

ADPH Emergency Response 101: The New Responsibility of Public Health

**Satellite Conference
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Video Communications Division**

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Objectives

- Describe two types of emergency events.
- Explain ADPH's role in emergency preparedness and response.
- Describe one task employees may be asked to perform in an emergency.

ADPH's Roles



ADPH's role is:

- Defined by the Emergency Operation Plan (EOP) as established by Alabama Emergency Management Association (AEMA).
- State Health Officer will assure and/or assume support of medical care and sanitation activities during a disaster.

Central Office Duties

- Serve as chief medical authority for Alabama.
- Staffs Emergency Operation Center (EOC) for medical and health functions during an Emergency.
- Coordinates and manages public health services and resources.
- Ascertains availability of air and/or ground emergency transportation vehicles and arranges for additional vehicle if necessary.

- Assess the potential volume of patients.
- Capacity of local hospitals to receive patients.
- Identifies backup hospitals.
- Determines drugs and supplies needed.
- Stocks available in the local area.
- Sources of additional amounts:
- SNS (Strategic National Stockpile)
- Vendor Management Inventory (VMI)
- ChemPack

- Determines number and type of health personnel needed at the scene and health facilities.
- Determines the number and type that are available and obtain more, if needed.
- Determines the patient load.
- The ability of health facilities to provide service to them.
- Assists in dispatching volunteer health workers to areas with the highest need.

- Assists Local Health Department Staff (LHD).
- In detecting conditions potentially leading to disease outbreaks.
- Implementing control measures.
- In epidemiological investigations of any disease outbreak.
- In disseminating information to the public and health services providers.
- Provides public information through a media center to help public cope with the disaster.

- Provides information to the Department of Human Resources (DHR).
- On urgent needs that voluntary relief agencies can meet.
- Provides staff to supplement local staffing of mass care shelters.
- Changes during an event that requires Mass Prophylaxis or Mass Vaccination.
- Our staff responds to Mass Prophylaxis Treatment Sites (MPTS) or Vaccination sites FIRST.

Area Level Plans

All Hazard EOP Purpose:

- Provide guidance for mobilizing and managing public and environmental health services during an emergency.
- Reduce vulnerability of persons to:
 - Injury.
 - Loss of life.
 - Illness from natural or man-made disasters.
- By preparing our staff for such events.

- Determine the responsibility for Staff.
- Identify who will be contacted during an emergency or a disaster.
- Establishes strategies and assumptions to manage an emergency or disaster involving health issues.
- Outlines concept of operations.

**Description of activities for
Emergency Preparedness Response:**

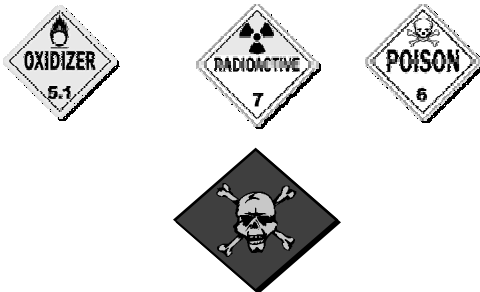
- Recovery
- Mitigation
- Describes the activation process of the plan.
- Usually Area Administrator or EP Coordinator.
- Determine staffing needs and provides the additional staff.

Man-Made Hazards Include

- Transportation



Hazardous Materials



Civil Disturbance Incidents

Acts of Terrorism:
Conventional, Nuclear, Chemical, or
Biological Agents.



Natural Hazards Include

Floods



Wild Land Fires



Severe Weather



Earthquakes



Infectious Disease Outbreaks



and Droughts



Priorities during an emergency are to:

- Address life threatening situations.
- Injury to persons.
- Safety of property.
- Protection of the environment.
- Essential services.
- Responsibility to protect the public's health and the environment.
- Forms the foundation for effective emergency/disaster response.

4 Main Operational Phases

Preparedness/Readiness:

- Begins with a threat to human health or the environment has been identified.
- All personnel review the EOP.
- Ensure they are familiar with their roles.

Response Phase:

- Begins at the onset of an emergency situation.
- Actions under direction of Emergency Preparedness Coordinator.
- Staff should refer to their outlined responsibilities during an emergency.
- Health and Medical Response Team efforts should be coordinated.
- Holding and treatment area may be set up for the public.
- Advisories can be issued to the public.

Recovery Phase:

- Occurs during and directly after the response phase.
- Damaged should be assessed and actions identified for:
 - Short term recovery
 - Long term recovery
- Critical health and medical services should be immediately restored if disrupted by the response.

Mitigation:

- Occurs during and after the recovery phase to prevent the occurrence of a similar emergency in the future.
- Additional disease control.
- Water treatment procedures.
- Vector control practices or other measures may be put in place.

Levels of Response

Events need to meet only a single criteria to be classified at a particular Level

Level 4 – Minimum Staffing (2 Persons)

- Health and Medical incidents with < 50 “treat and release” injuries.
- No activation of LHD requested by a local government.
- Example: small flu outbreak.

Level 3 Event – Minimum staffing with other staff placed on standby (determined by event).

- Activation of LHD requested by a local government with their EOC being activated.
- A single county’s or city’s EOC is activated.
- A single city declares an emergency.
- Example: tornado or flooding.

Level 2 Event – Partial Staffing (various sections required, >2 staff members on 24 hour operation.)

- Evacuations of 100 people or less.
- Large scale injuries.
- 50+ treat and release mixed with admitting injures.
- Local emergency declared by two or more cities or county and one or more city.

**Level 2 Event – Partial Staffing
(continued):**

- County or city requests proclamation of a state of emergency.
- State of emergency proclaimed by the Governor.
- Example: Small chemical release, major flooding.

Level 1 Event – Full Staffing

- State level assistance required and full 24 hour operations.
- Major evacuation (>100 people).
- Massive numbers of injuries with large number of serious “admit” injuries.
- Major countywide or regional state of emergency.

**Level 1 Event – Full Staffing
(continued)**

- All EOC positions filled on a 24 hour basis.
- Multiple state/county departments activated with heavy resource involvement.
- Example: Smallpox (worst case scenario).

Bioterrorism Incident Roles

Outbreak Management Response

- ADPH will be the lead response agency.
- If an incident occurs in your area, your PH Area will likely be the first state agency involved.
- ADPH is the primary response agency for the “Health and Medical Support Function” (ESF-8).
- A representative from your staff will go to the Local Emergency Operation Center (EOC).

County Health Department Roles:

- Coordinate their response with the AREA.
- Conduct surveillance.
- New cases associated with the BT incident.
- Assess the scope of the disease outbreak.
- Ensure observance of health regulations.
- Provide health advisories to the public on acquisition of health care.
- Pharmaceuticals.
- Vaccines, etc.

Our Roles

Team roles:

- Receive calls about an incident.
- Some one is On-Call 24/7.
- Respond to incidents and direct it to the appropriate person or group.
- Help coordinate response between state and local level.
 - EMA
 - Public Health
 - Hospitals
 - Other agencies

Individual team member roles

Environmental:

- Lead environmentalist in an event coordinated with Jim Hollins.
- Liaison between EMA and LHD.
- Involved in planning response.

Nurse:

- Works with hospitals.
- Lead epidemiology response.
- Involved in planning response.

Disease Intervention Director:

- Disease Intervention lead.
- Involved in planning and coordinating response.

Emergency Preparedness Coordinator:

- In charge of team.
- Possible Incident Commander.
- Involved in planning and coordinating response.
- Could be any of the EP Team members.
- Varies by PH Area.

Area Administrator:

- FINAL AUTHORITY for Area.
- Responsible for making decision to request state and federal assistances.
- Example SNS and requesting additional staff out of our area.

Staff Roles

Clerical/Administrative:

- Completing records or paperwork as necessary, including patient intake paperwork.
- Assisting team members and other staff in performance of their duties.
- Inventory control.
- Making reservations for out of area staff at hotels, motels as directed.
- Performing any general clerical tasks assigned.
- Help tracking expenses.

Environmental:

- Inspect food supplies.
- Determine proper disposition of condemned food supplies.
- Assisting property owners with testing private water supply.
- Actions related to onsite sewage disposal.
- Rodent and mosquito identification and control.

Environmental (continued):

- Assisting ADEM with monitoring and actions related to public water supplies, solid waste disposal and municipal sewer systems.
- Distributing environmental health information and notices.
- Surveying, monitoring, and actions related to solid waste storage, collection and transportation.
- Staffing disaster relief centers.

Environmental (continued):

- Determine that proper sanitation is maintained in evacuation shelters, such as bedding, food preparation and storage, sewage and solid waste management.
- Ventilation and general cleanliness, etc.
- Observing conditions as needed in the disaster areas and communicating observations to the assessment team Environmentalist.

Environmental (continued):

- Respond for SNS or Mass Vaccination Clinics Supporting roles.
- Could be involved in EPI investigations.

Nursing (all except Home Health):

- Assist in Mass Prophylaxis Treatment and/or Mass Vaccination Screening.
- Vaccinations.
- Other designated roles.
- MPTS and Mass Vaccination takes priority over shelters.
- Staff Mass Care Shelters.
- Emergency home visits.

Nursing (continued):

- Assist in follow-up activities with Social Workers and Environmentalist as needed.
- Could be involved with EPI Investigations.
- Home Health Nurses must take care of their home bound patients.
- Could be providing vaccinations or medications to them.
- Nurses WILL NOT perform TRAUMA and TRIAGE!

Social Workers:

- Respond to Mass Prophylaxis and Mass Vaccination treatment sites.
- Staffing evacuation shelters.
- Assisting with transportation needs of evacuees.
- Arrangement of health services for individuals.
- Assessing people's needs.
- Assisting with "Special Needs" persons.

Social Workers (continued):

- Developing a quick checklist of available resources once assessment is complete.
- Include such items as operational emergency rooms, first aid centers, physicians' offices, clinics, shelters, food lines. etc.
- Assisting LHD with continued services.

WIC/Nutritionists:

- Replace, as required, destroyed food instruments.
- Inventory, order, and supply necessary supplies (including infant formula).
- Manage requests for additional vendor supplies of infant formula.
- Respond to Mass Vaccination and Mass Prophylaxis treatment sites as needed.

Medicaid:

- Assist where needed.
- Disease Intervention assist in:
 - Epidemiological investigations.
 - Contact location.
 - Implementing disease control measures.

Public Information Officer:

- Establish media relations.
- Educate public on immediate/relevant issues.
- Distribute fact sheets as needed.
- Take information calls from public.
- Ensure language translation of all public notifications as indicated.

Public Information Officer (continued):

- Coordinate public information with other agencies, counties, and local officials.
- Establish an information network with local politicians, city council and board of health.
- Participate in Joint Information Centers (JIC) once established.

Translator:

- Assist the public information officer in providing information to the Spanish speaking public.
- Assist in vaccination clinics and mass prophylaxis treatment sites to provide information and help.
- Answer questions of the Spanish speaking population.
- Pictures obtained from, National Weather Service, EPA and FEMA websites.