



SANDUSKY COUNTY HEALTH DEPARTMENT

EMERGENCY OPERATIONS PLAN

I. INTRODUCTION

A. PURPOSE

It is necessary for the Sandusky County Health Department to be prepared to respond to emergencies that may occur in the jurisdiction, such as infectious disease outbreaks, threatened pandemics, natural disasters, radiological emergencies, terrorist incidents and Hazardous Materials incidents, in order to minimize public health effects and manage the consequences through appropriate responses.

The purpose of this plan is to prepare SCHED employees to respond to any public health emergency through coordinated, appropriate and timely response actions in conjunction with local, regional and state partners. The goal is to prepare the SCHED staff and the Sandusky County community to respond in an appropriate and timely manner to any disaster or public health emergency. This Plan is integrated into the Sandusky County Emergency Operations Plan as Annex H Public Health.

The SCHED has overall responsibility for protecting the health of the population (60,944) of Sandusky County on a daily basis, as well as during a public health emergency and to reduce the incidence of morbidity and mortality. The SCHED Health Commissioner is responsible for managing any Health Department emergency response in coordination with the Sandusky County Emergency Management Agency, Emergency Medical Services, local hospitals, law enforcement, local fire departments, mental health providers and state and federal agencies.

This plan is available to the general public through the SCHED website, www.alwayschoosehealth.com, with a link to submit comments.

B. PLAN ORGANIZATION

1. HEALTH DEPARTMENT PLAN

The Sandusky County Health Department Emergency Operations Plan provides an *all hazards* approach in planning for Natural, Radiological, Nuclear, Biological or Chemical Weapons of Mass Destruction (WMD) and Hazardous Material incidents.

Responsibilities and functions regarding disaster response in Sandusky County are laid out in the Sandusky County Emergency Operations Plan. The Sandusky County Health Department Emergency Operations Plan is integrated into the County Plan as Annex H. The stated purpose of the

annex is “the provision of Public Health services during emergency situations”, considering “factors such as disease control, water quality, and sanitation”. Annual review is completed annually by the Sandusky County EMA Director and the Health Commissioner.

II. ASSUMPTIONS

- In the event of a WMD incident in Sandusky County, the SCHD could receive State and Federal agency assistance. These agencies have sophisticated systems to detect and monitor nuclear, biological and chemical agent exposures, including the ability to predict spread.
- Outside assistance would complement, and not supplant, the Sandusky County Health Department’s own operating system.
- All agencies involved will operate under the Incident Command System (ICS), a sub-system of the National Incident Management System (NIMS).

III. OPERATIONS

A. ACTIVATION of the SCHD Emergency Operations Plan

1. Plan is activated in any emergency situation requiring public health resources and protective actions.
2. Public Health response is activated upon a major disaster, public health emergency or other event that exceeds the limits of normal response and requires assistance with resources and management.
3. Upon recognition and/or notification of an unusual occurrence, requiring an expanded response, the Health Commissioner will convene a PHEP (Public Health Emergency Preparedness) Team meeting to determine the departmental response per the Emergency Operations Plan, and whether to open the DOC.
4. The SCHD response to a disaster or any emergency potentially affecting the health of Sandusky County residents will be either through the Emergency Operations Center (EOC) or the Departmental Operations Center (DOC).
5. In a public health emergency, the Health Commissioner contacts the EMA to request EOC activation if the situation requires resources beyond the scope of the SCHD.
6. The Health Commissioner may request assistance from the EMA and/or request a declaration of emergency and activation of the EOC (if not already done so by the County Commissioners).

7. The Health Commissioner will determine the level of response needed, which plans to activate and who to deploy during the initial emergency response.
8. Following ICS, the Health Commissioner will assign individuals to those areas required, based on the scope of the response/size of the emergency. Following basic ICS philosophy, the ICS structure and organization will expand and contract, at the direction of the Incident Commander.
9. The SCHD Health Commissioner functions as the Health Department's Incident Commander until, or unless, she designates another person and transfers command to said person.
10. The EOC may be activated:
 - Upon notification from an agency that assistance is needed to respond to a multiple casualty incident or incidents.
 - Upon declaration of a local emergency by a City government within the County.
 - In response to any local emergency (natural or man-made) affecting the health and safety of employees or the public.
 - In response to multiple local or regional incidents (natural or man-made) occurring simultaneously and potentially affecting the health and safety of employees or the public.
 - Upon the declaration, by the Governor of a state emergency, or the declaration of the President of the United States for a Federal disaster, that may affect Sandusky County.
11. Upon activation of the EOC the SCHD response is coordinated by the Health Commissioner, managing the Medical/Health Branch and assuming the role of the Medical Health Coordinator.
12. The Health Commissioner may direct the activation of the Department Operations Center (DOC) to support the Leadership at the EOC.
13. The following SCHD staff report to the EOC when it is activated:
 - Health Commissioner
 - EOC Liaison
 - Other personnel as directed by the Health Commissioner
14. The Sandusky County Health Commissioner will activate the SCHD Emergency Operations Plan during any disaster or crisis event as needed.
15. The Department Operations Center may be activated by the Health Commissioner in response to:

- A communicable disease outbreak, not requiring activation of the EOC.
 - A suspected or actual bioterrorist event.
 - Any local emergency incident (natural or man-made) that may affect the health and safety of employees or the public.
 - Multiple or regional incidents (natural or man-made) occurring at the same time and potentially affecting the health and safety of employees and the public.
 - A declaration of a local emergency by the Sandusky County Emergency Management Agency and any County Executive.
 - A declaration by the by the Governor of a State of Emergency, or the declaration of the President of the United States for a Federal disaster, that may affect Sandusky County.
16. The SCHD Department of Operations Center will be housed at the health department (2000 Countryside Drive, Fremont, OH 43420). Alternate locations, in case of building inaccessibility, will be determined by the Health Commissioner and announced via the SCHD Crisis Communication Plan.
17. The SCHD Logistics Section Chief is responsible for setting up the DOC.
18. Reporting immediately upon activation of the DOC will be the following:
- Health Commissioner (if not active at the EOC)
 - Public Information Officer
 - Planning Chief (WIC Director)
 - Operations Chief (Director of Nursing)
 - Logistics Chief (Environmental Health Director)
 - Finance Chief (Director, Support Services)
 - Emergency Response Coordinator
 - Epidemiologist
 - Office Manager/Registrar
19. When activated, the Health Commissioner will determine the hours of operation, shift(s) and when to deactivate.

B. RESPONSE COORDINATION

1. SCHD will coordinate the medical/health response with:
 - The EOC is when it is activated.
 - An individual city or village when the Operational Area EOC is NOT activated. This type of activation involves response for a single affected jurisdiction.

- Hospital and/or EMS personnel during a mass casualty incident response.
- The Coroner during a mass fatality incident response.
- Other county departments.

C. GENERAL

1. Local government officials have the first line of responsibility for emergency planning and response within their jurisdiction. The Health Department participates in local emergency response planning.
2. Many elements of local, state and federal government will be integrated into a coherent response system including facilities, equipment, trained personnel, communications, plans and procedures.
3. The Health Department will follow the NIMS/ICS structure as outlined by the federal government.
4. All incidents will be treated as real until deemed no longer a threat to the community by the Health Commissioner.

D. NOTIFICATIONS

1. For Bioterrorism Incidents:
 - A report may be initiated by a concerned or threatened citizen, organization or employee.
 - 911 Dispatch or any government agency may receive the initial notification from the affected individual organization.
 - a. The SCHD maintains *Emergency Notification Procedures* at the main reception areas of the health department for use during an emergency or during the receipt of an emergency call or threat. This document includes Standard Operating Procedures for:
 - i. In House Emergency Calls
 - ii. Emergency Call Down List
 - iii. MARCS Radio
 - iv. Fire Emergency
 - v. Severe Weather Emergency
 - vi. General Evacuation
 - If any government agency receives the initial call, they will notify the 911 operator immediately.
 - If the 911 operator receives the initial call, the Local Law Enforcement agency, Fire and EMS are dispatched.

- After the initial responders are dispatched, the 911 operator will notify the Health Department, County EMA and the regional FBI.
 - The Health Department will notify the Ohio Department of Health and establish a bridge telephone line. The Health Commissioner will consult with state and federal agencies regarding evacuation and isolation, risk of contagion, sheltering and subsequent re-opening of the site, decontamination of individuals and property, specimen collection, laboratory capabilities/time frames, special instructions to hospitals, diseased individuals, walking wounded, test result notification, use and supply of prophylaxis/vaccine, surveillance and Public Health Advisories.
2. SCHD will follow the SCHD Crisis Communication Plan for unusual incidents/events. *See Appendix C SCHD Crisis Communication Plan.* For incidents and/or events that involve the Strategic National Stockpile see *Appendix J SCHD Mass Pharmaceutical Receipt and Distribution Plan.*
 3. For communicable disease outbreaks, the Health Department will notify the county EMA and county Hospital Infection Control Practitioners on the status of cases(s) on a basis to be determined at the onset of an event (i.e.: daily, weekly, hourly). See: *SCHD Disease Outbreak Investigation Procedures* (part of the *SCHD Epidemiologic Response Plan*, Appendix B).
 4. The County EMA will notify the State EMA, FBI, and other government agencies as an event develops. The Sandusky County Health Department *Crisis Communication Plan* contains a *Communication Flow Diagram* for communications and notifications during a biological incident.
 5. Regional Communications will follow the *North West Ohio Regional Communications Plan*. Note: *All NW Ohio Regional Plans are kept on file in the office of the Emergency Response Coordinator*, and are available electronically and in hard copy.
 6. Based on the first responder's assessment of the situation, the county EMA may activate the Emergency Operation Center, in which case the Sandusky County Health Department will coordinate communication from the Emergency Operation Center (EOC), with the Health Commissioner in attendance there.

E. INFECTIOUS DISEASES

1. PROTOCOL

The Sandusky County Health Department follows the protocols established by the Ohio Department of Health, as spelled out in the *Ohio Department of Health Infectious Disease Control Manual* (maintained online by the Ohio Department of Health).

In the event a case report is not for a class A infectious disease, but there is indication of epidemic spread or intentional infection, the Ohio Department of Health Outbreak Response and Bioterrorism Investigation Team (ORBIT) is notified immediately. The Northwest Ohio Regional Public Health Coordination team will be notified by the Epidemiologist of any event that is suspected of spreading beyond Sandusky County borders.

2. CLASS A DISEASES

Diseases of major public health concern (Class A Diseases) because of the severity of the disease and/or the potential for epidemic spread are, by law, to be reported to the Health Department immediately upon recognition of a case, a suspected case or a positive lab result. The Epidemiologist, or other designated personnel, is then responsible for immediately contacting the Ohio Department of Health, Bureau of Infectious Disease. In cases of a Class A disease, the Epidemiologist will notify the Director of Nursing and/or the Health Commissioner about the case(s), providing updates as necessary. Health Department staff will follow the SCHD *Epidemiologic Response Plan* which included the *Disease Outbreak Investigation Procedures* for all investigations and the additional *Biological Incident Policy and Procedure* for the following specific biological agents: Anthrax, Botulism, Plague, Smallpox and Tularemia.

3. RADIOLOGICAL EMERGENCIES

In case of a nuclear power plant emergency, the Sandusky County Health Department *Davis Besse Standard Operating Procedure* will be instituted, or in the case of other Radiological emergencies the **Radiological Response Protocol** will be instituted. The Environmental Health Director, or other designated personnel, is responsible for immediately notifying the Ohio Department of Health Radiation Protection Team.

F. ALTERNATE COMMUNICATIONS

Alternate sources of communication and methods of identification during a crisis period will be determined at the time of the event. Following the Sandusky County Emergency Operations Plan, if the Emergency Management Agency opens the Emergency Operations Center, the health department will follow their lead for communications and alternate types of communications for all actions that involve any or all members of the EOC. If an event is solely under the

jurisdiction of the health department, or if the EMA is involved without other members of the EOC (i.e.: mass vaccination event), then the Health Commissioner will determine what type of communication system will be utilized by the health department.

Regardless of the event, the Health Commissioner will determine what communication mode will be utilized during an event by the health department staff members, and/or volunteers, to communicate with the health department proper and with members of the staff both on and off site.

If telephone service is not interrupted, telephones and cell phones will be the communication mode of choice during an event. MARCS radios and hand held person to person radios (walkie-talkies) are available for use by the health department staff and will be assigned by the Health Commissioner. The Health Department has both T1 lines and Wireless internet available, which will be utilized when possible as well.

If telephone service is interrupted, the health department may choose to utilize S.C.A.R.E.S. (Sandusky County Amateur Radio Emergency Services), an organization of volunteer amateur radio operators who help to augment national, state and local disaster service communications systems in the event of an emergency. To access local A.R.E.S. members, the Health Commissioner will place a request for assistance through the Emergency Management Agency.

Anyone using the MARCS radios will follow the SCHD *MARCS Policy and Procedures*.

The Ohio Public Health Communication System is available, via internet, for communications with internal PHEP Team Members, and local hospital administration, as well as regional and state health departments. (*See SCHD OPHCS Standard Operating Guide*)

VoiP phone is available, with an active internet connection, for communication with regional and state health departments.

G. METHOD OF IDENTIFICATION

During any response to a crisis event all health department staff members will be required to wear their photo identification badge while on duty whether at the health department or at another locale.

Volunteers will be required to wear a name badge and designation of services (IE: RN, clerk, etc.) at all times during their stay, or service to the health department. If available, and as time permits, photo identification badges may be provided utilizing the SCHD/EMA badge machine.

All persons that are not directly employed by the health department will be required to sign in at the main reception desk of the health department or alternate care site, have their identification and/or credentials verified by a health department staff member, and receive an identification badge prior to being dispatched anywhere else in the building. Upon leaving the building, all non-health department employees will be required to surrender their identification badge. Volunteers and other non-health department employees will be validated and credentialed daily either at the health department or at an alternative Volunteer Management/Reception site.

H. CHAIN OF COMMAND

1. The Health Commissioner is the director of the Health Department operations and reports directly to the Board of Health. In the Health Commissioner's absence, the Director of Nursing will assume all Health Commissioner responsibility and authority. The Director of Nursing acts as the second in the chain of command. The Director of Nursing coordinates all nursing services.
2. The Medical Director provides health assessment, medical support and medical orders as needed and reports directly to the Health Commissioner. In the absence of the Medical Director, the Assistant Medical Director will assume the role of Medical Director.
3. The Environmental Health Director coordinates information and field staffing, and reports to the Health Commissioner. The Environmental Health Director oversees all sanitarian activities including outbreak investigations. During a crisis event, if the Health Commissioner is located at the EOC, the Environmental Health Director assists in overseeing all departmental activities.
4. The Epidemiologist oversees disease investigation, surveillance and prophylaxis activities, including immunization clinics, and reports to the Health Commissioner and the Director of Nursing. The Epidemiologist also acts as a back up to the Director of Nursing as assigned.
5. The Nursing and Environmental Division staff members report to their respective directors unless otherwise directed.
6. See Appendix H *SCHD Continuity of Operations Plan*.

I. INCIDENT COMMAND SYSTEM (ICS) and NATIONAL INCIDENT MANAGEMENT SYSTEM (NIMS) – SCHD POLICY:

1. In order to maintain order and a smooth response to an event the Health Department will follow the NIMS/ICS management system. Incident command and control issues will involve a unified command system in order to properly coordinate the various agencies and authorities involved in responding to an incident

2. All Health Department staff will receive training on the ICS system. Emergency Preparedness Team members and Administrative Team members will complete NIMS training with yearly reviews and updates as deemed necessary by the Health Commissioner.
3. At a minimum, all staff members will complete ICS 100 and 700 within 6 months of hiring. Management and first line supervisors (division leaders) will complete ICS 100, ICS 700 and ICS 200. All Command staff will complete ICS 100, 700, 200, 300, 400 and 800.
4. The FEMA ICS Forms booklet, which contains not only blank forms but detailed completion instructions, will be utilized as a template for producing all Incident Action Plans (IAPs). See *ICS Forms Booklet FEMA 502-2*
5. The Health Commissioner will assume or assign the Incident Command position at the onset of an event, with subsequent assignments and transfer(s) of command coming from/through the Incident Commander.
6. See **SCHD Emergency Response ICS Chart**.
7. **See specific Job Action Sheets for detailed ICS position descriptions and checklists. (NOTE: Job Action Sheets are compiled and kept in the office of the Emergency Response Coordinator).**
8. The Fire Department Chief Officer is the Incident Commander on scene for crisis management unless the incident is biological, in which case the SCHD will be the incident command, or will share ICS duties with local law enforcement.
9. The Emergency Management Agency is the lead agency for resource management.
10. The Incident Commander will consult with the Sheriff's department or other local law enforcement agency in whose jurisdiction the event occurs in order to decide if and when the FBI should be notified.
11. If the FBI is involved, they become the lead agency for criminal investigation including evidence collection and custody. Until the FBI arrives on the scene, the Sheriff's department or local law enforcement of the jurisdiction involved is the lead agency for securing the crime scene and further assisting the FBI.
12. The Ohio State Highway Patrol is the lead agency for crisis management in Ohio. The designation of the lead agency for the state for consequence management is contingent upon the actual event and will be designated by the state Emergency Management Agency when there is a statewide event or event large enough to open the state EOC.
13. In the event of nuclear and or biological agents, the Ohio Department of Health is the lead agency.
14. In the event of chemical agents, the state Environmental Protection Agency would be the lead agency assisted by the Ohio Department of Health for medical issues. Locally, Sandusky County Hazmat would be the lead agency with the Health Department assisting.
15. Presidential Decision Directive 39 identifies the FBI as the lead federal agency for crisis management during terrorist incidents, and identifies

FEMA (Federal Emergency Management Agency) as the lead agency for consequence management.

16. It is the policy of the SCHD that all staff members will follow the ICS structure and the lead of the Incident Command. The Incident Commander, established by the Health Commissioner, will assign ICS positions as necessary – expanding and contracting the structure – as called for.
17. **TRANSITION OF INCIDENT COMMAND:** The incident commander for major terrorist incidents will likely be, initially, the Fire Chief on scene. As state and federal assistance arrives, and the scope of the response grows more complex, the need to transition Incident Command to a higher level may become necessary. The Health Department, and all county officials, must implement this transition and work together to determine ongoing incident command. Because of the methods used in the NIMS and ICS structures, local command will remain under local authority with federal command assisting and directing decision making processes. The Health Commissioner will participate in all ICS decision making sessions at the EOC when an event is occurring.
18. Delegation of Authority, Transfer of Authority and other command staff measures will be announced at regularly scheduled staff briefings during an event, by the Incident Commander.
19. **REGIONAL Command and Control** – The SCHD will follow the NW Ohio Region Command and Control Policy for regional events/incidents. SCHD will fully participate with regional partners in all regional response and recovery efforts. (*NOTE: All NW Ohio Regional Plans are available in the office (and on digital files) of the Emergency Response Coordinator*).

J. HEALTH DEPARTMENT RESPONSIBILITIES

1. The Health Department will provide technical assistance to the IC on scene with regard to decontamination, personal protective equipment, identification of biological and/or chemicals, exposure assessment, risk assessment, drug/vaccine use, sample collection and shipping of diagnostic samples. The Health Department will act as a liaison between the Incident Commander and the Ohio Department of Health and/or the CDC.
2. The Health Department will maintain “Chain of Custody” when working with any samples involved in a potential or actual terrorist event. *SCHD will utilize Sandusky County Sheriff’s evidence tags for chain of custody per the Sheriff’s protocol.*
3. During an event the Health Department may support the local EMS at the triage site and will coordinate with local hospitals regarding treatment of victims that may be contaminated via contact with the hospital infectious disease control practitioners. The Health

Department will act as a liaison between ODH, CDC and the local hospital(s) involved.

4. The Health Department may provide nursing assistance and guidance to the local hospitals and/or Red Cross sites if needed; however, all Health Department needs will be met first before assigning staff to non-Health Department sites. The Emergency Preparedness Team will review all decisions regarding staff placement.
5. The SCHD will report Class A communicable diseases immediately to the ODH and will collect, pack, and ship diagnostic samples to the ODH lab following protocols established by the ODH. Chain of custody will follow Sheriff's protocol for any potential terrorist acts.
6. The SCHD will receive sample analysis reports and implement the health protection and prevention guidelines provided by ODH and CDC.
7. The SCHD Environmental Division will survey any incident sites for health threats and/or will inspect all shelter sites prior to occupancy.
8. The SCHD will receive, store, distribute and/or administer any vaccine, prophylactic antibiotic or other medication/treatment (i.e., potassium iodide tablets) following Strategic National Stockpile guidelines.
9. The SCHD will follow up with affected, exposed, and potentially exposed individuals, conduct surveillance, coordinate surveillance reporting to ODH, provide education to the public on exposure related issues, and monitor the immediate, as well as long term, effects of the event.
10. The SCHD will coordinate with contiguous county health departments, the North West Ohio Regional Public Health Coordination team and ODH to prepare public health advisories and announcements when more than Sandusky County individuals are involved following the NW Ohio Region Joint Information SOG. (***NOTE: All NW Ohio Regional Plans are available in the office (and on digital files) of the Emergency Response Coordinator.***)
11. The SCHD will coordinate as necessary with the county coroner and local funeral homes, and will communicate any specific risk to those working with exposed and deceased victims. SCHD will follow the Sandusky County Mass Fatality Plan, coordinated through the Coroner's office. In all Mass Fatality events, the Sandusky County Coroner will be Incident Commander for mass fatality management. See ***SCHD Mass Fatality Plan.***
12. SCHD will coordinate with the Red Cross as needed, including providing site surveys prior to opening shelters. The SCHD will provide site surveys on any shelter opened by the Red Cross.
13. SCHD will work in conjunction with the Sandusky County Board of DD to provide sheltering for functional needs populations. The Sandusky County Board of DD maintains a plan for special needs sheltering.
14. SCHD will provide staffing and coordination of health related issues at the county Emergency Operation Center when the EOC is activated.

15. SCHD will arrange for and/or coordinate mental health services for public health staff members during and after a crisis event, as well as coordinate mental health services for the public at any treatment, distribution, or vaccination sites that the health department is providing.
16. The Emergency Preparedness Team will request assistance from ODH and CDC when appropriate.
17. SCHD will accumulate, maintain and report real time data on surveillance, occurrences, contacts, regions affected, threat to surrounding areas and any other data deemed appropriate by the Emergency Preparedness Team to local, regional, state and/or federal partners.

K. ASSIGNMENTS

1. HEALTH COMMISSIONER

- Receives the event information from individual/organization, other agencies, Disaster Response Team, etc., from the site or may be informed by SCHD staff member upon immediate recognition that an event is occurring or has occurred.
- Functions as **Incident Commander** for the health department unless she chooses to assign this to another staff member.
- See specific Job Action Sheets for detailed ICS position descriptions and checklists. (*NOTE: Job Action Sheets are compiled and kept in the office of the Emergency Response Coordinator*).
- Acts, along with the Medical Director, as the Spokesperson for the health department. Consults with the Emergency Preparedness Team and Medical Director for technical details prior to releasing information to the media on specific threats, health related issues. Note: PIO Liaison will assist PIO as assigned.
- Coordinates staff functions. Assigns or designates alternate duties to administration and staff.
- Consults with Logistics, Planning, Operations and Finance on an ongoing basis.
- Reports directly to the Board of Health.
- Executive member of the County Administration.
- Functions in Unified Command at the Emergency Operation Center when the EOC is activated; functions within the Regional system as determined at the onset of a regional event.
- Directs activities related to the Strategic National Stockpile and distribution of same.
- Instructs staff to shut down HVAC system when warranted.
- Determines if and when health department should be abandoned for an alternative site.

2. DIRECTOR OF NURSING

- Functions as the Operations Chief when assigned.
- In the absence of the Medical Director, and or the Assistant Medical Director, the Nursing Director will also perform the functions of the Medical Director within the limits of state law.
- Provides information and updates to the Health Commissioner and Medical director on a timely basis.
- Reports directly to the Health Commissioner.
- Oversees all nursing and auxiliary staff activities.
- Assists in directing activities related to the Strategic National Stockpile.
- Assumes responsibility in all areas of command/coordination in the absence of the Health Commissioner.
- Acts as spokesperson for the Health Department in the absence of the Health Commissioner, and/or Medical Director.

3. DIRECTOR OF ENVIRONMENTAL HEALTH

- Oversees all Environmental Health staff and activities.
- Coordinates staff at the Health Department when the Emergency Operation Center is opened and the Health Commissioner is in attendance at the EOC.
- Oversees all food and water borne outbreak investigations in Sandusky County.
- Acts as a liaison between the Sandusky County Hazmat Team and the Health Department.
- Acts as a liaison between the EPA and the Health Department.
- Coordinates all activities related to Nuclear and/or Radiological Threats.
- Initiates and coordinates Health Department activities related to the Davis Besse Standard Operating Procedure Plan.
- Acts as Logistics Chief as assigned.
- Assigns staff members and assists with investigation and surveillance of biological and chemical threats.
- Oversees collection and shipping of all diagnostic samples.
- Reports directly to the Health Commissioner.
- Assists in directing activities related to the Strategic National Stockpile.

4. MEDICAL DIRECTOR/ASSISTANT MEDICAL DIRECTOR

- Acts as the health advisor and coordinates the assessment function of an event along with the Ohio Department of Health.
- Acts as Spokesperson when requested to do so by the Health Commissioner or Health Board.

- Signs for the Strategic National Stockpile (SNS) and provides standing orders as necessary.
- Oversees all clinics associated with the SNS.
- Provides medical advice in relation to SNS clinics and services.

5. DIRECTOR OF SUPPORT SERVICES

- Acts as Finance Chief during any event.
- Monitors, records and maintains a record of all expenses related to the event.
- Completes all documentation for FEMA reimbursement.
- Acts as a liaison to FEMA for reimbursement
- Reports directly to the Health Commissioner.

6. WIC DIRECTOR

- Acts as Planning Chief during any event.
- Is responsible for overall IAP completion and public education/information, as well as volunteer coordination.
- Responsible for assuring essential WIC Services are performed, scaling back operations as necessary to redirect staff to event response.

7. EPIDEMIOLOGIST

- Monitors Epi-X for national surveillance and EpiCenter and RODS for local surveillance.
- Monitors ODRS (Ohio Disease Reporting System) and oversees all activity related to this system.
- Acts as a liaison between area hospital Infection Control Practitioners and the Health Department.
- Coordinates investigation of communicable diseases with ODH.
- Assists in the coordination of all investigation, surveillance and follow up activities related to nuclear, biological or chemical threats or events.
- Monitors statewide and regional events through surveillance.
- Reports to the Health Commissioner, Director of Nursing and Environmental Health Director.
- Acts as Epidemiology Division Lead and reports directly to the Operations Chief during any biological event.

8. EMERGENCY RESPONSE COORDINATOR

- Assists in obtaining and compiling information, alerts, and advisories for the Public Information Officer(s).
- Reports directly to the Health Commissioner.
- Under the guidance of the Health Commissioner and Director of Nursing generates and sends local health alerts and advisories.

- Maintains current information related to all nuclear, biological or chemical threats.
- Assists in directing activities related to the Strategic National Stockpile.
- Assists in coordinating all activity related to immunization, prophylaxis or distribution of the SNS to staff and/or the public.

9. DIRECTOR OF HEALTH EDUCATION

- The Director of Health Education is responsible for acting as the PIO, collecting information related to the event, monitoring media reports, and compiling and preparing presentations and reports for the Incident Commander.
- Reports directly to the Health Commissioner. Directly assists the Incident Commander in PIO activities as assigned. Functions as Regional PIO Liaison as assigned.
- Maintains a database with media contacts to facilitate distribution of press releases, etc.

10. GENERAL STAFF

- The Nursing Staff, Environmental Health Staff and support staff will be provided with detailed assignments by the respective Section Chiefs as the situation develops, including providing response at the site, emergency operation center duties, alternate care facility assistance, mass vaccination or medication distribution clinics or other areas of concerns that may arise.

11. MENTAL HEALTH SERVICES

- The Sandusky County Health Department maintains a Memorandum of Agreement (MOA) with Firelands Counseling and Recovery Services and the Mental Health and Recovery Services Board of Seneca, Sandusky and Wyandot counties, to provide emergency services to the employees and volunteers of the SCDH during disaster services activities. Per the MOA, these services will only be available during a “declared” emergency.
 - Access to Firelands Counseling and Recovery Services – contact the Firelands Crisis Hotline (1-800-826-1306), which is available 24 hours/7days per week. In case of disruption of telephone service, MARCS Radio contact to Firelands Regional Medical Center will be utilized to notify Firelands Counseling and Recovery Service. (See MOA on file in the Epidemiologist’s office.)
- During emergency events, Mental Health Specialists will be consulted for assistance in preparing public information statements that are “reader friendly” and designed to decrease stress in the public.

- Mental Health services will be utilized as needed during and after any crisis event and may be provided by volunteers from NAMI, Mental Health and Recovery Services Board of Seneca, Sandusky and Wyandot Counties, Memorial Hospital, the Red Cross or other agencies available at the time of the crisis.
- The Health Commissioner and Emergency Preparedness Team will determine the mental health service needs at the time of the crisis and as the crisis progresses.
- Any mental health volunteers will follow the same guidelines all volunteers will as noted in Appendix E *Mass Pharmaceutical Receipt and Distribution Plan*.

IV. RESOURCE COORDINATION

A. PHARMACEUTICALS AND VACCINATIONS

- The Health Department is not equipped with the special pharmaceuticals and vaccines needed to respond to a bioterrorist attack. Vaccines that are needed for first responders and those exposed, are only available on a limited basis to the CDC, US Public Health Service and the US military.
- Supplies for mass treatment/vaccination are maintained by the Strategic National Stockpile (SNS) and will be distributed via governmental mandate, following requests from local, state or federal officials on the scene of an event.
- If the SNS is needed the Health Commissioner initiates the request through the Sandusky County EMA, as noted in Attachment C of the *SCHD Mass Pharmaceutical Receipt and Distribution Plan*. The CDC makes the final decision to deploy the SNS to an area or region. The Health Commissioner, as Incident Commander, will follow both the *SCHD Mass Pharmaceutical Receipt and Distribution Plan*, as well as the North West Region guidance documents if a regional event.
- If the SNS is deployed, the Clinic Manager, as assigned, will oversee and coordinate the acceptance, storage and distribution of all SNS materials in Sandusky County.
- Through prior Memorandums of Agreement, SNS acquisition, supply and distribution at the local level should not cause disruption in normal functioning of the SCHD though services may be geared down to essential services only if determined necessary by the Health Commissioner. *See SCHD Continuity of Operations Plan*.
- Clinic set up and distribution of SNS materials will be completed under the guidance of the *SCHD Mass Pharmaceutical Receipt and Distribution Plan*.
- The Sandusky County EMA will assist in locating and preparing appropriate sites for distribution of any governmental supplies.
- The Health Department will maintain all SNS vaccines at the distribution sites following CDC and ODH guidelines and protocols.

- The Health Department's Environmental Division will be responsible for evaluating/surveying all sites prior to the Health Department taking over control of the site, and will assure that the site is appropriate, suitable and safe.
- Under the direction of the Health Commissioner and/or Medical Director, primary drugs and vaccines will initially be made available to health department staff and their immediate family members, and first responders and their family members (including physicians and hospital personnel) based on need determined by risk of exposure.
- Distribution priority of primary drugs and vaccines to the public will be determined by the Health Commissioner, following guidance issued by the Ohio Department of Health and the Centers for Disease Control.
- The Health Commissioner will notify the Sandusky County EMA, the Sheriff, Local Law Enforcement agency and the county EMS of any impending mass clinics.
- ***For regional activities, the Incident Commander will participate in all Regional Command and Control activities and follow Regional decision making in allocation and access issues as outlined in NW Ohio Regional Plans.***
- The Health Department will maintain a list of local pharmacies and local analytical/clinical laboratories for support during emergencies as needed. The ODH Laboratories will be utilized as much as possible during outbreaks or unusual events.

B. DECONTAMINATION

- While certain Health Department staff have received HazMat Awareness level training, it is Health Department policy that SCHD staff are not First Responders. The Health Department will participate in local and regional HazMat events, as consultants, but will not function as First Responders.
- The Health Department will assist in the coordination of disposal of decontamination runoff as hazardous waste.
- The Health Department will maintain a list of hazardous waste movers and will also develop memorandums of understanding, as needed, to support efforts during an emergency.
- The Director of Environmental Health will be responsible for overseeing all decontamination activities, including documentation and follow up.
- The Director of Environmental Health or his designee will work directly with Hazmat in all decontamination activities.

C. EVACUATION, SHELTERING AND QUARANTINE

- Sheltering activities will follow the order of the Sandusky County Emergency Management Agency and the Sandusky County Emergency Operations Plan; this assumes that the EOC is open and functioning, with the Health Commissioner actively involved in the decision making process.

- The Health Commissioner, with assistance from the Emergency Preparedness Team, will provide consultation to the Incident Commander for issues related to evacuation, sheltering, isolation and/or quarantine of exposed individuals, in conjunction with guidance provided by the CDC and ODH.
- If an event occurs that is biological in nature, the Health Commissioner will become the Incident Commander and has the Board of Health's authority to institute isolation and quarantine orders following ODH guidelines. *See SCHD Isolation and Quarantine Plan in Appendix C Community Disease Containment Plan.*
- The Environmental Health Director will dispatch sanitarians to inspect the safe habitation in the designated shelters. *See SCHD Mass Care/Sheltering SOG.*
- The Director of Nursing will dispatch public health nurses to the shelters to provide assistance in the distribution of medical aid if deemed appropriate.
- The Operations Chief will have final say as to staff assignment of nurses during any mass vaccination or prophylaxis clinic.
- The Health Commissioner, with the authority of the Board of Health, can institute an order of isolation and/or quarantine to any individual(s), organization(s) and /or entire entities located in Sandusky County before, during, or after a potential biological incident. *See Sandusky County Board of Health Delegation of Authority to Quarantine and Isolate Policy.*
- The Environmental Health Director will be responsible for directing Registered Sanitarians in posting quarantine/isolation notices on private homes or businesses, and will maintain detailed records concerning any isolation or quarantine ruled necessary.
- The Sandusky County Sheriff and the Local Police Chief will be notified by the Health Commissioner of any quarantine notices posted.
- The Health Commissioner, in consultation with the Emergency Preparedness Team, will determine if there is public notification of any quarantine activity.

D. EMERGENCY MEDICAL SERVICES (EMS)

- The Health Department and EMS will coordinate response activities as necessary to ensure proper tracking of victims/patients, monitor the public's health, and monitor health exposure of first responders during major incidents.
- It is assumed that standard Triage tag color codes will be followed (Red = Critical, Yellow = Serious, Green = Emergency Transport not necessary, and Black = Dead or Dying). The same color code tagging is followed by all County Hospitals in disaster response planning. The EMS utilizes perforated triage tags with priority determined as follows:
 - Black with white lettering = deceased
 - Red with black lettering = immediate

- Yellow with black lettering = delayed
- Green with black lettering = minor
 - Tags are torn off at perforations as priority level changes. New tags can be added if needed.

E. CORONER

- The Health Department will coordinate with the County Coroner regarding deceased victims, body identification, preservation, prevention of spread of infection, disposal of potentially infectious body fluids, and personnel safety, following the *SC Mass Fatality Plan*. See *SCHD Mass Fatality Plan*. The Health Department will maintain and protect all information concerning vital statistics and issues related to death certificates.
- The Health Department Office Manager/Registrar will act as the main liaison between the Coroner and the Health Department.

F. POISON CONTROL CENTER

- The Health Department will notify the Poison Control Center (800-222-1222) when a nuclear, biologic or chemical event occurs with information related to material used if this is known.
- The Health Department will communicate with the Poison Control Center as they research data for personnel protection and emergency medical information.
- All information provided about a nuclear, biologic or chemical agent will be shared by the Health Department, through the Epidemiologist, with county hospitals, physicians and incident command as determined necessary by the Preparedness Team.

G. RED CROSS

- The Health Department will assist in activities of sheltering with the American Red Cross. See *SCHD Mass Care/Sheltering SOG*. Requests go through the Sandusky County Emergency Management Agency.
- SCHD will coordinate with the American Red Cross and Sandusky County Board of DD to assure that all functional needs populations are sheltered appropriately when necessary.

H. HOSPITALS

- The Health Department will collaborate with the county hospitals Disaster Response Teams and Infection Control Practitioners during mass casualty incidents for clinical, investigational and surveillance support.
- The Epidemiologist will follow established protocols and state law for communicable disease reporting and surveillance with the local hospitals and Infection Control Practitioners. See *SCHD Epidemiologic Response Plan*.

I. SANDUSKY COUNTY HEALTHCARE COALITION

- The SCHD, Sandusky County EMA, and Memorial Hospital are the co-chairs of the Sandusky County Healthcare Coalition.
- The coalition, comprised of community agencies and partners, meets at least bi-annually with a goal of maximizing healthcare response capabilities and minimizing healthcare system interruptions during emergencies by planning together to identify and fill gaps.
- The health and medical impacts of disasters on at-risk individuals with functional needs is addressed through the coalition, as agencies that serve them are included.
- The coalition's meetings and communications provide for information sharing and situational awareness among partners.

V. **PUBLIC HEALTH INFORMATION**

In addition to the information provided in the SCHD Emergency Operations Plan, the following special considerations would be taken during any crisis event:

- The Sandusky County Crisis Communication Plan will be followed at all times.
- During events that are under the sole responsibility of the Health Department, the Health Commissioner may choose to be the Public Information Officer and will pre-approve any information prior to dissemination by any Health Department employee.
- The PIO will be responsible for coordinating the Health Department's participation in any Joint Information Center activities.
- In joint response within the County EOC, all incident press releases or public information dissemination will be assigned to the Health Commissioner who will work with the Public Information Officer assigned by the EOC, and the incident commander.
- The County Public Information Officer, assigned to the Incident Commander, will defer questions to the Health Commissioner regarding biological, chemical and radiological hazards that relate to public health.
- Fact sheets will be utilized for nuclear, biological and chemical agents, where concern exists about disease, immunization, communicability, exposure and health effects, personnel protection, including use of potassium iodide, risk factors, community resources, and other environmental issues. These fact sheets will be used to reach decisions on response activity.
- Fact sheets on commonly used nuclear, biological and chemical agents, as well as treatment, prevention and surveillance procedure will be maintained at the Health Department.
- CDC and ODH updated information will be maintained and augment any Health Department standard operating guides if an actual event occurs.

VI. TRAINING

- SCHD utilizes a building block approach to training including the use of staff meetings with educational pieces, table top exercises, drills, functional and full scale exercises to educate staff to the SCHD Emergency Operations Plan.
- At a minimum, the Health Commissioner, Director of Nursing, Director of Environmental Health, and the Epidemiologist will participate in training, including tabletop exercises and drills within the department, the county and the region.
- At least yearly, the SCHD will participate in emergency response training.
- When available, the SCHD will participate in a county-wide or regional emergency response training.
- Whenever possible, all staff members will be involved in some level of exercise involving the SCHD Emergency Operations Plan. The level of involvement and the type of exercise will be determined by the PHEP Team.
- The Health Department will utilize training resources provided by ODH and CDC, as well as the Northwest Ohio Region.
- The Health Department may coordinate training activities among first responder groups and the county hospitals as needed.
- The Health Commissioner, or his designee, will be responsible for assuring that all health department staff are trained and prepared to carry out their duties or responsibilities before, during and after a public health crisis.
- Lessons learned, After Action Reviews and Improvement Plans will be completed and submitted to the Ohio Department of Health within 90 days of all SCHD emergency response exercises.
- Corrective actions will be tracked for completion, and AAR/IPs shared with stakeholders (e.g. email distribution or coalition meeting).

VII. DEBRIEFING POST EVENT

- All Health Department employees and/or volunteers involved in responding to a crisis incident will participate in a critical incident stress debriefing, conducted by the Health Department, coordinated by the Health Commissioner, in the department offices after termination of the incident.
- Debriefing will include reflection on strengths and weaknesses of the response, recommendations for changes in the Emergency Operations Plan, and recommendations for future trainings based on weaknesses noted during the event.
- Mental Health personnel will be available during and after the post event debriefing, for stress debriefing of any and all employees requesting such services.
- If another county agency has acted as Incident Command and conducts a debriefing session, all administrative Health Department employees taking part in the incident will participate.

VIII. PLAN MAINTENANCE

- The SCHD Emergency Operations Plan, and all its components, will be reviewed at least annually by the Emergency Response Coordinator and

approved by the Health Commissioner with input from the Public Health Emergency Preparedness Team.

- Following any emergency response or training, the PHEP Team, in conducting the After Action Review, will suggest and implement any changes needed to the Emergency Operations Plan.
- Copies of the Plan are maintained, at minimum, in the office of the Emergency Response Coordinator.
- Electronic copies of the SCHD Emergency Operations Plans are on the SCHD server, on flash drives, and in online storage that can be accessed by the Health Commissioner, the Director of Environmental Health, the Director of Nursing, Director of Health Education, and the Director of Support Services.

IX. APPROVAL

The Sandusky County Health Department Emergency Operations Plan is approved by the Sandusky County Board of Health.

X. APPENDICES

- A. Crisis Communication Plan
- B. Epidemiologic Response Plan
- C. Community Disease Containment Plan
- D. Continuity of Operations Plan
- E. Mass Pharmaceutical Receipt and Distribution Plan
- F. Pandemic Influenza and Other Highly Transmissible Respiratory Illnesses Plan
- G. MARCS Radio Policy and Procedure
- H. Biological Incident Policy and Procedure
- I. Chemical Agent Policy
- J. Radiological Event Policy
- K. Weather Emergencies
- L. Health Alert Network
- M. Mass Fatality Plan
- N. Mass Care/Shelter Policy
- O. Building Safety

