Department of Health Services Emergency Response Roles

**Emergency Medical Services** – managing ambulance response, assuring emergency first aid in the field, coordinating critical patient transport, managing emergency medical resources

**Public Health** – detecting and containing communicable diseases, preventing illness, assuring ongoing medical care, managing health care resources with health facilities

**Environmental Health & Safety** – assuring safety of food sources; of well water, storm water, and recreational water systems; and of solid waste services

**Behavioral Health** – assuring wellness and recovery when stress, mental illness, or substance use impact disaster survivors

**Animal Services** – assuring care and return of pets and livestock displaced due to disaster
Some Health Dept. Disaster Plans:

**Functional plans - how to run a special type of operation:**
- **Medical Countermeasures Plan** – preventive vaccine or medication to large groups of people. Warehousing, public info, mass dispensing sites (PODs), etc.
- **Medical Surge Plan** – Healthcare system’s ability to support a patient surge.
- **DOC Plan** – How Health Dept will run its Department Operations Center.
- **Risk Communications Plan** – To develop and share public information.
- **Animal Care Emergency Response Plan** – Control, shelter, care, reunification to owners.

**Hazard-specific plans - actions & considerations:**
- **Influenza Pandemic Plan** - **Smallpox Response Plan**
- **Mass Casualty Incident (MCI) Response Plan**

**Action Plans – tasks for an actual situation**
- Written in the moment by County EOC or Health DOC.
### Sonoma County Medical Reserve Corps

**Introduction to Emergency Response Planning & Coordination**

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**Preparedness**

The Health Department works with healthcare facilities, fire, law, hazmat, and other disaster responders to prioritize the hazards we should focus on. From these assessments we define tasks and resources to develop a coordinated plan for responding together.

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#### HAZARD AND VULNERABILITY ASSESSMENT TOOL

**EVENTS INVOLVING HAZARDOUS MATERIALS**

<table>
<thead>
<tr>
<th>EVENT</th>
<th>PROBABILITY</th>
<th>HUMAN IMPACT</th>
<th>PROPERTY IMPACT</th>
<th>BUSINESS IMPACT</th>
<th>PREPAREDNESS</th>
<th>INTERNAL RESPONSE</th>
<th>EXTERNAL RESPONSE</th>
<th>RISK</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Likelihood</td>
<td>Possibility of death or injury</td>
<td>Physical losses and damages</td>
<td>Interruption of services</td>
<td>Preplanning</td>
<td>Time, effectiveness, resource availability</td>
<td>Community/Mutual Aid staff and supplies</td>
<td>Relative threat*</td>
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<tr>
<td>Mass Casualty Hazmat Incident (From historic events at your MC with &gt;5 victims)</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>3</td>
<td>2</td>
<td>2</td>
<td>3</td>
<td>72%</td>
</tr>
<tr>
<td>Small Casualty Hazmat Incident (From historic events at your MC with &lt;5 victims)</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>3</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td>61%</td>
</tr>
<tr>
<td>Chemical Exposure, External</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>3</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td>61%</td>
</tr>
<tr>
<td>Small-Medium Sized Internal Spill</td>
<td>3</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>39%</td>
</tr>
<tr>
<td>Large Internal Spill</td>
<td>2</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>30%</td>
</tr>
<tr>
<td>Terrorism, Chemical Exposure, Internal</td>
<td>1</td>
<td>3</td>
<td>1</td>
<td>3</td>
<td>2</td>
<td>2</td>
<td>3</td>
<td>26%</td>
</tr>
<tr>
<td>Radiologic Exposure, External</td>
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<td>1</td>
<td>1</td>
<td>3</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>15%</td>
</tr>
<tr>
<td>Terrorism, Radiologic Exposure</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>3</td>
<td>2</td>
<td>2</td>
<td>3</td>
<td>17%</td>
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<tr>
<td><strong>AVERAGE</strong></td>
<td>2.0</td>
<td>1.89</td>
<td>1.00</td>
<td>2.67</td>
<td>1.33</td>
<td>1.56</td>
<td>2.11</td>
<td>39%</td>
</tr>
</tbody>
</table>

*Risk increases with percentage.

**Risk = Probability * Severity**

- **AVG:** 0.39
- **AVG:** 0.67
- **AVG:** 0.69
Detection & Notification

Health Department continually **monitors** the health status of the community and of the environment.

Health Dept **shares** critical information quickly to other key response partners.

Multiple (redundant) systems assure rapid communications and support **multi-agency coordination** of response strategies.
DOC Plan – when an emergency calls for extensive Health Dept action, we activate our Department Operations Center to coordinate with the County Emergency Operations Center and others during disasters.
Risk Communications

The Health Department has a key role in assuring that the public, businesses, and community agencies have timely and accurate health information during disasters.
Field Operations

Various plans outline measures that could be taken in response to health event.
Isolation & Quarantine

Includes options for Health Department to contain disease, including:

Isolation of people with symptoms

Quarantine of people who have been in contact with people with symptoms

Social Distancing putting barriers or space between people in public places

Closure of public events when needed
Disaster Response Plans are constantly...

**Growing**
new resources are added to plans, emerging diseases require new plans, new relationships with responders

**Changing**
keeping up with technology and new information

**Improving**
exercises and actual events indicate how to improve our written plans
MRC Volunteers:

What does all this planning have to do with you?
H1N1 Influenza Mass Vaccination 2009 - first PODs in Sonoma County

- An average of 100 MRC volunteers worked at each of 5 large vaccination PODs in Sonoma County for the 2009 H1N1 pandemic.
- Another 46 MRC worked at the annual Flu Shot Saturday in December, where we gave seasonal and H1N1 vaccinations.

Emergency Plans / Resources used:
- Point of Dispensing (POD) org charts, job descriptions, flow diagrams, staffing plans, just-in-time training, agreements with schools
- MRC contact lists and notification system to alert and assign staff to PODs
- Public Health communications plans. Surge plans for disease control and lab. Emergency management plans for Health Dept. DOC
Tuberculosis Case in Local High School – Nov 2013

Ten MRC volunteers assisted over 5-weeks in a Public Health Disease Control response to a communicable disease. A case of TB was reported in a local high school. PH and the school worked together to respond. MRC RNs and LVNs provided telephone information to the public and placed and read TB skin tests for students in November and again in December.

Emergency Plans / Resources used:

- MRC call-up system
- Disease investigation procedures
- Public Risk Communications Plan
Valley Fire, Lake and Napa Counties – Sept-Nov 2015

Health Department Staff and MRC Volunteers served over 7 weeks in the Valley Fire response in Lake and Napa Counties. Nurses and behavioral health professionals provided medical care, support for access and functional needs, referrals for services and medications, and counselling and emotional support to victims at several locations.

Emergency Plans / Resources used:
- MRC call-up system
- DOC Plan and tools
Takeaway for MRC:

• There are plans for us to follow.

• There are trainings and exercises to build skills and improve the plan.

• There is a management team that plans ahead for strategies and resources.

• There is a response team – each person has assignments; no one has to do it all.