

# Emergency Support Function 8 Public Health & Medical

Transition Briefing Package  
January 24, 2011  
Version 1.0



## OVERVIEW

Florida's Public Health and Healthcare System is one of the most robust in the nation. It includes 290 hospitals, 678 nursing homes, 67 county health departments, 270 EMS providers, in addition to the thousands of private medical providers, and 18,537,969 Florida residents that may need some type of health or medical care during disasters.

Preparing for and responding to incidents and events that may impact the public health and healthcare system is of the utmost importance to the state. As the lead agency for Emergency Support Function 8 at the state-level, the Florida Department of Health coordinates preparedness efforts statewide to assure the healthcare system is ready to respond when called upon.

## CORE MISSIONS of ESF8

The scope of ESF8 is defined by a core set of missions carried out during response. These missions are aligned to the National Response Framework and the Target Capabilities List.

- Support local assessment and identification of public health and medical needs in impacted counties and implement plans to address those needs.
- Coordinate and support stabilization of the public health and medical system in impacted counties.
- Support sheltering of persons with medical and functional needs.
- Monitor and coordinate resources to support care and movement of persons with medical and functional needs in impacted counties.
- Support monitoring, investigating, and controlling potential or known threats and impacts to human health through surveillance, delivery of medical countermeasures and non-medical interventions.
- Support monitoring, investigating, and controlling potential or know threats to human health of environmental origin.
- Develop, disseminate, and coordinate accurate and timely public health and medical information.
- Monitor need for and coordinate resources to support fatality management services.
- Monitor need for and coordinate resources to support disaster behavioral health services.
- Support responder safety and health needs.
- Provide public health and medical technical assistance and support.

## PARTNERSHIPS

The Public Health and Healthcare System is made up of many partner agencies, associations and private medical providers. These stakeholders are engaged during both preparedness and response activities to assure the needs of Florida's public health and medical system are adequately represented and addressed. These partners include:

- Florida Department of Health (lead agency)
- Agency for Health Care Administration
- Agency for Persons with Disabilities
- Department of Elder Affairs
- Department of Children and Families
- Florida Hospital Association
- Florida Health Care Association
- Florida Association of Homes for the Aging,
- Florida Emergency Mortuary Response System
- Florida Fire Chiefs' Association
- Network 7/ Florida's Medicare Quality Improvement Organization
- Florida Poison Information Center Network
- Florida Association of Community Health Centers
- Florida Pharmacy Association
- Medical Reserve Corps
- Florida Crisis Consortium
- Red Cross
- Department of Agriculture and Consumer Services
- Department of Business and Professional Regulation
- Department of Environmental Protection
- Department of Military Affairs
- Department of Law Enforcement
- State Fire Marshal

## PREPAREDNESS

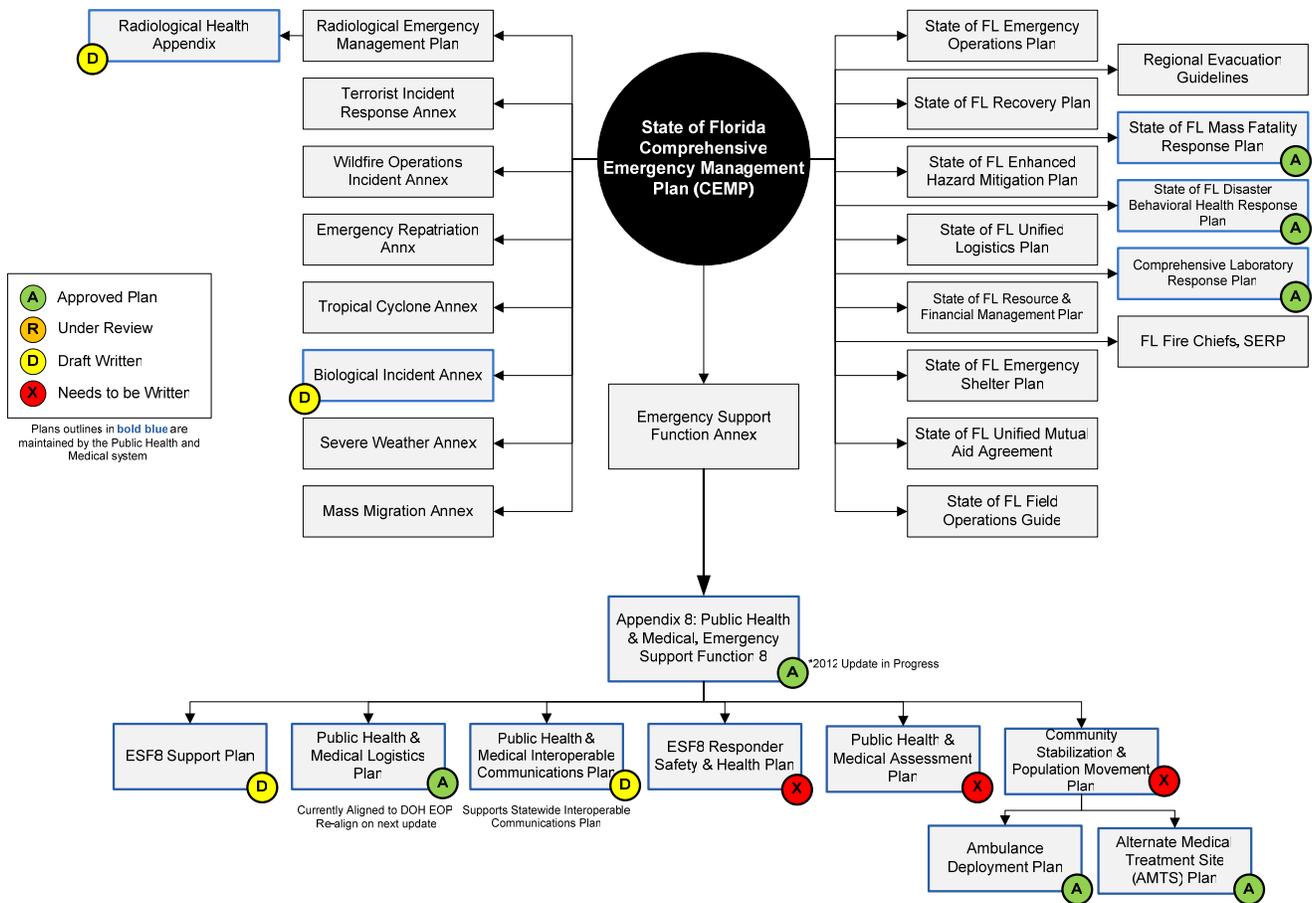
The Department of Health coordinates preparedness activities on a daily basis on behalf of the public health and healthcare system. Key preparedness initiatives include:

- **Oversight of the Florida Public Health and Health Care Preparedness (PHHP) Strategic Plan** – The strategic plan describes how the public health and healthcare system will supports the Florida Domestic Security Strategy, and serves as a guide for all partners committed to minimizing loss of life, illness and injury from natural or man-made disasters.
- **Management of Preparedness Grant Funds** – DOH manages an excess of \$50 million annually in federal grant funds from the U.S. Department of Health and Human Services' Centers for Disease Control & Prevention and Assistant Secretary for Preparedness and Response's (ASPR) Hospital Preparedness Program, and Department of Domestic Security which are used to build statewide public health and medical response capabilities. Approximately 40% of this funding is distributed directly to local public health and healthcare entities. The remaining 60% is used to support statewide initiatives that support local capability development
- **Supporting County Health Department Preparedness Efforts** – At the local level the public health and medical response structure and scope varies between counties. Each of Florida's 67 county health departments (CHDs) has a role in preparedness and response. CHDs are provided with funding, planning tools and guidance, technical assistance, and access to statewide systems in order to enhance local capabilities.
- **Integration with the Florida Fusion Center** – DOH provides liaisons to the fusion center to support the State's a collaborative effort to detect, prevent, investigate, and respond to criminal and terrorist activity which may impact the public health and healthcare system through integrated intelligence process.

- **Maintaining full-time 24/7 Duty Officers** – These staff are the primary point of contact with the State Watch Office to assure timely notification of incidents and events that may trigger an activation of ESF8. They disseminate pertinent information within the Department and to external health and medical partners.
- **Development of Emergency Plans and Procedures** – DOH coordinates the development of plans which support the missions of ESF8 in support of the State Comprehensive Emergency Management Plan as well as an internal Emergency Operations Plan (EOP) which documents DOH's agency level emergency responsibilities to respond to threats impacting public health. The DOH EOP may be activated for public health emergencies which don't escalate to an activation of the SERT. The following diagrams depict the ESF8 and DOH plans and their linkages.

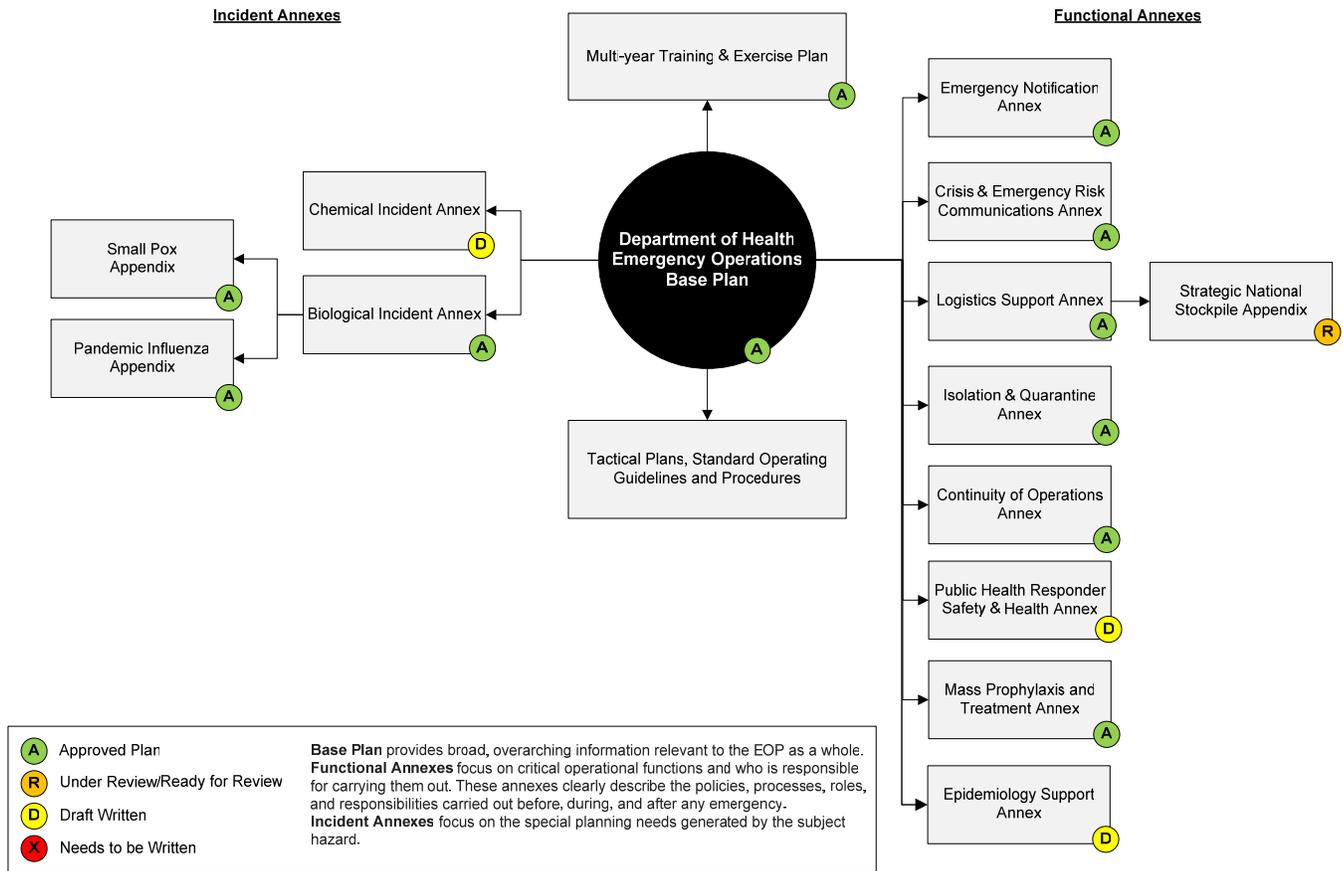
**Alignment to the CEMP**

ESF8 plans support and integrate with the State Comprehensive Emergency Management Plan (CEMP) and link with other agency plans.



## Alignment to the Department of Health Emergency Operations Plan

The DOH EOP complements the CEMP by describing the agency level public health functions during emergency response.



## CAPABILITIES

Florida's public health and healthcare preparedness efforts collectively build capabilities needed during response. These capabilities are identified in the Florida Domestic Security Strategy and align to the National Target Capabilities List and the National Health Security Strategy.

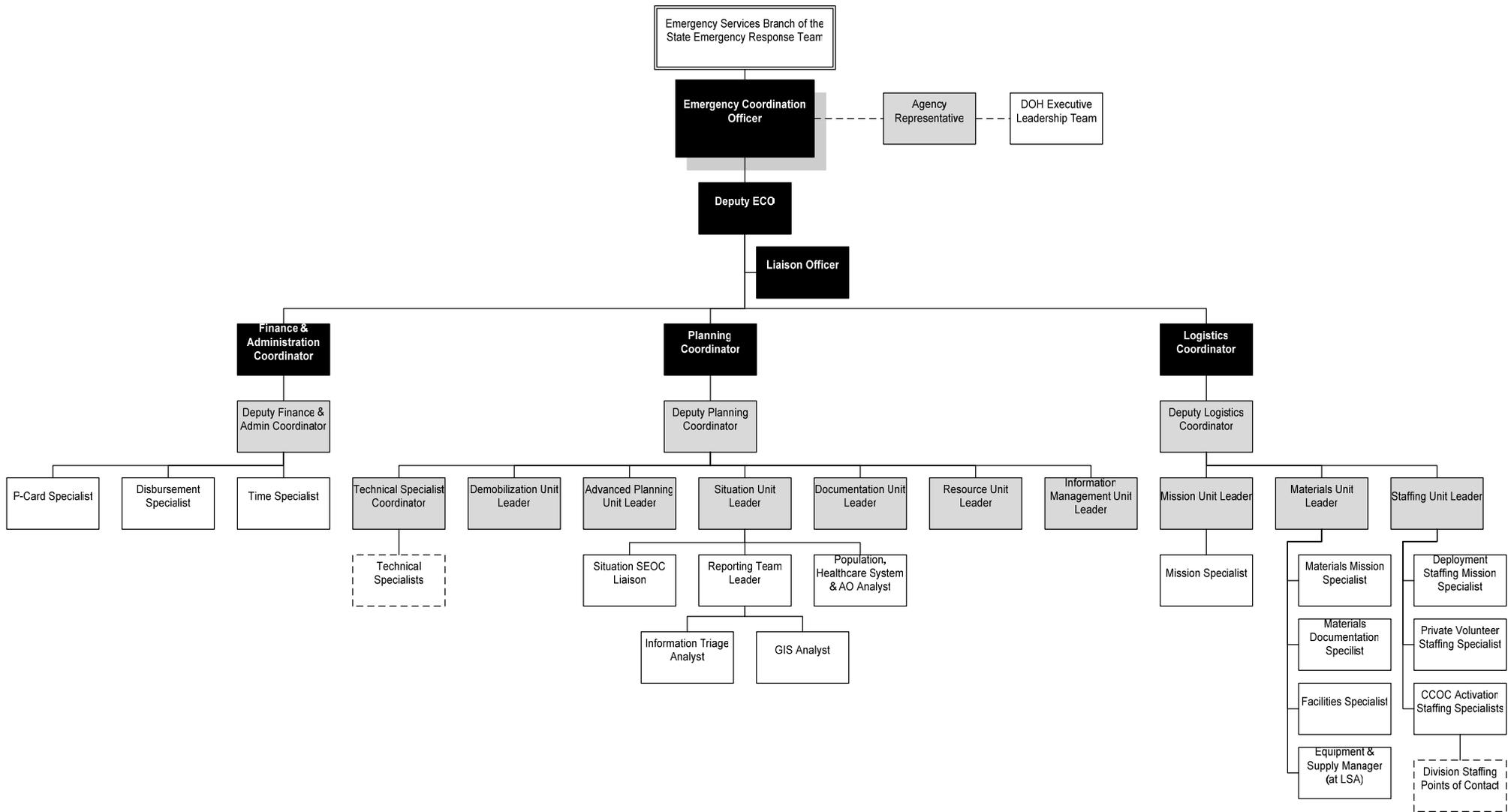
- **Information Sharing and Dissemination Capability** - Effective and timely sharing of information and intelligence occurs across federal, state, local, tribal, territorial, regional and private sector entities to achieve coordinated awareness of, prevention of, protection against and response to a threatened or actual domestic terrorist attack, major disaster or other emergency.
- **Interoperable Voice and Data Communications Capability** - A continuous flow of critical information is maintained as needed among multi-jurisdictional and multidisciplinary emergency responders, command posts, agencies and the governmental officials for the duration of the emergency response operation.
- **Emergency Triage and Pre-Hospital Treatment Capability** - EMS resources are effectively and appropriately dispatched and provide pre-hospital triage, treatment, transport, tracking of patients and documentation of care appropriate for the incident, while maintaining the capabilities of the EMS system for continued operations.
- **Medical Surge Capability** - Injured or ill from the event are rapidly and appropriately cared for while continuity of care is maintained for non-incident related illness or injury.

- **Medical Logistics Capability** - Critical medical supplies and equipment are appropriately secured, managed, distributed, and restocked in a timeframe appropriate to the incident.
- **Volunteer Management Capability** - The positive effect of using volunteers and donations is maximized to augment incident operations.
- **Fatality Management Capability** - Complete documentation and recovery of human remains and items of evidence (except in cases where the health risks posed to personnel outweigh the benefits of recovery of remains).
- **Responder Safety and Health Capability** - No illnesses or injury to any first responder, first receiver, medical facility staff member, or other skilled support personnel as a result of preventable exposure.
- **Mass Prophylaxis Capability** - Appropriate drug prophylaxis and vaccination strategies are implemented in a timely manner upon the onset of an event to prevent the development of disease in exposed individuals.
- **Isolation and Quarantine Capability** - Individuals who are ill, exposed, or likely to be exposed are separated, movement is restricted, basic necessities of life are available, and their health is monitored in order to limit the spread of a newly introduced contagious disease (e.g., pandemic influenza).
- **Epidemiological Surveillance and Investigation Capability** - Potential exposure to disease is identified rapidly by determining exposure, mode of transmission and agent, interrupting transmission to contain the spread of the event, and reducing number of cases.
- **Laboratory Testing Capability** - Potential exposure to disease is identified rapidly by determining exposure and mode of transmission and agent; interrupting transmission to contain the spread of the event; and reducing number of cases.
- **CBRNE Detection Capability** - Chemical, biological, radiological, nuclear, and/or explosive (CBRNE) materials are rapidly detected and characterized at borders and ports of entry, critical locations, events, and incidents
- **Environmental Health Capability** - After the primary event, disease and injury are prevented through the quick identification of associated environmental hazards, including exposure to infectious diseases that are secondary to the primary event as well as secondary transmission modes.
- **Community Health Care System Resilience Capability** - Community health care systems are prepared for and can recover quickly from all hazards.
- **Community Preparedness and Participation Capability** - An informed, empowered and resilient public.
- **Mass Care Capability** - Mass care services, including sheltering, feeding and appropriate health care services are rapidly provided for the population and companion animals within the affected area.

## RESPONSE

When disasters occur that trigger an activation of the State Emergency Response Team (SERT), ESF8 is activated in support of the SERT to coordinate the public health and medical components of the state response. ESF8 serves both public and private entities within Florida's public health and medical system as requested by county emergency management agencies.

ESF8 activates at the direction of the SERT. A team of pre-identified staff stand ready to activate when the SERT moves to Level 2 activation to staff the ESF8 function. ESF8 is organized using incident command system principles. The structure is a multi-agency coordination model that is designed to coordinate resources and provide support rather than provide on-scene incident management.



## DEPLOYABLE RESOURCES

In order to achieve the ESF8 core missions and activate the public health and health care capabilities, ESF8 maintains a robust network of deployable resources able to respond on behalf of the state. Many of these resources are embedded at the local level and can be marshaled to support the state response when not needed locally. These resources are managed and deployed in coordination with the SERT during activations.

### Personnel Resources

- **Epidemiology Strike Teams** – At full capability this team is able to conduct surveillance and investigation efforts in a defined geographic area. Team has capacity to perform activities related to disease surveillance, outbreak investigation, quarantine and isolation, data analysis, and phlebotomy.
- **Environmental Health Strike Teams** – At full capability this team is able to provide up to 80 environmental health services per day. Team includes a supervisor level position for liaison with local structure. Team has capacity to perform activities related to the following subject areas— food, water, sewage, indoor air, vector/zoonotic, facilities, and chemical/toxic.
- **Special Needs Shelter Teams** – Team can perform a variety of management, operations, and augmentation functions for a special needs shelter.
- **Disaster Behavioral Assessment Health Teams** - Provides on-scene assessment of the need for behavioral support services to victims, survivors, responders and the public in communities impacted by traumatic events.
- **Fatality Management Teams** – Provide initial scene response and evaluation, processing the scene, temporary morgue operations and administration, and the roles of various forensic units within the morgue (e.g., pathologist, anthropologist, odontologist, radiologist, fingerprint specialist, DNA analyst, funeral director, and others), victim identification, disposition of human remains (embalming/casketing), personal effects, and evidence collection.
- **State Medical Response Teams** – Are a state-level version of the federal Disaster Medical Assistance Team. These teams can meet a broad range of medical missions, including hospital augmentation, medical triage, in-the-field patient care and first aid support.
- **Forward Advanced Surgical Team** - The Florida Advance Surgical Transport Team (FAST) is designed, to add clinical and surgical capacity to the existing State Medical Response Team’s (SMRT). This additional capability would be brought in as an additional “force multiplier” to enhance the clinical capacity of a deployed SMRTs, specifically to provide emergent surgical, general anesthesia, critical care transport capability, and additional specialist equipment to a deployed SMRT or to augment a crippled medical care facility during a disaster.
- **Ambulance Strike Teams** – Provide emergency medical capability including patient triage and transport. These teams can be built from the 4032 ambulance units and 50 trained ambulance strike team leaders across the state. Deployment of these teams is coordinated with ESF4/9.
- **Regional Emergency Response Advisors** – Can deploy as a team or individual resources to provide public health and medical response consultation to local ESF8 and County Health Departments and conduct post-impact assessments of the public health and medical infrastructure.
- **Medical Reserve Corps** – These individuals include government employees, volunteers, and private medical providers who can be integrated into response efforts for a variety of roles to address public health and medical workforce surge.

## Medical Supplies and Equipment

- **Mobile Medical Field Units** – Four 50 bed units that can be used as shelters, alternate medical treatment site, or triage centers.
- **Chempack Chemical Antidote Caches** – 108 forward placed chemical nerve agent antidote containers prepositioned in 67 designated locations to include hospitals, EMS stations, and warehouse facilities.
- **Mass Casualty Trailers** - 23 enclosed trailers with medical supplies and equipment needed in trauma situations for mass casualty incidents.
- **Medical Supplies and Equipment Caches** – A broad range of medical supplies and equipment including pharmaceuticals, ventilators, and medical supplies strategically placed across the state.
- **Mobile Communications Units** - Enclosed custom utility trailers equipped with high-speed satellite (2Mb down and 1Mb upstream data speed) communications, self generated power, rooftop AC, and necessary infrastructure hardware pre-configured to establish inter access. They include four VOIP phone lines and server hardware to restore data from valid back-ups. Units are supported by two disaster response technicians.

## Operational Systems

- **Biowatch Detection System** – BioWatch is a federally-managed, locally-operated, nationwide environmental bio-surveillance system designed to detect the intentional release of select aerosolized biological organisms. The program operates in more than 30 high threat metropolitan areas across the country including three in Florida. The program focuses on early detection of a biological attack. Early detection is critical to the successful treatment of affected populations and provides public health decision makers more time and thereby more options in responding to, mitigating, and recovering from a bioterrorist event.
- **ESSENCE Syndromic Surveillance System** – The Electronic Surveillance System for the Early Notification of Community-based Epidemics (ESSENCE) is a biosurveillance system that collects: emergency department chief complaint data from participating hospitals and urgent care centers in Florida (172 hospitals and urgent care centers report daily); all calls from the Florida Poison Information Center Network (reported every ~20 minutes); all reportable disease data from the Merlin database (reported hourly); and all mortality data from the Florida Office of Vital Statistics (reported daily). The objective of this surveillance system is to provide the epidemiologist with the data sources and analytic tools (e.g. automated alerting and data visualization) needed to identify outbreaks or unusual trends more rapidly, leading to a timelier public health response. The system has been very useful to providing situational awareness during previous response efforts.
- **Florida Department of Health Emergency Notification System** – FDENS is an electronic notification system able to rapidly alert pre-identified responders with critical information through multiple communication technologies, while assuring responders received the message through electronic confirmation. FDENS serves as Florida's Health Alert Network.
- **Inventory Resource Management System** – IRMS is the inventory system in operation for the Bureau of Statewide Pharmaceutical Services in conjunction with the Bureau of Preparedness and Response and the State Medical Response Teams. IRMS is an Enterprise solution suite in a hosted environment with a centralized warehouse management system that provides real time visibility of all pharmaceutical and emergency response assets throughout the State of Florida. IRMS is an emergency management resource that increases the efficiency and asset visibility of Florida's response to any large scale emergency event.
- **Emergency Status System (ESS)** – ESS is an electronic reporting system managed by the Agency for Health Care Administration to collect and report status of licensed medical facilities during responses. Information such as bed census, emergency power, generator usage, evacuation status, and facility damage is collected. This information is used to inform the overall situational awareness of the response.

- **SERV-FL** – Florida's online system for managing public health and medical disaster responders, both volunteers and deployable teams. Florida currently has 12,177 volunteers registered in SERV-FL, the state's public health and medical emergency responder volunteer database.
- **Region IV ESF8 Unified Planning Coalition (UPC)** – This is an interstate coordinating element made up of the ESF8 representatives from the eight states in FEMA Region IV designed to support one another during emergency response through resource identification, gathering situational awareness and enhance planning efforts for the public health and medical (ESF8) system through Emergency Management Assistance Compact (EMAC). The UPC concept supports EMAC's direction encouraging states and disciplines to coordinate on resource needs during response.

## **PUBLIC HEALTH EMERGENCIES**

The ability to declare "Public Health Emergencies" is a unique function that the Department of Health brings to bear during emergencies. A Public Emergency declaration may or may not coincide with an activation of the SERT. F.S. 381.00315 authorizes the State Health Officer to declare Public Health Emergencies when incidents may result in substantial injury or harm to the public health from infectious disease, chemical agents, nuclear agents, biological toxins, or situations involving mass casualties or natural disasters. Orders given by the State Health Officer to effectuate Public Health Emergencies are enforceable by law. Public Health Emergencies allow the State Health Officer to take actions necessary to protect public health, including:

- Prioritizing shipments of specified drugs to pharmacies and health care providers within designated geographic areas.
- Authorizing DOH pharmacists to compound and distribute drugs for mass prophylaxis.
- Temporarily re-activating licensure of inactive healthcare practitioners to support response efforts.
- Ordering individuals to be examined, tested, vaccinated, treated, or quarantined for communicable diseases that have significant morbidity or mortality and present a severe danger to public health.

During Public Health Emergencies, the Department of Health can request resources from the federal Strategic National Stockpile (SNS) to access medical counter measures. The SNS, maintained by the U.S. Centers for Disease Control and Prevention, includes a push package which contains a formulary of pharmaceuticals needed for immediate response to a biological incident. CDC has designed the push package to arrive in Florida within 12 hours of a request. Additional pharmaceuticals and durable medical equipment can be ordered from the SNS based on state needs.

## **FOR MORE INFORMATION**

Contact:

Mike McHargue,  
ESF8/DOH Emergency Coordinating Officer  
Florida Department of Health  
Bureau of Preparedness and Response  
850-528-5195  
[Mike\\_McHargue@doh.state.fl.us](mailto:Mike_McHargue@doh.state.fl.us)