## **Primary Agency**

• Allen County Health Department

## **Support Agencies**

- Allen County Commissioners Office
- Allen County Coroner's Office
- Allen County Citizen Corps
- Allen County Medical Reserve Corps
- Allen County Office of Homeland Security & Emergency Management
- Allen County Engineers Office
- Allen County Sheriff Office including local police departments
- Allen County Veterinarians
- City of Lima Public Works
- City of Lima Police Department
- City of Lima City Fire Department, including local fire departments
- DHHS Centers for Disease Control
- Department of Homeland Security
- Federal Emergency Management Agency
- Ohio Emergency Management Agency
- Ohio Department of Health
- Ohio Department of Agriculture

## **Non-Government Agency Support Organizations**

- American Red Cross
- Bluffton Hospital
- Lima Area Chamber of Commerce
- Lima Memorial Hospital
- Local Health Care Providers
- St. Rita's Medical Center
- Security Services, contractor
- Television station WLIO TV 35, Fox 25, ABC 18
- Temperature Controlled Storage and Transportation Services
- Pharmacy

#### I. INTRODUCTION

The Allen County Health Department, hereinafter referred to as ACHD, has certain responsibilities as part of its routine activities. Among these is the responsibility to develop and maintain a strong public health infrastructure capable of addressing and responding to a bioterrorism, terrorism, unintentional, or naturally occurring event that results in a public health threat or emergency.

The following objectives are the responsibility of ACHD in the event of an attack or disaster, to protect and maintain the public's health and to reduce the incidence of morbidity and mortality:

- Assist in hazard identification (initial identification and confirmation of bio-agent hazards). Safe food, water, sewage and refuse disposal, rodent and vector control, as well as the control of communicable diseases must be evaluated
- Determine and order public health protective actions
- Coordinate and provide protective measures as ordered by the Health Commissioner or designee in coordination with the medical community and other partners
- Initiate communicable disease interventions appropriate to stop transmission and propagation of the disease or infectious agent
- If evacuation centers are opened, ensure that safe food service operations, water supply, sewage and refuse disposal, rodent and vector controls are maintained, and that the spread of any communicable disease is minimized.
- If necessary order isolation, quarantine, evacuation or social distancing measures.
- Provide a representative to the County EOC when activated.

## A. Purpose

The purpose of this Public Health and Medical Services Annex is to provide a framework for identifying, responding to, and controlling public health emergencies in Allen County. The plan details local response activities to be taken by local public health before, during, and after a public health emergency. Public health activities at the local level will be coordinated through The Allen County Health Department, Departmental Operations Center.

This plan follows guidance by the U.S. Department of Health and Human Services (DHHS) and the Ohio Department of Health (ODH). It is also compliant with the National Incident Management System (NIMS) developed by the Federal Emergency Management Agency. It is meant to be a dynamic document and will be regularly reviewed and updated as new information on the public health threats and emerging issues arise.

## B. Scope

The Allen County EOP is structured on 15 Emergency Support Functions (ESF) that correspond to the format of the National Response Plan. Each ESF is headed by a Primary Agency that coordinates activity under that function. The Primary Agency is supported by a number of Support Agencies, which are selected based upon their legislative authorities, knowledge, resources, and capabilities. The ESF is the primary mechanism for management of local emergency response operations, and through which state assistance to local governments is managed during emergencies. State assistance can include the allocation of state resources and technical assistance and the coordination of federal, interstate, intra-state, local government and non-government agencies in response to emergency events or incidents.

The ESF's detail the roles and responsibilities of county and other public and private agencies that are charged with carrying-out functional missions to assist local jurisdictions in response to emergency events or incidents. Each primary and support agency has internal plans and procedures that detail how it will address responsibilities during county-level emergencies. Support agencies are not required to address any emergency responsibilities that are contrary to the laws or policies that govern their organizations.

The purpose of this plan is to ensure that the ACHD can efficiently and effectively meet the healthcare needs of our community when confronted by the impact of a natural or human-induced emergency. This plan determines, to the extent possible, emergency management actions to be taken by the Health Department to:

- 1. Prevent/Mitigate
- 2. Prepare
- 3. Respond
- 4. Recover

This plan is developed with the intent to provide guidance in the event of a public health emergency, and is not intended to be exhaustively definitive for all disaster situations.

In a public health emergency, it is anticipated that the ACHD will act as the lead in a unified command structure. When the ACHD department of operations center is activated, membership shall include management representatives from the local hospital(s) to assist with strategic planning. The hospital representatives at the ACHD DOC may be a part of a unified incident command structure and shall assume the

statutory responsibility to make decisions on behalf of the health care facility he/she is representing.

The ACHD Emergency Operations Base Plan (EOP) outlines the Department's organization, policies, and responsibilities for support of national and state/local emergency operations. The plan describes the system for alerting, dispatching, and employing public health and medical resources during a disaster or emergency event. Discrimination on the grounds of age, sex, religion, nationality, physical/psychological impairment, or economic status is prohibited in the execution of this plan.

## C. Policies

The Allen County Health Department maintains a number of departmental policies, incident specific annexes and standard operating procedures and guidelines, which by reference are incorporated into this Public Health and Medical Services Annex. ACHD policies include:

- ACHD Emergency Call Policy
- After Hours Message Policy
- Airborne Pathogen Exposure Control Plan
- Blood & Body Fluid Exposure Control Plan
- Disease Reporting
- Fire Plan 219 E. Market Street Building
- Fire Plan Family Planning Building
- Fire Plan WIC Building
- HAN Policy
- HazCom Plan
- MARC's Policy
- Mutual Aid Policy
- OPHCS Policy
- Shelter in Place or Evacuation
- Spill Containment & Clean-Up Procedures
- Suspicious Person in Building
- Tornado-Severe Weather Emergency

## 1. Specific Incident Annexes

Specific Incident Annexes address contingency or hazard situations requirting specialized application. The Incident Annexes (See ACHD Emergency Operations Base Plan Appendices) describe the missions, policies, responsibilities and coordination processes that govern the interaction of public and private entities engaged in incident management and emergency response operations. These annexes address the following types of incidents:

- Biological or infectious disease
- Natural disasters
- Food and agricultural disasters
- Nuclear or radiological
- Oil and hazardous materials

## 2. Standard Operating Procedures

In addition a number of standard operating procedures and guidelines are pertinent to this plan. They, like the Specific Incident Annexes, can be found in the ACHD Emergency Operations Base Plan. They include:

- Epidemiology and Surveillance
- Mass Prophylaxis
- Casualty Management
- Quarantine Isolation
- Evacuation /Shelter in place
- Risk communications
- Laboratory
- Hospital/health care provider status reporting
- Personnel Protective Equipment
- Biological agents health effects and decontamination
- Nuclear/radiation/chemical health effects and decontamination
- Strategic National Stockpile
- Mental health
- Communication
- Morgue
- Security
- Water Supplies
- Solid Waste Disposal/Handling Information
- Veterinary Staff Officer
- Health Services and Supply Sources
- Strategic National Stockpile (SNS)

#### II. SITUATION & ASSUMPTIONS

## A. Situation

- i. Allen County is exposed to many hazards, all of which have the potential to disrupt the community and cause damage to lives and property. These hazards include, but are not limited to, disease outbreaks, floods, tornadoes, thunderstorms, winter storms, blizzards, earthquakes, forest and brush fires, drought, biological incidences, hazardous material incidences, acts of terrorism, major transportation incidents, and civil disorder.
- ii. Complications affecting the health of the community include diseases, sanitation problems, and the contamination of food and water that may occur in conjunction with emergencies.
- iii. The Allen County Health District (known herein as ACHD) is located at 219 East Market in Lima, Ohio, is a countywide public health agency.
- iv. During declared emergencies, the Health Department may obtain additional health personnel from adjacent counties, Northwest Ohio Region, State Department of Health, and Red Cross (ref: Annex H, Tab 1).

## **B.** Assumptions

- i. The Allen County Combined Health District is a public health agency serving all of Allen County, including 12 townships, 8 villages and the cities of Lima and Delphos
- ii. This annex applies primarily to disasters that may have a major impact on the health of the citizens in Allen County.
- iii. The majority of incidents will only require a local response.
- iv. Although health problems may be associated with disasters, there is an adequate local capability to meet the demands of most situations. When necessary, support will be available from state and federal health agencies.
- v. All levels of government have the responsibility to provide for the health, welfare and safety of the citizens of Allen County.
- vi. Upon the occurrence of a disaster, each level of government must commit all available resources, including mutual aid, prior to requesting additional assistance.
- vii. Medical resources may be damaged, destroyed or otherwise taxed beyond capacity in affected areas.

- viii. Public health resources may be taxed beyond capacity: Affected individuals may need food, shelter, water, and medical/psychological services.
  - ix. Affected hospitals may not have the required staff to meet all the situations following an event.
  - x. Resources normally available for day-to-day use will be immediately available for support of any public health emergency.
  - xi. The level of participation of the ACHD in emergency response will depend on the nature of the hazardous event.
- xii. When a hazardous event involves chemicals, explosives or catastrophic natural disasters, the ACHD plays a supportive role to other emergency response agencies at the local and federal level.
- xiii. When regional resources (personnel) assist local jurisdiction, they will work within the requesting jurisdiction's incident command structure.
- xiv. When there are multiple incident command posts within a jurisdiction, it is recommended that a Local Unified Area Command post be established. Incident command posts may be operated by multiple agencies within the jurisdiction, such as public health, law enforcement, fire, and hospitals.
- xv. When an incident of significance crosses jurisdictional boundaries, or has regional implications, an assessment meeting should be conducted with representatives from all of the public health jurisdictions, hospitals, local emergency management agencies, NWO regional coordinators, and ODH to determine the appropriate regional response, and to develop incident objectives and strategies.
- xvi. When an incident of significance crosses jurisdictional boundaries, and the assessment meeting concludes that there are regional implications, or it requires a regional response a Regional Multi-Agency Coordination Entity should be established. Due to logistical, physical and political constraints, when the Regional Multi-Agency Coordination Entity is established representatives may be in person or virtual.
- xvii. In the event of a public health emergency, the Health Department could receive local, regional, state and/or Federal assistance. While it is likely that outside assistance would be available in most disaster situations, and while plans have been developed to facilitate this assistance, it is necessary for the Health Department to plan for and be prepared to carry out response and short-term recovery operations on an independent basis.

- xviii. Outside assistance would complement, and not supplant, the Health Department's own operating system.
  - xix. All agencies involved operate under the National Incident Management System (NIMS) and the Incident Command Structure (ICS).

#### Bioterrorism Incidents

- i. When a biological agent is involved, the ACHD will be the lead agency in the emergency response
- ii. A bioterrorist attack may or may not be preceded by a warning or a threat, and may at first appear to be a natural outbreak of infectious disease.
- iii. The biological agent used in the attack may quickly dissipate or, under some circumstances, may persist in the environment.
- iv. Initial victims of a bioterrorism incident may be identified at a distance from the actual site of attack.
- v. There may be a delay in identifying the biological agents present and in determining the appropriate protective measures.
- vi. The presence of a biological agent may not be recognized until sometime after casualties occur.
- vii. The number of casualties resulting from a bioterrorist attack may depend on how quickly the biological agent can be identified.

## • Terrorism Incidents

- Terrorist attacks usually target population centers and buildings or facilities that conduct operations for government, transportation, or industry.
- ii. A hazardous incident may or may not be initially recognized as an act of terrorism.
- iii. An act of terrorism may result in large numbers of casualties, including fatalities.
- iv. A terrorist attack may require a response effort that involves local, state and federal governments.
- v. An act of terrorism may affect multiple locations.

- vi. A terrorist attack may be accompanied by fire, explosion, or other acts of sabotage.
- Natural Disasters Incidents
  - **i.** Few deaths and critical injuries are expected, except if accompanied by flooding, in which case drowning may occur.

Damage to medical and health care facilities may occur.

#### III. CONCEPT OF OPERATIONS

The following objectives are the responsibility of the Health Department in an emergency:

- Gather all known data on the nature of the disaster and evaluate the threat to public health.
  Determine the most appropriate protective actions for the public to follow. The accuracy and speed in making public health statements is crucial in minimizing the adverse results of an emergency. Utilize resources as needed.
- Provide the public with health precaution information (disease and/or injury prevention) through the news media and the OHSEM Director.
- If evacuation centers are opened, ensure that safe food service operations, water supply, sewage and refuse disposal, rodent and vector controls are maintained, and that the spread of any communicable disease is minimized. Environmental and Nursing Divisions will be responsible for these functions.
- Safe food, water, sewage and refuse disposal, rodent and vector control, as well as the control of
  communicable diseases must be evaluated. Provide the public with clean-up and health
  precaution measures following an incident.

#### A. General – Public Health Functions

- 1. Local, state and federal laws regulate the County Health Department. The Board of Health appoints the Health Commissioner and advises on, or assigns additional responsibilities.
- 2. The Health Commissioner serves as the overall Public Health Coordinator and is responsible for assessing the hazard relating to any existing or anticipated public health threats and the environmental impact of an accident, health threats and the environment of an emergency.
- 3. It is the responsibility of the Health Commissioner and Health Department Staff to protect the residents of Allen County during any incident, natural or manmade, that threatens the public's health and safety; and, to assist the Allen County OHSEM in implementing the county's Emergency Operations Plan and/or Hazardous Materials Emergency Plan.
- 4. The health department, through our internal response plan, will work in coordination with Allen County OHSEM under the National Incident Management System (NIMS) and the Incident Command System (ICS).
- 5. In the event the incident extends beyond Allen County boundaries, local plans will coordinate under the Unified Command System with regional, state and federal authorities, operating under the NIMS. When the emergency exceeds the local capability to respond, assistance will be requested from one or more of the following:

• Ohio Department of Health

- Northwest Ohio Regional Medical Response System (RMRS)
- Partner health districts through existing mutual aid agreements
- When State resources have been exceeded and a state of emergency declared, federal assistance may be requested
- 6. When a county emergency is declared, the Health Commissioner activates the Health Department Emergency Response Plan. The Health Commissioner or designee will report to the County Emergency Operations Center, in the Allen County Justice Center (alternate site is the American Red Cross building), or other location deemed appropriate by the OHSEM Director. As needed, additional Health Department staff will be called upon to perform public health services.

#### **B.** Pre-Incident Actions

- 1. Immunize county residents against disease(s).
- 2. Provide continuous health and sanitation inspections.
- 3. Research and address the prevention, detection, and control of communicable diseases.
- 4. Develop and regularly update the Health Department Response Plan.
- 5. Develop and regularly update Health Department SOGs.
- 6. Develop procedures for supplemental water supplies, back-up sanitation measures, water and food quality testing and garbage disposal and sewage treatment.
- 7. Develop volunteer resources; Medical Reserve Corp

#### C. Incident Actions

- 1. Provide public information programs.
- 2. Initiate disease control operations.
- 3. Augment staff as necessary.
- 4. Request material support from other health departments and related organizations through EOC representative.
- 5. Maintain sanitation activities.
- 6. Coordinate environmental health activities regarding waste and refuse disposal, food and water quality, and vector control.

#### **D.** Post – Incident Actions

- 1. Compilation of health reports as required by local, state, and federal officials.
- 2. Inspecting deactivated shelters for sanitation and vermin control.
- **3.** Continuation of response activities, as needed.

#### IV. ASSIGNMENT OF RESPONSIBILITY

#### A. General

- 1. The Health Commissioner or designee is responsible for the planning and coordination of all public health services on a daily basis and is responsible for directing operational response of departmental personnel during a major emergency.
- 2. The County District Board of Health oversees the operations of the Health Department and may assign additional program responsibilities.

## **B.** Responsibilities of the Health Department

The Health Department Representative to the EOC will:

- 1. Provide direction and guidance for public health activities during emergencies.
- 2. Maintain communications with the Health Department DOC.
- 3. Implement the Public Health Annex when necessary.
- 4. Convey resource plans from Health Department DOC for health services.
- 5. Provide appropriate information on protective measures to be taken by the public through the Public Information Officer.
- 6. Provide support for other response forces as necessary.

#### The Health Department Staff will:

- 1. Evaluate the potential health risks associated with the hazard and recommend appropriate protective measures.
- 2. Inspect for purity, usability, and quality control of vital foodstuffs, pharmaceuticals, water, and other consumables.
- 3. Coordinate with the water, public works and sanitation departments to ensure the availability of potable water, effective sewage disposal, and sanitary garbage disposal.
- 4. Establish preventive health services, including the control of communicable diseases.
- 5. Provide disease surveillance, case investigation, and follow-up.

- 6. Monitor food handling, mass feeding and sanitation service in emergency facilities.
- 7. Ensure adequate sanitary facilities are provided in emergency shelters.
- 8. Implement action to prevent or control vectors such as flies, mosquitoes, rodents, and work with veterinarians to prevent the spread of disease through animals.
- 9. Coordinate with neighboring areas and the State Health Department on matters requiring outside assistance.
- 10. Coordinate health-related activities among other local public and private response agencies or groups (to include veterinarians).
- 11. Coordinate operations for general or mass emergency immunizations or quarantine procedures. During an emergency the Health Department will utilize all local resources; if additional assistance is required the State Health Department may be contacted.
- 12. Data related to disease outbreaks will be forwarded to appropriate State and Federal officials.
- 13. Testing of materials will be accomplished under normal procedures used by the Health Department.
- 14. Inspections of critical facilities will be conducted with increased frequency during emergencies as man power permits.
- 15. The Health Department maintains notification/recall rosters, and maps and charts of Allen County.
- 16. The Health Department will protect all essential records, such as medical records, immunizations, etc.

#### C. Responsibilities of Support Agencies

- 1. Allen County OHSEM
  - Logistical support for Health Department operations will be coordinated through the EOC.
- 2. Hospitals

o Maintain liaison with Health officials.

- Provide medical care, hospitalization, and communications as needed and available.
- o Laboratories that provide testing for water, food, environmental contaminates and diseases and sources for equipment, chemicals and medications related to health services are listed in Annex H, Tab 1.

#### 3. American Red Cross

- o Provide nursing staff as requested.
- o Assist in handling injuries.
- o Inform families on the status of missing persons.
- **4.** School Systems provide school facilities for evacuation, shelters, medical clinics, etc.

## **5.** State Health Department

- o Provide support to the Local Health Department as requested.
- o Provide supplies and resources as requested.

#### 6. Ohio EPA

- o Monitor contamination and pollution of public water supplies.
- o Decontamination of public waterways for use as in potable water supplies.

## V. PLAN DEVELOPMENT & MAINTENANCE

## A. Plan Development

The Health Commissioner is responsible for reviewing this annex, ensuring that changes to this annex are prepared and coordinated based upon deficiencies identified by exercises, emergencies and changes in governmental structure. The Allen County Emergency Management Director will publish and forward all revisions to all applicable organizations.

#### **B.** Maintenance

Additional SOGs, mutual-aid agreements, and equipment inventories will be developed as directed by the Health Commissioner.

## **VI.** AUTHORITY & REFERENCES

## A. Authority

ORC 3707 and 3709, The Ohio Administrative Code, Chapter 3701 and local regulations.

## **B.** References

Guide For The Development Of State And Local emergency Operations Plans, CPG 1-8/September, 1990. Federal Emergency Management Agency.

Guide For the Review of State and Local Emergency Operations Plans. CPG 1-8A/September, 1988. Federal Emergency Management Agency.