

## ESF #8: PUBLIC HEALTH, MENTAL HEALTH, AND MEDICAL SERVICES

Primary Department	Support Department	External Agencies
<p>Executive Director of Operations Phone: 406-447-6926 Cell: 617-446-3691</p> <p>*Lewis &amp; Clark Co. Public Health Department</p>	<p>Director of Crisis &amp; Emergency Management Phone: 406-447-6382 Cell: 406-461-0635</p> <p>HC Administration</p> <p>HC Nursing Department</p>	<p><b>Local Law Enforcement Agencies</b></p> <ul style="list-style-type: none"> <li>- Helena Police Department</li> <li>- Lewis &amp; Clark Sheriff's Office</li> </ul> <p><b>City/County Agencies</b></p> <ul style="list-style-type: none"> <li>- Helena-Lewis and Clark County Communications Center</li> <li>- L&amp;C Department of Disaster &amp; Emergency Services</li> <li>- L&amp;C Public Health Department Non-Urgent 406-457-8900 Emergency: 406-523-5564</li> <li>- L&amp;C Water Quality Protection</li> <li>- L&amp;C Environmental Health</li> </ul> <p><b>State Agencies</b></p> <ul style="list-style-type: none"> <li>- MT State DPHHS- Public Health and Safety Division</li> <li>- MT State Department of Disaster &amp; Emergency Services</li> </ul> <p><b>Private/Public Sector</b></p> <ul style="list-style-type: none"> <li>- St. Peter's Hospital</li> <li>- Urgent Cares</li> <li>- St. Peter's Behavioral Health Unit</li> <li>- VA Medical Center</li> <li>- Mobile Crisis Response and Stabilization Team</li> <li>- Pure View Health Clinic</li> <li>- Center for Mental Health</li> <li>- Suicide Prevention Hotline/Lifeline</li> <li>- Helena Friendship Center</li> <li>- Red Cross</li> </ul>

### **8.1 Purpose**

The purpose of this annex is to outline the local organization, operational concepts, responsibilities, and procedures/guidelines to accomplish coordinated public health, mental health, and medical services to reduce death and injury during emergency situations and restore essential health and medical services within a disaster area.

This ESF lists the internal and external departments responsible for public health, mental health, religious services, and medical services that may be needed in an emergency.

### **8.2 Scope**

A) Services may be needed for Helena College employees, students and all emergency personnel.

- (1) Public health and medical needs
- (2) Public health information and surveillance
- (3) Coordination of medical care personnel
- (4) Coordination and distribution of health and medical equipment and supplies
- (5) In hospital care
- (6) Food, drug and medical device safety
- (7) Mental health services
- (8) Religious needs
- (9) Mass fatality management
- (10) Chemical, Biological and Radiological Hazards
- (11) Potable water, wastewater, and solid waste disposal

B) May include triage treatment (ESF-6) and emergency transportation (ESF-1).

C) May be activated to respond to incidents that overwhelm normal Incident Command response actions.

### **8.3 Situation**

A) Emergency Conditions and Hazards

- 1) Helena College may periodically experience emergency and disaster situations that will require the restoration of essential services. Potential emergencies and disasters include both natural and human-caused incidents.
- 2) These hazards could result in mass casualties or fatalities, disruption of food and/or water distribution and utility services, the loss of water supply, wastewater, and solid waste disposal services, and other situations that could create potential health hazards or serious health risks.
- 3) One of the primary concerns for public health officials is disease control. This involves the prevention, detection, and control of disease-causing agents, maintaining safe water and food sources, and continuation of wastewater disposal under disaster conditions.

- 4) Disaster and mass-casualty incidents take many forms. Proper emergency medical response must be structured to provide optimum resource application without total abandonment of day-to-day responsibilities.
- 5) St. Peter's Hospital emergency room can take up to 12 seriously injured patients. It has 123 beds with an emergency capacity of 144 beds and a 30-day stockpile of medicine. An emergency generator is available.
- 6) Lewis & Clark County does not have large scale morgue storage capabilities.
- 7) Lewis & Clark County does not have a designated "Functional Needs" Shelter.
- 8) See Helena College's All Threat/Hazard Annexes for a description of potential emergencies.
- 9) Helena College does not have on-campus living or a designated food/catering service designed to provide meal services on a day-to-day basis. Both campus locations close and lock at designated times through the week.

#### **8.4 Assumptions**

- A) College resources will be quickly overwhelmed.
- B) Communication systems may fail during a major incident.
- C) Backup systems will be available but may take time to activate.
- D) Shortfalls can be expected in both support personnel and equipment.
- E) State and federal assistance may not be immediately available.
- G) Emergencies and disasters may occur without warning at any time of the day or night and may cause mass casualties.
- H) Use of nuclear, chemical, or biological weapons of mass destruction could produce many injuries requiring specialized treatment that could overwhelm the local and state health and medical system.
- I) Public and private medical, health, and mortuary services resources located in Lewis & Clark County will be available for use during emergency situations; however, these resources may be adversely impacted by the emergency.
- J) Health and medical facilities that survive emergency situations with little or no damage may be unable to operate normally because of a lack of utilities or because staff are unable to report for duty because of personal injuries or damage to communications and transportation systems.
- K) Medical and health care facilities that remain in operation and have the necessary utilities and staff could be overwhelmed by the "walking wounded" and seriously injured victims transported to facilities in the aftermath of a disaster.
- L) In a major catastrophic event (including but not limited to epidemics, pandemics, and bioterrorism attacks), medical resources may be insufficient to meet demand, specialized equipment and/or treatment materials may be unavailable, and transportation assets may also be restricted due to contamination. No emergency plan can ensure the provision of adequate resources in such circumstances.
- M) Disruption of sanitation services and facilities, loss of power, and the concentration of people in shelters may increase the potential for disease and injury.
- N) Emergency responders, victims, and others who are affected by emergency situations may experience stress, anxiety, and display other physical and psychological symptoms that may

adversely impinge on their daily lives. In some cases, disaster mental health services may be needed during response operations.

## **8.5 Concept of Operations**

### **A) General**

- 1) The Emergency Operation Plan provides overall guidance for emergency planning.
- 2) ESF annexes are designed to provide basic information to include points of contact in case additional resources or expertise is needed at the EOC or incident scene.

### **B) Organization**

- 1) National Incident Management System concepts will be used for all incidents.
- 2) Incident or Unified Command will be used by responding departments.
- 3) When requested ESF personnel will report to the EOC or ICP and use the EOP to activate and operate during an incident or event.
- 4) In a significant incident, provisions should be made for the following;
  - (i) Support health & medical response team efforts.
  - (ii) Identify an area to hold and treat the injured.
  - (iii) Triage, treatment, & transport of the injured, as appropriate.
  - (iv) Isolate, decontaminate, and direct victims of hazardous materials or infectious diseases to seek medical.
  - (v) Reiterate health & medical advisories to the Helena College community on such issues as drinking water precautions, waste disposal, the need for immunizations, and food protection techniques.
- 5) Helena College Emergency Operations should try to maintain coordination with the appropriate local jurisdictions, medical and public health officials, and organizations to obtain current medical and public health assistance requests.

### **C) Notification**

- 1) If ESF-8 needs to be activated the EOC Director/Dean/CEO or designee will contact the department or agencies listed in this annex to report to the EOC.
- 2) The Dean/CEO, Executive Director of Operations, or the Director of Marketing, Communications and Alumni Relations are the point of contact for all emergency warning notifications.
  - (i) Helena College Regroup Emergency ALERT Notification System will normally be activated on their direction.
  - (ii) If life safety is in jeopardy, the Emergency Manager/Incident Commander can direct Helena College Regroup Emergency Notification ALERT System activation.

(iii) Time sensitive information will be communicated to the Helena College community in a timely fashion. On-going (status) information will be communicated regularly.

3) The Dean/CEO or designee, will notify other key personnel as required.

4) Request for resources normally comes to the Emergency Operations Center (EOC), if activated. If the EOC is not activated, a request should be sent to the on-scene Emergency Manager/Incident Commander for coordination between the Emergency Management Advisory Team and Incident/Unified Command.

D) Direction, Control and Authority to Act

1) The Incident Command System (ICS) is used by Helena College personnel to respond to emergencies and disasters. During the emergency response phase, all responders will report to the designated Incident Commander at the Incident Command Post.

2) **Do not self-deploy to the incident scene.** Wait to be contacted or try to contact the Emergency Operations Center for guidance and direction.

(i) Do **not** call the Helena-Lewis and Clark County Communication Center unless you have critical information to report.

E) Actions

1) Preparedness

(i) Participate in emergency management training and exercises.

(ii) Develop and maintain a list of possible resources that could be requested in an emergency.

(iii) Maintain a list of personnel (at least one primary and one back up individual) that can be called to the EOC, as needed.

(iv) Conduct planning with support agencies.

(v) Identify population groups requiring special assistance during an emergency (i.e., senior citizens, special needs, etc.) and ensure that preparations are made to provide assistance.

(vi) Maintain adequate medical supplies.

(vii) Appoint a representative to assist in the County EOC.

(viii) Develop procedures to document costs for any potential reimbursement.

2) Response

(i) When requested by the Emergency Manager or designee, responding personnel will report to the Incident Command Post before being assigned tasks.

(ii) Conduct rapid assessments for immediate response objectives.

(iii) Determine the number and type of casualties, request additional assistance, establish staging areas and initiate triage procedures.

(iv) Determine which normal activities and facility accommodations can be curtailed or shifted to allow for increased emergency capacity.

(v) Allow for provisions of medical personnel, equipment, and supplies as needed to health and medical facilities.

(vi) Adopt Public Health recommendations, such as the implementation of disease control and prevention measures.

(viii) Coordinate emergency information for public release through the EOC Emergency Manager, Dean/CEO, and Public Information Officer.

(ix) Coordinate the release of public health information with County and State Public Information Officers.

(x) If the event happens outside of operational hours, consider closing both campus locations.

### 3) Recovery

(i) Coordinate assistance as needed by the Incident Commander, EOC Emergency Manager, or Emergency Management Advisory Team, as appropriate.

(ii) Monitor health authorities to determine if a continuing health problem exists requiring an on-going commitment of resources, or if there is a potential for new problems developing.

(iii) Monitor environmental and epidemiological systems.

(iv) Assist the Department of Environmental Quality (DEQ) in the disposal of hazardous materials.

(v) Continue EOC operations until it is determined that EOC coordination is no longer necessary.

(vi) Return staff, clients, and equipment to regularly assigned locations.

(vii) Complete critical payroll and other financial information for cost recovery, if possible. Ensure that ESF-8 team members maintain appropriate records of costs incurred during the event.

(viii) Participate in after action critiques and reports.

(ix) Update plans and procedures/guidelines based on critiques and lessons learned during an actual event.

## **8.6 Responsibilities**

### **A) Primary Department**

- 1) Serve as the lead agency for ESF-8, supporting the response and recovery operations after activation of the EOC.
- 2) Develop, maintain, and update plans and procedures for use during an emergency.
- 3) Identify, train, and assign personnel to staff ESF-8 when the College EOC is activated.
  - (i) At a minimum, the National Incident Management System ICS-100 and IS-700 online classes should be completed by assigned personnel.

### **4) General Responsibilities**

- (i) Evaluate the emergency situation, make strategic decisions, and identify resource needs and secure resources required for field operations.
- (ii) Coordinate activities with other agencies identified in this annex.
- (iii) Document costs for reimbursement and auditing purposes.
- (iv) Evaluate and review procedures/guidelines to ensure operational readiness.
- (v) Assist in identifying personnel and resources to support this Annex.

### **B) Support Departments**

- 1) Develop, maintain, and update plans and procedures for use during an emergency.
- 2) Identify, train, and assign personnel to staff ESF-8 when the College EOC is activated.
- 3) Support the primary department as needed.