

Mississippi Emergency Support Function #8 – Public Health and Medical Services Annex

ESF #8 Coordinator

Mississippi State Department of Health

Primary Agencies:

Mississippi State Department of Health
University of Mississippi Medical Center

Support Agencies

Mississippi Department of Human Services
Mississippi Department of Public Safety
Mississippi Department of Agriculture and
Commerce/Bureau of Plant Industry/
Agricultural Theft and Consumer Protection
Mississippi Board of Animal Health
Mississippi Department of Environmental
Quality
Office of the State Medical Examiner
Mississippi Department of Mental Health
Mississippi Military Department
Mississippi State Board of Pharmacy
Mississippi Department of Rehabilitation
Services/Vocational Rehabilitation
Mississippi Division of Medicaid
Mississippi Board of Medical Licensure
Mississippi Board of Nursing
Mississippi Veterinary Medical Association
Mississippi Institutions of Higher Learning
Mississippi State Board of Community and
Junior Colleges
Other State Hospitals
Network #8 Incorporated

Federal ESF Coordinator

Department of Health and Human Services

Federal Primary Agency

Department of Health and Human Services

Introduction

Purpose

The purpose of this Emergency Support Function (ESF) is to provide state assistance and coordinate local resources in response to public health and disaster medical care needs. State agencies and health organizations will provide and coordinate services and resources including, but not limited to, emergency medical treatment and prevention, inspection of food and potable water, sewage and wastewater disposal, emergency mortuary service and mass fatality management, patient rehabilitation, vector and disease control, disease surveillance, and the restoration of health and medical infrastructure.

Scope

This section of the plan is to be used to respond to incidents where threatened or actual damage or needs exceeds local response capabilities. It is also used when Mississippi's capabilities are exceeded and Federal government response is requested.

Policies

- Mississippi State Department of Health (MSDH) coordinates the state ESF #8 preparedness, response, and recovery actions in accordance with the MSDH Concept of Operations (CONOPS) and the Mississippi Health Response Team plans. These actions do not alter or impede the existing authorities of any department or agency supporting ESF #8.
- MSDH will establish an ESF #8 Public Health Command/Coordination Center (PHCC) if needed to support State Emergency Operation Center (SEOC) operations and/or forward support cells.
- The PHCC facilitates the overall Mississippi ESF #8 response. As necessary during activations, the ESF #8 PHCC will liaise with other agencies as needed.
- All local and state organizations and other ESFs participating in response operations report public health and medical requirements to their functional counterpart in ESF #8.
- General medical and public health response information will be released to the public through ESF #15 after consultation with the MSDH Public Information Officer (PIO) at the ESF #8 PHCC. When possible, a recognized spokesperson from the public health and medical community delivers relevant community messages.
- Other general medical and public health response information may be released through ESF #15 at the discretion of the lead PIO, after consultation with MSDH. To ensure necessary patient confidentiality, the release of medical information by ESF #8 will be made in accordance with the applicable laws. Inquiries about patients are managed by MSDH in coordination with the Joint Information Center (JIC) when established. (See the ESF #15 External Affairs Annex for more details.)
- Individuals in all counties of the state can receive mental health services through the Regional Mental Health Center system. In the event of a disaster, the center serving the region where the disaster occurred will have the primary role in providing services (See Appendix 2 for map of Regional Mental Health Centers).
- In the event of a zoonotic or animal disease outbreak in coordination with ESF #11 Animals, Agriculture, and Natural Resources, public information may be released after consultation with the Mississippi Department of Agriculture and Commerce (MDAC), the Mississippi Board of Animal Health (MBAH), and MSDH.
- As the coordinating agency for ESF #8, MSDH determines the appropriateness of all requests for public health, medical, and death information.

- All state licensing boards will verify official credentials of out-of-state practitioners. The ESF #8 PHCC will oversee this activity through the Emergency Services Advanced Registration – Volunteer Health Professionals (ESAR-VHP) system.
- MSDH, as the coordinating agency for ESF #8, is responsible for consulting with and organizing state public health and medical subject-matter experts, as needed.
- Any deployed field personnel or units are subordinate to the ESF #8 Command or Coordination Center and will stay in contact with them at all times.
- The ESF #8 State Lead Agency (MSDH) will coordinate and manage the deployment of State Medical Response System (SMRS) assets as directed by mission tasks.
- Responsible parties at all health care facilities must keep the ESF #8 Coordination or Command Center advised of unmet needs and will advise the SEOC through its liaison.

Mutual Aid Agreements

- **Statewide Mutual Aid Compact (SMAC)**- If an emergency incapacitates local emergency medical and/or health and medical services, or if the magnitude of the emergency exceeds local veterinary resources, requests can be made to other participants for resources.
- **Emergency Management Assistance Compact (EMAC)**- Requests for emergency medical and/or health and medical service resources obtained from either EMAC or SMAC will be directed to the State Coordinating Officer (SCO) for execution. The EMAC states that persons holding licenses, certificates, or other permits issued by a party state for professional, mechanical, or other skills, shall be deemed licensed, certified, or permitted by the requesting state to render aid involving such skills.
- In accordance with Section 33-15-14(2)(a)(viii) of The Emergency Management Law, MS Code Ann. § 33-15 (1972), all agencies with ESF #8 responsibilities will ensure that they have Standard Operating Procedures (SOPs) in place to enable them to perform appropriate levels of health and medical mitigation, preparedness, response, and recovery.

Concept of Operations

Assumptions

- Medical resources and services may be damaged or unavailable during the disaster or emergency.
- Some disasters may generate casualty loads beyond the treatment capabilities of local emergency medical services and health care systems.
- Damage to chemical and industrial plants, sewer lines, and water systems, combined with secondary hazards such as fires, will result in toxic environmental and public health hazards to the surviving population and response personnel.
- Disruption of sanitation services and facilities, loss of power, and the massing of people in shelters may increase the potential for disease and injuries.

- The damage and destruction of a catastrophic disaster will produce urgent needs for mental health crisis counseling for disaster victims and response personnel.
- In a catastrophic event, the need for emergency mortuary services and victim identification will be paramount.
- Communication systems post-impact will most likely be limited or inoperable.
- Decisions to evacuate and whom to evacuate are local/state decisions.
- Transportation routes will be severely and negatively impacted.
- All patient movements on the ground will be coordinated with general population evacuation processes.
- During a catastrophic event, healthcare facilities may lose significant operational capacity. The facilities may be at or above capacity prior to the event.
- Hospitals and other healthcare facilities may receive a surge in citizens with special medical needs, long-term care patient transfers, and citizens with other medical concerns prior to an event (if there is pre-event notice).
- Hospitals and other healthcare facilities may receive a surge in citizens who have medical injuries, who are experiencing exacerbation of medical conditions, or who have other medical concerns post-impact.
- During events that provide no-notice, all pre-impact actions, i.e. warnings or evacuations, will begin immediately post-impact.
- A major disaster could have detrimental effects on the animal population. This in turn could seriously harm the economy and the environment.

General

- ESF #8 is organized in a manner similar to the Incident Command System (ICS) in order to provide incident assessment, planning, procurement, deployment, and support operations to the State Emergency Response Team (SERT), area coordinators, and local emergency management to assure a timely and appropriate response to an emergency/disaster situation.
- Procedural protocols and plans for disaster response activities are developed to govern staff operation at the SEOC, PHCC and in the field. Periodic training is also conducted to enhance effectiveness.
- In a large event requiring federal or mutual aid assistance, ESF #8 will work with counterparts from other jurisdictions to seek, plan and direct use of assets.
- Throughout the response and recovery periods, ESF #8 will evaluate and analyze information regarding medical, health and public health assistance requests for response, develop and update

assessments of medical and public health status in the impact area and do contingency planning to meet anticipated demands.

- ESF #8 will manage and coordinate state health and medical resources from the PHCC and liaise with the SEOC when activated.
- When an event is focused in scope to a specific type or response mode (e.g., hospital evacuation or radiological problem), the positions and functions of the PHCC Operations Chief will be assumed by an appropriate person with expertise pertinent to the event.
- Upon request by local government, ESF #8 will be operational by acquisitioning state health and medical resources in support of local hospitals. In addition, local ESF #8 representatives will make a request to their local Emergency Management Director for state resources if needed, who will in turn contact the SEOC for assistance.
- As personnel representing an ESF #8 primary or support organization, members are expected to have extensive knowledge of the resources and capabilities of their respective organization and have access to the appropriate authority for committing such resources during the activation.
- Public health and medical subject-matter experts from regional and federal ESF #8 organizations are consulted as needed for risk analysis, evaluation, and support.
- In the early stages of an incident, it may not be possible to fully assess the situation and verify the level of assistance required. In such circumstances, MSDH may provide assistance under its own statutory authorities. In these cases, every reasonable attempt is made to verify the need before providing assistance.
- All agencies with this ESF responsibility will receive administrative support from their respective organization with additional support from Mississippi Emergency Management Agency (MEMA) personnel.
- Upon notification, identified MSDH personnel are alerted to activate ESF #8 public health assets as well as medical assets as required.

Animal Health

- Animals in Mississippi are important assets to the state. Animals contribute to the economic stability of the state and the health and well-being of its residents. They are also an integral part of the state parks and the ecology of Mississippi. ESF #8 will collaborate with and provide support to ESF #11 as requested to ensure the health and well-being of the public. This includes surveillance for zoonotic disease, administration of vaccinations or prophylactic medication for responders and/or the public, and distribution of public information messages.
- MBAH is the primary organization for coordinating veterinary-related services in emergencies. The MBAH acts as a liaison with state agencies, humane societies, and animal control agencies and deploys the Mississippi Animal Response Team. Private veterinarians and humane society personnel participate on a voluntary basis in emergency operations.
- MBAH will support the state ESF #8 PHCC to coordinate veterinary-related services needed in emergencies. ESF #8 will also offer like support to the ESF #11 command support cell.

Mississippi Health Response Team

- The Mississippi Health Response Team (MHRT) and/or its advance element acts as the State Health Officer's agent on scene at emergency sites under the direction of the Director of Health Protection (DHP). The DHP, on behalf of the State Health Officer, directs and coordinates the department's efforts to prevent, prepare for, respond to, and recover from, the public health and medical consequences of disaster or emergency. The MHRT will serve as field command for ESF #8.

State Emergency Response Team (SERT)

- MSDH provides personnel as requested to MEMA's forward command unit(s). Personnel assigned to this unit will process requests as directed by MEMA.

Organization

State

- ESF #8 is part of the Operations Section, Emergency Services Branch, at the SEOC.
- During an activation of the SEOC, ESF #8 primary and support agency staff will participate in the ESF #8 PHCC, when activated, to provide support that will allow for an appropriate and timely response.
- During the response phase, ESF #8 will evaluate and analyze information regarding medical and public health assistance requests. Also, ESF #8 will develop and update assessments of medical and public health status in the impact area and do contingency planning to meet anticipated demands.
- MSDH develops and maintains emergency operations plans that govern internal response actions related to emergencies.

Field Units

- State Medical Assistance Teams (SMAT)
- Mississippi Health Response Teams (MHRT)
- Mississippi Mortuary Response Team (MMRT)
- Rapid Needs Assessment Team
- State Emergency Response Team (SERT)
- ESF #8 may be asked to provide personnel to the JFO to work closely with their federal counterparts.

Area

- MSDH has established a regional emergency response coordinator (ERC) in each of the nine public health districts of the state (**see Appendix 1**). These coordinators have been trained to carry out responsibilities under ESF #8 and function as coordinators, assessors, and operational personnel in support of regional or field activities.
- District ERC's are involved with ESF #8 by providing technical assistance whenever an event is so small that a county emergency operations center is not activated. If more than one county emergency operations center is activated, then additional liaisons will be activated and ERC's will assume a more involved role of coordinating regional resources or requests from the SEOC.

Direction, Control, and Coordination

- As the ESF #8 coordinator, MSDH is responsible for coordinating the overall health and medical activities by providing state resources or personnel based upon local jurisdictional needs.
- MSDH has nine districts throughout the state, which are all coordinated through their state or central office in Jackson (Appendix 1). These districts mirror MEMA's Emergency Management Districts.
- The State Health Officer, or his/her designated representative, will perform the necessary tasks of addressing emergency health needs, whether through delegation or direct involvement with MEMA, during the time of a disaster. Per the MSDH Concept of Operations, the defacto designee is the Director of Health Protection unless otherwise delegated.
- MSDH will be responsible for direction and control obligations on all health and medical ventures that involve state resources and assistance including mass fatality management and coordination. Coordination direction and control decisions will be managed by the ESF #8 PHCC and liaised to the SEOC.
- Each participating agency will coordinate its support with ESF #8.
- If state emergency health and medical resources have either been exhausted or are expected to be exhausted prior to meeting the demand, MEMA officials will recommend that assistance be requested from other states through the EMAC or from the Federal Emergency Management Agency (FEMA). Such a request to FEMA for assistance could prompt the implementation of the National Response Framework (NRF).
- All field units must keep the ESF #8 PHCC advised of unmet needs.

Administrative and Logistical Support

- Each ESF #8 agency that has an automated financial management system will utilize that system to capture the incurred costs of all available, acquired, and contracted resources used during the support activities related to emergency or major disaster operations. Those agencies not having access to an automated system will utilize their existing system to capture all related costs for reporting and potential reimbursement.

- All ESF #8 agencies understand that their financial management system (automated or otherwise) used to capture their incurred costs during an emergency, major disaster, or exercise must be in compliance with applicable agency, state, and federal guidelines, rules, standards, and laws.
- This understanding is based on the knowledge that any reimbursement of incurred costs is subject to audit.

Actions

Actions carried out by ESF #8 are grouped into the four phases of emergency management: preparedness, response, recovery, and mitigation. Each phase requires specific skills and knowledge to accomplish and requires significant cooperation and collaboration between all primary and supporting agencies and the intended recipient of service. This ESF 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. The following services provide the framework upon which actions will occur:

- Assessment of health and medical needs- MSDH mobilizes and deploys ESF #8 personnel to support MEMA to assess public health and medical needs. This function includes the assessment of the public health care system/facility infrastructure and morgue capability.
- Disease control/epidemiology - ESF #8 agencies enhance existing surveillance systems to monitor the health of the general population and special high-risk populations, carry out field studies and investigations, monitor injury and disease patterns and potential disease outbreaks, and provide technical assistance and consultations on disease and injury prevention and precautions.
- Medical Care Personnel- State ESF #8 has very limited resources to provide medical care personnel. University of Mississippi Medical Center (UMMC) will provide staffing when available, coordinate staffing from other healthcare facilities, request staffing from the Public Health Command/Coordination Center from Volunteers in Preparedness Registry, SMAC, EMAC, or the Federal Department of Health and Human Services. UMMC will coordinate medical care personnel staffing augmentation requests.
- Health/Medical Equipment and Supplies- ESF #8 PHCC will manage acquired medical supplies and equipment. UMMC will coordinate donated medical supplies and pharmaceuticals.
- Patient Evacuation- ESF #8 will coordinate patient evacuation for those patients requiring movement or relocation where local evacuation plans have failed or are inadequate to meet the need. UMMC will provide medical control for emergency medical services when operating outside of their normal response area. Mississippi MEDCOM will assist with patient movements and bed status reporting.
- Patient Care- ESF #8 will support in-hospital, nursing home, and other patient care needs and facilitate requests to assist with patient care where needed. UMMC as a primary agency will provide support to the Public Health Command/Coordination Center in coordinating patient care.
- Safety and Security of Human Drugs, Biologics, Medical Devices, and Veterinary Drugs- The MSDH PHCC may advise ESF #13 on security and all other ESFs on safety measures of regulated human

and veterinary drugs, biologics (including blood and vaccines), medical devices (including radiation emitting and screening devices), and other medical products.

- Emergency Responder Health and Safety- MSDH will develop first responder health and safety plans. Primary and support agencies will provide technical assistance to local government and other responders as requested.
- Blood and Blood Products- ESF #8 PHCC will track Mississippi blood availability through Red Cross, Mississippi Blood Services, Department of Defense, and other related organizations.
- Food Safety and Security- MSDH, in cooperation with ESF #11, may task its components to ensure the safety and security of regulated foods. (Note: MSDH has statutory authority for all domestic and imported foods.)
- Agriculture Safety and Security- ESF#8 PHCC, in coordination with ESF #11, may task its components to ensure the safety and security of food-producing animals, animal feed, and therapeutics.
- All-Hazard Public Health and Medical Consultation, Technical Assistance, and Support- MSDH and ESF #8 may task its components to assist in assessing public health and medical effects resulting from all hazards. Such tasks may include assessing exposures on the general population and on high-risk population groups; coordinating the collection and identification of human remains associated with mass fatalities; conducting field investigations, including collection and analysis of relevant samples; providing advice on protective actions related to direct human and animal exposures, and on indirect exposure through contaminated food, drugs, water supply, and other media; and providing technical assistance and consultation on medical treatment, screening, and decontamination of injured or contaminated individuals.
- Behavioral Health Care- ESF #8 PHCC may task its components (primarily the Department of Mental Health) to assist in assessing mental health and substance abuse needs; provide disaster mental health training materials for workers; provide liaison with assessment, training, and program development activities undertaken by state, local, and tribal mental health and substance abuse officials; and provide additional consultation as needed.
- Public Health and Medical Information- ESF #8 PHCC will staff a PIO at all times during activation. This PIO, with associated staff, will develop public information messages and implement their dissemination in conjunction with the MEMA PIO and/or the state JIC once established.
- Vector Control- The ESF #8 PHCC will assemble necessary expertise to augment the ESF #8 planning section to address any vector control issues. Federal assistance, if needed, would be requested through the SEOC. The ESF #8 support cell will assist in assessing the threat of vector-borne diseases; conducting field investigations, including the collection and laboratory analysis of relevant samples; providing technical assistance and consultation on protective actions regarding vector-borne diseases; and providing technical assistance and consultation on medical treatment of victims of vector-borne diseases.
- Potable Water/Wastewater and Solid Waste Disposal- ESF #8 PHCC will assist ESF #3 with the coordination of potable water/onsite individual wastewater and solid waste issues with public health

assets. The ESF #8 PHCC will also assist ESF #3 with the coordination of central wastewater systems through the Mississippi Department of Environmental Quality (MDEQ).

- Victim Identification/Mortuary Services- Upon the notification of need from the SEOC for mortuary service assistance or victim identification assistance, the Mental Health Response Team will augment staff with a Mass Fatality Task Force consisting of representatives from the state crime lab and the Office of the Medical Examiner, Mississippi Bureau of Investigation (MBI), MSDH, and the Mississippi Coroner's Association. This task force will coordinate resource requests and planning activities and report directly to the ESF #8 PHCC.
- Protection of Animal Health- ESF #11 Command Support Cell operates under the direction of the MDAC and MBAH. Coordinators and support agency representation is based upon the assistance needed for the specific incident. When there is an outbreak of highly contagious or economically devastating animal/zoonotic disease or if small animals/large animals/poultry/wildlife are affected by natural disasters, the MBAH will provide primary oversight and direction.
- Management, Command and Control of Assets- MSDH will operate the PHCC to support ESF #8 and commence various forms of communication with public health and medical representatives from county, municipal, and tribal government to discuss the situation and determine the appropriate response actions. ESF #8 will enhance staffing immediately on notification of an actual or potential public health or medical emergency and consult with the appropriate ESF #8 organizations to determine the need for assistance.
- Emergency Medical Services (pre-hospital) - MSDH will maintain memorandums of understanding (MOU's) with Mississippi licensed ambulance services and other medical transport units. Request for medical transportation from a local or county government should be sent through the county emergency management agency (EMA) to the SEOC. MSDH will coordinate resource deployments. Mississippi MEDCOM will coordinate resources once deployed. MSDH will coordinate medical transportation assistance with ESF #1.
- Health and medical activities related to terrorism threats and/or events.

Preparedness Actions

- Actions and activities that develop health and medical response capabilities may include planning, training, orientation sessions, and exercises for all ESF #8 personnel and other emergency support functions that will respond with ESF #8.
- Conduct planning with ESF #8 primary and support agencies.
- Develop and refine procedures to be used in the following field surveys: Rapid Needs Assessment, Health Assessment Teams, environmental health assessment survey, and epidemiological surveys.
- Conduct training for Rapid Needs Assessment Team members.
- Develop and present training courses for ESF #8 personnel, provide information on critical facilities to MEMA and develop protocols for frequently provided services.

- Maintain liaison with health and medical volunteer organizations and Mississippi Mortuary Response Teams.
- Develop rapid response mechanism for crisis mental health counseling for responders and assist in the development of public health nursing disaster protocols.
- Recruit, train, and exercise ESF #8 personnel to include SMATs, MMRT, and volunteer healthcare professionals as needed.
- Review and upgrade capabilities as needed.
- Stage assets as needed.

Response Actions

Initial Actions

- Activate and continue to respond using the ESF #8 Operations Plan and the MSDH Concept of Operations Plan (CONOPS).
- Coordinate ESF #8 activities through the ESF #8 Public Health Command/Coordination Center.
- Designate an official to participate in the JFO ESF #8 if requested.
- Develop and update assessments of medical and public health status.
- Deploy Mississippi Health Response Teams as appropriate.
- Establish communications necessary to coordinate state public health and medical assistance effectively.
- Coordinate medical transportation assistance with ESF #1.

MSDH

- Ensure essential acute medical care hospitals at or near the disaster location are able to support disaster response activities (See Appendix 3 and 4 for hospitals in Mississippi).
- Coordinate health and medical services to evacuated citizens, affected special medical needs populations, and home health care patients.

ESF #8 Public Health Command/Coordination Center (PHCC)

- Request UMMC, primary agency, to activate their CONOPS.
- Request the Executive Director of the Department of Mental Health, or a designee, to activate the crisis counseling service when deemed appropriate.
- Continue to identify the nature and extent of public health and medical problems, and establish appropriate monitoring and public surveillance.

- Refer information requests from the media and the general public to ESF #15.
- Provide team members for the SERT field deployment; procure health and medical resources for a Forward SERT deployment; provide communications for deployed health and medical personnel. In addition, primary and support agencies of ESF #8 may serve the SERT in other areas such as providing technical assistance, securing resources, command and response to the incident scene as requested (i.e., Impact Assessment Teams, State Medical Assistance Teams, State Mortuary Response Teams, intrastate and/or interstate mutual aid assistance).
- Assist with evacuations for special medical needs populations as needed.
- Conduct field assessments and surveys; provide nursing staff for special medical needs shelters; provide staff and services for monitoring public health conditions; conduct rapid assessments for immediate response objectives; determine needs for health surveillance programs in communities and districts.
- Manage all field deployed assets and provide command, communications, and logistical support to field operations, and verify actual need for requested health and medical resources.
- Arrange for the provision of medical personnel, equipment, and supplies as needed to health and medical facilities; assist with patient evacuation and relocation (post-event); identify hospital and nursing home bed vacancies statewide; operate the PHCC. Consider credentialing and verifying emergency medical technicians (EMTs), paramedics, and other health professionals during extended operations.
- Assist in hazardous materials response or a weapon of mass destruction event through consultation, toxicological support, and technical support of staff deployment; perform water, food and drug safety analysis and inspection.
- Arrange for Disaster Mortuary Response Team or victim identification services; provide port-o-lets and dumpsters to comfort stations/other locations; provide public health nursing staff as needed at state or regional special medical needs shelters; respond to radiological incidents and weapons of mass destruction incidents as necessary, including staffing the SEOC.

Recovery Actions

- Restore essential health and medical components of delivery systems, permanent medical facilities to operational status; restore pharmacy services to operational status; monitor environmental and epidemiological systems; and initiate grants for environmental and epidemiological surveillance.
- Continue provision of mental health crisis services.
- Support emergency services staff and operations until the local system is self-sustaining; maintain provision of long-term emergency environmental activities; identify populations requiring event-driven health, medical or social services post-event; and provide emergency pharmacy/laboratory services.
- Initiate financial reimbursement process for these activities when such support is available.

Mitigation Actions

- Increase use of geographical information systems (GIS) to identify location of all vulnerable sites or populations.
- Identify and seek funds to mitigate hazards in critical health facilities.
- Stockpile critical medical supplies in strategic locations throughout the state; develop Disaster Medical Assistance Team readiness levels to Category I capability; identify and seek auxiliary power for critical health and medical facilities.
- Prepare an after-action report (AAR). The AAR identifies key problems, indicates how they are to be/were solved, and makes recommendations for improving response operations. ESF #8 organizations assist in preparation of the AAR.

Responsibilities

Mississippi State Department of Health- Coordinator/Primary Agency

- Develop a Concept of Operations and ESF #8 Operational Plan in conjunction with MEMA, primary, and supporting agencies for this ESF.
- Designate an individual(s) who will report to the SEOC upon activation and will act as the Emergency Coordinating Officer (ECO) for ESF #8 (ensure alternate ECOs for 24-hour availability).
- Provide leadership in directing, coordinating, and integrating the overall state efforts to provide health, medical, public health, mortuary/victim identification, personnel, supplies, equipment, and some social services assistance to the affected area.
- Direct and coordinate regional and county facilities in providing medical and public health assistance.
- Assure essential acute medical care hospitals at or near the disaster location are able to support disaster response activities.
- Monitor post-disaster health hazards by providing food inspection, as well as insect, vector, and vermin control.
- Provide status on bed availability of all hospitals and other health care facilities outside of the disaster area.
- Provide nursing personnel as available to assist in shelters, public health clinics, and other facilities.
- Coordinate emergency mortuary services.
- Coordinate protective actions with all licensed medical facilities before, during, and following a disaster and/or an emergency.
- Coordinate the assignment, reallocation, and use of public and private emergency medical vehicles to evacuate non-ambulatory patients in support of county requirements.

- Assist with the return of non-ambulatory patients.
- Provide oversight and technical direction for radiological/nuclear incidents.
- Provide oversight and technical direction as the lead state agency for biological incidents.
- On assignment, open and operate a system of regional and a state-level special medical needs shelter for individuals with special medical needs.
- Provide trained personnel (emergency response coordinators) as technical assistance for Hazardous Materials (HAZMAT) incidents within their level of training, and when such personnel are available.
- Coordinate with State Donations Management to organize and assign volunteer and donated health resources to disaster areas.
- Issue directives for the acceptance, handling, and quarantine of food donations.
- Coordinate emergency medical, environmental, and sanitation services including water supply and wastewater disposal with appropriate ESFs.
- Coordinate the evacuation, care, and sheltering of individuals entering regional and state-level special medical needs shelters with ESF #6.
- Facilitate the identification of victims in emergency mortuary services by providing body bags and other essential public health supplies to local authorities.
- Coordinate with ESF #3 to obtain trained personnel to evaluate the structural integrity of affected health care facilities.

University of Mississippi Medical Center- Primary Agency

- Develop a CONOPS plan in conjunction with MSDH.
- Develop applicable standard operating guidelines (SOGs) for all primary responsibilities assigned.
- Designate an individual(s) who will report to the SEOC upon activation and will act as a primary agency ECO for ESF #8 (ensure an alternate ECO for 24-hour availability).
- Provide additional liaison(s) in support of other incident command structures as requested.
- As the only in-state academic medical center and Level I trauma center, coordinate response activities that address the short-term, direct effects of an incident and mitigating activities in order to provide a faster response in emergency situations.
- Mississippi MEDCOM coordinates patient movement and interoperable communication of emergency medical response statewide for all resources assigned by PHCC.
- Develop applicable plans for Mississippi State Medical Assistance Teams for a tiered response that will include but not be limited to triage, treatment, shelter, and staging.

- Train and roster teams that can serve to augment staffing needs of health care facilities affected in disasters; serve in special medical needs shelters, local, regional or state; participate in rapid needs assessment teams; provide immediate triage and transportation of the sick and injured; staff mobile field hospitals.
- Develop plans, procedures warning and communication systems, training and exercises, and mutual aid agreements; response activities that address the short-term, direct effects of an incident including immediate actions to save lives, protect property and meet basic human needs.
- Provide air ambulance support and coordinate air operations as assigned.
- Provide medical control to out-of-state emergency medical services as assigned.
- Provide statewide medical control to statewide emergency medical service resources.
- Provide just-in-time and/or advanced training to healthcare providers as assigned.
- Provide toxicological support as requested.
- Assist with data collection and epidemiological support.
- Augment essential acute medical care hospitals at or near the disaster location to ensure support of disaster response activities.
- Monitor post-disaster health hazards and report as applicable.
- Provide status on bed availability of all hospitals and other health care facilities outside of the disaster area.
- Provide nursing personnel as available to assist in shelters, public health clinics, and other facilities.
- Coordinate the assignment, reallocation, and use of public and private emergency medical vehicles assigned by the PHCC.
- Coordinate the return of non-ambulatory patients.
- On assignment, assist in the operation of regional and/or state-level special medical needs shelters for individuals with special medical needs.
- Provide technical assistance for HAZMAT incidents through the Mississippi Poison Control Center when requested.
- Coordinate with State Donations Management (See separate annex) to organize and assign volunteer and donated health resources to disaster areas. UMMC will be primary for donated pharmaceuticals.
- Assist in coordination of the evacuation, care, and sheltering of individuals entering regional and state-level special medical needs shelters with ESF #6.

All Primary and Support Agencies

- Designate a primary and alternate ECO to report to the ESF #8 PHCC and/or the SEOC.

- Ensure that adequate communications are established and maintained.
- Support the resource pool by providing available resources as needed.
- Coordinate the efforts through a liaison to ESF #5 if needed.
- Assist in gathering and providing information to ESF #5 for establishing priorities and to ESF #15 for press releases.

Support Agencies

Agency	Functions
Mississippi Department of Agriculture and Commerce	<ul style="list-style-type: none"> • Inspect and certify quality of food to minimize the potential for spoilage and disease. • Provide control and inspection to mitigate vectors of disease such as insects and vermin.
Mississippi Board of Animal Health	<ul style="list-style-type: none"> • Coordinate burial and/or disposal of animal carcasses. • Review and authenticate out-of-state veterinary licenses and certification for in-state use as directed by the state licensing board. • Organize according to the National Incident Management System (NIMS) to ensure rapid response to animal care needs in the disaster area. • Coordinate emergency medical care for all animals. • Coordinate the development, education, and activation of the Mississippi Animal Response Team (MART). • Coordinate with ESF#8 the identification, prevention, and control of diseases of animals that have public health significance. • Coordinate support for sheltering of pets for persons within special medical needs shelters.
Mississippi Department of Environmental Quality	<ul style="list-style-type: none"> • Provide sanitation services to water and wastewater treatment plants. • Provide sanitation services to all community and centralized wastewater systems as needed.
Mississippi Department of Mental Health	<ul style="list-style-type: none"> • Provide mental health services to disaster victims, including crisis counseling. • Review and authenticate out-of-state medical and professional licenses and certification for in-state use for volunteers. • Provide 24-hour ECO to the ESF #8 support cell to liaise mental health operations.

Agency	Functions
Office of the State Medical Examiner	<ul style="list-style-type: none"> • Designate at least one ECO to serve on the State Mass Fatality Task Force when activated. • Provide and coordinate victim identification and emergency services through ESF #8 Mass Fatality Task Force and autopsies if required. • Control of fatalities in coordination with the respective county coroners through the Mass Fatalities Task Force. • Arrange for transportation and storage of bodies through the Mass Fatalities Task Force. • Assist in the dissemination of any information to the families of the deceased through the Mass Fatalities Task Force.
Mississippi Military Department	<ul style="list-style-type: none"> • Provide logistical support such as transportation, petroleum, water purification, and other items as needed. • Provide transportation services for victims of disaster. • Transport civilian medical personnel to disaster sites and/or local or regional medical facilities.
Mississippi Department of Rehabilitation Services-Vocational Rehabilitation	<ul style="list-style-type: none"> • Coordinate the evacuation, care, and sheltering of special medical needs populations.
Mississippi Veterinary Medical Association	<ul style="list-style-type: none"> • Coordinate veterinary services and animal care with MSDH and the MBAH.
Mississippi Division of Medicaid	<ul style="list-style-type: none"> • Promote and disseminate as needed Medicaid customer service and assistance.
Mississippi Board of Medical Licensure	<ul style="list-style-type: none"> • Provide credentialing and investigative service for volunteer physicians both in and out of state. • Provide assistance in placement of volunteer physicians during an emergency.
Mississippi Board of Nursing	<ul style="list-style-type: none"> • Provide credentialing and investigative service for volunteer nurses both in and out of state. • Provide guidance in placement of volunteer nurses during and emergency.
Mississippi Institutions of Higher Learning	<ul style="list-style-type: none"> • Provide resources in support of special needs sheltering. • Provide multilingual support.
Mississippi State Board of Community and Junior Colleges	<ul style="list-style-type: none"> • Provide regional special medical needs shelters as deemed appropriate by the ESF #8 PHCC. • Open, mobilize, and support the operation of regional special medical needs shelters as needed in coordination with the ESF #8 PHCC. • Provide personnel and necessary logistical support including security, healthcare providers, ancillary service, and transportation as needed for special medical needs shelters.

Agency	Functions
Mississippi Pharmacy Board	<ul style="list-style-type: none"> • Provide credentialing and investigative service for volunteer pharmacists both in and out of state. • Provide assistance in placement of volunteer pharmacists during an emergency.
Network 8 Incorporated	<ul style="list-style-type: none"> • Track and make available to the public the open and closed status of dialysis facilities in affected areas. • Assist patients in identifying dialysis facilities that can provide ESRD services. • At the direction of CMS, provide information to family members attempting to locate relatives. • As appropriate, provide other coordinating services in support of patient access to care.

ESF Review and Maintenance

As a minimum, the ESF #8 Coordinator will coordinate a bi-annual review of this annex with all support agencies. Additional reviews may be conducted if experience with a significant incident or regulatory changes indicate a need. Recommended changes will be submitted through the ECO to MEMA for approval, publication, and distribution.

Appendices

- Appendix 1 - MSDH District Map
- Appendix 2 - Mental Health MR Facilities Map
- Appendix 3 – Mississippi Hospitals by Types of Facilities
- Appendix 4 - Acronyms

PUBLIC HEALTH DISTRICTS

Northwest Public Health
District I
 662-563-5603

Northeast Public Health
District II
 662-841-9015

Delta/Hills Public Health
District III
 662-453-4563

Tombigbee Public Health
District IV
 662-323-7313

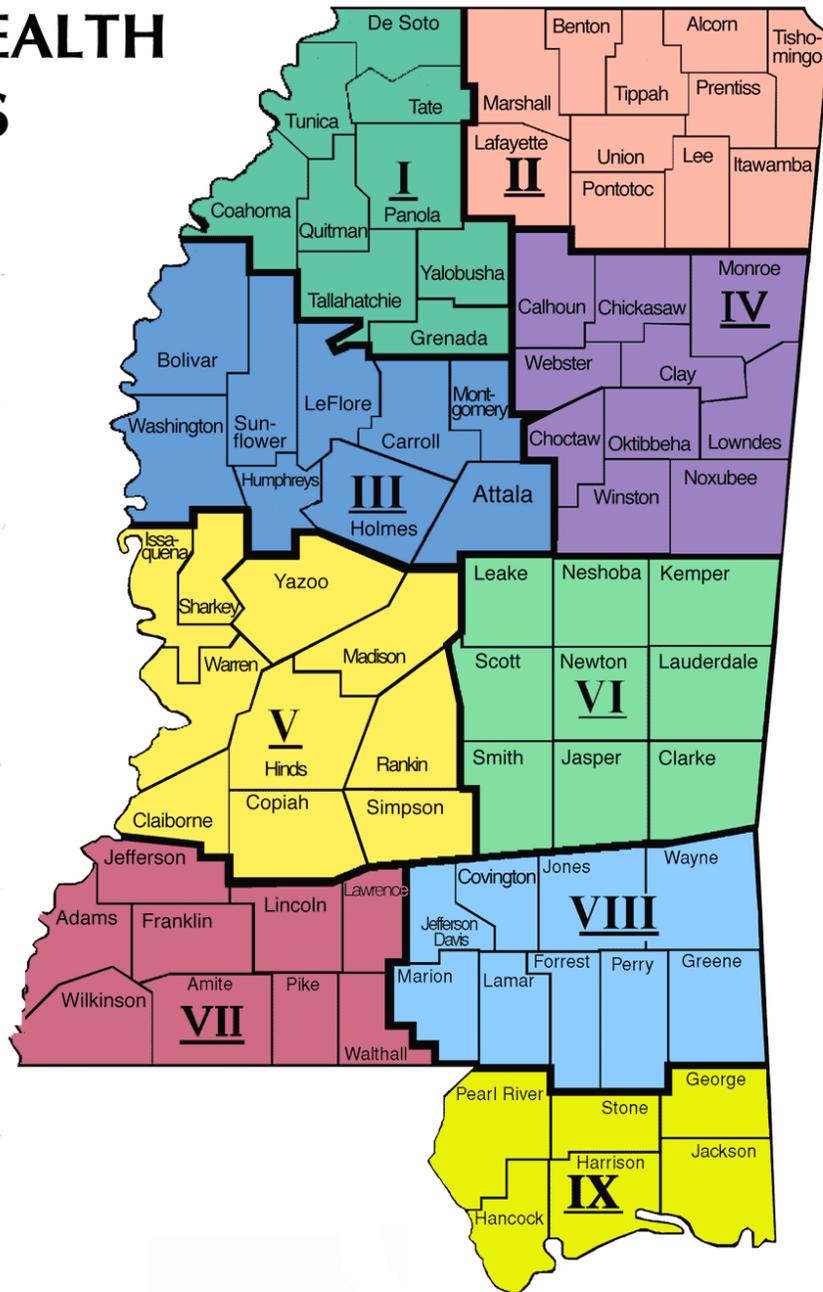
West Central Public Health
District V
 601-978-7864

East Central Public Health
District VI
 601-482-3171

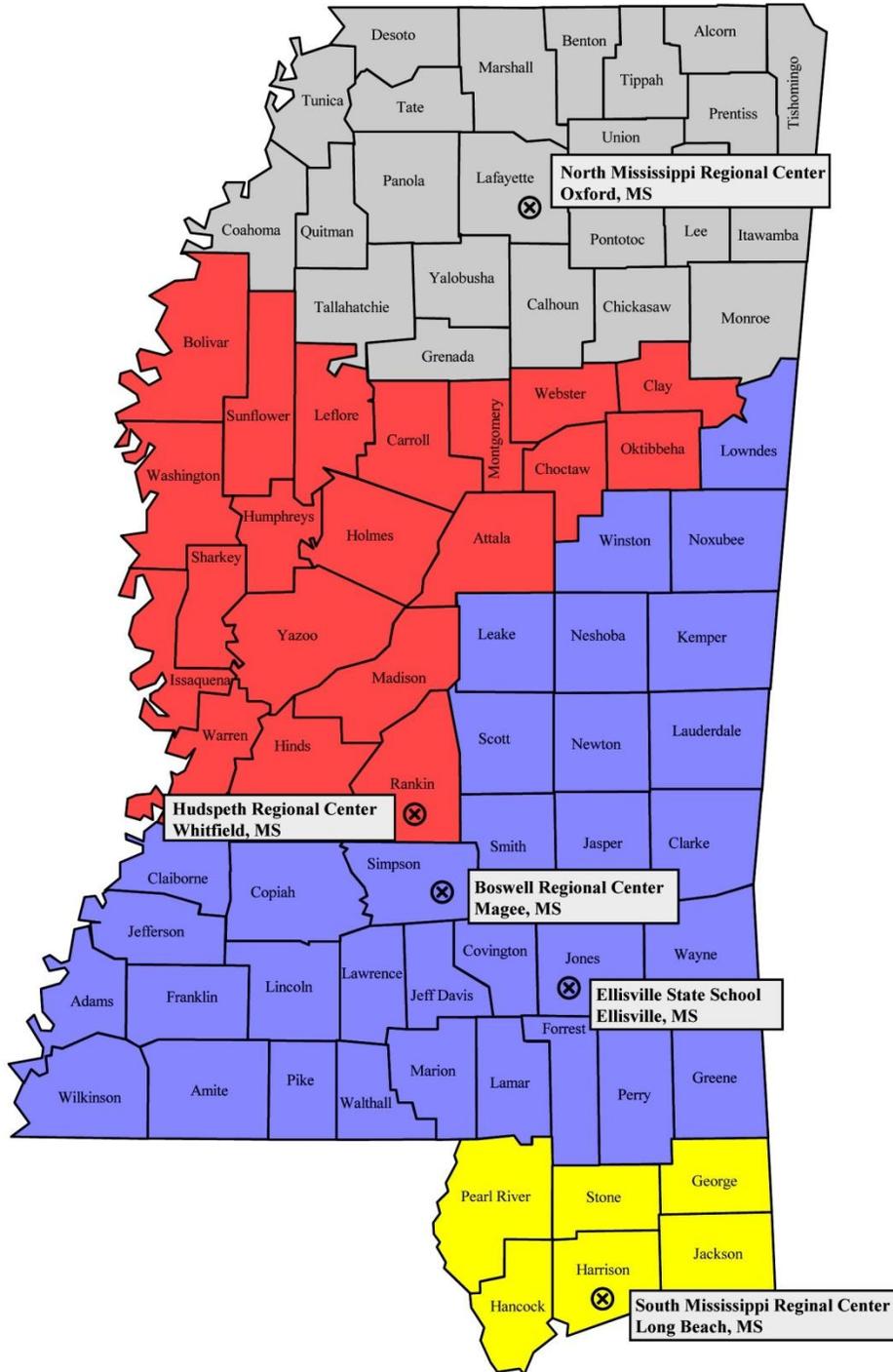
Southwest Public Health
District VII
 601-684-9411

Southeast Public Health
District VIII
 601-544-6766

Coastal Plains Public Health
District IX
 228-831-5151

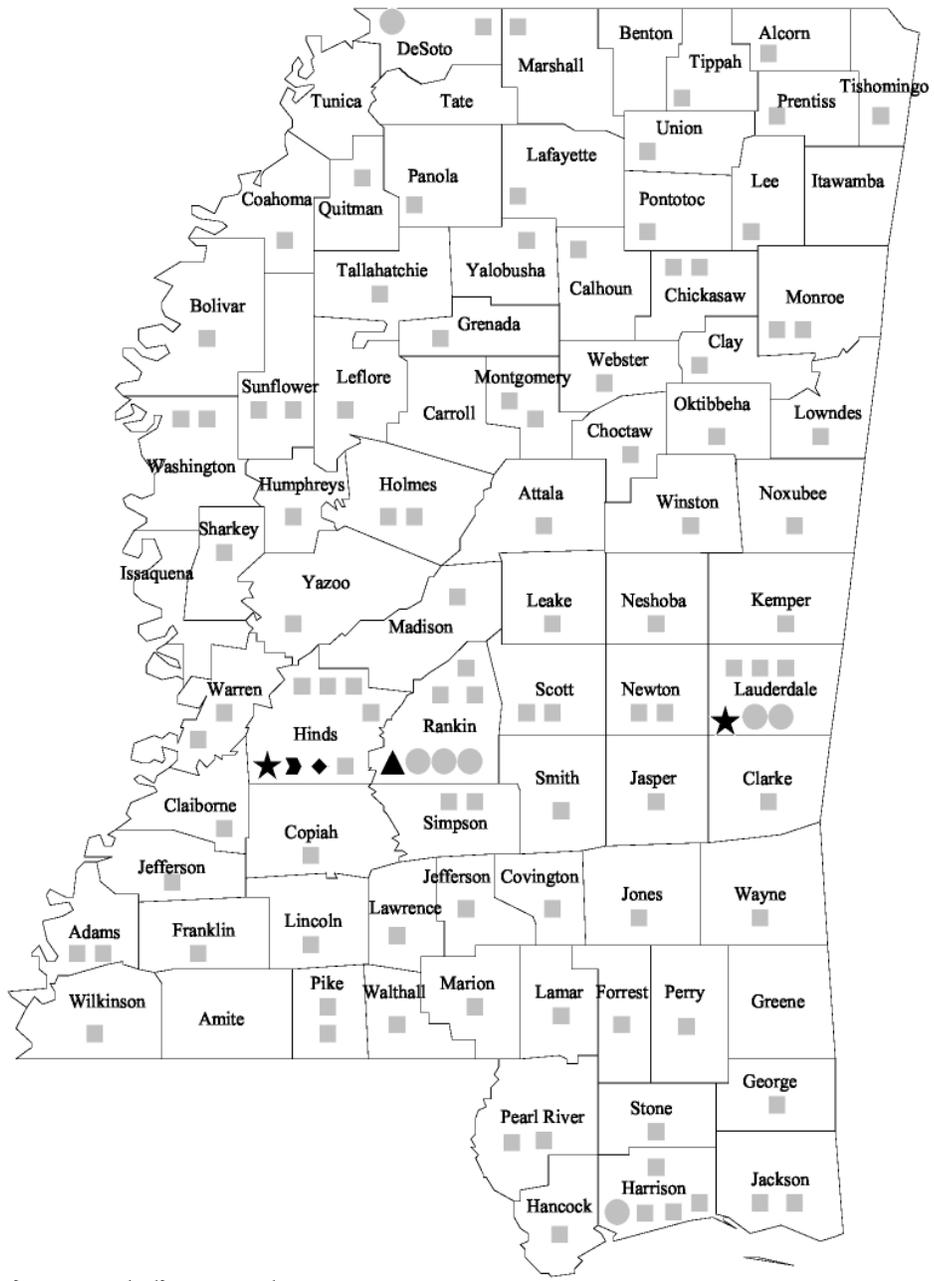


State-Run Facilities for Persons with Mental Retardation/Developmental Disabilities



Distribution of Mississippi Hospitals by Type of Facility and County

■	Medical Surgical	100
●	Psychiatric/Mental	7
▸	Alcoholism and Chemical Dependency	1
◆	Rehabilitation	1
▲	OB/GYN	1
★	Long Term Acute	2



Note: Type of facility indicated represents the one category selected by the facility as being the best description of the type of service provided to the majority of admissions.

Includes East Mississippi State Hospital, Mississippi State Hospital, Oak Circle Center, and Whitfield Medical Surgical Hospital.

APPENDIX 4-Acronyms

CONOPS	Concept of Operations
DHP	Director of Health Protection
EMAC	Emergency Mutual aid Compact
EOC	Emergency Operations Center
ESAR-VHP	Emergency Services Advanced Registration-Volunteer Health Professional
ESF	Emergency Support Function
HAZMAT	Hazardous Material
MART	Mississippi Animal Response Team
MBAH	Mississippi Board of Animal Health
MEMA	Mississippi Emergency Management Agency
MHRT	Mississippi Health Response Team
MMRT	Mississippi Mortuary Response Team
MSDH	Mississippi State Department of Health
PHCC	Public Health Command/Coordination Center
PIO	Public Information Officer
SEOC	State Emergency Operations Center
SERT	State Emergency Response Team
SMAC	Statewide Mutual Aid Compact
SMAR	State Medical Response System
UMMC	University of Mississippi Medical Center