseling centers.
5. Coordinate for Critical Incident Stress Debriefing for emergency responders.
6. Coordinate medical patient evacuation in the pre-impact phase of the disaster (including special needs patients requiring ambulance transport) as well as continued response to emergency medical calls.
7. Coordinate both public and private service field responses.

D. Local Medical Providers shall:

1. Coordinate the notification, information, update and evacuation assistance to medical facilities within the county both pre- and post-impact.
2. Develop an emergency and disaster plan that address preparedness and response to hurricane threats for their residents. These plans should include:
 - a. The degree of shutdown operations and evacuation of facilities.
 - b. Process to cancel elective surgery, discharge patients for whom care would not be compromised, transfer patients who could be moved to safer facilities and make special arrangements for those patients whose condition will not allow transfer or evacuation. Psychiatric and mental health facilities will be expected to transfer their patients and staff to safer locations.
3. Develop evacuation and/or care plans for those patients who are receiving home health care through the hospital or its affiliates.

E. Nursing Homes, Assisted Living Facilities and Other Residence Based Assistance Programs shall:

1. Develop an emergency and disaster plan appropriate for hurricane conditions.
2. Design evacuation procedures to relocate their residents, through commercially available transportation resources, to a safer and similar facility if they are located in a mandatory evacuation area. Special care must be given to those transportation needs of patients required horizontal transport. Similar arrangements must also be made by each facility to accommodate the transport of their equipment and supplies.

These facilities must be prepared to evacuate immediately following the issuance of a Hurricane Watch or Voluntary evacuation order for their location. Due to the complexities of evacuating these members of our population, additional time will be required and delays may create a shortage of transportation resources as well as increased traffic delays.