Kentucky’s Emergency Support Function (ESF) 8 – Public Health and Medical Services Annex

June 14, 2017
APPROVAL AND IMPLEMENTATION

Kentucky’s Emergency Support Function (ESF) 8 – Public Health and Medical Services Annex was fully revised and updated in 2017 and is hereby approved for implementation. This document may be amended by the Kentucky Department for Public Health (KDPH) as outlined in the Annex Development and Maintenance section. This revision supersedes all previous versions.
# RECORD OF CHANGES

KDPH’s ESF 8 Planning Coordinator shall ensure any changes made to this annex outside the official cycle of annex review and update are documented and distributed using the following Document Change Record as outlined in the [Annex Development and Maintenance](#) section.

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OVERVIEW

ESF 8 Coordinator
KY Department for Public Health

Primary Agencies
KY Department for Public Health
KY Board of Emergency Medical Services
KY Community Crisis Response Board

Non-Governmental Organizations/ Private Support Agencies
American Red Cross
KY Hospital Association
KY Pharmacists Association
KY Regional Poison Control Center
University of Louisville Emergency Preparedness for Aging Program

Local Support Agencies
Local Health Departments
Regional Healthcare Coalitions

FEMA Region IV Support Agencies
FEMA Region IV Unified Planning Coalition

Federal Support Agencies
U.S. Department of Health and Human Services
  • Assistant Secretary of Preparedness and Response
  • Centers for Disease Control and Prevention
  • U.S. Food and Drug Administration
U.S. Department of Veterans Affairs

State Support Agencies
Cabinet for Health and Family Services
  • Department for Aging and Independent Living
  • Department for Behavioral Health, Developmental and Intellectual Disabilities
  • Department for Community Based Services
  • Department for Medicaid Services
  • KY Governor’s Office of Electronic Health Information
  • Office of Communications
  • Office of Inspector General
KY Department of Agriculture
KY Department of Military Affairs
  • KY Division of Emergency Management
  • KY National Guard
KY Department of Veterans Affairs
KY Education and Workforce Development Cabinet
  • KY Commission on the Deaf and Hard of Hearing
  • KY Office for the Blind
KY Energy and Environment Cabinet
  • KY Department for Environmental Protection
KY Justice and Public Safety Cabinet
  • KY Department of Corrections
  • KY Medical Examiner’s Office/KY Coroner’s Incident Response Team
  • KY State Police
KY Labor Cabinet
  • Department of Workplace Standards
KY Transportation Cabinet
  • Division of Incident Management
Purpose

The Emergency Support Function (ESF) 8 – Public Health and Medical Services Annex defines how Kentucky’s ESF 8 agencies will coordinate public health and medical related preparedness, response, and recovery activities for any incident/event (emergency, disaster, exercise, or planned event) that will require state-level coordination. Many of the agencies involved in ESF 8 activities have existing emergency plans and procedures that this annex is designed to complement and support.

Scope

The ESF 8 – Public Health and Medical Services Annex is the functional annex to the Commonwealth of Kentucky Emergency Operations Plan (EOP). The ESF 8 Agencies listed within this annex have the responsibility for coordinating state-level public health and medical support for the following capabilities:

- Behavioral and Mental Health Services
- Community Based Services Support
- Community Preparedness
- Community Recovery
- Critical Resources
- Disease Surveillance, Prevention and Control
- Environmental Health
- Fatality Management
- Mass Care Support
- Medical Evacuation and Transportation
- Medical Surge
- Public Information and Warning
- Radiological Incident Response
- Responder Safety and Health
- Volunteer Coordination

Assumptions

The following assumptions have been made in the development of this annex:

- Local agencies will contact the Kentucky Department for Public Health (KDPH) or the Kentucky Division of Emergency Management (KYEM) if state-level public health and medical support is required;

- ESF 8 operations will be coordinated through the KDPH’s State Health Operations Center (SHOC) and the state’s Emergency Operations Center (EOC), when activated;

- Primary ESF 8 Agencies will coordinate with ESF 8 Support Agencies to prepare for, respond to, and recover from any incident/event requiring public health and medical services;

- Situational awareness and dissemination of public information will be maintained through defined information sharing processes in coordination with local, state, and federal agencies. Common terminology will be used to include the acronyms and terms listed in Attachment 1;

- The declaration of an emergency or disaster issued by the Governor may suspend selected rules and regulations that affect public health and medical operations;

- Additional resources from local, state, interstate, and federal agencies will be needed to supplement and assist impacted jurisdictions to ensure continuity of medical and public health services;

- Additional resources will be needed to triage, transport, and treat casualties and/or evacuate patients to hospitals, long-term care facilities, or other medical facilities;
• Medical countermeasures and non-pharmaceutical interventions will be implemented to prevent the occurrence or spread of infectious diseases or chemical, biological or radiological contamination;

• Laboratory services are essential for the identification of chemical, biological, and radiological hazards on clinical and environmental specimens;

• Disasters will require evacuation/relocation of large populations to shelters. Shelter sites will require potable water, wastewater control, vector control, food safety inspections, epidemiological surveillance, and/or other public health measures;

• People with functional and access needs will require additional levels of support. People with medical support needs, including long term care, will require medical support and transportation to facilities equipped to provide required levels of service;

• An emergency or disaster will require crisis intervention and disaster behavioral health services for victims and response personnel;

• The Kentucky Medical Examiner’s Office and county coroners are responsible for managing mass fatality incidents, but will require support from other local and state agencies.

**CONCEPT OF OPERATIONS**

**General**

As the Coordinating Agency, KDPH will activate the SHOC to coordinate ESF 8 - Public Health and Medical Services in accordance with this annex and the KDPH SHOC Support Plan. The KDPH SHOC will coordinate operations with the state’s EOC, when activated;

The KDPH SHOC will operate under a defined Incident Command System (ICS) in compliance with the National Incident Management System (NIMS) as represented by the incident command structure in Attachment 2 and activation levels in Attachment 3;

The KDPH SHOC will coordinate with local, state, and federal agencies to evaluate and assess public health and medical needs in the impacted jurisdictions and coordinate public health and medical services. The public health and medical regional maps in Attachment 4 illustrate Kentucky’s healthcare regions that will be referenced for ESF 8 operations;

Interstate and federal assistance will be requested when state ESF 8 resources and capabilities are expected to be and/or are exceeded.

**Triggering Events**

ESF 8 Agencies will be notified whenever any of the following incidents/events are expected to and/or require public health and/or medical support, especially those resulting in high morbidity, major damage, or loss of life:

• **Manmade Incidents**: Hazardous material incidents, industrial accidents, radiological incidents, riots, terrorism (biological, chemical, radiological, explosive incidents), or transportation accidents;
• **Natural Incidents**: Animal/plant disease outbreaks, human disease outbreaks, disease cluster evaluations, droughts, earthquakes, floods, landslides, severe weather, or wildfires;

• **Requests for Assistance**: Any all-hazards incident, planned event, or exercise for which a local jurisdiction requests state-level public health and medical support, as applicable.

**Preparedness Phase**

ESF 8 Agencies listed in this annex will prepare for any incident/event requiring state-level public health and medical support by:

- Identifying threats and hazards through assessments;
- Developing emergency operations plans;
- Developing and maintaining mutual agreements;
- Maintaining 24-hour warning points;
- Maintaining alert and notification lists;
- Maintaining communication and incident management software systems;
- Prepositioning resources;
- Conducting and participating in training and exercises;
- Conducting disease surveillance;
- Coordinating ESF 8 support for planned events; Maintaining situational awareness.

**Response Phase**

The transition from preparedness to response will occur when there is an incident/event requiring state-level public health and medical support. KDPH will coordinate with ESF 8 Agencies to implement incident response strategies and state-level support to address public health and medical capabilities by:

- Receiving warnings from local, state, federal agencies;
- Activating the KDPH SHOC and assigning ESF 8 incident management personnel;
- Alerting and notifying ESF 8 incident management personnel and supporting agencies;
- Developing incident response strategies through operational planning;
- Maintaining situational awareness through information sharing;
- Providing behavioral health services;
- Providing support for community based services;
- Managing critical resources and personnel;
- Preventing the spread of infectious diseases;
- Coordinating support for environmental health operations;
- Coordinating support for fatality management operations;
- Coordinating support for mass care operations;
- Coordinating resources for medical evacuation and transportation;
- Coordinating support to meet medical surge demands;
- Developing and disseminating public information and warnings;
- Providing technical assistance and oversight for radiological incidents;
- Assuring the safety and health of responders;
- Providing oversight and program management for Medical Reserve Corps (MRC) volunteers.
Recovery Phase

The transition from response to recovery will occur when major operations have been completed and the need for state-level public health and medical support has been minimized or is no longer required. KDPH will coordinate with ESF 8 Agencies to continue needed response operations and/or to implement recovery operations for the following:

- Coordinating public health and medical support for community recovery;
- Demobilizing resources (personnel, equipment, and supplies);
- Deactivating the KDPH SHOC;
- Requesting state and/or federal reimbursement;
- Documenting response and recovery activities in After Action Reports/Improvement Plans (AAR/IP);
- Following up and implementing corrective actions.

ORGANIZATION AND ASSIGNMENT OF RESPONSIBILITIES

All ESF 8 Agencies

The ESF 8 Agencies listed within this annex have the following common responsibilities to prepare for, respond to, and recover from any incident/event. The matrix in Attachment 5 provides a graphic representation of each agency’s primary and support roles during the response and recovery phases.

Preparedness Phase

- Maintain agency specific emergency response plans and procedures;
- Identify agency representatives who can be contacted to provide support and technical assistance during and after-hours. These persons should maintain an account in KDPH’s alert and notification systems;
- Identify trained personnel for assignment to public health strike teams, as applicable. Personnel assigned to strike teams should be registered and credentialed in the Kentucky’s Health Emergency Listing of Professionals for Surge (KHELPs);
- Participate in planning, training and exercises to enhance preparedness efforts and evaluate emergency operations plans;
- Understand how to use incident management software systems as a means to receive alerts and share incident related information.

Response Phase

- Conduct situational assessments within their jurisdictional areas and provide status updates to the KDPH SHOC for integration into overall situational awareness;
- Assign personnel to provide technical or logistical support to the KDPH SHOC upon request;
- Coordinate the deployment of personnel and resources through the KDPH SHOC;
- Disseminate public health and medical messaging to constituents through ESF 15 – Public Information;
- Maintain accurate documentation of activities and expenses throughout an incident/event.
Recovery Phase

- Recover agency resources through coordination with the KDPH SHOC;
- Participate in After Action Reviews and development of AAR/IPs;
- Implement corrective action items as assigned.

Primary Agencies

Kentucky Department for Public Health (KDPH)

- Serves as the Coordinating Agency for the ESF 8 Primary and Support Agencies in the preparedness, response, and recovery phases;
- Collaborates with local, state, and federal agencies to develop and evaluate emergency operations plans through an active planning, training, and exercise cycle;
- Maintains spaces, equipment, supplies, incident management software systems, and interoperable communication systems to ensure ESF 8 can support and coordinate public health and medical operations;
- Registers key incident management personnel into incident management software systems to allow for notification and sharing of information;
- Maintains the 24/7 contact number of 1-888-9REPORT (973-7678) for disease reporting and public health emergencies;
- Maintains electronic surveillance systems to track and report notifiable diseases and conditions;
- Provides leadership in coordinating and integrating public health and medical preparedness, response, and recovery efforts for local health departments, hospitals, and other healthcare agencies;
- Assigns personnel to coordinate public health and medical services through KDPH’S SHOC and the state’s EOC;
- Activates and deploys public health and medical teams to provide support and technical assistance to affected jurisdictions;
- Coordinates requests for ESF 8 assistance through Mutual Aid, Emergency Management Assistance Compact (EMAC), and/or federal assistance.

Kentucky Board of Emergency Medical Services (KBEMS)

- Assigns personnel to coordinate emergency medical services (EMS) through KDPH’S SHOC and/or state’s EOC, as applicable;
- Coordinates the emergency notification of, and communication with, EMS agencies and personnel;
• Assembles and directs the deployment of EMS assets within the state to support public health and medical operations;

• Coordinates the credentialing of out-of-state EMS personnel responding to assist Kentucky during an emergency or disaster;

• Coordinates requests for ESF 8 assistance through Mutual Aid, Emergency Management Assistance Compact (EMAC), and/or federal assistance.

Kentucky Community Crisis Response Board (KCCRB)

• Assigns personnel to coordinate behavioral health services through KDPH’S SHOC and/or state’s EOC, as applicable;

• Maintains and publishes the toll free, 24/7 access phone number of (888) 522-7228 for behavioral health support;

• Coordinates the activation of Crisis Intervention Teams to provide behavioral health services to disaster victims, emergency workers, and others suffering psychological trauma during and after an emergency or disaster;

• Coordinates requests for ESF 8 assistance through Mutual Aid, Emergency Management Assistance Compact (EMAC), and/or federal assistance.

Support Agencies

The responsibilities of the local, state, federal, and non-governmental organizations/private support agencies that support ESF 8 within Kentucky are listed in Attachment 6.

DIRECTION, CONTROL, AND COORDINATION

General

This annex serves as the operational framework for Kentucky’s ESF 8 Agencies to coordinate state-level public health and medical services:

• KDPH is the coordinating agency for ESF 8 – Public Health and Medical Services;

• KDPH’s SHOC will serve as the base of direction, control, and coordination of ESF 8, in coordination with the state’s EOC, if activated.

• ESF 8 Agencies will provide technical and/or logistical support in accordance with the rules, regulations, and capabilities of their respective agency or organization;

• ESF 8 Agencies will follow their own guidelines for purchasing equipment, supplies, and services in support of response and recovery activities;

• Upon activation, ESF 8 Agencies will ensure the necessary personnel and resources are available to achieve operational objectives.
Kentucky’s Emergency Support Function (ESF) 8 - Public Health and Medical Services Annex

**Preparedness Phase**

1. **Assessments**
   
   a. KDPH, KBEMS, KCCRB, Regional HCC’s and applicable ESF 8 Support Agencies will coordinate with KYEM to conduct hazard vulnerability assessments to identify public health and medical associated hazards, vulnerabilities, and risks. Results of these assessments will be disseminated to the ESF 8 Agencies listed within this annex;
   
   b. KDPH will coordinate with local health jurisdictions to conduct public health vulnerability assessments to identify Functional and Access Needs (FAN) Populations and Critical Infrastructure Personnel.

2. **Planning**
   
   a. ESF 8 Agencies will develop agency-level emergency operations plans, continuity of operations plans, and related procedures to support any all-hazards incident or planned event requiring public health and medical support;
   
   b. State-level public health and medical incident specific and support plans will be submitted to KYEM for publication and distribution.

3. **Agreements**
   
   a. ESF 8 Agencies will ensure applicable inter- and intra-state agreements are in place with local, state, federal, and private agencies and organizations as needed to meet operational objectives;
   
   b. Copies of these agreements will be maintained by the responsible agency.

4. **Warning Points:** KYEM, KDPH, and KCCRB will maintain the following 24-hour Warning Points, as applicable, and ensure key personnel can be notified 24/7:
   
   a. KY Emergency Management’s Duty Officer: (800) 255-2587 or (502) 607-1638;
   
   b. KDPH’s On-Call Epidemiologist: (888) 9REPORT (973-7678);
   
   c. KDPH’s Division of Laboratory Services: (502) 564-4446 or (502) 545-1782 (after hours);
   
   d. KCCRB 24 Hour Response Request: (888) 522-7228

5. **Alert/Notification Lists**
   
   a. ESF 8 Agencies will identify agency representatives to serve as the agency’s ESF 8 point of contact. Identified persons will provide KDPH with contact information and maintain updated accounts in KDPH’s alert and notification systems and WebEOC to receive alerts and to share incident/event related information;
   
   b. These persons may provide onsite support at the KDPH SHOC and the state’s EOC, as applicable.
6. **Communications Systems**: ESF 8 Agencies will maintain and use primary and redundant communications systems to share information and maintain situational awareness, as applicable;
   a. **Primary Systems**: Land-based telephone systems, cellular telephones, e-mail, internet, facsimile, video conferencing, and two-way radio (VHF and 800MHz frequency bands);
   b. **Redundant Systems**: Satellite radio/telephone, amateur radio, and high frequency radio.

7. **Incident Management Software Systems**: KDPH will maintain the following incident management software systems and ensure designated personnel from ESF 8 Agencies are registered and trained on how to use each system, as applicable:
   a. **WebEOC (Includes Bed Availability Reporting)**
   b. **KDPH’s alert and notification system (HAN, ReadyOp)**
   c. **Kentucky Health Emergency Listing of Professionals for Surge (KHELPS)**

8. **Prepositioned Resources**: ESF 8 Agencies will maintain an inventory of resources in accordance with agency directives. Local jurisdictions and other state agencies may request available resources during a response to an incident/event.

9. **Training and Exercise**: ESF 8 Agencies are responsible for training and exercising to prepare for any incident/event as outlined in this annex and will participate in training and exercises per local, regional and state Training and Exercise Plans.

10. **Disease Surveillance**
    a. KDPH will coordinate with local, state, and federal public health and healthcare agencies to monitor for disease trends and outbreaks;
    b. Tracking and reporting of diseases will be coordinated through the National Electronic Disease Surveillance System (NEDSS) and the National Outbreak Reporting System (NORS).

11. **Planned Events**
    a. If requested, KDPH will collaborate with local, state, and federal agencies to coordinate public health and medical support for planned events;
    b. KDPH may pre-stage resources and supporting personnel through activation of the SHOC in collaboration with the established ICS.

12. **Situational Awareness**
    a. KDPH, through coordination with local, state, and federal agencies, will receive and disseminate information related to potential incidents and planned events through information sharing systems and processes;
    b. Information will be disseminated to designated ESF 8 Agencies in a timely manner to allow agencies to prepare for and coordinate ESF 8 response and recovery activities.
Response Phase

1. **Warning Point**: KDPH, KBEMS, and KCCRB may be notified through KY’s 24-Hour Warning Points or by local, state, or federal agencies concerning any incident/event that will require KDPH to activate the SHOC.

2. **Activation**
   
   a. KDPH will coordinate with applicable ESF 8 Agencies to conduct preliminary assessments to determine KDPH SHOC activation levels;

   b. KDPH will activate the KDPH SHOC to one of the following levels to coordinate ESF 8 operations for any incident/event that require state-level public health and medical support as outlined in Attachment 3. The state’s EOC may or may not be activated;

      - Level 4 – Monitoring Activation;
      - Level 3 – Limited Activation;
      - Level 2 – Partial Activation;
      - Level 1 – Full Activation.

   c. KDPH, KBEMS, and/or KCCRB will assign personnel to coordinate ESF 8 operations through the KDPH SHOC and/or state’s EOC, as applicable.

3. **Alert and Notification**: Upon activation of the SHOC, KDPH will alert ESF 8 Agencies through KDPH’s alert and notification system or by other means based upon the activation levels in Attachment 3.

4. **Operational Planning**
   
   a. KDPH and Primary ESF 8 Agencies will develop an incident response strategy in coordination with all involved agencies to address the public health and medical capabilities;

   b. Incident Action Plans (IAP) and Situation Reports (SitReps) will be developed for each defined operational period and disseminated to involved ESF 8 Agencies when the KDPH SHOC is activated to Level 3, 2, or 1.

5. **Situational Awareness**
   
   a. ESF 8 Agencies will ensure incident/event related information is provided to the KDPH SHOC in a timely manner to maintain a common operating picture;

   b. Incident/event related information will be sent to KDPH’s SHOC email address at chfsdpdrc@ky.gov and/or documented in WebEOC;

   c. KDPH and KYEM will disseminate SitRep to ESF 8 Agencies and other local, state, and federal agencies as required for situational awareness;

   d. Confidentiality and legal restraints will be maintained throughout the information sharing process.
6. **Behavioral Health Services**
   
a. Behavioral health services for responders and impacted persons will be coordinated through KCCRB;

b. KCCRB will coordinate with KDPH and KYEM to deploy Kentucky Community Crisis Response Teams (KCCRT) to provide onsite behavioral health assessments and counseling.

7. **Community Based Services Support:** ESF 8 Support Agencies will coordinate with KDPH if public health and medical assistance and/or resources are needed to support community based services as listed within this annex during the response and recovery phases.

8. **Critical Resources**
   
a. ESF 8 Agencies will identify, request, receive, allocate, deploy, track, and recover public health and medical resources through coordination with the KDPH SHOC. Once assigned, resources will be under the control of the receiving agency and will not be directly managed by the issuing agency until demobilized;

b. Deployment and recovery of state ESF 8 resources will be tracked through WebEOC or other tracking systems and processes;

c. Requests for resources (personnel, equipment, and supplies) from local jurisdictions will be coordinated through the KDPH SHOC in coordination with the state’s EOC as outlined in Attachment 7;

d. If required, KDPH will coordinate with the KYEM and the Governor’s Office to request federal medical assets including, but not limited to, the Strategic National Stockpile (SNS), Federal Medical Stations (FMS), antivirals, vaccines, and other ancillary medical supplies in accordance with the Kentucky Strategic National Stockpile (SNS) Support Plan. Additional resources may also be requested through Mutual Aid or EMAC.

9. **Disease Surveillance, Prevention, and Control**
   
a. KDPH will provide epidemiological support through coordination with assigned Regional Epidemiologists, local health departments, sentinel laboratories, clinical providers, and if required, activation and deployment of Epidemiology Strike Teams;

b. Public health laboratory testing will be coordinated through KDPH’s Division of Laboratory Services for hazards related to chemical and biological agents, including clinical, food, water, and environmental samples;

c. Medical countermeasures will be implemented at the local level by public health and health care agencies. KDPH will provide guidance related to medical countermeasures and will coordinate with local, state, and federal agencies for the request, receipt, and distribution of vaccines, antiviral drugs, and antibiotics;
d. Non-pharmaceutical intervention strategies will be coordinated by KDPH in collaboration with local, state, and federal agencies. This may include, but is not limited to isolation and quarantine, travel restrictions, hygiene, and social distancing.

10. Environmental Health

a. Environmental health assessments and operations will be coordinated through the KDPH SHOC for vector control, food and water safety (private water supplies), and sanitation services;

b. Environmental Health Strike Teams may be deployed to support environmental health operations in impacted jurisdictions;

c. KDPH will coordinate with the Kentucky Department of Environmental Protection (KDEP) to assess public potable water and waste water systems, solid waste disposal, and other environmental health situations.

11. Fatality Management

a. The State Medical Examiner’s Office and the Kentucky Coroner’s Incident Response Team will provide fatality management support to requesting coroners in accordance with the Commonwealth of Kentucky Mass Fatality Incident Plan;

b. The request for Disaster Mortuary Operational Response Teams (DMORT) and other fatality management resources external to Kentucky will be requested by the county coroner and State Medical Examiner’s office, if deemed necessary and appropriate, and will be coordinated through the State Medical Examiner’s Office, KDPH SHOC, and state’s EOC, if activated;

c. Fatality reports will be produced by the county coroner and State Medical Examiner’s Office as standard procedure in the recovery, autopsy, and identification of decedents, and fatality data may be monitored and tracked through Kentucky’s Mortality Data Management System (MDMS).

12. Mass Care Support

a. ESF 8 Agencies will provide public health and medical support to mass care operations in accordance with Kentucky’s ESF 6 – Mass Care Annex;

b. KDPH may activate and deploy Environmental and Epidemiological Strike Teams to provide assistance to local health departments for shelter operations;

c. The Department of Aging and Independent Living (DAIL) will coordinate with KDPH to activate and deploy Functional Assessment Service Teams (FAST) to assess the functional and access needs of populations in shelters;

d. KDPH will track the morbidity and environmental status of shelters through coordination with the state’s EOC, local health departments, county emergency management agencies, and ESF 6 representatives.
13. Medical Evacuation and Transportation

   a. KBEMS will coordinate with the KDPH and KYEM through the KDPH SHOC and/or state’s EOC to request, deploy, track, and recover intra- and inter-state emergency air and ground assets for the movement of casualties, patients, or residents;

   b. Patient triage, treatment, and tracking will be managed at the local level.

14. Medical Surge

   a. ESF 8 Agencies will collaborate with the healthcare agencies and ESF 8 partnering agencies to support the expansion of a local jurisdiction’s healthcare system by allocating and coordinating the deployment of resources (personnel, equipment, and supplies), and facilitating in the provision of state and federal waivers;

   b. KDPH may request activation of the National Disaster Medical System (NDMS) and additional local, state, and/or federal resources to meet medical surge demand.

15. Public Information and Warning

   a. ESF 8 Agencies will coordinate the development and release of public information through ESF 15 – Public Information via a Joint Information Center (JIC), if activated;

   b. Authorized representatives from ESF 8 Agencies will coordinate the release of public information as required by agency directives and protocols;

   c. Personnel from CHFS’ Office of Communications serve as the Public Information Officer (PIO) for KDPH and will disseminate ESF 8 related public information as outlined in the CHFS Emergency Communications Plan;

   d. Once authorized, public information may also be released through the Kentucky Outreach and Information Network (KOIN) and Kentucky Health Alerts at http://healthalerts.ky.gov. The KYHealthAlerts Twitter feed and the GovDelivery.com listserv will also be used.

16. Radiological Incident Response

   a. Radiological incident response activities will be managed as outlined in the Kentucky Radiological Incident Specific Plan (KRISP);

   b. KDPH’s Radiation Health Branch will assign personnel to coordinate public health and medical operations and provide subject matter expertise at the KDPH SHOC and/or state’s EOC. If required, KDPH will activate and deploy the Radiation Response Strike Team to support local operations;

   c. Radiological laboratory testing for environmental and clinical samples will be coordinated through the Radiation Health Branch’s Radiation/Environmental Monitoring Section for analysis of potentially contaminated samples;
d. KDPH will coordinate with local health departments to activate the Radiation Response Volunteer Corps and trained MRC Volunteers through KHELPS to support local population monitoring operations, if required.

17. Responder Safety and Health

a. ESF 8 Agencies will coordinate with the KDPH SHOC, KCCRB, and if required, the Kentucky Labor Cabinet to assure the safety and health of personnel. This includes, but is not limited to, exposure risks, personal protective equipment, ongoing surveillance requirements, deployment, tracking, and recovery of personnel, and behavioral health needs.

b. Behavioral health services for responders will be coordinated through KCCRB;

c. Radiation safety will be coordinated through KDPH’s Radiation Health Branch.

18. Volunteer Coordination

a. Local health departments have the responsibility for managing the MRC program at the local level through coordination with KDPH;

b. Activation of MRC Volunteers will be conducted by local health departments through KHELPS as determined at the local level or upon request by KDPH;

c. MRC Volunteers may be deployed within the state to support public health and medical operations. **MRC Volunteers cannot be deployed through EMAC.**

**Recovery Phase**

1. Community Recovery

a. ESF 8 Agencies will continue to coordinate with the affected jurisdiction to provide public health and medical support and technical assistance during the Recovery Phase per agency directives;

b. KDPH will maintain an activated SHOC to coordinate public health and medical support until it has been determined by KDPH and ESF 8 Agencies that services are no longer required.

2. Demobilization

a. ESF 8 Agencies will recover and rehabilitate resources as per agency directives through coordination with the KDPH;

b. KDPH will develop and disseminate demobilization plans for the recovery of ESF 8 resources through coordination with ESF 8 Agencies.

3. Deactivation

a. The KDPH SHOC will remain activated during the recovery of personnel, but not necessarily during the recovery of equipment and supplies as this may be ongoing for an extended period of time;
b. KDPH will coordinate with the state’s EOC and applicable ESF 8 Agencies to determine when the KDPH SHOC will be deactivated and will notify all ESF 8 Agencies upon deactivation of the SHOC;

c. KDPH will ensure the SHOC is returned to a pre-incident status and is prepared for the next activation.

4. **Reimbursement**

   a. ESF 8 Agencies are responsible for costs associated with preparedness, response, and recovery activities and must individually seek reimbursement following an incident/event;

   b. Federal reimbursement will be coordinated through KYEM.

5. **After Action Reporting**

   a. KDPH will coordinate with ESF 8 Agencies to evaluate and document response and recovery activities through After Action Reviews and After Action Reports/Improvement Plans (AAR/IP) per the Department of Homeland Security’s Exercise and Evaluation Program (HSEEP) guidance;

   b. AAR/IPs will be written to document response and recovery activities anytime the KDPH SHOC is activated to Level 3, 2, or 1 and completed within 60 days of an exercise or within 120 days of an incident or planned event.

6. **Follow Up of Corrective Actions:** Corrective actions identified in the AAR/IP will be tracked and implemented through coordination with applicable agencies per HSEEP guidance.

**ANNEX DEVELOPMENT AND MAINTENANCE**

**Maintenance**

KDPH will coordinate a periodic review of the ESF 8 Annex in coordination with the agencies and organizations identified within this document. Additional reviews may be conducted after an exercise, a significant event occurs, or regulatory changes indicate a need;

All revisions to the ESF 8 Annex will be maintained on file by KDPH’s Preparedness Branch using the Document Change Record contained within this document. Recommended changes will be submitted through KYEM for publication and distribution.

Elements of the ESF 8 Annex will be activated and evaluated during scheduled exercises as outlined in KDPH’s Multiyear Training and Exercise Plan (MTEP).

**Document Control**

The original, physical copy of the ESF 8 Annex will be maintained by KDPH’s Preparedness Branch through coordination with KYEM’s Planning Branch.
AUTHORITIES AND REFERENCES

Legal Authorities

Federal

• The Robert T. Stafford Disaster Relief and Emergency Assistance (Public Law 93-288) as amended
• Section 319 of the Public Health Service Act – Declaration of a Public Health Emergency
• Social Security Act Section 1135 Waiver Authority in National Emergencies
• The Health Insurance Portability and Accountability Act (HIPAA) of 1996

State

• Kentucky Revised Statutes (KRS), Title XVIII-Public Health
• KRS 36.260(5) - Duties of board (Crisis Response Services)
• KRS 39A.270 - Use of publicly owned resources at impending, happening, or response phase of disaster or emergency
• KRS 39A.950 - Emergency Management Assistance Compact
• KRS 39B.045 - Mutual aid agreements between Kentucky or its agencies or political subdivisions and units of government from another state
• KRS 194A.410 - Vaccination program for emergency responders
• KRS 72 – Coroners, Inquests, and Medical Examinations
• KRS 315.500 - Emergency authority for pharmacists during state of emergency
• 106 KAR 5:040 - Initiation of a crisis or disaster response
• 902 KAR 2:030 - Inspections and control procedures
• 902 KAR 2:090 - Tuberculosis detection, prevention, and control
• 902 KAR 100 - Radiology

References

Federal

• 2017-2022 Hospital Preparedness Program and Public Health Emergency Preparedness Cooperative Agreement
• 2017-2022 Health Care Preparedness and Response Capabilities, Office of the Assistant Secretary for Preparedness and Response, November 2016
• Public Health Preparedness Capabilities, National Standards for State and Local Planning, Centers for Disease Control and Prevention, March 2011
• Department of Homeland Security’s Exercise and Evaluation Program (HSEEP) Policy and Guidance, revised 2013

FEMA Region IV Unified Planning Coalition

• Region IV ESF 8 Unified Planning Coalition Resource Coordinating Task Force Manual
Kentucky’s Emergency Support Function (ESF) 8 - Public Health and Medical Services Annex

State
- Commonwealth of Kentucky’s Emergency Operations Plan
- Cabinet for Health and Family Services’ Emergency Communications Plan
- Commonwealth of Kentucky Mass Fatality Incident Plan
- ESF 8 Disaster Behavioral Health Services Plan
- KDPH’s Continuity of Operations (COOP) Plan
- KDPH’s Disease Outbreak Support Plan
- KDPH’s Public Health Preparedness Branch Strategic Plan
- KDPH’s Multiyear Training and Exercise Plan
- KDPH’s Public Health Preparedness Training Matrix
- KDPH’s State Health Operations Center (SHOC) Support Plan
- KDPH’s Strike Team Manual
- Kentucky’s Ebola Response Plan
- Kentucky Mass Casualty Incident (MCI) Support Plan
- Kentucky’s Medical Support Needs Sheltering Support Plan
- Kentucky Radiological Incident Specific Plan (KRISP)
- Kentucky/Tennessee All Hazards Cross Border Notification Plan
- Kentucky Strategic National Stockpile (SNS) Support Plan
- Kentucky’s Zika Response Plan
## ATTACHMENT 1: KENTUCKY’S ESF 8 ACRONYM LIST

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>AAR/IP</td>
<td>After Action Report/Improvement Plan</td>
</tr>
<tr>
<td>ARC</td>
<td>American Red Cross</td>
</tr>
<tr>
<td>ARF</td>
<td>Action Request Form</td>
</tr>
<tr>
<td>ASPR</td>
<td>Assistant Secretary of Preparedness and Response</td>
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<td>CBRN</td>
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<tr>
<td>CCAP</td>
<td>Child Care Assistance Program</td>
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<tr>
<td>CDC</td>
<td>Centers for Disease Control and Prevention</td>
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<tr>
<td>CHFS</td>
<td>Cabinet for Health and Family Services</td>
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<td>COOP</td>
<td>Continuity of Operations</td>
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<tr>
<td>CPG</td>
<td>Comprehensive Preparedness Guide</td>
</tr>
<tr>
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<td>Civil Support Team</td>
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<td>Department for Aging and Independent Living</td>
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<tr>
<td>DBHDID</td>
<td>Department for Behavioral Health, Developmental and Intellectual Disabilities</td>
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<tr>
<td>DCBS</td>
<td>Department for Community Based Services</td>
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<td>DMAT</td>
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<td>Functional and Access Needs</td>
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<td>FAST</td>
<td>Functional Assessment Service Teams</td>
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<td>Federal Emergency Management Agency</td>
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<td>HSEEP</td>
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<td>International Medical Surgical Response Teams</td>
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<td>KCDHH</td>
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<td>Kentucky Department for Environmental Protection</td>
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<td>KHA</td>
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<td>KHELPS</td>
<td>Kentucky’s Health Emergency Listing of Professionals for Surge</td>
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<td>KME</td>
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<td>KOIN</td>
<td>Kentucky Outreach and Information Network</td>
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<td>KPhA</td>
<td>Kentucky Pharmacists Association</td>
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<td>Kentucky Radiological Incident Specific Plan</td>
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<td>Kentucky Revised Statutes</td>
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<td>Mass Casualty Incident</td>
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<td>Mortality Data Management System</td>
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<td>MHz</td>
<td>Megahertz</td>
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<td>MRC</td>
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<td>National Incident Management System</td>
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<td>National Outbreak Reporting System</td>
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<td>NVRT</td>
<td>National Veterinary Response Team</td>
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<td>OIG</td>
<td>Office of Inspector General</td>
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<td>Acronym</td>
<td>Title</td>
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<tr>
<td>PIO</td>
<td>Public Information Officer</td>
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<td>REC</td>
<td>Regional Emergency Coordinator</td>
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<tr>
<td>RPC</td>
<td>Regional Preparedness Coordinator</td>
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<td>RSS</td>
<td>Receiving, Staging, and Storage</td>
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<tr>
<td>SITREP</td>
<td>Situation Report</td>
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<td>SNAP</td>
<td>Supplemental Nutrition Assistance Program</td>
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<td>SNS</td>
<td>Strategic National Stockpile</td>
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<tr>
<td>SOC</td>
<td>Secretary’s Operations Center</td>
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<td>STE</td>
<td>Specialized Telecommunications Equipment</td>
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<tr>
<td>U of L</td>
<td>University of Louisville</td>
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<tr>
<td>UPC</td>
<td>Unified Planning Coalition</td>
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<td>VA</td>
<td>Veterans Affairs</td>
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<tr>
<td>VHF</td>
<td>Very High Frequency</td>
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<tr>
<td>WMD</td>
<td>Weapons of Mass Destruction</td>
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</table>
ATTACHMENT 2: KDPH’S STATE HEALTH OPERATIONS CENTER (SHOC) INCIDENT COMMAND STRUCTURE FOR ESF 8 OPERATIONS

KDPH’s SHOC will serve as the base of direction, control, and coordination of ESF 8 public health and medical response and recovery activities based upon the type and complexity of an incident/event. The incident command structure in Figure 1 will expand or contract to meet the needs of the incident/event. At minimum, an Executive Staff Member and KDPH SHOC Manager will be assigned to coordinate ESF 8 operations. The state’s EOC may or may not be activated when the SHOC is activated. ESF 8 Agency Representatives may provide technical and/or logistical support through assignment to an ICS position.

Figure 1: KDPH SHOC ICS

- *Regional Preparedness Coordinators (RPCs) are employed by KDPH and will support ESF 8 operations by providing assistance to local health departments and the community in the affected area and maintaining situational awareness through coordination with the SHOC. RPCs in unaffected areas may be assigned to work in the SHOC;

- *Healthcare Preparedness Coordinators (HPC) are employed by KDPH and will support ESF 8 operations by providing assistance to hospitals and healthcare coalitions in the affected area and maintaining situational awareness through coordination with the SHOC. HPC’s in unaffected areas may be assigned to work in the SHOC;

- Regional Epidemiologists and Coalition Coordinators are not employed by KDPH but are preparedness funded through KDPH. These positions are responsible for coordinating ESF 8 operations, as applicable, within their respective jurisdictions and maintaining situational awareness through coordination with the SHOC. These positions may be requested to work in the SHOC.
# ATTACHMENT 3: KDPH’S STATE HEALTH OPERATIONS CENTER (SHOC) ACTIVATION LEVELS

<table>
<thead>
<tr>
<th>Level 4</th>
<th>Monitoring Activation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Description:</strong> Level 4 will be used anytime KDPH is required to monitor and/or assess an incident/event for possible ESF 8 support and if required, activation to a higher level. Level 4 activation does not require KDPH to significantly alter its day-to-day operations;</td>
<td></td>
</tr>
<tr>
<td><strong>Staffing:</strong> An Executive Staff member and SHOC Manager will be assigned to monitor the situation. Command and General ICS positions will not be activated;</td>
<td></td>
</tr>
<tr>
<td><strong>Notification:</strong> KDPH’s ICS staff will be notified through E-mail via the KDPH’s alert and notification systems or established Listservs. ESF 8 Agencies will not be notified unless required;</td>
<td></td>
</tr>
<tr>
<td><strong>Operational Planning:</strong> Incident Action Plans (IAP) are not required for this level of activation;</td>
<td></td>
</tr>
<tr>
<td><strong>Situational Awareness:</strong> Situation Reports (SitReps) may be developed for each operational period and disseminated to involved agencies, as required;</td>
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</tr>
<tr>
<td><strong>SHOC Setup:</strong> The SHOC will not be physically set up for operations.</td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Level 3</th>
<th>Limited Activation</th>
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</thead>
<tbody>
<tr>
<td><strong>Description:</strong> Level 3 will be used when an incident/event requires limited ICS staff to coordinate ESF 8 operations;</td>
<td></td>
</tr>
<tr>
<td><strong>Staffing:</strong> An Executive Staff member, SHOC Manager, and assigned ICS staff will coordinate response/recovery activities while working from their respective offices. Additional ICS positions may be activated;</td>
<td></td>
</tr>
<tr>
<td><strong>Notification:</strong> KDPH’s ICS/ESF 8 Agencies will be notified through E-mail via the KDPH’s alert and notification systems or established Listservs;</td>
<td></td>
</tr>
<tr>
<td><strong>Operational Planning:</strong> IAPs will be developed for each operational period and disseminated to involved agencies. A designated location will be reserved to conduct operational briefings and conference calls;</td>
<td></td>
</tr>
<tr>
<td><strong>Situational Awareness:</strong> SitReps will be developed for each operational period and disseminated to all ESF 8 Agencies and other involved agencies;</td>
<td></td>
</tr>
<tr>
<td><strong>SHOC Setup:</strong> The SHOC may be set up in preparation for activation to Level 2.</td>
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</table>

<table>
<thead>
<tr>
<th>Level 2</th>
<th>Partial Activation</th>
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</thead>
<tbody>
<tr>
<td><strong>Description:</strong> Level 2 will be used when an incident/event requires additional ICS staff to coordinate ESF 8 operations;</td>
<td></td>
</tr>
<tr>
<td><strong>Staffing:</strong> An Executive Staff member, SHOC Manager, and assigned ICS staff will coordinate response/recovery activities while working in the KDPH SHOC. Additional ICS positions may be activated. ESF 8 Agency Representatives may be requested to support SHOC operations;</td>
<td></td>
</tr>
<tr>
<td><strong>Notification:</strong> KDPH’s ICS/ESF 8 Agencies will be notified through a High Priority Alert sent via the KDPH’s alert and notification systems;</td>
<td></td>
</tr>
<tr>
<td><strong>Operational Planning:</strong> IAPs will be developed for each operational period and disseminated to involved agencies. Operational briefings and conference calls will be conducted in the SHOC or designated spaces;</td>
<td></td>
</tr>
<tr>
<td><strong>Situational Awareness:</strong> SitReps will be developed for each operational period and disseminated to all ESF 8 Agencies and other involved agencies;</td>
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<tr>
<td><strong>SHOC Setup:</strong> The SHOC will be set up in preparation for activation to Level 1, but not fully staffed.</td>
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</table>

<table>
<thead>
<tr>
<th>Level 1</th>
<th>Full Activation</th>
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<tr>
<td><strong>Description:</strong> Level 1 will be used when an incident/event requires all Command and General ICS staff, plus applicable Branches and Units, to coordinate ESF 8 operations;</td>
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<td><strong>Staffing:</strong> An Executive Staff member, SHOC Manager, and assigned ICS staff will coordinate response/recovery activities while working in the KDPH SHOC. ESF 8 Agency Representatives will most likely be requested to support SHOC operations;</td>
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<tr>
<td><strong>Notification:</strong> KDPH’s ICS/ESF 8 Agencies will be notified through a High Priority Alert sent via the KDPH’s alert and notification systems;</td>
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</tr>
<tr>
<td><strong>Operational Planning:</strong> IAPs will be developed for each operational period and disseminated to involved agencies. Operational briefings and conference calls will be conducted in the SHOC or designated spaces;</td>
<td></td>
</tr>
<tr>
<td><strong>Situational Awareness:</strong> SitReps will be developed for each operational period and disseminated to all ESF 8 Agencies and other involved agencies;</td>
<td></td>
</tr>
<tr>
<td><strong>SHOC Setup:</strong> The SHOC will be set up and staffed to coordinate ESF 8 operations.</td>
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</tr>
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</table>
ATTACHMENT 4: KENTUCKY’S HEALTH AND MEDICAL REGIONAL MAPS

Kentucky’s ESF 8 Agencies will reference the maps in Figure 2, 3 and 4 to coordinate public health and medical services during the preparedness, response, and recovery phases. These maps encompass those regions covered by the Regional Preparedness Coordinators (RPC), Regional Epidemiologists, the Hospital Preparedness Program (HPP) Coordinators and the Kentucky Board of Emergency Medical Services (KBEMS). These maps should be crossed referenced with other Kentucky Regional Maps, e.g. Kentucky Division of Emergency Management’s Regional Map or the Area Development District Map.

Figure 2: Kentucky Public Health Regional Map
Figure 3: Kentucky Hospital Preparedness Program Regional Map
Figure 4: KBEMS Regional Map
# ATTACHMENT 5: KENTUCKY’S ESF 8 AGENCY ROLES MATRIX

<table>
<thead>
<tr>
<th>Kentucky’s ESF 8 Agencies</th>
<th>ROLES/CAPABILITIES</th>
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</thead>
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<tr>
<td></td>
<td>Alert and Notification</td>
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<td>DCBS</td>
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<td>KDA</td>
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<td>KDEP</td>
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<td>KDOC</td>
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<td>KDVA</td>
<td>S</td>
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<tr>
<td>KME’s Office</td>
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<tr>
<td>KSP</td>
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<td>Ky Labor Cabinet</td>
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<td>Kv Office for Blind</td>
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**P** = Primary Role: Has a leading role in coordinating response and recovery activities for the capabilities outlined in this annex.

**S** = Supporting Role: Has a significant role in supporting response and recovery activities for the capabilities outlined in this annex.

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ATTACHMENT 6: RESPONSIBILITIES OF KENTUCKY’S ESF 8 SUPPORT AGENCIES

State Agencies

Cabinet for Health and Family Services (CHFS)

Department for Aging and Independent Living (DAIL)

- Provides technical assistance concerning programs and services for the elderly and people with disabilities in long-term care facilities and in-homecare;
- Serves as a resource for identifying senior citizen centers within Kentucky;
- Initiates well check protocols for Guardianship clients and provides resources as appropriate;
- Serves as a resource in partnership with Aging and Disability providers to ensure the health, safety, and welfare during an emergency or disaster;
- Coordinates the deployment of Functional Access Service Teams (FAST).

Department for Behavior Health, Developmental and Intellectual Disabilities (DBHDID)

- Maintains a directory of community mental health centers throughout Kentucky ensuring key personnel can be contacted 24/7 to facilitate continued operations during any incident;
- Provides technical assistance and situational awareness concerning the areas of behavioral health, developmental and intellectual disabilities, child and adult programs and services, deaf and hard of hearing services, substance abuse, suicide prevention, and supportive living during and after an emergency or disaster;
- Supports KCCRB and faith-based coalitions to provide behavioral health services during an emergency or disaster and plan for recovery of the community at large.

Department for Community Based Services (DCBS): In accordance with applicable federal and state requirements governing the provision of these services and to the extent funding is available:

- Provides eligibility determination services and/or replacement benefits for the Kentucky Transitional Assistance Program (K-TAP); Kinship Care Program; Supplemental Nutrition Assistance Program or “SNAP”; State Supplementation Program for people who are aged, blind, or have a disability; and Medicaid Programs;
- Coordinates eligibility determination for the Child Care Assistance Program (CCAP) and/or Low Income Home Energy Assistance Program (LIHEAP);
- Works in cooperation with partners to assure timely provision of benefits for DCBS administered programs;
• Serves as a resource in partnership with the Office of Inspector General and area agencies to identify licensed, certified, and registered child care providers across Kentucky and coordinate emergency child care;

• Provides protection and permanency services for children subject to abuse, neglect, and/or dependency in partnership with area resources, including law enforcement and the courts;

• Coordinates relocation, tracking, and benefit services for children in the custody of the Cabinet for Health and Family Services;

• Provides protective services and general assistance for vulnerable adults, including victims of domestic violence, in partnership with area resources;

• Offers services through the Repatriation Program;

• Offers resource referrals through local DCBS’ offices and staff in each Kentucky county;

• Prepares waiver applications, as appropriate, for enhanced flexibility or federal relief.

Department for Medicaid Services (DMS)

• Coordinates with KDPH, Kentucky Pharmacists Association (KPhA), subcontractors and participating pharmacies to ensure Medicaid recipients continue to receive prescribed, non-controlled medications and durable medical equipment during an emergency or disaster;

• Provides after-hour contacts to KDPH. These contacts have access to the Medicaid Pharmacy vendor 24/7 phone line ensuring Medicaid recipients can receive appropriate access to medications;

• Provides authorization, via contact with the Pharmacy Benefits vendor, for issuing replacement, non-controlled medications to Medicaid recipients;

• Provides assistance to local pharmacies for verification of Medicaid recipients and prescribed medications;

• Serves as a resource for identifying alternate pharmacies or other pharmaceutical resources.

Kentucky Governor’s Office of Electronic Health Information (GOEHI)

• Maintains the Kentucky Health Information Exchange (KHIE) to support the exchange of health information among healthcare providers and organizations;

• Supports the electronic, real time exchange of patient medical records;

• Provides a view of a patient’s consolidated healthcare information to their treating physician at the point of care;

• Provides a view of all Medicaid claims data to a Medicaid patient’s treating physician at the point of care.
Office of Communications

- Coordinates the communications response and media relations for ESF 8 through coordination with the Cabinet for Health and Family Services, KDPH, and ESF 8 agencies. Trained personnel from the Office of Communications and Administrative Review will serve in the Public Information role for ESF 8 from a virtual setting or at the state’s Joint Information Center (JIC), KDPH’s SHOC, or in field settings;

- Provides public health, disease, and injury prevention information for dissemination to the public in languages and formats that are understandable to all segments of the population, including those individuals with limited- or non-English proficiency, blind or visually impaired, deaf or hard of hearing, or individuals with disabilities;

- Ensures that risk communication principles to build trust and credibility are employed in all contact with the media, public, and partner information release efforts;

- Oversees media monitoring systems (video clips/news clips/coverage—e.g. analyzing coverage environment and trends to determine needed messages, emerging issues, identifying misinformation for correction, identifying concerns, interests, and needs arising from the crisis and the response);

- Manages all information distributed to the Kentucky Outreach and Information Network (KOIN), a grassroots emergency communication network comprised of vulnerable/at-risk populations.

Office of Inspector General (OIG)

- Serves as the primary point of contact for coordinating response and recovery efforts specific to Division of Healthcare, Division of Regulated Childcare, and Audits and Investigations;

- Provides technical assistance regarding licensed and certified healthcare facilities;

- Provides technical assistance regarding licensed childcare and child placing facilities;

- Provides technical assistance to healthcare facilities concerning 1135 Waivers upon declaration of disaster, emergency, or public health emergency;

- Serves as a resource for all licensed manufacturers and/or wholesalers of distributed controlled substances in Kentucky.

Kentucky Department of Agriculture (KDA)

- Coordinates with KDPH on any agriculture related incident that may affect humans to include zoonotic diseases, crop diseases, vector-borne diseases (animal-borne diseases transferrable to humans via insects), food or drug contamination or hazards posed by exposure to pesticides or fertilizers;

- Coordinates with KDPH to conduct field investigations, collect samples, oversee laboratory tests, and provide technical assistance to local government in response to agricultural emergencies impacting the human population.
Kentucky Department of Military Affairs

Kentucky Division of Emergency Management (KYEM)

- Supports ESF 8 in coordinating public health and medical preparedness, response and recovery activities with other ESFs and local, state, and federal agencies;
- Maintains the 24/7 emergency contact information of key incident management personnel within KDPH and ESF 8 agencies;
- Keeps KDPH apprised of all matters of public health and medical interest and alert incident management personnel;
- Provides a location at the state’s EOC for ESF 8 representatives to coordinate public health and medical operations ensuring needed equipment and supplies are available during activation;
- Liaises with affected jurisdictions to receive and act on requests for assistance from county emergency managers and county elected officials;
- Prepares Incident Action Plans (IAPs) and Situation Reports (SitReps) through coordination with ESF 8;
- Coordinates requests for assistance through Mutual Aid, EMAC, and/or federal assistance when the capabilities of the state to respond to a disaster are exceeded;
- Assists with developing federal action request forms (ARF) and EMAC Requisition-A’s for operational resource needs;
- Provides consistent and accurate information to the public during an emergency or disaster through ESF 15 – Public Information and/or activation of a JIC;
- Provides administrative support to recovery efforts by assisting in the processing of documents authorizing payments to individuals, families, local governments, and state agencies.

Kentucky National Guard (KYNG)

- Assists in the coordination of Active Duty Forces to support ESF 8 operations;
- Provides available personnel and equipment to support the triage, treatment, decontamination, transportation, evacuation and tracking of patients and casualties during an emergency or disaster;
- Provides available personnel and equipment to support the receipt and distribution of state and federal assets, to include the Strategic National Stockpile (SNS);
- Coordinates the activation and deployment of the 41st Civil Support Team (CST) to provide technical advice on Weapons of Mass Destruction (WMD) response operations and help identify and support the arrival of follow-on state and federal military response assets;
• Coordinates the activation and deployment of the Chemical, Biological, Radiological, Nuclear and high-yield Explosive (CBRNE) Enhanced Response Force Package (CERFP) to provide immediate response capabilities including command and control, search and extraction, decontamination, and medical triage, treatment and transportation;

• Coordinates the activation and deployment of the Air National Guard’s Expeditionary Medical Support (EMEDS) package to support humanitarian relief, wartime contingencies, and disaster response operations.

**Kentucky Department of Veterans Affairs (KDVA)**

• Provides technical assistance and support to KDPH and the Department of Veterans Affairs to ensure healthcare services are available for Kentucky’s veterans;

• Maintains a directory of Kentucky Veterans Centers ensuring key personnel can be contacted 24/7 to facilitate continued operations during any all-hazards event;

• Keeps KDPH informed of disease trends and other health situations in Kentucky Veterans Centers.

**Kentucky Education and Workforce Development Cabinet**

**Kentucky Commission on the Deaf and Hard of Hearing (KCDHH)**

• Provides technical assistance to KDPH concerning policy, programs and services for the deaf and hard of hearing populations;

• Coordinates with state and local agencies to ensure services are provided to the deaf and hard of hearing before, during and after an emergency or disaster;

• Provides specialized telecommunications equipment (STE) to citizens of the Commonwealth who are deaf, hard of hearing or speech-impaired through the Telecommunication Access Program (TAP);

• Coordinates with the Kentucky Assistive Technology Service (KATS) Network to provide information and related services to persons with disabilities, including the deaf and hard of hearing;

• Maintains and publish a Directory of Services to provide information for the deaf and hard of hearing populations concerning referral and advocacy services.

**Kentucky Office for the Blind**

• Provides technical assistance related to the programs and delivery of services to the blind and visually prepared;

• Provides technical assistance to KDPH for providing health and medical related information in accessible formats (Braille, audio recording, large print, etc.) to the blind and visually impaired;
• Maintains the Kentucky Blind and Deaf Resource Directory to provide resources and information available to those who are blind, visually impaired and deaf-blind (http://blind.ky.gov) including Office for the Blind locations.

Kentucky Energy and Environment Cabinet

*Kentucky Department for Environmental Protection (KDEP)*

• Provides technical assistance and environmental information to KDPH who will provide health and medical recommendations in situations involving non-radiological hazardous materials, solid waste, drinking water systems, and wastewater systems;

• Assists in identifying alternate drinking water supplies, and wastewater collection and treatment for critical healthcare facilities;

• Provides environmental support for managing radiological or nuclear related incidents;

• Provides environmental technical assistance in the event temporary interment is necessary and/or human remains are contaminated by non-radiological agents.

Kentucky Justice and Public Safety Cabinet

*Kentucky Department of Corrections (KDOC)*

• Keeps KDPH informed of disease trends and other health situations in correctional facilities before, during, and after an emergency or disaster;

• Assists KDPH in distributing medicines, vaccines and medical supplies to correctional facilities during an emergency or disaster;

• Coordinates with KDPH and the CHFS Office of Communications and Review to develop and disseminate health and medical related information to employees and incarcerated persons.

Kentucky Medical Examiner’s Office/Kentucky Coroner’s Incident Response Team

• Provides technical assistance to KDPH during natural death surge operations;

• Activates the Kentucky Coroner/Medical Examiner Incident Response Team to support mass fatality operations by providing trained personnel, equipment, and supplies to locate, recover, and identify the deceased;

• Provides support to County Coroners by determining the cause and manner of death, identifying the deceased, preparing reports, and maintaining evidence and personal property;

• Coordinates with the State Registrar for processing and issuing death certificates during mass fatality events, when required;

• Shares missing person’s data with KDPH to help identify the seriously wounded or deceased.
Kentucky’s Emergency Support Function (ESF) 8- Public Health and Medical Services Annex

Kentucky State Police (KSP)

- Provides relevant information to KDPH of any credible threat or other situation that could potentially threaten the public’s health;
- Coordinates with KDPH to provide security at Kentucky’s Receiving, Staging, and Storage (RSS) sites during activation and for transportation of medicines, vaccines, medical supplies, blood, and blood products or medical equipment between the RSS and local Distribution Nodes as outlined in the Kentucky Strategic National Stockpile (SNS) Support Plan;
- Coordinates with the local law enforcement agencies and designated airfields for security and traffic control problems during operations involving patient movement through NDMS;
- Collaborates with KDPH and local law enforcement agencies to coordinate law enforcement measures when isolation and quarantine measures are implemented;
- Collaborates with local, state, and federal agencies to provide preventive radiological/nuclear detection operations.

Kentucky Labor Cabinet

Department of Workplace Standards

- Provides technical assistance to KDPH concerning safety and health regulations, safety of responders and employees, exposure assessments, risk assessments, and personal protective equipment to include selection, distribution, training, and fit-testing;
- Provides technical assistance to support safety and health in field operations during deployment of health and medical response teams.

Kentucky Transportation Cabinet (KYTC)

Division of Incident Management

- Coordinates the state’s transportation resources during a declaration of emergency;
- Provides technical expertise and support for routing and logistical movement of personnel and medical supplies, medical equipment, antibiotics, antivirals, other pharmaceuticals, vaccines, and prepositioned resources before, during, and after an emergency or disaster;
- Provides needed resources through vehicles, equipment and personnel for transporting ESF 8 assets and medical material during an emergency or disaster;
- Assists with routing and coordinating resources for transporting casualties, patients, and evacuees.
Non-Governmental Organizations/Private Support Agencies

American Red Cross (ARC)

- Coordinates with regional blood centers to provide blood products and services at the request of ESF 8;
- Provides support services as requested by ESF 8 for accompanying family members/caregivers when patients are evacuated through NDMS;
- Provides preventative health services and behavioral health support to people in shelters, service centers, outreach teams, and emergency aid stations in designated safe zones in coordination with ESF 8;
- Distributes public health and behavioral health information to persons affected by disasters in coordination with ESF 8;
- Provides available personnel to assist in immunization clinics, morgues, hospitals, and nursing homes. Assistance may include administrative support, logistical support, or health services support within clearly defined boundaries;
- Provides supportive counseling to family members of the dead, for the injured, and for others affected by the incident in coordination with ESF 8;
- Acquaints families with available health resources and services, and makes appropriate referrals;
- Provides human and technological resources to reconnect people following a disaster through facilitated communication and emergency welfare inquiries accomplished by the Safe and Well Program.

Kentucky Hospital Association (KHA)

- Supports public health and medical response efforts by acting as a liaison between KDPH, hospitals, Healthcare Planning Coalitions (HPC), and other community healthcare partners;
- Provides subject matter expertise, support, and technical assistance to hospitals, HPCs, and other community healthcare partners in planning and responding to bioterrorism and other public health emergencies;
- Assists with community and syndromic surveillance by monitoring hospitals and other healthcare agencies for infectious disease and injury cases;
- Coordinates storage requirements and assists with inventory control of health and medical prepositioned response assets including, but not limited to, pharmaceuticals, antiviral medications, and medical surge units;
- Supports the implementation and use of WebEOC and patient tracking, data sharing, and communication systems in each of the HPC regions.
Kentucky Pharmacists Association (KPhA)

- Stores and maintains the state’s cache of antivirals and antibiotics in a secure, climate-controlled environment;
- Provides technical assistance and support concerning storage requirements, lot numbers, expiration dates, and shelf life extensions and re-labeling of state-cached medications;
- Provides assistance to state and local agencies for locating and allocating available pharmaceuticals during shortage situations;
- Distributes medications during an emergency or disaster at the direction of KDPH ensuring that ESF 8 is kept informed of the number and type distributed and inventory on hand;
- Coordinates with local pharmacies to maintain a minimum inventory of medications to support local needs during an emergency or disaster;
- Provides personnel and equipment to assist with the repackaging and labeling of medications upon receipt of SNS assets;
- Provides licensed pharmacists, support personnel, and equipment to support medical operations upon deployment of the state’s Pharmacy Trailer;
- Assists KDPH and Department of Medicaid Services to ensure Medicaid recipients continue to receive prescribed medications and durable medical equipment during an emergency or disaster.

Kentucky Regional Poison Control Center (KRPCC)

- Maintains and publishes a toll free, 24/7 access phone number to provide information and answer questions from the public and healthcare professionals via a call center on poisons, pharmaceuticals, vaccines, diseases, emergency care and treatment, location of antidotes, current recommendations, and other related health topics;
- Maintains the Kentucky Regional Poison Control Center’s website and social media resources to publish current alerts, public education and other related health, medical and safety topics;
- Monitors health and medical health related trends throughout the state and keep KDPH informed of an increase or decrease in trends;
- Assists in preparing health and safety messages for incidents involving poisons or hazardous materials;
- Maintains a listing of doctors and nurses specially trained and certified in toxicology.
University of Louisville Emergency Preparedness for Aging Program

- Serves as an ESF 8 resource to support long term care emergency preparedness, response, and recovery efforts;

- Provides technical assistance to KDPH and KYEM concerning long-term care facilities.

Local Support Agencies

Local Health Departments (LHD)

- Maintains a system for 24/7 notification or activation of the local public health emergency response system;

- Keeps KDPH informed of all matters of health and medical interest to facilitate situational awareness among all local health departments before, during, and after an emergency or disaster;

- Assesses the impact of an incident on health and medical infrastructure within the local health jurisdiction and keeps KDPH apprised of the situation;

- Uses web-based systems to alert and/or share information with KDPH, local incident management personnel and volunteers;

- Coordinates with KDPH to provide personnel and resources to support health and medical operations;

- Activates and deploys MRC volunteers to support health and medical operations at the local or state level through KHELPS;

- Coordinates with local emergency management agencies to request public health and medical assistance from KYEM and/or KDPH;

- Requests, receives, distributes and dispenses medical supplies, medical equipment, antibiotics, antivirals, other pharmaceuticals, vaccines, and prepositioned resources as outlined in state and county SNS Support Plans;

- Conducts disease surveillance within the respective jurisdiction and promptly reports conditions or disease trends of interest to KDPH.

Regional Healthcare Coalitions (HCC)

- Supports health and medical preparedness, response, and recovery efforts by acting as a liaison between KDPH, hospitals, and other community healthcare partners;

- Maintains a process to ensure cooperation between healthcare organizations and coalition members;

- Maintains plans and procedures for the coalition to prepare for, respond to, and recover from an emergency or disaster;
• Provides support, and technical assistance to hospitals and other community healthcare partners in planning, training, exercising and responding to health emergencies;

• Coordinates with community healthcare partners and KDPH to provide personnel and resources to support health and medical operations;

• Assists with storage requirements and inventory control of health and medical prepositioned response assets including, but not limited to, equipment, supplies, pharmaceuticals, antiviral medications, and medical surge units;

• Assists with the coordination of resources for transporting casualties, patients, and evacuees;

• Keeps KDPH informed of all matters of health and medical interest to facilitate situational awareness among healthcare entities before, during, and after an emergency or disaster.

**HHS Region IV Support Agencies**

HHS Region IV - Unified Planning Coalition (UPC) (Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, and Tennessee)

• Assures the continued readiness of the Resource Coordinating Task Force by maintaining accurate contact information, communication mechanisms and deployable cache of equipment and supplies;

• Initiates and disseminates regional alerts and notifications among HHS Region IV states;

• Gathers and disseminates information among HHS Region IV states before, during and after an emergency or disaster;

• Coordinates public health and medical assistance through activation of the Resource Coordinating Task Force and EMAC;

• Identifies available health and medical assets within HHS Region IV states during a disaster response;

• Assists with developing federal action request forms (ARF) and EMAC Requisition-A’s for operational resource needs;

• Provides a channel for non-impacted states to offer assistance to impacted states and reduce redundancy in the deployment of resources.
Federal Support Agencies

U.S. Department of Health and Human Services (HHS)

Assistant Secretary of Preparedness and Response (ASPR)

- Serves in the leadership role for federal Emergency Support Function 8 and is responsible for coordinating federal assistance for all health and medical services to supplement state and local resources in response to public health and medical emergencies or disasters;

- Maintains an Emergency Operations Center (Secretary’s Operations Center or “SOC”) 24 hours a day, 7 days a week for command and control, communications, and information collection, assessment, analysis, and dissemination under non-emergency and emergency conditions to support a common operating picture;

- Oversees the Regional Emergency Coordinator (REC) for Region IV who has responsibility for working with federal and state agencies to determine regional priorities for public health and medical emergency preparedness and in response to requests for federal health/medical assistance will coordinate, activate, and deploy regional public health/medical personnel, equipment, and supplies;

- Oversees the Hospital Preparedness Program (HPP) which administers cooperative agreement funding and provides technical assistance to enhance the medical surge capability and capacity of hospitals and healthcare systems during disasters and increases their ability to prepare for and respond to bioterrorism and other public health emergencies;

- Manages the National Disaster Medical System to supplement state and local capabilities through a specialized range of public health and medical capabilities including Disaster Medical Assistance Teams (DMAT), Disaster Mortuary Operational Response Teams (DMORT), International Medical Surgical Response Teams (IMSURT), and the National Veterinary Response Team (NVRT);

- Oversees the volunteer registration program through the Emergency System for Advance Registration of Volunteer Health Professionals (ESAR-VHP) to establish a national network of state-based programs for pre-registration of Medical Reserve Corps (MRC) volunteer health professionals (in Kentucky, this system is titled Kentucky Health Emergency Listing of Professionals for Surge (KHELPS)).

Centers for Disease Control and Prevention (CDC)

- Provides technical assistance and funding for strategic planning through the Office of Public Health Preparedness and Response to enable Kentucky’s state and local public health agencies to respond and recover from public health threats;

- Provides epidemiologic consultation to KDPH and local health departments in determination of risk factors for illness and development of prevention and control strategies;

- Provides on-site field assignees for daily public health operations who may provide expertise and/or assist in public health responses in Kentucky;
• Provides additional CDC personnel/teams of experts (e.g., Epidemic Intelligence Service (EIS) Officers, program specific experts) to Kentucky for urgent public health responses and investigations when requested and feasible;

• Coordinates multi-state epidemiologic investigations;

• Provides reference diagnostic support to the state public health laboratory, direct laboratory testing, and confirmatory capability beyond the state laboratory’s capacity;

• Works closely with KDPH and local public health epidemiologists and laboratorians to identify illnesses and clusters of illness;

• Administers and coordinates the use of the SNS and CHEMPACK and provides guidance and approval for request, delivery and recovery of these federal assets;

• Maintains an EOC 24 hours a day, 7 days a week for command and control, communications, and information collection, assessment, analysis, and dissemination under non-emergency and emergency conditions to support a common operating picture across the world.

**U.S. Food and Drug Administration (FDA)**

• Coordinates federal emergency and crisis response activities involving FDA regulated products or in situations when FDA regulated products need to be used or deployed;

• Manages FDA’s incident management system that provides situational awareness and a common operational picture during incidents, outbreaks, or terrorist threats in the form of maps that geographically depict FDA regulated firms and other locations of interest;

• Maintains situational awareness to provide key agency officials with timely awareness of public health issues involving FDA regulated products.

**U.S. Department of Veterans Affairs (VA)**

• In support of HHS under ESF 8, provides assistance for health and medical needs with medical personnel, supplies and subject matter expertise as needed;

• Designates and deploys available medical, surgical, mental health, and other health service support assets.
ATTACHMENT 7: KENTUCKY’S ESF 8 RESOURCE REQUEST FLOWCHART

**EVENT/DISASTER OCCURS**
Local/regional resources have been, or will soon be exhausted and state assistance/resources are required to support local response activities!

**REQUESTING AGENCY**
Requesting agency submits resource request to County EM or to County EOC, if activated. Note: ESF 8 - Public Health and Medical resources may be submitted to EM and the Local Health Department (LHD) simultaneously. The LHD and County EM (ESF 8) will maintain situational awareness throughout the event concerning requests for assistance or resources.

**County Emergency Manager/County Emergency Operations Center**

ESF 8 Emergency Management

ESF 8 - Public Health and Medical Services

**Regional Preparedness Coordinator (RPC), Health Care Preparedness Coordinator (HPC) and/or LHD HPP Coalition Coordinator** are notified and will assist in obtaining needed resources.

**ESF 8 resource requests submitted to KDPH/SHOC**

**KYEM Area Manager** notified and will assist in obtaining needed resources.

**ESF 7 - Resource Support/CRMG (KYEM EOC)**

**Resource requests submitted to KYEM/State EOC**

**Resource requests can be filled by the state.**

**YES**

**KDPH SMOC/KYEM EOC** coordinates deployment of resources and monitors that resource from deployment through demobilization

**NO**

KDPH will transfer non-ESF 8 resource requests to KYEM EOC

**ESF 8 - Public Health and Medical Services (KDPH SHOC)**

**KYEM will transfer ESF 8 resource requests to KDPH SHOC**

**Resource Request Not Approved**

**KYEM/KDPH requests resources through Inter-state (EMAC) and/or Federal Support (Resource Request Form - RRF)**

**Resource Request Approved**

**KEY POINTS**

- Submitting Resource Requests: Local agencies should coordinate with their respective county Emergency Management Agency, Local Health Department (LHD), and/or regional personnel prior to requesting resources from the state. However, this is not always feasible, and in some cases, agencies will submit requests directly to the state.
- If an agency submits a resource request directly to the state Emergency Operations Center (EOC) or State Health Operations Center (SHOC), the state will notify local and regional personnel for follow-on actions.

Regional Personnel: KYEM Area Managers, KDPH Regional/Healthcare Preparedness Coordinators, and/or LHD Hospital Preparedness Program (HPP) Coalition Coordinators should be involved in the request process prior to submitting a request to the state. Personnel assigned to these positions will check the availability of local/regional resources and will keep state agencies informed of response and recovery activities.