

**UNIFIED SAN DIEGO COUNTY
EMERGENCY SERVICES ORGANIZATION
OPERATIONAL AREA EMERGENCY PLAN**

ANNEX E

PUBLIC HEALTH OPERATIONS

September 2006

UNIFIED SAN DIEGO COUNTY EMERGENCY SERVICES ORGANIZATION

ANNEX E

PUBLIC HEALTH OPERATIONS

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**UNIFIED SAN DIEGO COUNTY EMERGENCY SERVICES ORGANIZATION
ANNEX E
PUBLIC HEALTH OPERATIONS**

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ANNEX E PUBLIC HEALTH OPERATIONS

I. GENERAL

The Public Health Operations Annex to the Operational Area Emergency Plan describes the basic concepts, policies and procedures for providing public health services in the event of any disaster. Organizationally, public health services are provided under the coordination of the Health and Human Services Agency, Public Health Services. This Annex serves as the unifying public health document for the San Diego County Operational Area, as authorized by the Emergency Services Agreement.

A. Purpose

To establish emergency public health operations, assign responsibilities, and provide actions and responses to public health problems associated with disasters.

B. Goals and Objectives

The overall goal of disaster public health operations is to:

- Minimize loss of life and human suffering, prevent disease and promote optimum health for the population by controlling public health factors that affect human health and by providing leadership and guidance in all disaster public health-related activities.

The overall objectives of disaster public health operations are to:

- Provide preventive health services and control disease outbreaks.
- Coordinate health-related activities among other local public and private response agencies or groups.

C. Concept of Operations

There are three levels of emergency response. These levels are based on the nature and severity of the situation and the availability of resources. See the Basic Plan for Level Descriptions.

Level One: Initial Alert

- The scope and degree of the emergency can be handled effectively with the public health resources available within the Operational Area.

Level II: Partial Activation

- The Operational Area emergency response system, the Emergency Operations Center (EOC), the EMS Departmental Operations Center/Medical Operations Center (DOC/MOC), and the Health and Human Services Departmental Operations Center (HDOC) may or may not be activated.
- Affected government agencies will be notified.
- Requests for medical/health mutual aid to the State will be made via the Regional Disaster Medical/Health Coordinator.
- Assistance from other governmental agencies such as the National Guard and other military may be required.

Level III: Full Activation

- Full activation of all public health services personnel.
- The Operational Area EOC, HDOC, and DOC/MOC will be activated and fully staffed.
- Assistance will be required from both state and federal resources.

D. Plan Activation and Termination

Activation and termination of this Annex shall be by the direction of (1) the County's Chief Administrative Officer (CAO) in that capacity, or as Area Coordinator of the Unified San Diego County Emergency Services Organization; or (2) a designated Deputy CAO; or (3) the Director, Office of Emergency Services or designated representative; or (4) the Public Health Officer or designated representative; or (5) the Director, Emergency Medical Services or designated representative.

Upon activation, the Public Health Officer determines the extent of public health services needed for the disaster and notifies the appropriate divisions.

II. ORGANIZATION

The Emergency Operations Center (EOC), the Health Departmental Operations Center (HDOC), and the Emergency Medical Services Departmental Operations Center/Medical Operations Center (DOC/MOC) under the Standardized Emergency Management System (SEMS) and the National Incident Management System (NIMS) criteria, are key to successful response and recovery operations. With centralized decision making, personnel and other resources can be more effectively utilized. Coordination of activities insures that all tasks are accomplished with little or no duplication of effort, and with the highest probability of success.

A. City EOCs

Each city has a central facility designated as an EOC. From the EOC, disaster operations are directed or coordinated. It is activated when a disaster occurs and is staffed by city employees from departments with emergency responsibilities, as well as liaison representatives from other agencies and jurisdictions.

City plans may call for a medical/health liaison representative to be present when the EOC is activated. In each city, the City Manager is designated as Director of Emergency Services, by ordinance, and directs emergency operations from the EOC.

B. Operational Area/County EOC

The Operational Area/County EOC serves the same function as the city EOCs, with the Chief Administrative Officer serving as Director of Emergency Services for the unincorporated area of the Operational Area and Coordinator for the incorporated areas.

It is located in Kearny Mesa and is used as the central point for resource acquisition and allocation, as well as coordination.

The Public Health Section of the EOC (Figure 1) is normally activated when the EOC is fully activated. It is staffed by pre-designated public health personnel who coordinate the public health response for the Operational Area. The EOC public health staff serves as advisors to the CAO and makes decisions about resource allocation and priorities, and other public health matters.

The following are HHSA/EOC staff positions in the Operational Area/County EOC:

1. Director, Health and Human Services Agency- reports to the CAO and is responsible for the long-range logistics planning and policy decisions of all disaster health services to include Emergency Medical Services, Public Health, Environmental Health and Behavioral Health.
2. Public Health Officer - reports to the Director, Health and Human Services Agency, and is responsible for the overall management of Public Health Services within the Operational Area. The Public Health Officer submits requests for mutual aid support and other relevant information to the Regional Disaster Medical/Health Coordinator via EMS staff assigned to the EOC.
3. Director, Emergency Medical Services - will report to the EOC and is responsible for the management and assessment of all county EMS and county hospital needs and resources.
4. Specified HHSA Staff - will report to the EOC and support activities at the Operations section.

C. Operational Area/County HDOC

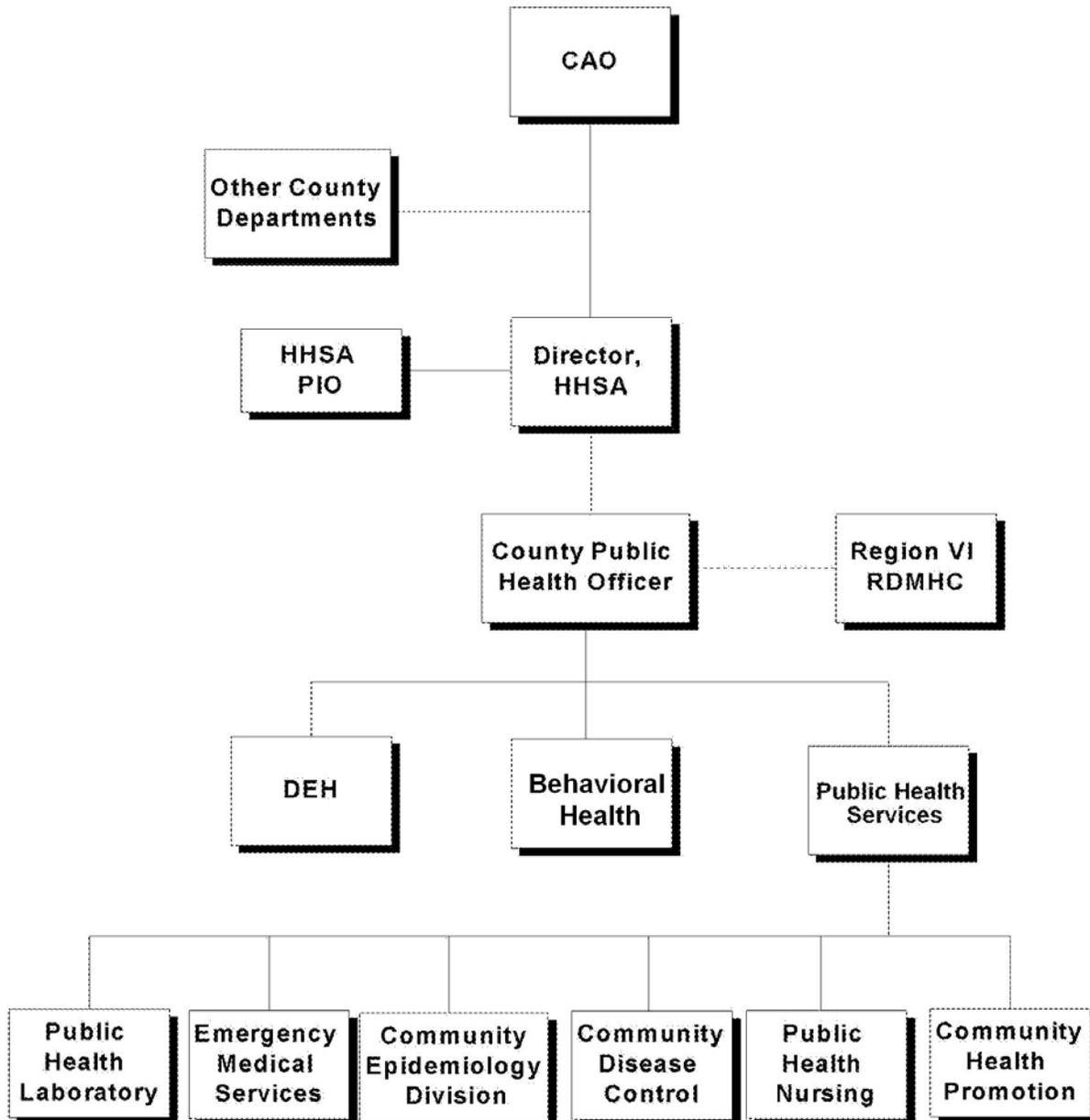
The County HDOC serves as a support and procurement entity to the County Operational Area/EOC, with its primary location at the County Health Services Complex. A secondary HDOC site, in the JB Askew Building, will be utilized in the event of an earthquake. The following are staff positions in the HDOC:

1. Chief, Public Health Nursing, or Designee
2. Chief, Community Epidemiology/ or Designee
3. Chief, Public Health Laboratory, or Designee
4. Emergency Medical Services Staff *
5. HHSA Chief, Financial Officer
6. HHSA Chief, Operations Officer
7. HHSA Public Information Officer
8. Director, Dept. Environmental Health, or Designee **
9. Director, Behavioral Health Services, or Designee **
10. American Red Cross Director, or Designee **

*The Division of EMS may open its Departmental Operations Center/Medical Operations Center (DOC/MOC) in Grantville to support the HDOC Operations.

** If requested and available

Figure 1
PUBLIC HEALTH OPERATIONS AT THE
SAN DIEGO COUNTY EMERGENCY OPERATIONS CENTER (EOC)



III. ROLES AND RESPONSIBILITIES

A. All Public Health Agencies/Divisions/Units

1. Prepare Standard Operating Procedures (SOPs) and functional checklists for public health response to a disaster, including a system for automatic reporting of pre-designated personnel to assigned disaster posts.
2. Train personnel and alternates as responders and train designated staff as representatives to the EOC/HDOC and the DOC/MOC under SEMS and NIMS criteria.

B. Public Health Services (PHS)

1. Writes and updates this Public Health Annex and any other emergency public health plans and procedures.
2. Coordinates disaster public health operations within the Operational Area.
3. Coordinates the procurement, allocation and distribution of public health resources required to support disaster public health operations.
4. Requests and responds to requests from the Regional Disaster Medical/Health Coordinator for disaster assistance.
5. Develops and maintains a capability for identifying public health resources within the Operational Area.
6. Coordinates all public health-related activities among other local public and private response agencies or groups, as well as state and federal agencies.
7. Coordinates training of staff in disaster operations.
8. Activates Clinical Disaster Service Worker Program when deemed necessary.

C. Public Health Nursing

1. Chief Public Health Nurse or designee coordinates activation of public health nurses from the regions and PHS branches during a disaster response.
2. May be assigned to provide outreach, teaching, and/or provide mass immunization/prophylaxis to the community at large (when directed by the Public Health Officer).

3. Assists with environmental and disease control measures when requested.
4. Assists with assessment of community health status.
5. Provides staffing at Mass Care Shelters, Field Treatment Sites and First Aid Stations, as requested. It is recognized that Public Health Nurses are not necessarily trained in emergency care procedures and techniques that may be required at Field Treatment Sites and First Aid Stations. As such, for planning purposes, their role at the sites should normally be limited to public and preventive health activities.
6. The Regional General Manager shall identify and communicate the needs of the region through the HDOC. The Regional Manager will confer with the Public Health Officer and/or the Chief Public Health Nurse to coordinate implementation and delivery of these services.

D. Community Epidemiology

1. Conducts epidemiologic surveillance for identification, monitoring, prevention, and administration of control measures.
2. Investigates communicable disease occurrence.
3. Provides County Health and Human Services Agency Public Information Officer (PIO) staff with communicable disease information to be disseminated to the public and coordinates with other agencies when applicable.

E. HHSA/Public Information Officer (PIO)

1. Provides representatives to the County Media Team and prepares public health information for dissemination to the public.
2. Principal liaison with County Media Team.

F. Public Health Laboratory

Maintains laboratory services in:

1. Department clinic and hospital support.
2. Environmental testing, especially food, water and sewage.
3. Public health surveillance and assessment support.

G. Office of Emergency Services (OES)

1. Assists with public health disaster planning and training.
2. Coordinates efforts to obtain resources both in the Operational Area and out of the Operational Area, including supplies and logistical support.
3. Requests, obtains, and allocates military assistance in accordance with military plans and procedures.
4. Activates, manages, and staffs the EOC.
5. Assists with recovery efforts, particularly in obtaining state and federal reimbursement funds.

H. State (See Attachment A)

1. Responds to requests for resources from the Operational Area (OES or Health Officer).
2. The Director, State Department of Health Services, serves as the State Director of Public Health and has the overall responsibility of coordinating statewide disaster public health operations and support requirements.

I. Federal (See Attachment B)

1. Public Health Service
 - Assists state and local communities in taking protective and remedial measures for ensuring sanitary food and potable water supplies; adequate sanitary systems; rodent, insect, and pest control; care of sick and injured; and control of communicable disease.
 - Assigns professional and technical personnel to augment state and local forces.
2. Food and Drug Administration
 - Works with state and local governments in establishing public health controls through the regulation of food and drugs.

IV. FUNCTIONS

A. Public Health Centers

Throughout the County Operational Area, there are six (6) Public Health Centers: Central Region, East Region, North Inland, North Central, North Coastal, and South Region. These sites may be opened during a disaster, depending on the nature of the emergency and the availability of personnel and resources. Each Public Health Center is the primary assembly point for Public Health Center personnel during activation. If an office or a Public Health Center is destroyed or inaccessible, staff will move to an alternate Public Health Center as designated in the Business Continuity Plan, assuming it is safe to do so. Emergency public health activities will be coordinated and priorities set under the direction of the Public Health Officer, the Chief Public Health Nurse, or designees.

B. Disaster Public Health Nursing

The role of a Public Health Nurse will vary depending on the nature of a disaster. Disaster response activities may include:

1. Assessment of community health status.
2. Outreach, teaching, and other health promotion or disease prevention activities.
3. Communicable disease investigations.
4. Assistance to vulnerable risk groups as designated by the Health Officer.
5. Behavioral health assistance related to emotional trauma.
6. Staffing at Mass Immunization/Prophylaxis Clinics, Mass Care Shelters, Field or Alternate Treatment Sites and/or First Aid Stations.

C. Emergency Public Health Laboratory

The Public Health Laboratory and staff provides testing services at the Public Health Laboratory, the Health Centers, or at any location where incubator and autoclave facilities exist, e.g., community clinics, water treatment facilities, etc. The services to be provided include, but are not limited to:

1. Bacteriological testing of drinking water for potability.
2. Performing clinical chemistry and hematology testing as needed if Operational Area hospital facilities (e.g., County Psychiatric Hospital or Edgemoor) become treatment centers.

3. Performing microbiological testing and antibiotic sensitivity testing of human specimens as needed for disease control and support of Departmental clinics and hospitals.
4. Performing microbiological testing of food supplies as needed for disease control.
5. Assisting in microbiological testing of the environment as needed.

D. Community Disease Control

Natural disasters can contribute to the transmission of disease by introducing new pathogens into the environment by heightening the susceptibility of the population to infection, or by intensifying the transmission of local pathogens. Specifically, disasters may increase exposure to unsafe food and water, bring humans into greater contact with animal and insect disease vectors, and increase person-to-person exposure to communicable diseases. Physical trauma, emotional stress, inadequate treatment of chronic medical conditions, and poor nutrition may add to disease vulnerability.

While an effective disaster-specific response to public health threats is vital, interruption of ongoing disease control programs must also be minimized in order to prevent secondary outbreaks of disease indirectly caused by the disaster. The duration of public health services disruption related to a disaster is expected to correlate positively with its adverse sequelae. Advanced planning optimizes the maintenance of or prompt resumption of public health services.

Epidemiologic Surveillance

The first priority is to intensify epidemiologic surveillance and disseminate information so that the authorities can, (1) make maximum use of the available resources and, (2) keep the public informed. To this end the following measures must be implemented:

- Advance identification of diseases under surveillance for which monitoring must be intensified during public health disasters.
- Syndromic surveillance for advance notice of disease activity prior to diagnostic determination
- Real-time identification of indicators of increased health care services utilization
- Monitoring of indirect indicators of disease activity, such as school absenteeism and prescriptions filled

- Usage of multiple, cross-referenced sources of data, such as Starlims, Electronic Laboratory Reporting, Virtual Confidential Morbidity Reporting, etc.
- Investigation of rumored disease outbreaks.

Control Methodology

To control communicable diseases, the following strategies are recommended:

- Contact tracing with appropriate social distancing measures such as quarantine, and prophylactic treatment, if applicable, should be promptly instituted.
- Priority should be given to restoration of normal water supply and environmental control measures.
- Heightened surveillance should be promptly established.
- Routine public health programs should be maintained and strengthened.
- Special control measures should be instituted when dictated by epidemiologic findings.
- Dissemination of information vital to the prompt recognition and control of the disease, including Emergency Medical Alert Network (EMAN) releases to health care professionals
- Public messaging as to risk-reducing behaviors should be regularly disseminated to the media via the Office of Media and Public Affairs.
- Effective communication with State and Federal agencies must be maintained, and outside resources accessed when needed

E. Public Health Information

Health Promotion representatives are members of the County Media Team. These representatives work with the HHSA Public Information Officer (HHSA-PIO) to prepare Public Health Advisories for broadcast during a disaster. Public Health Advisories inform the public of any immediate or long-term public health issues. Public Health Advisories may include, but are not limited to, emergency information regarding recommendations in the following types of activities:

Water	Sanitation
Food Preparation	Communicable Disease Control
Vectors	Radiological Protection
Hazardous Materials	Laboratory Testing

F. Administration and Logistics

The primary Health Departmental Operations Center (HDOC) site will be established at the County Health Services Complex, except in an earthquake. Depending on the nature and extent of the disaster, the secondary HDOC site (primary during an earthquake), will be established at the County JB Askew Building. Appropriate HHSA personnel will be represented at the EOC as well as the HDOC. Staff at the HDOC will be responsible for assessing status and capabilities of staff in the field, providing data to HHSA representative(s) at the EOC, receiving direction from the EOC, and coordinating the field response. The HDOC will be organized in accordance with SEMS and NIMS guidelines.

The Division of EMS may staff and operate its DOC/MOC in Grantville to support EMS activities at the County EOC/HDOC.

G. Resources

The Public Health Services develops and maintains the capability for identifying Public Health resources within the Operational Area. Additionally, Public Health Services is responsible for the procurement, allocation and distribution of all public health resources required to support disaster public health operations.

H. State Mutual Aid

The State of California is divided into six mutual aid regions. The San Diego County Operational Area is in Region VI, which also includes the Counties of Mono, Inyo, San Bernardino, Riverside, and Imperial. In the event local public health resources are unable to meet the needs of the Operational Area, assistance from the neighboring jurisdictions is requested through the Regional Disaster Medical/Health Coordinator or the Office of Emergency Services (regional office). The Regional Coordinator coordinates the provision of medical and public health resources through the Operational Area. If a state response is indicated, the Regional Coordinator functions are subsumed under the overall State medical and health response.

Disaster public health requests are consolidated at the Operational Area EOC and provided to the Regional Coordinator who transmits it to the State Operations Center (SOC). The Regional Coordinator will:

- Coordinate the acquisition and allocation of critical public and private medical and public health resources required to support disaster medical operations.
- Coordinate medical resources in unaffected counties in the Region for acceptance of casualties.
- Request assistance from the Emergency Medical Services Authority (EMSA) and the State Department of Health Services (DHS), as needed.

I. Communications

The Regional Communication System (RCS) is the primary Operational Area radio system for coordinating the emergency response to a disaster. It is based at the Sheriff's Communications Center in Kearny Mesa.

There are currently six county public health clinics in the Operational Area that are part of the enhanced RCS:

- Central Region, San Diego
- East Region, El Cajon
- North Inland Region, Escondido
- North Central Region, San Diego
- North Coastal Region, Oceanside
- South Region, Chula Vista

The RCS allows for direct communications between all of the public health clinics, the County EOC, and the HDOC.

In the event of an incident, all clinics, Regional General Managers, Administrative offices, EMS, and the HDOC will be directed to monitor the HLT-HLTGRP (Health group) talk-group for command and control. In addition, the clinics will monitor their own talk-group for tactical operations within the clinic's area. Regional Administration offices will use HLT-HADM for tactical information and operations within the regions.

1. Talk-groups

See Annex I - Communications

2. Back-Up Communications

- a. Telephones, faxes, and wireless systems will be utilized when available.
- b. Amateur radio operators may be called upon for back-up communications at the scene(s), hospitals, clinics, first aid stations, the blood bank, field treatment sites, Red Cross Service Centers, and the EOC/HDOC if necessary. For more information on amateur radio operations capabilities see the San Diego County Mutual Aid Radio Plan.

ATTACHMENT A

STATE RESPONSIBILITIES

The Director, State Department of Health Services, serves as State Director of Public Health and has the overall responsibility for coordinating statewide disaster public health operations and support.

The following state agencies have varied capabilities and responsibilities for providing support to public health disaster operations:

Department of Health Services

Primarily responsible, under the State Director of Public Health, for the administration and coordination of a statewide disaster public health program which includes coordinating, supervising, and assisting those essential services required to:

1. Assure availability of safe drinking water.
2. Prevent and control communicable disease.
3. Provide technical assistance in the safe operation of sewage collection, treatment, and disposal systems.
4. Assure prevention and control of vectors, including flies, mosquitoes, and rodents.
5. Assure observance of health aspects in management of solid waste disposal, including proper disposal of dead animals and human remains.
6. Assure safe management of hazardous wastes, including handling, transportation, and disposal.
7. Ensure safety of emergency supplies of food, drugs, medical devices, and other products.
8. Ensure rapid restoration or replacement of facilities for processing, storing, and distributing food, drugs, medical devices, cosmetics, and other products.
9. Rapidly establish measures to mitigate damage to public health from radiological accidents, including safety criteria for recovery, reoccupancy, and rehabilitation of contaminated areas.
10. Provide support to the California Air Resources Board in carrying out the public health aspects of the California Air Pollution Emergency Plan.

Department of Food and Agriculture

1. Administers programs for the control and eradication of diseases, pests or chemicals affecting animals, poultry or crops.
2. Provides information on the protection of human and animal food from contamination by harmful residues or chemicals.
3. Provides entomological and veterinary assistance in support of emergency operations.

Air Resources Board

1. Develops plans to prevent substantial endangerment to the health of persons by anticipating and preventing or abating air pollution emergencies.
2. Coordinates the execution of air pollution emergency plans with Operational Areas and Regional Air Pollution Control Districts, State Office of Emergency Services, and other public agencies.
3. Coordinates the monitoring of air quality and issues bulletins consistent with public safety as required by the Department of Health Services.

State Water Resources Control Board

Assures safe operation of sewage collection, treatment, and disposal systems; and provides water quality advice and support in emergency operations.

Solid Waste Management Board

Assures proper disposal of solid wastes.

ATTACHMENT B

FEDERAL RESPONSIBILITIES

The Department of Health and Human Services, operating under its own statutory authority or following a Presidential Declaration of an EMERGENCY, may provide disaster public health services.

Public Health Service

Has the primary federal responsibility for activities associated with health hazards resulting from emergencies and will:

- Assist state and local communities in taking protective and remedial measures for ensuring sanitary food and potable water supplies; adequate sanitary systems; rodent, insect, and pest control; care of sick and injured; and control of communicable disease.
- Assign professional and technical personnel to augment state and local forces.

Food and Drug Administration

Works with state and local governments in establishing public health controls through the decontamination or condemnation of contaminated food and drugs.

Policies and Procedures

1. If a local situation requires the regulation of a local health department in accordance with Section 207 of the Health and Safety Code, the State Department of Health Services will notify the appropriate health officer and assume control of local public health functions.
2. If local resources (both public and private) are inadequate to cope with the situation(s), required support will be requested through the appropriate OES Mutual Aid Regional Office. If the requirement cannot be met through resources available within the counties in the Region, the Region staff or Director will request assistance from the Sacramento headquarters, OES, who will then forward the request to the State Department of Health Services for assistance.
3. The provision of Federal resources prior to a Presidential Declaration of an EMERGENCY is justified where prompt action is essential for the protection of life and property. After a Presidential Declaration is made, and upon instructions from the Region Director, Federal Emergency Management Agency, Federal agencies will make their resources available to support local and state emergency public health and sanitation efforts.

APPENDIX E-1
PUBLIC HEALTH
EMERGENCY ACTION CHECKLIST
RESPONSE TO A MAJOR EARTHQUAKE

Action

Responsibility

IF LITTLE OR NO DAMAGE IS REPORTED, PREPARE TO SUPPORT MORE HEAVILY DAMAGED JURISDICTIONS.

IF EXTENSIVE DAMAGE IS REPORTED, TAKE THE FOLLOWING ACTIONS AS REQUIRED:

Report to the HDOC at J.B. Askew Building.

Public Health Officer and Pre-Designated Staff

Coordinate health-related activities among local public and private response agencies or groups.

Public Health Officer

Coordinate with the County Medical Examiner, on any health-related problems associated with the disposal of the dead.

Public Health Officer

Request assistance from the Regional Disaster Medical/Health Coordinator, as required.

Public Health Officer

Assist in communicable disease control activities.

Public Health Nursing

Assist in community health assessment.

Public Health Nursing

Assist in Field Treatment Sites, First Aid Stations, and Mass Care Shelters when requested.

Public Health Nursing

Coordinate with the Jurisdiction Public Information Officer on issuing Public Health Advisories to ensure that the public is aware of public health hazards and mitigation procedures.

Health Promotion

Provide microbiological testing of water and food as needed for prevention of transmission of diseases.

Public Health Laboratory

Provide microbiological testing as needed for plague, typhoid, tularemia, malaria, etc.

Public Health Laboratory

APPENDIX E-2

PUBLIC HEALTH

EMERGENCY ACTION CHECKLIST

RESPONSE TO A HAZARDOUS MATERIALS INCIDENT

<u>Action</u>	<u>Responsibility</u>
Coordinate a systematic inspection of health hazards in the affected area.	Public Health Officer
Implement preventive health measures, including the control of communicable diseases, and other public health services.	Public Health Officer
Coordinate health related activities among local public and private response agencies.	Public Health Officer
Coordinate with the County Medical Examiner, on health problems associated with the disposition of the dead.	Public Health Officer
Request outside assistance from the Regional Disaster Medical/Health Coordinator.	Public Health Officer
Assist in environmental and communicable disease control measures when requested.	Public Health Nursing
Assist in community health assessment.	Public Health Nursing
Assist in Field Treatment Sites, First Aid Stations, and Mass Care Shelters when requested.	Public Health Nursing
Coordinate with the jurisdiction Public Information Officer on using Public Health Advisories to ensure that the public is aware of public health hazards and mitigation procedures.	Health Promotion

APPENDIX E-3

PUBLIC HEALTH

EMERGENCY ACTION CHECKLIST

RESPONSE TO IMMINENT/ACTUAL FLOODING

FLOODING EXPECTED

Action

Responsibility

Determine potential health hazards and establish standards for control.

Public Health Officer

Request assistance from the Regional Disaster Medical/Health Coordinator, as required.

Public Health Officer

Prepare for influx of water specimens for testing of drinking water quality.

Public Health Laboratory

Prepare for examination of plague, typhoid, tularemia, etc.

Public Health Laboratory

Coordinate with the Jurisdiction Public Information Officer on issuing Health Advisories to ensure that the public is aware of public health hazards and mitigation procedures.

Public Health Promotion

PUBLIC HEALTH

EMERGENCY ACTION CHECKLIST

RESPONSE TO IMMINENT/ACTUAL FLOODING

FLOODING OCCURS

Action

Responsibility

Identify sources of contamination dangerous to the general physical and mental health of the community.

Public Health Officer

Coordinate health-related activities among local public and private response agencies or groups.

Public Health Officer

Coordinate, with the County Medical Examiner, any health-related problems associated with the disposition of the dead.

Public Health Officer

Request outside assistance from the Regional Disaster Medical/Health Coordinator.

Public Health Officer

Provide supportive health care at operating Public Health Centers.

Public Health Nursing

Conduct preventative health services.

Public Health Nursing

Assist in environmental protection activities.

Public Health Nursing

Provide supportive emergency health care
Field Treatment Sites, First Aid Stations and Mass Care
Shelters, as requested.

Public Health Nursing

Coordinate with the Jurisdiction Public Information Officer on issuing Public Health Advisories to ensure that the public is aware of public health hazards and mitigation procedures.

Health Promotion

Provide microbiological testing of water and food as needed for prevention of transmission of diseases.

Public Health Laboratory

Provide microbiological testing as needed for plague, typhoid, tularemia, malaria, etc.

Public Health Laboratory

APPENDIX E-4
PUBLIC HEALTH
EMERGENCY ACTION CHECKLIST
RESPONSE TO IMMINENT/ACTUAL DAM FAILURE

DAM FAILURE IMMINENT

<u>Action</u>	<u>Responsibility</u>
Determine potential health hazards and establish standards for control.	Public Health Officer
Coordinate with Medical Examiner for the disposition of dead persons.	Public Health Officer
Request assistance from the State OES Mutual Aid Region Disaster Medical/Health Coordinator, as required.	Public Health Officer
Determine potential health hazards and establish standards for control.	Public Health Officer
Prepare for response should dam fail.	Public Health Nursing
Coordinate with the Jurisdiction Public Information Officer on issuing Public Health Advisories to ensure that the public is aware of public health hazards and mitigation procedures.	Health Promotion

PUBLIC HEALTH
EMERGENCY ACTION CHECKLIST
RESPONSE TO IMMINENT/ACTUAL DAM FAILURE

DAM FAILURE OCCURS

Action

Responsibility

Identify sources of contamination dangerous to the health of the community.	Public Health Officer
Coordinate health-related activities among local public and private response agencies or groups.	Public Health Officer
Coordinate health-related problems associated with the disposition of the dead.	Public Health Officer
Request outside assistance from the State Mutual Aid Region Disaster Medical/Health Coordinator.	Public Health Officer
Provide supportive health care at operating Public Health Centers.	Public Health Nursing
Conduct preventative health services.	Public Health Nursing
Assist in environmental protection activities.	Public Health Nursing
Provide supportive emergency health care at Field Treatment Sites, First Aid Stations and Mass Care Shelters, as requested.	Public Health Nursing
Coordinate with the Jurisdiction Public Information Officer on issuing health advisories to ensure that the public is aware of public health hazards and mitigation procedures.	Public Health Promotion
Provide microbiological testing of water and food as needed for prevention of transmission of diseases.	Public Health Laboratory
Provide microbiological testing as needed for plague, typhoid, tularemia, malaria, etc.	Public Health Laboratory