

EMERGENCY SUPPORT FUNCTION #8

HEALTH & MEDICAL SERVICES



2019

RECORD OF REVIEW AND CHANGES

Date Revised	Pages/Topic Revised	Revised By
March 2010	Page 3. Changed National Response Plan to National Response Framework.	Andy Anderson (SRCHD)
	Page 4. Under B Organizations add little b.	
	Page 8. 2. Special Needs Shelter Operations a. Accommodation: added Bennett Russell Elementary - Large Scale Event Sims Middle School- North end – Overflow / Backup	
	Page 9. 2. Special Needs Shelter Operations i. Clients should bring their own medicine supplies for 3 days.	
	Page 11. 1. PREPAREDNESS ACTIONS p. The Santa Rosa County IT Department will maintain the SpNS database. The EM will enter the clients into the database and the leads health department nurse will review and approve or disapprove the client for SpNS.	
	Page 18 2. support Agencies; o. Santa Rosa County Animal Services will maintain the pet friendly shelter. p. Santa Rosa County Animal Services maintain a list of animal shelters and vets.	
Feb 2012	Removed support agencies: all public works, all LEAs, ARES, all air services, all FDs	Daniel Hahn
February 2014	Review for Accreditation.	Andy Anderson (SRCHD)
January 12, 2015	Changed “Santa Rosa County Health Department” to “Florida Department of Health in Santa Rosa County” throughout document. Page 7 D added ESF 8 missions per the State of FL ESF 8 Plan. Updated Appendix 2 with ESF 8 Appendix to CEMP 2014 State plan.	Michelle Hill
January 26, 2015	Review all. <ul style="list-style-type: none"> • Page 5 2.b. added RERA • Page 10 1.d. added RERA and Healthcare Facility Assessment Teams • Page 11 2.c. updated with SMRT, MRC 	Sandy Park-O’Hara, Barb McMillion, Mary Beverly, Michelle Hill
February 9, 2015	Updated page 15 to say “ESF 6” instead of “Northwest Florida Chapter of the American Red Cross” per guidance from Amy Eden, Disaster Program Manager of Red Cross.	Michelle Hill
June 1, 2016	Review of plan. No significant changes.	Michelle Hill
October 21, 2016	Review of Plan – Pages 3,6,10,11,29	Michelle Hill, Tom Verlaan
March 22, 2017	Review of Plan - Pages 2,3,6-17,31	Sandy Park-O’Hara, Barb McMillion, Michelle Hill, Tom Verlaan

August 14, 2019	Changed EM Director to EO Manager throughout the document Move Authorities and references section to Annex 10 Authorities and References	Kimberlyn Bouler
-----------------	--	------------------

Emergency Support Function (ESF) 8 Health and Medical

Primary Agency: Florida Department of Health in Santa Rosa County

Support Agencies: Life Guard
Santa Rosa County Emergency Management
Santa Rosa Medical Center
Gulf Breeze Hospital
Jay Hospital

I. Purpose

The purpose of Emergency Support Function 8 (ESF 8) is to identify health and medical needs of the entire county before, during, and after a disaster. ESF 8 will:

- Coordinate the health and medical resources needed in responding to public health and medical care needs following a significant natural disaster or manmade event.
- Develop policy guidelines for sheltering people with special needs.
- Develop strategies to ensure adequate staffing for the Special Needs Shelter and the registration of people with special needs.
- Provide personnel and resources to support prevention, preparedness, protection, response, recovery and mitigation in support of the primary emergency management objectives.

The ESF 8 Emergency Coordination Officer (ECO) is appointed by and located in the Florida Department of Health in Santa Rosa County (DOH-Santa Rosa) and directs all aspects of health and medical support. ESF 8 resources are used when individual agencies are overwhelmed and County Emergency Response Team requests additional Health and Medical assistance.

II. Concept of Operations

A. GENERAL

1. Emergency Support Function 8 complies with the National Response Framework (NRF), and the National Incident Management System (NIMS). The NIMS guides the direction and control system adopted by the Division of Emergency Management, which functions as the official disaster prevention, protection, response, preparedness, recovery, and mitigation organization within Santa Rosa County.
2. In a large event requiring local or State mutual aid assistance, ESF 8 will work with its support agency counterparts to seek and procure, plan, coordinate and direct the use of any required assets.
3. Throughout the response and recovery periods, ESF 8 will evaluate and analyze information regarding medical and public health assistance requests for response;

develop and update assessments of the health and public health situation and status in the impact area and undertake contingency planning to meet anticipated demands or needs.

4. When an event is focused in scope to a specific type or response mode (i.e., hospital evacuation, biological threat, hazardous materials release, pandemic disease or radiological event) technical and subject matter expertise may be provided by an appropriate person(s) from a supporting agency with skills pertinent to the type of event, who will advise and/or direct operations within the context of the Incident Command System structure.

B. ORGANIZATION

1. COUNTY

- a. During an activation of the County Emergency Operations Center, support agency staff is integrated with the DOH-Santa Rosa staff to provide support that will allow for an appropriate, coordinated and timely response.
- b. During an emergency or disaster event, the Emergency Operations Center, Logistics Section Chief will coordinate the support resources from the support agencies with the Human Needs Branch Director.
- c. During the response phase, ESF 8 will evaluate and analyze information regarding health and public health assistance requests. Also, ESF 8 will develop and update assessments of the Health and Medical status in the impact area and do contingency planning to meet anticipate demands and needs.
- d. The DOH-Santa Rosa develops and maintains the overall ESF 8 Emergency Operations Plan and accompanying Appendices, Annexes and Standard Operating Guidelines that govern response actions related to emergencies. However, support agencies may develop and maintain their own similar documents for internal use, which must be compatible with and in support of the overall Emergency Operations Plan. All such documents will be in compliance with the National Response Framework, the National Incident Management System, the Incident Command System the County Comprehensive Emergency Management Plan, and the Florida Department of Health (FDOH)-Santa Rosa County All Hazards Emergency Operations Plan (EOP) and related annexes.

2. AREA

- a. The Human Needs Branch Director, in consultation with the requesting jurisdiction, may obtain additional Health and Medical resources via established mutual aid agreements.
- b. The Florida Department of Health serves as the lead agency for Health and Medical coordination and support and will designate a liaison (Regional Emergency Response Advisor) to the EOC from the Regional Office and/or the Regional Domestic Security Task Force (RDSTF). The liaisons (RERAs) have been trained to carry out ESF 8 responsibilities and will function as coordinators, assessors, and operational personnel in support of EOC or field activities.

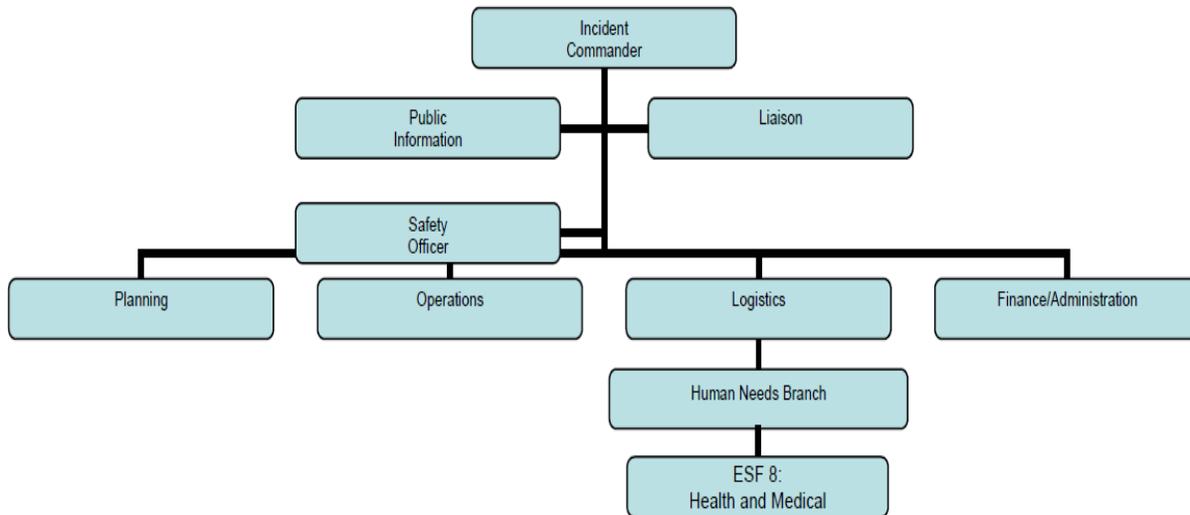


Figure – Incident Command System Structure: ESF 8 – Health and Medical

3. STATE

- a. During an activation of the State Emergency Operations Center (State EOC), the Department of Health is the designated lead agency for State Health and Medical and will provide a liaison to facilitate requests for Health and Medical resources to local Emergency Operations Centers.
- b. During an emergency or disaster event, the primary and support agencies of ESF 8 at the State EOC will report to the Human Needs Branch Director who reports to the Operations Section Chief under the overall direction of the State Coordination Officer.
- c. During the response phase, ESF 8 will evaluate and analyze information regarding Health and Medical requests. Also, Emergency Support Function 8 will develop and update assessments of the Health and Medical situation and status in the impact area and do contingency planning to meet anticipated demands and needs.
- d. The Department of Health, the Bureau of Preparedness and Response (BPR), develops and maintains the overall ESF 8 Emergency Operations Plan and accompanying Appendices, annexes and Standard Operating Guidelines that govern response actions related to emergencies. However, support agencies may develop and maintain their own similar documents for internal use, which must be compatible with and in support of the overall Emergency Operations Plan. All such documents will be in compliance with the National Response Framework, the National Incident Management System, the Incident Command System and the County Comprehensive Emergency Management Plan, and the Florida Department of Health (FDOH)-Santa Rosa County All Hazards Emergency Operations Plan (EOP) and related annexes.

C. ALERTS/NOTIFICATIONS

1. DOH-Santa Rosa will notify the County Warning Point (9-1-1 Center) when information comes to their attention indicating that an emergency or disaster situation is developing.

The report will include all relevant information that is known at this time. Additional information should be reported as it becomes available.

2. CHD will notify Regional Emergency Response Advisor (RERA) who will contact state warning point.
3. ESF 8 will be activated or placed on standby upon notification by the County Emergency Management Office. The primary and support Health and Medical representatives or designees will jointly manage the emergency activities of ESF 8.
4. Upon instructions to activate ESF 8, DOH-Santa Rosa will implement procedures to notify and mobilize all personnel, facilities, and physical resources likely to be needed, based on the emergency circumstance.
5. Upon notification of a significant event, the Health Department representatives will be notified; and then EMS/ Disaster Medical Assistance Teams (DMAT), State Medical Emergency Response Teams (SMRT), residential/medical facilities, and special needs population/assisted care shelter will be alerted as indicated. These representatives will alert all essential emergency response personnel assigned to the Emergency Operations Center as well as appropriate field personnel and agencies. Representatives for ESF-8 and essential emergency response personnel assigned to the Emergency Operations Center will be expected to report to duty within one hour of notification.
6. In consultation with ESF 8, the EO Manager will determine which shelter will be opened. When the decision is made by the Board of County Commissioners that shelters are needed, the EO Manager will notify the School District Assistant Superintendent for Administrative Services who will then notify the schools to open for sheltering.

D. ACTIONS

1. Actions carried out by ESF 8 are grouped into phases of emergency management: prevention, preparedness, protection, response, recovery and mitigation. Each phase requires specific skills and knowledge to accomplish and requires significant cooperation and collaboration between all supporting agencies and the intended recipients of service. ESF 8 encompasses a full range of activities from training to the provision of field services. It also functions as a coordinator and, at times, assumes direct operational control of provided services. This support is categorized into four functional areas with responsibilities including the following:

- a. Public Health Services

- Assessment of health/medical needs
- Disease Control/Epidemiology
- Health/medical care personnel, equipment and supplies
- Food/drug/safety
- Radiological/chemical/biological hazards (CBRNE)
- Mental health and crisis counseling
- Public health information release
- Vector control/monitoring
- Potability of water, wastewater and solid waste disposal
- Victim identification/mortuary services

- Medical Command and Control

Per the ESF 8 Appendix to the state CEMP, ESF 8 is tasked with the following missions:

- 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 special needs.
- Monitor and coordinate resources to support care and movement of persons with special 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 known 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.

b. EMS/DMAT/SMRT

- Patient evacuation
- Emergency medical care personnel, equipment and supplies
- Emergency responder health and safety
- Mental health and crisis counseling

c. Residential/Medical Facilities

- Coordinate notification, information update and evacuation assistance to medical facilities within the county both pre- and post-impact
- Coordinate in-hospital care
- Provide updated census information and bed availability
- Detail facility needs for coordination with the State EOC

d. Special Needs Population/Assisted Care Shelter (See DOH Santa Rosa Special Needs Shelter Plan (Annex D of All Hazards EOP) for details)

- Emergency Management (EM) assigns responsibilities and establish procedures for governmental, volunteer agencies and individuals in preparing for and executing evacuation for the special needs population segment of Santa Rosa County that might be necessary during any manmade or natural emergency event.
- Emergency Management (EM) coordinates registration, notification, transportation and sheltering of special needs population.
- Special Needs Shelters are a refuge for people with specific needs that cannot be met in other shelters but should not be considered a mini-hospital or nursing home. Persons with Special Needs will be admitted and need to be accompanied by a Caregiver. Clients will be referred to an

alternate site if their needs are too complex to be met at the Special Needs Shelter or if their needs do not meet the minimum requirements. No one will be turned away from a shelter, however, anyone not requiring services provided in the Special Needs shelter will be informed about all the other shelters available to them.

2. Special Needs Shelter Operations

Special Needs Shelters are designed to care for the following:

- Persons with medical conditions that require observation, assessment and maintenance
- Persons with contagious health conditions that require minimal precautions or isolation which cannot be handled by local public shelter staff. This will be handled on a case by case basis.
- Persons with chronic conditions that require assistance with activities of daily living and do not require hospitalization.
- Persons with the need for medication administration and/or vital sign readings on a regular basis.

a. Accommodations

- Bennett Russell Elementary - Large Scale Event
- Sims Middle School- North end – Overflow / Backup
- Guy Thompson Milton Community Center - Small Scale Event

NOTE: Bennett Russell Elementary School has an emergency generator for providing power to run only essential medical equipment such as oxygen delivery systems, with priority being given to persons requiring this type equipment. This school has been designated as the Special Needs Evacuation Shelter.

- b. A shelter manager will be in charge of the Special Needs Shelter. The school principal shall provide access to necessary parts of the school (primarily hallways, gang bathrooms, cafeteria dining and, in some instances, classrooms) and inform the shelter manager which areas are off-limits. Shelter managers will be issued school keys.
- c. The school principal should ensure that as much of the off-limits area as possible is locked to prevent unauthorized entry. The school principal is not responsible for registering or dealing with the shelters. This is the Shelter Manager's responsibility. Once the school principal is satisfied that all is going well from a facilities viewpoint, he/she may leave the Shelter Manager in charge.
- d. The DOH-Santa Rosa, in coordination with the EO Manager, will determine when Special Needs sheltering will cease and will notify the Santa Rosa County District Schools Assistant Superintendent for Administrative Services when the shelter has closed.
- e. A very limited number of cots and blankets are available for use in the Special Needs Shelter. There may not be a cot available for everyone.
- f. Clients are responsible for bringing their own pillow, blanket, sleeping bag, egg crate, and any other special items that they may require.

- g. There are no hospital type beds and hospital beds and Hoyer Lifts as this specific type of medical equipment will not fit in the doorway of the building.
- h. Clients must/shall bring their own food and water supplies for 3 days. Food is not guaranteed to be available.
- i. Clients must/shall bring their own medicine supplies for 3 days.

3. Medical Care

- a. The Special Needs Shelter is not a substitute for regular health care. Nurses are there to provide assistance only, not for providing all of the necessary care. If person(s) are under the care of a doctor or home health care agency, the medical care provider is responsible for discussing disaster evacuation with them.
- b. If clients receive home health care or hospice, their folders and nurses' names and telephone numbers need to be brought with them. Home health care agencies and Hospice should make every effort to assure that their clients receive continuity of care while in the shelter, in accordance with their (the agencies) respective Comprehensive Emergency Response Plans (CEMP).
- c. Clients are responsible for bringing their medication and any medical supplies and equipment that they will need, including Depends, Chux, and urinals. Additionally, personal grooming items such as toothbrush, toothpaste, deodorant, are also recommended. A flashlight with spare batteries for all electronic devices would be helpful if a loss of power should occur. Books, magazines, cards or a game are also recommended to pass the time.

4. Hurricane Conditions for Special Needs Shelter Activation

- a. Hurricane Condition # 4 -- 72 Hours
 - The Health Department EOC liaison will be notified and report to the Emergency Operations Shelter for briefing by Division of Emergency Management staff.
 - Other agencies involved in evacuation, sheltering, public assistance, will be notified and briefed as required.
- b. Hurricane Condition # 3 -- 48 Hours
 - The Incident Command at the Health Department will be notified of the current hurricane conditions and will start assignments as outlined in this plan.
 - The Special Needs Shelter assistant at the EM will notify Special Needs Verifier to report to the Emergency Operation Shelter.
 - The Special Needs Transportation Officer from the EM will contact transportation personnel to report to the school bus shop.
- c. Hurricane Condition # 2 -- 24 Hours
 - All Special Needs Callers will report to the Emergency Operations Center.
 - EM Division ensures all Persons with Special Needs have been contacted and requests for evacuation are completed.
- d. Hurricane Condition #1 -- 12 Hours

- All preparation activities are completed.

1. PREPAREDNESS ACTIONS

- a. Actions and activities that develop Health and Medical response capabilities may include planning, training, orientation sessions, and exercises for Emergency Support Function 8 personnel (i.e., County, State, Regional, and Federal) and other emergency support functions that will respond with ESF 8. This involves the active participation of inter-agency preparedness organizations, which collaborate on such activities on a regular basis.
- b. Jointly address with State Health and Medical the planning issues on an on-going basis to identify response zones, potential staging areas, and potential medical facilities and establish specialized teams.
- c. Conduct planning with ESF 8 support agencies, Regional Domestic Security Task Forces (RDSTF), and other emergency support functions to refine Health and Medical operations.
- d. Work with Healthcare Facility Assessment Teams (HFATs) to gather data.
- e. Conduct training and exercise for EOC and Health and Medical Team members.
- f. Prepare and maintain emergency operating procedures, resource inventories, personnel rosters and resource mobilization information necessary for implementation of the responsibilities of the lead agency. Ensure lead agency personnel are trained in their responsibilities and duties.
- g. Develop and implement emergency response and Health and Medical strategies.
- h. Maintain liaison with support agencies.
- i. Participate in training in all hazards exercises involving Emergency Support Function 8.
- j. In order to meet the special needs of those persons who would need assistance during evacuations and sheltering because of physical or mental handicaps, each local emergency management agency in the state shall maintain a registry to provide for the voluntary registration of special needs persons/citizens located within the jurisdiction of the local agency.
- k. The registration shall identify those persons in need of assistance and plan for resource allocation to meet those identified needs. It further exists to assist the local emergency management agency in the identification of such persons. The registry shall be updated annually. The registration program shall give special needs citizens the option of preauthorizing emergency response personnel to enter their homes during search and rescue operation, if necessary, to assure their safety and welfare following a disaster.

- l. All appropriate agencies and community based service providers, including home health agencies, nurse registries, medical equipment providers, hospice, will coordinate with Emergency Management which will collect registration information for people with special needs as part of their program intake process, establish programs to increase the awareness of the registration process, and educate clients about the procedures which may be necessary for their safety during disasters. Clients of state or federally funded service programs with physical or mental handicaps, in need of assistance in evacuation or when in shelters, shall register as Special Needs.
- m. The DOH-Santa Rosa will organize and support the Special Needs Shelter (SpNS).
- n. The Santa Rosa County IT Department will maintain the SpNS database. The EM special needs coordinator will enter the clients into the database and the lead health department nurse will review and approve or disapprove the client for SpNS.
- o. All records, data, information, correspondence and communications relating to the registration of persons with special needs are confidential and exempt from providers of s. 119.07 (1), except that such information shall be available for other emergency response agencies, as determined by the local Emergency Management Director. This exemption is subject to the Open Government Sunset Review Act in accordance with s. 119.114.
- p. DOH Santa Rosa will transport staff and supplies to the designated shelter. An environmental health specialist and shelter nurse will inspect the shelter before its opening.

2. RESPONSE ACTIONS

- a. Coordinate operations at the ESF 8 office in the County Emergency Operations Center and/or at other locations as required.
- b. Establish and maintain a system to support on-scene direction and control and coordination with county EOC, regional task force and State EOC.
- c. Work with State ESF 8 to establish Mutual Aid procedures for the following resources: Disaster Medical Assistance Teams and State Medical Assistance Teams for medical support and DMORT for mass fatality support.
- d. Support Health and Medical Regional Domestic Security Task Force (RDSTF) in the investigation of a terrorist attack.
- e. Preposition response resources when it is apparent that health and medical resources will be necessary. Relocate health and medical resources when it is apparent that they are endangered by the likely impacts of the emergency situation.
- f. Monitor and direct Health and Medical resources and response activities.
- g. Participate in EOC briefings, Incident Action Plans, Situation Reports and meetings.
- h. Coordinate with support agencies, as needed, to support emergency activities.

- i. Obtain State resources through the State Comprehensive Emergency Management Plan (CEMP); coordinate all resources into the affected areas from designated staging areas.
- j. Coordinate with state ESF8 to obtain resources and to facilitate an effective emergency response among all participating agencies.
- k. ESF 8 will not release medical information on individual patients to the general public to ensure patient confidentiality protection, in accordance with the H.I.P.A.A Act.
- l. Appropriate non-specific information on casualties/patients will be provided to the American Red Cross for inclusion in the Disaster Welfare Information System, to ESF 14 for informational releases and to ESF 5 for development of Situation Report for dissemination to the State EOC.

3. RECOVERY ACTIONS

The activities of ESF 8 should assist systems in returning to normal pre-event status. *See Annex ESF 8-B, the State of Florida Comprehensive Emergency Management Plan 2014, Appendix VIII ESF 8-Health and Medical Services.*

- a. Continue to provide support as required until response activities are concluded or until they can be managed and staffed by the primary incident agency or jurisdictions.
- b. Continue to provide support as required to support the recovery phase.
- c. Initiate financial reimbursement process for these activities when such support is available.

4. MITIGATION ACTIONS

The activities of ESF 8 would reduce or eliminate hazards. *See Annex ESF 8-B, the State of Florida Comprehensive Emergency Management Plan 2014, Appendix VIII ESF 8-Health and Medical Services.*

- a. Identify and seek funds for retrofitting critical facilities and providing auxiliary power.
- b. Provide personnel with the appropriate expertise to participate in activities designed to reduce or minimize the impact of future disasters.

E. DIRECTION AND CONTROL

- 1. Emergency Support Function 8 complies with the National Response Framework, and the National Incident Management System (NIMS). The NIMS guides the direction and control system adopted by the Division of Emergency Management, which functions as the official disaster prevention, protection, response, preparedness, recovery, and mitigation organization within Santa Rosa County.

2. The ESF 8 system operates at two levels 1) County Emergency Operations Center; and 2) Field operations.
3. During emergency activations, all management decisions regarding County or regional response are made at the County Emergency Operations Center by the ESF 8 coordinator, under the guidance of health department Incident Command. Under the Incident Command System structure, the Planning, Logistics, Finance/Administration, and Operations Section Coordinators and staff at the County Emergency Operations Center assist the commander in carrying out the overall mission. Sections, Units, Teams, staffing levels, etc. are modular and scalable, depending on the type, size, scope and complexity of the emergency or disaster event.
4. A staffing directory and the ESF 8 Emergency Operations Plan, its accompanying Appendices, Annexes and Standard Operating guidelines are maintained by the DOH-Santa Rosa with status of the call lists updated at least quarterly and all other documents at least annually.
6. In accordance with a mission assignment from ESF 8, and further mission tasking by a local primary agency, each support organization assisting ESF 8 assignment will retain administrative control over its own resources and personnel. Delegation of mission operational control may be delegated to a Management Support Unit, Multi-Agency Coordination Team or a local entity.

F. RESPONSIBILITIES

1. PRIMARY AGENCY – FLORIDA DEPARTMENT OF HEALTH IN SANTA ROSA COUNTY (ESF 8)

- a. Provide leadership in directing, coordinating and integrating overall County efforts to provide Health and Medical assistance to affected areas and populations.
- b. Staff and operate a National Incident Management system compliant command and control structure (i.e., Incident Command System) to assure that services and staff are provided to areas of need, either locally or with state/federal resources.
- c. Evaluate the emergency situation, make strategic decisions, and identify resource needs and secure resources required for field operations.
- d. Coordinate supplemental assistance in identifying and meeting the Health and Medical needs of disaster victims.
- e. Implement the organization, assignment and staffing at the facilities at which ESF 8 is required to be located.
- f. Coordinate response for:
 - Safety of food and drugs
 - Potable water/wastewater/solid waste
 - Victim identification/mortuary services (see DOH Santa Rosa Mass Fatality Plan, Annex M to the All Hazards EOP).

h. Provide the coordination of the following resources thru MRC, State ESF8 Mutual Aid with other counties if available:

- Medical equipment and supplies
- Nurses/RN/LPN
- Health administrators
- Pharmacy services
- Physicians
- Environmental health specialists
- Laboratories and laboratory personnel
- Nutritional services
- Epidemiology
- Mental health workers
- Radiation monitoring
- Disaster response expertise
- Immunizations
- Discharge planning at the Special Needs Shelter
- Outreach capability
- Public information and education

j. Communicable disease, epidemiology and environmental health issues are a routine responsibility of the DOH-Santa Rosa.

k. Medical equipment and supplies will be obtained from local vendors where possible. If they are unable to be reached for needed items, ESF 8 will utilize the State Emergency Operations Center for other resources.

l. Health Department will staff the Special Needs Shelter as needed. Their duties will include administering aid, assisting in triage/screening and displaced persons assignment, keeping patient records, evaluating sanitary conditions of shelters, and consulting with environmental health specialists as needed.

2. SUPPORT AGENCIES

(NOTE: Each Support Agency should review its own roles and responsibilities and revise in conjunction with the Department of Health)

Support agencies will provide assistance to the Emergency Support Function with services, staff, equipment, and supplies which assist in supporting the entire emergency response effort, as the County Emergency Response Team addresses the consequences generated by the hazards that may impact the County (i.e., severe weather, tropical cyclones, environmental biological, terrorism, technological, and mass migration, etc.). Because services and resources are subject to change from time to time, emergency coordinators are responsible for frequently updating their resources capabilities with the Emergency Support Function 8.

a. Santa Rosa County local EMS Provider (LifeGuard Ambulance) coordinates the evacuation of patients from disaster areas when deemed appropriate, transport of victims to medical facilities outside the at risk area in accordance with approved Trauma Transport Protocols, transport needs with ESF 1, and coordinates the

following resources: ALS/BLS vehicles, Emergency Medical Technicians, and Paramedics, EMS procurement, aircraft transport and ensures the health and safety of emergency responders in accordance with ESF 8 SOP and medical support such as:

- In the event any shelter is in need of oxygen, oxygen supplies or delivery devices, the local EMS provider (LifeGuard Ambulance) will make arrangements to supply all items.
 - Provide on request Paramedic with appropriate training to administer tetanus shots in the field, primarily in large recovery areas.
 - Provide support to special needs shelter clients by coordinating with the Health Department to verify residence readiness/condition post disaster event.
 - Provide for Critical Incident Stress Debriefing (CISD) for emergency response personnel.
 - Provide support personnel and ambulance to each shelter location, based on availability with the goal that each shelter has at least one ALS ambulance.
 - Provide at a minimum of one Emergency Medical Technician to the Emergency Operations Center when activated or as directed by EO Manager or designee.
 - Provide oxygen support by refilling cylinders, loaning cylinders, or deliver if necessary, provided equipment/supplies/manpower are available.
- b. Santa Rosa County Environmental Department (Mosquito Control) provides consultation and advice in the management of invertebrate pests of public health importance, support in vector control as needed and required, conducting field investigations and laboratory analysis of relevant samples, providing vector control equipment and supplies; coordinates with Environmental Health to provide technical assistance and consultation on protective actions regarding vector-borne diseases.
- c. Hospitals (Jay, Santa Rosa, Gulf Breeze) will:
- Provide contact information regarding Hospital Incident Command structure upon EOC activation.
 - Provide, as required, staff representation to Emergency Support Function 8 to participate in ongoing planning and decision making.
 - Report number/types of beds available and type of emergencies observed to ESF 8 pre storm and post storm.
- d. Emergency Support Function 6 Mass Care
- Coordinate special needs shelter support (food, ice and water under Emergency Support Function 6)
 - Coordinate/provide support (food, ice and water) during public health emergencies at designated Points of Dispensing for Health and Medical staff providing support.
 - Coordinate with DOH-Santa Rosa Environmental Health Division to provide inspections of mass feeding area involved in food preparation and distribution.
 - American Red Cross and other community agencies (Emergency Support Function 6) will provide field support to emergency response personnel (food, water, basic assistance, etc.)
- e. Santa Rosa County Division of Emergency Management will provide EOC support, conduct briefings, direct needs assessments, distribute key information, and serve as liaison to the State EOC to request resources.

- SRC EO Manager in coordination with DOH-Santa Rosa will determine when the Special Needs Shelter is opened and closed.
- SRC DEM will perform/coordinate the following functions:
 - (1) Special Needs Coordinator: Calls Special Needs agencies (Home health, ALFs, nursing homes, etc), makes copies of the current special needs registrants forms which indicates each person's shelter and transportation needs, coordinates needed resources through both private and public sectors on local and state lands. Oversees the entire special needs evacuation process.
 - (2) Special Needs Coordinator Assistant: Assists in calling Special Needs Agencies, making copies of the current special needs registrants' forms and distributes them to the Special Needs Transportation Office and the EMS Coordinator. Sorts the "Request for Evacuation Assistance" forms and maintains control of them until needed by EMS, Transportation and the Special Needs Coordinator. Makes other copies as required for the evacuees' return home.

NOTE: Once the order to commence Special Needs evacuation is issued, the School District's Assistant Superintendent for Administrative Services will be notified to open the school and the Division of Emergency Management and the DOH Santa Rosa and will begin moving the Special Needs trailer with required equipment to the Special Needs Evacuation Shelter at Bennett Russell Elementary.

- Verifiers/Callers: Calls all pre-registered Special Needs clients after the order to evacuate has been given. Takes telephone requests for evacuation sheltering and/or transportation assistance from non-preregistered Special Needs clients.
- f. Santa Rosa County District Schools
 - Provide facilities and services for Special Needs Shelter.
 - If it appears that evacuation transportation may be required, the School District's Director of Transportation will be notified.
 - The Santa Rosa County District Schools will provide buses and drivers equipped with lift gates to transport individuals confined to wheelchairs to the Special Needs Shelter.
 - Standard School Buses - The Santa Rosa County District Schools will provide standard sized school buses and drivers to transport ambulatory handicapped individuals to the Special Needs Shelter.
 - Drivers will ensure that all vans are prepared for emergency evacuation and be on stand-by for evacuation assignment prior to and following a disaster.
 - Other transportation directives are included in ESF 1 (Transportation)
 - g. Department of Elderly Affairs
 - Ensure clients are registered as Special Needs Clients as appropriate.
 - Monitor status of clients at the shelter and assist with their discharge.
 - h. Santa Rosa County Animal Services will maintain the pet friendly shelter and maintain a list of animal shelters and vets.
 - i. Avalon Center of Lakeview Mental Health Services will provide mental health and crisis counseling as requested.

- j. District 1 Medical Examiner's Office will assure the provision for decedent identification and mortuary services including temporary morgue services in accordance with established, victim identification protocol, preparing and disposing of remains, coordinate with the American Red Cross (ARC) on victim identification, mortuary protocol for family notification in accordance with established ARC procedures, and provide mortuary services through the local funeral homes.
- k. Home Health Care Agencies & Hospice
 - Ensure that an updated list of special need clients in their care is current.
 - Operations Managers at each agency will maintain close frequent liaison with the DOH-Santa Rosa and the Division of Emergency Management.
 - The agency will fully cooperate with local Emergency Management authorities during the emergency.
 - Provide care for their patients in any Shelter before, during, and after the event.
- l. Local Funeral Homes will provide mortuary services and advise ESF 8 of status and observations. (See DOH-Santa Rosa Mass Fatality Plan, Annex M to the All Hazards EOP).

G. FINANCIAL MANAGEMENT

1. ESF 8 is responsible for managing financial matters related to resources that are procured and used during an event. During a response, each agency/department is responsible for recording and tracking its own expenditures and seeking reimbursement from the appropriate resource after the event. If a federally declared disaster exists, then a reimbursement formula is established by the Federal Emergency Management Agency that may be as much as 100 percent, but usually does not exceed 75 percent.
2. Coordinate closely with the Logistics Section to ensure that procurements and staff hours are properly documented and processed for payment and potential reimbursement. It will also be responsible for following up all financial issues after response has ceased by coordinating with Department of Public Safety fiscal and personnel management officials, the State Division of Emergency Management fiscal agents and the Federal Emergency Management Agency fiscal agents and directly with vendors as necessary.
3. Expenditures by support entities will be documented by those entities and submitted directly to the Finance/Administration Section or a designated Finance Service officer as soon as possible.

H. REFERENCES AND AUTHORITIES

- State Emergency Support Function 8 annex
- Florida Statutes 1993, Emergency Management, chap. 252 (252.31- 52.61)
- Florida SS 911 (1993)
- The Federal Response Plan for P.L. 93-288 (1992)
- Regional Domestic Security Task Forces, Section 943.0312, F.S.
- Florida Field Operations Guide (FFOG)
- DHS Homeland Security Act (2002)
- HSPD-5, Management of Domestic Incidents
- HSPD-8, National Preparedness Goal

- DHS National Incident Management System (2004)
- DHS National Response Framework (March 22, 2008)
- Public Law-288

Attachment 1:

Florida Division of Emergency Management Comprehensive Emergency Management Plan Appendix
VIII: ESF 8 – Public Health and Medical Services 2014