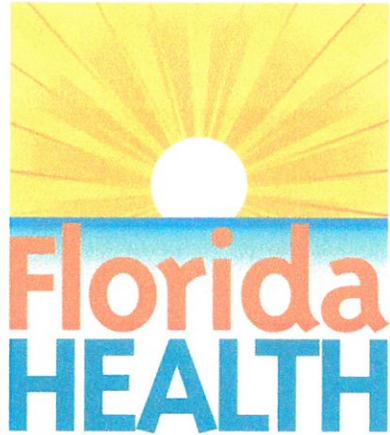


**STATE OF FLORIDA
Department of Health**



**Crisis and Emergency Risk Communications (CERC) Annex
to the
Emergency Operations Plan**

Version 1.4

October 2, 2014

I. INTRODUCTION

A. Signature Page

The Florida Department of Health (DOH) Emergency Operations Plan (EOP)'s Crisis and Emergency Risk Communications (CERC) Annex documents the department's all-hazard approach to protecting staff and the public through effective use of crisis and risk communications during emergencies. The Annex is aligned to state and federal emergency management principles, practices, and plans.

The State Surgeon General hereby adopts this revision of the Crisis and Risk Communications Annex to the Emergency Operations Plan as a necessary component of the Annex for the Florida Department of Health. This Annex supersedes all previous versions of this Annex.

Reviewed and adopted this date 10-2-2014



John H. Armstrong, MD, FACS
Surgeon General & Secretary
Florida Department of Health

B. Approval and Implementation

The Florida Department of Health (DOH) Emergency Operations Plan (EOP)'s Crisis and Emergency Risk Communications (CERC) Annex ensures that, during emergency incidents or related threats with public health significance, the Department of Health effectively and efficiently communicates essential information to its various stakeholders in order to instill and maintain confidence in the public health and medical system.

The department will activate this Annex when an emergency threat or incident has the potential to exceed the capability of routine departmental information validation and dissemination procedures.

The State Surgeon General approves and signs the DOH EOP CERC Annex, which replaces and supersedes all prior versions of the Annex.

The Florida Department of Health, Division of Emergency Preparedness and Community Support (DEPCS), Bureau of Preparedness and Response works with the Office of Communications to update the document as needed to maintain operational readiness.

A. Overview

The DOH State Surgeon General (SSG) activates the DOH EOP and any applicable annexes, including the CERC Annex. The State Surgeon General (SSG) and Department of Health Incident Management Team (DOH IMT) provide direction, control and coordination for the department during emergencies as documented in the DOH EOP plan.

As a member of the DOH IMT, the Office of Communications Director's key role is to coordinate the department's communications to the Governor, departmental staff, public and other stakeholders during any emergency or crisis of public health significance.

Communication needs during an emergency require resources beyond those used during the department's day-to-day functions. Because the Office of Communications Director is extremely active during an emergency, the Office of Communications Director uses a scalable Information Management public information capability to address the expanded communication requirements associated with a crisis or emergency incident.

Key components of an effective Information Management capability include:

- Information technical specialists to identify and address messaging needed for various target audiences e.g. leadership, DOH staff, general public, healthcare providers.
- A rumor control component to coordinate a rumor management process.
- Additional include:
 - Social Media analysts
 - Interpreters, translators
 - IT/Web consultants
 - Information specialists to discern, develop and/or proof messages

If an emergency requires activation of the State Emergency Response Team (SERT), the department's Information Management capability expands to support ESF8 and Emergency Support Function 14 (ESF 14) and Joint Information Center/Joint Information System (JIC/JIS).

B. Key Crisis and Emergency Risk Communication (CERC) Functions

The following is a summary of key functions to be addressed during a CERC Annex activation.

1. Information Monitoring and Rumor Control

Monitoring a wide variety of information sources allows a consistent assessment of facts and, equally important, perceptions related to a threat or incident. It is essential that crisis communications be based on

current information in order to provide timely messaging and to maintain a credible presence during any emergency.

Mainstream and social media compilation sites are helpful for general information monitoring activities, yet the postings may be delayed.

Effective information validation involves surveying a variety of sites (e.g. network, broadcasts, web and/or call center trends).

During activations of the DOH IMT, the Planning – Situation Unit, in coordination with the office of Communications, is responsible for coordinating and monitoring information and addressing rumors.

2. **Message Development and Approval**

It is imperative that messages be provided in a concise and timely fashion, based on the most accurate information available, and that target audiences include persons with disabilities and functional needs, as well as other vulnerable populations. Finalized messages need to be approved by key leadership members as well as subject matter experts to assure accuracy and alignment with other incident-related activities.

CERC Annex attachments provide guidance for message development activities.

3. **Message Dissemination and Evaluation**

Key crisis communications are effective when they are successfully delivered to the target audience(s) in a timely fashion. It is important that multiple dissemination venues are used to effectively reach the target audience(s).

CERC Annex attachments provide guidance and tools to assist during message dissemination and evaluation activities.

II. **INFORMATION COLLECTION AND DISSEMINATION**

The timely collection and dissemination of critical CERC-related information is necessary to accomplish the CERC Annex objectives. The following is a summary of the essential communication information needed for each of the CERC target audiences.

- Provide **government officials and policymakers** immediate notification of significant incident changes, regular situational updates that go beyond news reports, and advance notice of sensitive news releases.
- Provide the **healthcare community** clear and current testing and treatment guidance and protocols, reporting requirements, protective measures for staff and clients, and a method for seeking additional professional medical management information.
- Provide **additional response partners** (including emergency management, school and university systems, and major agencies/associations/businesses)

regular situational briefings (including rumors) and method for obtaining additional situational updates.

- Provide **media** regular incident briefings, news releases and contact information to obtain additional information.
- Provide **DOH personnel** regular situational updates, reporting requirements (including how to provide the state their local situational updates, how to report rumors), and guidance for communications with local stakeholders and continuity of operations activities (as appropriate).
- Provide the **general public** timely, accurate protective measure recommendations, situational updates, and method to obtain additional information.

As a general practice, all news releases should be concurrently disseminated to community stakeholders, (including emergency management partners, local leaders, other PIOs, school and university systems, military bases, other major agencies/associations/businesses in the area) to reinforce and align key messages.

III. COMMUNICATIONS

Crisis and emergency risk communications with the department's internal and external partners are conducted in accordance with the DOH EOP.

Crisis and emergency risk communications may incorporate:

- Formal and informal agreements between agencies.
- A diversity of communication dissemination venues.
- Robust redundancy/back-up communication equipment that is tested/exercised regularly.

Sample messages (e.g. news release templates, media briefings, PSAs, video clips, messaging) are located on the DOH Office of Communications' Crisis and Emergency Risk Communications (CERC) Portal, Sharepoint site, social media (i.e. Facebook, Twitter, Pinterest) and YouTube sites.

A. Intra-Agency

The Office of Communications maintains an established network to communicate with DOH staff (e.g. email, DOH Status Report Hotline, Everbridge SERVFL). The **Critical Public Health & Medical (PHM) Communication Venues & POCs attachment** contains an overview of key DOH stakeholders to be notified of DOH activities.

B. Inter-Agency

Emergency communications with all stakeholders outside of the department are conducted in accordance with:

- Florida's Comprehensive Emergency Management Plan (CEMP).

- Florida’s Interoperable Communications Plan.
- Public Information and Joint Information System (JIS) and Joint Information Center (JIC) Guidelines.

In addition, communications are aligned with other related protocols set forth by the Florida Division of Emergency Management, and the DOH Office of Communications.

IV. ADMINISTRATION, FINANCE AND LOGISTICS

The following administrative, fiscal, and logistical parameters are used to optimize the department’s CERC activities.

A. Finance and Administration

The DOH EOP contains the financial parameters for CERC-related activities.

B. Logistics

1. The DOH EOP contains the logistics parameters for CERC-related activities.
2. The Office of Communications Director works with the incident command staff to determine the location of staff working on CERC-related activities e.g.
 - a. DOH Office of Communication workspace.
 - b. ESF14 workplace.
 - c. Identified JIC/JIS workplaces.
 - d. Additional identified workplaces for communication-related activities.
3. CERC-related activities can be undertaken at remote locations if:
 - a. Equipped with working and effective telecommuting equipment (e.g. power (line, generator or battery), phone, computer, network and internet access).
 - b. Technical specialists are available for message development, message translation, information line/call center message recording, and calls to media.

V. PLAN DEVELOPMENT AND MAINTENANCE

The Office of Communication, in coordination with the Bureau of Preparedness and Response (BPR) periodically reviews this Annex in accordance with the Federal Emergency Management Agency’s “Developing and Maintaining Emergency Operations Plans” Comprehensive Emergency Preparedness Guide 101

<\\netdata.doh.ad.state.fl.us\netdata\Shared\EOPs\Federal\Federal AP 10 CP G.pdf>. Development is accomplished in coordination with guidance.

The Bureau of Preparedness and Response disseminates copies of the revised Annex to key stakeholders.

VI. AUTHORITIES AND REFERENCES

A. Department of Health

- Emergency Operations Plan.
- Florida Department of Health Style Guide, Executive Office
- DOH Policy 5-3-06, Correspondence and Report Policy
- DOH Policy DOHP 220-3-00, Equal Opportunity Methods of Administration, Equal Opportunity in Service Delivery

B. State

- Sec. 20.43(3)(f), Florida Statutes.
- Sec. 252.35(2)(e), Florida Statutes.
- Sec. 381.0011(4), Florida Statutes.
- Sec. 381.0011(14), Florida Statutes.
- Florida Comprehensive Emergency Management Plan
 - <http://floridadisaster.org/cemp.htm>
- RDSTF State Working Group on Domestic Preparedness, Public Information and Joint Information System (JIS) and Joint Information Center (JIC) Guidelines, March 2010
- State of Florida, Office of the Governor, Executive Order Number 07-01.

C. Federal

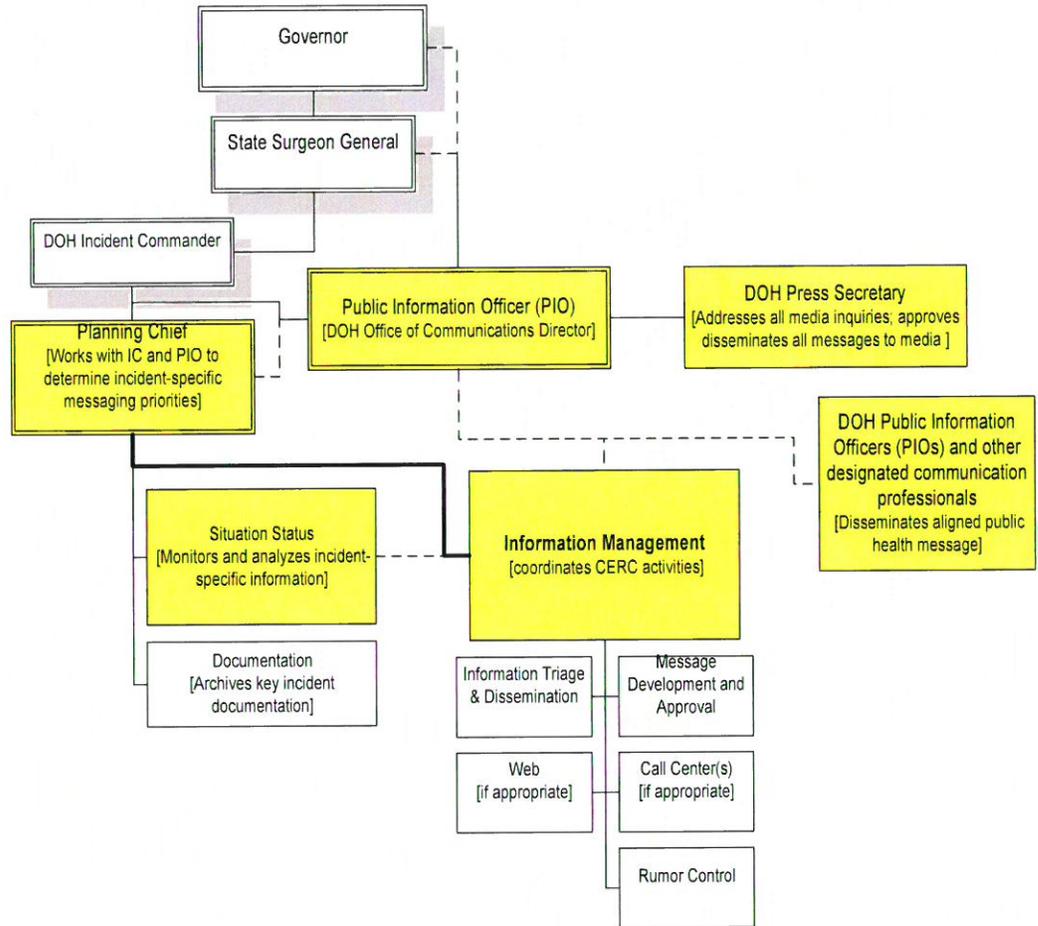
- Americans with Disabilities Act of 2011
- Public Affairs Field Guide for Joint Field Office Operations, Federal Emergency Management Agency (FEMA)
- Homeland Security Presidential Directive – 8: National Preparedness Goals, March 2011
- Crisis and Emergency Risk Communication, Centers for Disease Control and Prevention
- Omnibus Budget Reconciliation Action of 1981
- Age Discrimination Act of 1975
- Equality Act 2010
- Rehabilitation Act of 1973, Section 504

- Education Amendments of 1972, Title IX
- Civil Rights Act of 1964, Title VI

VII. ATTACHMENTS

**A. Key DOH Positions for Effective Crisis and Emergency Risk Communications:
 SCENARIO 1 - DOH IMT Activation Only (No SERT ESF8 Activation)**

Last Update: *October 2, 2014*



DOH CERC Audiences:

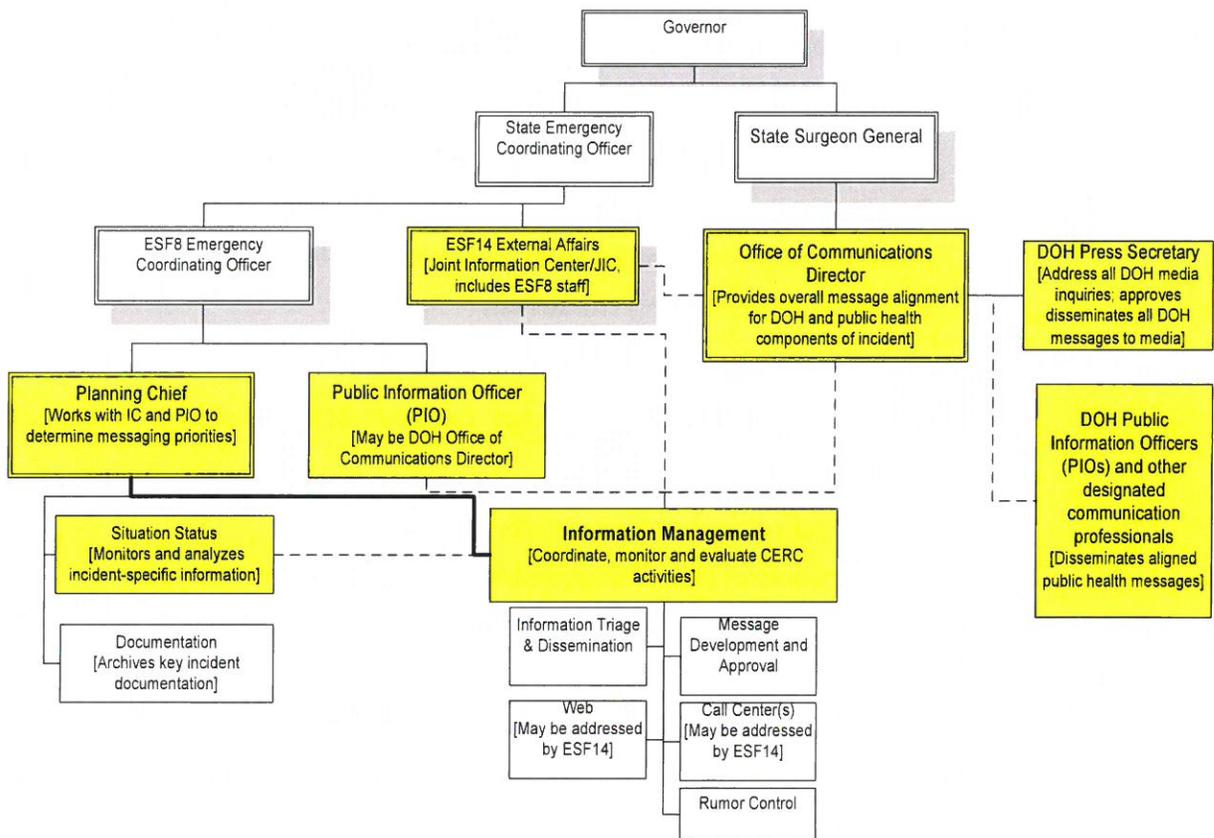
Government Officials and Policy Makers	Healthcare Providers and Facilities	Department of Health Personnel	Other Emergency Response Partners	Media	General Public
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Florida Department of Health (DOH) – Emergency Operations Plan (EOP)
 Crisis & Emergency Risk Communications (CERC) Annex

B. Key DOH Positions for Effective Crisis and Emergency Risk Communications: SCENARIO 2 – SERT ESF8 Activation

Last Update: *October 2, 2014*



DOH CERC Audiences:

Government Officials and Policy Makers	Healthcare Providers and Facilities	Department of Health Personnel	Other Emergency Response Partners	Media	General Public

C. CERC Operational Checklist

D. Sample Job Position Checklist and Action Sheets

E. Social Media, Information Monitoring and Rumor Control Guidelines, Processes/Checklists

E.1. DOH State Designated Spokespersons for Public Health Emergencies: Identification/Approval Process (Under revision within Office of Communications)

E.2. DOH Social Media Guidelines

E.3-9. DOH All-Hazards Rumor Control Proposal Standard Operations Guidelines (SOGs)

E.10. Job Aids for Media-related Activities

F. Message Development and Approval Processes/Checklists

F.1. Information Collection and Dissemination Summary

F.2. Message Development and Dissemination Job Aids

F.3. Guidelines for Written DOH Responses to Inquiries

F.4. Internal Messaging Guidelines

G. Message Dissemination Processes/Checklists

See also separate CERC attachment: Critical PHM Communication Venues and POCs

G.1. DOH Approval Process for Information Releases to the Media

(FDOH Communications Policy)

G.2. Information Dissemination Modes, Coverage and Usages

G.3. Guidelines to Create an Effective Web Presence for an Emergency Incident / Event

G.4. Guidelines for Creating an Effective Call Center

H. Additional Operational Templates, Processes and Checklists

H.1. First 12 Hours, 48, Recovery Checklists

H.2. Process for Addressing Speaker Requests

H.3. Message Status Board

[Contains 4 spreadsheets: Message Board (priority messages to develop/disseminate), Disseminated Messages, Staffing List, Speaker's Request Status Board]

I. Orientation Materials

I.1. Senior Leadership Briefing

I.2. Overview of Department of Health Communications Crisis and Emergency Risk Communications Portal and Sharepoint Directory,

YouTube, Online Newsroom Resources – *maintained by Office of Communications and Information Management capability*

I.3. Sample Information Management Handout: Optimizing Information Management During Emergencies

I.4. Sample CERC Staff Key Information Sheet– “Rules, Tools, Tips and Resources”

J. Virtual Joint Information Center Activation and Tools

J.1. DOH Virtual Joint Information Center (V-JIC) Standard Operating Guidelines

J.2. Open Source Virtual JIC Tools

J.3. Role of Proposed Virtual JIC Tools - Alphabetized

K. Internal, External Response Information Repositories

- All-Hazards “Dark Pages” Standard Operating Guidelines
- Internal “Dark Pages” Template
- External “Dark Pages” Template
- Sample Internal Response Page
- Sample External Response Page

L. Definitions and Acronyms

M. Critical Public health & Medical Communication Venues & POCs

