ANNEX 8

ESF-8- HEALTH AND MEDICAL SERVICES

COORDINATING: Department of Public Health

PRIMARY: SC Coalition Against Domestic Violence and Sexual Assault; SC

Department of Disabilities and Special Needs; SC Department of Environmental Services; SC Department of Labor, Licensing and Regulation, Division of Professional and Occupational Licensing and Division of Fire and Life Safety; SC Department of Mental Health; SC Vocational Rehabilitation Department; South Carolina Law Enforcement

Division; South Carolina National Guard

SUPPORT: American Red Cross; LeadingAge South Carolina; Palmetto Poison

Control; SC Coroner's Association; SC Criminal Justice Academy; SC Department of Alcohol and Other Drug Abuse Services; SC Department on Aging; SC Department of Corrections; SC Department of Transportation; SC Department of Veterans' Affairs; SC EMS Association; SC Funeral Directors Association; SC Health Care Association; SC Hospital Association; SC Medical Association; SC Morticians Association; SC Pharmacy Association; SC Regional Healthcare Coalitions; Southern

Baptist Disaster Relief; The Salvation Army

I. INTRODUCTION

- A. Health and medical services consist of resources from established programs and includes coordination, reporting or provision for direct service for the following:
 - Medical Care
 - Medical Materiel Management
 - Public Health
 - Behavioral Health
 - Fatality Management
 - Medical Transport
 - Healthcare Facility Evacuation

II. PURPOSE

- A. Organize the capability to provide medical care, medical materiel management, public health, behavioral health, fatality management, medical transport, and healthcare facility evacuation in disaster situations.
- B. Outline responsibility and policy established for health and medical operations before, during, and after a disaster.

III. CONCEPT OF OPERATIONS

- A. The SC Department of Public Health (SCDPH) is responsible for the coordination of ESF-8 administrative, management, planning, training, preparedness/mitigation, response, and recovery activities to include developing, coordinating, and maintaining the ESF-8 Annex and Standard Operating Procedure (SOP).
- B. ESF-8 supporting agencies will assist SCDPH in the planning and execution of ESF-8 duties.
- C. ESF-8 will coordinate with all supporting and other appropriate departments/agencies and organizations to ensure operational readiness in time of emergency. Each independent agency is responsible for maintaining readiness.
- D. ESF-8 personnel will be familiar with the National Response Framework for ESF-8 and the corresponding Annex with Federal counterpart concepts, actions, and responsibilities. This familiarization will include the organization, structure, functions, and responsibilities of the Incident Management Assistance Teams (IMAT), Joint Field Office (JFO) and Disaster Recovery Center (DRC).
- E. ESF-8 will assess the situation (both pre- and post-event), and in coordination with Emergency Management officials, develop strategies to respond to the emergency.
- F. Additional resources may be requested to sustain emergency operations from participating States via Emergency Management Assistance Compacts (EMAC). (Covered in SCEOP <u>Base Plan</u>).
- G. Coordinate with ESF leads to assess respective lifeline sectors.
- H. ESF-8 will coordinate with Federal ESF-8 to obtain assistance as necessary.

IV. ESF ACTIONS

A. Prevention/Protection

1. General

- a. Develop mutual support relationships between agencies, professional associations and other private services and volunteer organizations that may assist during an emergency or disaster, including vulnerable populations' service agencies and advocacy groups.
- b. Ensure individual agency documents and processes are developed for documenting costs for any potential reimbursement.
- c. Participate in State exercises and/or conduct an exercise to validate this Annex and supporting SOPs.
- d. Provide representation on the Recovery Task Force.

SCEOP Annex 8-2 April 2025

- e. Coordinate and develop plans to implement <u>Emergency Health</u> Powers Act.
- f. Develop and maintain planning and common operating picture tools for disaster response implementation.
- g. Coordinate with South Carolina Hospital Association (SCHA) and South Carolina EMS Association (SCEMSA) for staffing of SCDPH emergency operations center (DPH EOC).

2. Medical Care

- a. Maintain situational awareness of medical resources.
- b. Develop protocols and maintain liaison with elements of the National Disaster Medical System (NDMS), to include Federal Coordinating Centers (FCC) within South Carolina, Disaster Medical Assistance Teams (DMATs) and Health Care System Assessment Team (HCSAT).
 - (a) Federal Coordinating Centers (FCCs) receive, triage, stage, track, and transport inpatients, affected by a disaster or national emergency, to a participating NDMS medical facility capable of providing the required definitive care. An NDMS facility also has the potential to receive military patients should the Department of Defense (DoD) Military Health System (MHS) and the Department of Veterans Affairs (VA) Contingency Hospital System become overwhelmed. The single DoD FCC within SC is Columbia Fort Jackson.

3. Medical Materiel Management

a. Coordinate the SC <u>Medical Countermeasures Plan</u> (MCM) (published separately), to include Strategic National Stockpile (SNS), Potassium Iodide Distribution, CHEMPACK, and Medical Points of Dispensing (POD) plans and coordinating instructions.

4. Public Health

- a. Develop the provisions to deploy SCDPH health department resources: Women, Infant, and Children (WIC) Nutrition Program, Vital Statistics, and other public health services to all established Disaster Recovery Center.
- b. Establish Coordinate and report procedures which allow for the monitoring of the state's public health.

Annex 8-3 April 2025

- c. Coordinate procedures to protect the public from communicable diseases.
- d. Coordinate procedures to protect the public from contaminated meds, vaccine, and medical supplies.
- e. Coordinate technical assistance, inspection procedures and protocols to ensure acceptable conditions related to food and water.
- f. Coordinate laboratory testing or identify appropriate laboratory testing facilities to include the Centers for Disease Control and Prevention (CDC).
- g. Coordinate environmental surveillance for vector-borne disease transmission.
- h. Coordinate procedures for emergency immunization operations (e.g., mass prophylaxis).
- i. Coordinate technical assistance and consultations on disease and injury prevention and precautions.
- j. Assist in monitoring the disease progression and coordinate epidemiological information for decision-making.

5. Behavioral Health

(1) Reference Attachment 1 (<u>Behavioral Health Plan</u>) of Annex 8 (Health and Medical Services).

6. Fatality Management.

- a. Reference Annex 4 (<u>Mass Fatality Management Plan</u>) of Appendix 5 (<u>Mass Casualty Plan</u>).
- b. Maintain capabilities and procedures for alert, assembly, and deployment of state mortuary assistance assets.
- c. Coordinate with SC Coroner's Association (SCCA) for staffing at the SEOC.

7. Medical Transport

- a. Maintain situational awareness of all statewide transport resources, certification levels of Emergency Medical Technicians (EMT), and licensed ambulance services.
- b. Maintain systems used to monitor Emergency Medical Services (EMS) transport patterns.

SCEOP Annex 8-4 April 2025

8. Healthcare Facility Evacuation

- a. Review licensed health care facilities' (e.g., hospitals, nursing homes, residential care facilities) evacuation plans and procedures.
- b. Maintain situational awareness of licensed health care facilities to include capacity, bed space, and critical data elements.
- c. Develop and maintain facility evacuation survey tool, data collection methodology and evacuation coordination language.
- d. Coordinate with SCDPH Office of General Counsel (OGC) for Mandatory Medical Evacuation (MME) Order language.

B. Response

1. General

- a. Provide information to ESF-15 for release.
- b. Coordinate the arrival of Federal ESF-8 personnel and resources.
- c. Maintain records of expenditures and resources used for possible later reimbursement.
- d. Provide significant events and other information for inclusion in agency or state/ federal briefings, situation reports and action plans.

2. Medical Care

- a. Maintain situational awareness of hospital and other licensed healthcare facilities capacities statewide.
- b. Facilitate coordination for doctors, nurses, medical technicians, and other medical personnel.
- c. Maintain situational awareness of the status of licensed providers.
- d. Coordinate emergency dental services.
- e. Coordinate NDMS services, to include HCSAT and patient evacuation assistance, as required.
- f. Implement emergency immunization and medical countermeasures operations as required.

3. Medical Materiel Management

a. Coordinate staging for medical equipment and supplies.

SCEOP Annex 8-5 April 2025

b. Coordinate MCM/ SNS operations as required.

4. Public Health

- a. Conduct epidemiological surveillance to monitor the health and identify emerging health trends related to the incident.
- b. Recommend measures to prevent and control disease transmission.

5. Behavioral Health

- a. Coordinate delivery of behavioral health services to affected individuals, families, communities, and responders.
- b. Upon notification of a Presidential Major Disaster Declaration for Individual Assistance, apply for and prepare to implement Crisis Counseling Programs to mitigate psychological distress in individuals, families, communities, and responders.
- c. Provide assistance to other agencies or organizations dealing with behavioral health concerns during and following disasters.
- d. Assist law enforcement or other agencies not typically responsible for delivering behavioral health services as needed, by continuing to provide mobile crisis services

6. Fatality Management

- a. Coordinate teams for decedent identification.
- b. Coordinate State assistance for next-of-kin notification.
- c. Coordinate EMAC and Disaster Mortuary Operational Response Team (DMORT) services.
- d. Coordinate security issues with ESF-13 (Law Enforcement).
- e. Coordinate collection and dissemination of information regarding the numbers of fatalities.
- f. Coordinate supply and equipment support (e.g., refrigeration units, body bags, stretchers, embalming supplies, transportation), as required to maintain appropriate condition of the deceased until proper identification, notification and disposition can be determined.
- g. Coordinate fatality reporting with ESF-16 (Emergency Traffic Management).

7. Medical Transport

- a. Maintain situational awareness of deployed EMS assets.
- b. Utilize tracking tools to monitor EMS patterns.
- c. Coordinate the activation and deployment of EMS resources, including but not limited to medical transportation resources such as ambulances, helicopter transport, mass casualty vehicles, wheelchairs, and other related assets.
- d. Coordinate EMS transportation with healthcare facilities as needed.

8. Healthcare Facility Evacuation

- a. Coordinate patient evacuation and relocation as required.
- b. Coordinate alternate care sites (by Centers for Medicare & Medicaid Services [CMS] definition) as necessary.
- c. Coordinate healthcare facility reentry procedures as necessary.
- d. Implement facility evacuation survey tool, data collection and communication processes to gather facility information.
- e. Review Critical Data Sheets (CDS), weather forecast and other pertinent information for disaster specific vulnerabilities to determine MME exemptions.
- f. Coordinate with the SCHA to ensure bed placement and information sharing is ongoing.

C. Recovery

1. General

- a. Anticipate and plan for arrival and coordination with Federal personnel in the JFO.
- b. Support long-term recovery priorities.
- c. Document matters for inclusion in agency or state/federal briefings, situation reports and action plans.

2. Medical Care

Support restoration of essential health and medical care systems.

3. Public Health

SCEOP Annex 8-7 April 2025

- a. Continue monitoring disease and injury patterns including for potential disease outbreaks,
- b. Assess the threat of vector-borne diseases and provide technical assistance and consultation on protective actions regarding vector-borne diseases.
- c. Reconcile final incident fatality report(s) with SCDPH Office of Vital Statistics.

4. Behavioral Health

- a. Continue providing behavioral health services to affected persons through available and shared resources throughout SCDMH.
- b. As needed and when applicable to the event, apply and provide crisis counseling programs for affected areas.

5. Fatality Management

- a. Support the operations necessary for the identification, registration, certification, and disposition of the deceased and their personal effects.
- b. Provide a final fatality report in coordination with ESF-16.

6. Medical Transport

Coordinate support for EMS and medical care infrastructure until affected local systems are self-supporting.

7. Healthcare Facility Evacuation

- a. Coordinate re-opening procedures with evacuated facility(s).
- b. Coordinate with facilities that encountered evacuation issues to ensure compliance and/or take appropriate enforcement actions to correct problems.
- c. Re-evaluate existing regulations and emergency plans as needed.

D. Mitigation

- 1. Review, evaluate, and comment on proposed State Hazard Mitigation Plan amendments upon initiation and within the review period.
- 2. Support requests and directives from the Governor and/or federal agencies concerning mitigation and/or re-development activities.

SCEOP Annex 8-8 April 2025

3. Document matter for inclusion in agency or state/ federal briefings, situation reports and action plans.

V. RESPONSIBILITIES

A. General

ESF-8 primary and support agencies will identify, train, and assign personnel to maintain contact with and prepare to execute missions in support of ESF-8 during activation.

B. SC Department of Public Health

Agency-wide

- a. Develop mutual support relationships with professional associations and other private services and volunteer organizations that may assist during emergencies or disasters including vulnerable populations' service agencies and advocacy groups.
- b. Implement isolation and quarantine procedures, as appropriate.
- c. Implement Medical Countermeasures operations as required.
- d. Establish agency Incident Management Team (IMT) as required.
- e. Provide staffing support (to include SCDPH regulatory staff) to ESF-6, ESF-8 as needed.
- f. Implement emergency immunization or mass prophylaxis procedures as required.
- 2. Bureau of Emergency Preparedness and Response
 - a. Provide ESF-8 with a lead representative and alternate.
 - b. Coordinate and direct the activation and deployment of SCDPH staff and volunteer health/medical personnel, SCDPH supplies, and equipment.
 - c. Develop and conduct internal and external drills and exercises which test the medical and behavioral health response to disaster situations.
 - d. Develop protocols, maintain liaison with, and arrange for services of the NDMS, to include:
 - (1) FCCs in South Carolina
 - (2) DMAT

SCEOP Annex 8-9 April 2025

- (3) DMORT
- (4) HCSAT
- e. Plan for the deployment of Federal Medical Stations in SC, as needed.
- f. Develop, implement and manage emergency management training agency wide.
- g. Develop and maintain the DPH EOC. Ensure communication with the SEOC/ SERT.

3. Healthcare Quality

- a. Ensure licensed health care facilities (e.g., hospitals, nursing homes, residential care facilities, etc.) develop evacuation plans and procedures.
- b. In conjunction with SC Hospital Association, determine operational status of hospitals. Coordinate MME exemptions for General Acute Care hospitals, ensuring Critical Data Sheets and necessary exemption documentation are complete.
- c. Maintain and provide a listing of licensed health care facilities including names of administrators and phone numbers, as appropriate.
- d. Identify and provide bed capacity and availability status of all inpatient care facilities throughout the state.
- e. Maintain situational awareness of evacuating and repatriating facilities.
- f. Coordinate post-event with facilities that encountered evacuation issues to ensure compliance and/or take appropriate enforcement actions to correct problems.
- g. Assist in implementing the MME and/or <u>Emergency Health Powers</u> Act.
- h. Coordinate with federal partners to provide required CMS updates, as requested.
- i. Maintain and provide a listing of licensed ambulance services and certification levels of EMT.
- j. Lead the coordination, activation, and deployment of EMS resources with the EMS association, FEMA, EMS compact members, and other key partners.

SCEOP Annex 8-10 April 2025

- k. Maintain systems used to monitor EMS transport patterns.
- 1. In conjunction with SC EMS Association, determine operational status of EMS resources.
- m. Coordinate licensing for out of state EMS resources including utilization of the EMS compact.

4. Communicable Disease and Epidemiology

- a. Coordinate and monitor surveillance, investigation, and response for communicable disease cases and exposures in the population.
- b. Maintain access to a disease tracking and surveillance system.
- c. Coordinate collection, testing, and follow-up of results for laboratory samples/specimens.
- d. Recommend protective actions and mitigation measures against communicable diseases.
- e. Provide consultation on screening and medical treatment of individuals exposed to communicable diseases.
- f. In coordination with SCDPH OGC, determine need for and implement isolation and quarantine measures.
- g. Coordinate with SCDPH OGC and SCDPH's Incident Command to assist in implementing the Emergency Health Powers Act.

5. Community Health Services

- a. Provide personnel to operate public health clinics.
- b. Reconcile incident fatality report(s)

6. Office of General Counsel

Advise SCDPH Incident Command Staff regarding legal issues which arise during the emergency, including effects of recommending declaration of a Public Health Emergency pursuant to the Emergency Health Powers Act.

7. Medical Reserve Corps

Under the guidance of SCDPH staff, provide support to public health response activities, including large-scale vaccinations, medical countermeasures, or other response efforts.

8. Division of Oral Health

SCEOP Annex 8-11 April 2025

Coordinate emergency dental services.

C. American Red Cross

- 1. Provide disaster health services personnel in mass care settings, as agreed upon and available.
- 2. Provide disaster mental health services personnel in mass care settings, as agreed upon and available.
- 3. Fulfill federally defined responsibilities during transportation incidents where the National Transportation Safety Board (NTSB) is involved.

D. LeadingAge South Carolina

Prepare for and conduct operations in support of ESF-8.

E. Palmetto Poison Control

- 1. Develop and disseminate public health messaging and education related to poison prevention, chemical exposure risks, and medication safety.
- 2. Facilitate connections between healthcare providers and specialized toxicology consultation services,
- 3. Provide clinical guidance to healthcare professionals managing poisoning cases.

F. SC Coalition Against Domestic Violence and Sexual Assault

- 1. Provide crisis counseling for disaster victims with histories of domestic and/or sexual violence victimization to facilitate healing and to identify other needed supportive resources.
- 2. Assess training needs that become evident during response.

G. SC Coroner's Association

- 1. Coordinate collection and dissemination of information regarding the numbers of fatalities.
- 2. Augment county fatality management resources, as necessary.
- 3. Assist County Coroner with victim identification and next-of-kin notification.

H. SC Criminal Justice Academy

Provide berthing and staging arrangements for incoming EMS assets, as available.

SCEOP Annex 8-12 April 2025

I. SC Department on Aging

Assist with the identification of medically vulnerable senior adult populations.

J. SC Department of Alcohol and Other Drug Abuse Services

Provide behavioral health counseling personnel and other substance abuse services.

K. SC Department of Corrections

Provide refrigerated trucks in support of ESF-8 operations.

- L. SC Department of Disabilities and Special Needs
 - 1. Provide dental resources, nursing, and other disabilities and special needs personnel, as available.
 - 2. Provide accessible transportation assets, as available.
- M. SC Department of Environmental Servies
 - 1. Provide or coordinate technical assistance regarding known hazards to minimize public health threats.
 - 2. Coordinate with ESF-3 (Public Works and Engineering) to provide technical assistance to responsible entities in their efforts to manage the public health services.
- N. SC Department of Labor, Licensing and Regulation
 - 1. Division of Professional and Occupational Licensing
 - a. Assist with temporary licensing of health care workers.
 - b. Assist with the coordination of medical professionals (i.e., doctors, nurses, and pharmacists).
 - c. Coordinate waivers of rules and regulations regarding licensed health care workers.
 - 2. Division of State Fire

Assist with the mobilization of EMS personnel and equipment registered within the fire service.

- O. SC Department of Mental Health
 - 1. Manage behavioral health services support within ESF-8.

SCEOP Annex 8-13 April 2025

- 2. Provide crisis and behavioral health counselors to facilitate response and recovery.
- 3. Provide nurses and other medical professionals as available.
- 4. Provide First Responder support services, as needed.
- 5. Develop federally funded Crisis Counseling Programs for affected individuals, families, communities, and responders, when applicable.

P. SC Department of Transportation

Ensure clear roadway access to critical healthcare facility infrastructure.

Q. SC Department of Veterans' Affairs

Assist with burial arrangements for families of deceased veterans.

R. SC EMS Association

- 1. Coordinate with DPH on status of EMS resources across the state.
- 2. Assist in the coordination of EMS deployment for incidents, at the request of DPH.
- 3. Facilitate mutual aid for public and private EMS agencies that exceeds local capacity, at the request of DPH or an EMS service within the state.
- 4. Facilitate mutual aid for healthcare facilities requiring medical transportation exceeding local capacity at the request of DPH.
- 5. Provide staff to the DPH EOC and South Carolina Hospital Association upon request.

S. SC Funeral Directors Association

Provide mortuary services including personnel, supplies, equipment, transportation, and obtaining information from the families of deceased.

T. SC Health Care Association

Prepare for and conduct operations in support of ESF-8.

U. SC Hospital Association

- 1. Assist with identification of hospital bed information.
- 2. Assist with determining operational status of hospitals.
- 3. Assist in facilitating communications with hospitals.

SCEOP Annex 8-14 April 2025

4. Assist with patient relocations as available.

V. SC Medical Association

- 1. Assist with acquisition of physicians for emergency operations.
- 2. Assist in facilitating communications with physicians.

W. SC Morticians Association

Provide mortuary services including personnel, supplies, equipment, transportation, and obtaining information from the families of deceased.

X. SC Pharmacy Association

- 1. Assist with acquisition of pharmacists for emergency operations.
- 2. Assist with acquisition and distribution of pharmaceuticals for emergency operations.
- 3. Coordinate appropriate storage of pharmaceuticals.
- 4. Assist with alerts to community pharmacies.

Y. SC Regional Healthcare Coalitions

- 1. Establish mechanisms for situational awareness, information-sharing, and coordinating resource requests across regions with healthcare coalition partners.
- 2. Establish reporting systems and tools utilized to collect essential elements of information established by SCDPH on healthcare facilities' operational status.

Z. SC Vocational Rehabilitation Department

- 3. Provide the following resources, if available:
 - a. Behavioral health disaster response staff to facilitate recovery.
 - b. Accessible transportation assets.
 - c. Warehouse space for temporary storage and medical supplies.
 - d. Temporary alcohol and drug treatment bed space.

AA. South Carolina Law Enforcement Division

1. Provide assistance for the gathering or rapid transportation of samples for analysis.

Annex 8-15 April 2025

- 2. Provide technical assistance, equipment, laboratory, and body location documentation services for deceased identification and mortuary services.
- 3. Provide chaplains to support County Coroners, as requested, for death notification services and crisis intervention services to families of affected Law Enforcement Agencies within the State.

BB. South Carolina National Guard

- 1. Coordinate available military assets as requested through ESF-8.
- 2. Coordinate and assist with security, equipment, facilities, and personnel to implement Medical Countermeasures operations.
- 3. Provide hospital administrative support as requested (e.g., patient intake and/or patient movement).
- 4. Coordinate and provide bulk water to hospitals as needed.

CC. Southern Baptist Disaster Relief

Provide personnel trained in emotional and spiritual care as available.

DD. The Salvation Army

Provide personnel trained in emotional and spiritual care as available.

VI. FEDERAL ASSISTANCE

- A. This Annex is supported by the National Response Framework for ESF-8 (<u>Public Health and Medical Services</u>).
- B. The US Department of Health and Human Services (HHS) is responsible for directing Federal ESF-8 operations.
- C. Federal ESF-8 representatives will deploy with the IMAT to the SEOC or other designated location.