

# Emergency Operations Plan



Division of Public Health  
Department of Health and Social Services

# Letter of Promulgation

To All Recipients:

The Division of Public Health Emergency Operations Plan (EOP) is intended to provide the framework for guiding the agency's response to a Public Health Emergency. Public Health Emergencies may be stand-alone events that require response from only DPH. However, Public Health Emergencies may be only a part of large-scale events that include aspects outside the realm of DPH. This document is intended to provide an umbrella plan for DPH to use as a guide for command and control and identifying Divisional and Sectional roles and responsibilities during a crisis.

I anticipate that all Public Health Division employees will want to know the contents of this plan and their section's SOP, to facilitate their implementation during actual public health emergency responses. A continual program of training and exercises will begin soon to educate us all together.

Thanks in advance, for your willingness to help us take the actions needed to protect Alaskan's health in today's environment.

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Richard Mandsager, Director, October 27, 2005  
Alaska Division of Public Health

**EMERGENCY OPERATIONS PLAN**  
**TABLE OF CONTENTS**

- I. PURPOSE
- II. ACTIVATION
- III. DISASTER DEFINITION
- IV. SITUATION AND ASSUMPTIONS
- V. CONCEPT OF OPERATIONS
- VI. ORGANIZATION AND ASSIGNMENT OF RESPONSIBILITIES
- VII. PLAN REVIEW AND MAINTENANCE (TRAINING AND EXERCISE)
- VIII. AUTHORITY AND REFERENCES
- IX. ACRONYMS

**ANNEXES:**

**A EMERGENCY OPERATIONS CENTER**

- Appendix 1 to annex A-organizational charts
- Appendix 2 to annex A-threat conditions and recommended actions
- Appendix 3 to annex A-EOC activation procedures
- Appendix 4 to annex A-command checklists
- Appendix 5 to annex A-operations
- Appendix 6 to annex A-logistics
- Appendix 7 to annex A-plans
- Appendix 8 to annex A-finance & administration
- Appendix 9 to annex A-Incident Command forms

**B RISK COMMUNICATION AND PUBLIC INFORMATION**

- Appendix 1 to annex B-PH Emergency Risk Communication Functions
- Appendix 2 to annex B-ANTHC Bioterrorism Communications Plan Outline
- Appendix 3 to annex B-Executive Summary

**C BIOTERRORISM**

**D CHEMICAL**

**E RADIOLOGICAL**

**F MASS PROPHYLAXIS**

- Appendix 1 to annex F-Mass Prophylaxis Planning Checklist
- Appendix 2 to annex F-Community Mass Prophylaxis Planning
- Appendix 3 to annex F-Job Action Sheets Mass Prophylaxis Clinic
- Appendix 4 to annex F-Sample Staffing
- Appendix 5 to annex F-Sample Clinic Floor Plan
- Appendix 6 to annex F-Supply and Equipment Checklist
- Appendix 7 to annex F-RSS

**G MASS CASUALTY**

**H BEHAVIORAL HEALTH**

**I ENVIRONMENTAL HEALTH**

**J PANDEMIC INFLUENZA RESPONSE PLAN**

**K ALTERNATE CARE SITE PLAN**

**REFERENCE SECTION**

# Introduction

## I. PURPOSE

Alaska's Department of Health and Social Services, Division of Public Health (DPH) intends this plan to guide its response to disasters. It is intended to provide specific guidance for division personnel during disasters including naturally occurring disease outbreaks causing public health concerns, weapons of mass destruction (WMD) and or terrorism events.

## II. ACTIVATION

This plan is to be implemented *by the director of Public Health* when they have determined; local resources, including normal mutual aid, have been overwhelmed by the size of a Mass Casualty Incident (MCI) or a Public Health threat.

## III. DEFINITION OF DISASTER

“A disaster is any occurrence that causes damage, ecological disruption, loss of human life, deterioration of health and health services on a scale sufficient to warrant an extraordinary response from outside the affected community areas.” (World Health Organization W.H.O.)

## IV. SITUATION & ASSUMPTIONS

### SITUATION:

The sudden onset of a large number of victims would stress the local medical system necessitating time critical assistance from state government. Hospitals, nursing homes, pharmacies and other medical/health care facilities may be severely damaged or destroyed during a catastrophic or major disaster.

Medical and health facilities remaining in operation are likely to be overwhelmed by the “walking wounded” and seriously injured victims who are transported there in the immediate aftermath of the event. Medical personnel, supplies, including pharmaceuticals and equipment are likely to be in short supply. Disruptions in local communications and transportation systems could prevent timely re-supply.

A major emergency resulting from an explosion, toxic gas release or terrorist deployment of weapons of mass destruction (WMD) could occur but may not damage the local medical system; however, such an event could produce a large concentration of injuries that could overwhelm the local area medical system.

Geographic isolation may also cause us extreme difficulty in responding to outlying areas. Communities should anticipate and plan for 72 hours before the arrival of outside assistance.

## **ASSUMPTIONS:**

A. A public health emergency is apt to occur without warning and at a time when State offices may be closed.

B. A large-scale disaster will generate casualties by trauma, infectious disease and/or exposure to WMD.

C. DPH employees will first attend to their personal family needs and then respond according to division direction. Key personnel may be injured, and others may be delayed in assuming emergency functions until assured of the safety and welfare of their families and homes.

D. Mobilization of some State Emergency Coordination Center (SECC) staff on Fort Richardson may occur on or before the Public Health Emergency Operations Center (PHEOC) activation.

E. In a major event, national and international media will be on-scene in addition to local media representatives.

F. Alaskans will want to help. Volunteers and those offering services for pay will come forward. They will need resourceful leadership.

G. Alaskans will not disobey lawful authority or tolerate those who attempt to do so.

H. All state agencies will comply with the State Emergency Response Plan.

## **V. CONCEPT OF OPERATIONS**

### **A. GENERAL**

The State Emergency Response Plan (SERP) identifies DHSS as the State Agency with having Primary Functional Responsibility for Human Services Functions and Mass Casualty Coordination associated with disasters. The SERP also credits DHSS with being the Major Supporting State Agency for Bioterrorism. Checklists within the SERP identify the broad scope of activities associated with those roles. Additionally, the SERP identifies DHSS/DPH as a supporting agency for a variety of other disaster response operations. The Public Health Plan is based upon the concept that emergency operations begin at the local, city or borough level. Local emergency and or health officials know the best way to apply emergency response resources within their communities. Local health services agencies and responders will respond in accordance with their jurisdictional plans. State assistance will be provided upon request when emergency or disaster needs exceed local capabilities.

The State, when asked to assist, should not attempt to direct and control local disaster response operations unless asked to do so but will work in coordination with local officials. Alaska Statute 18:15 provides the basis for DPH's communicable disease control activities.

Alaska public health laws like those of most states, were drafted over 50 years ago and do not reflect contemporary public health, medical, or legal practices. Regulatory and oversight responsibilities should be fulfilled in an atmosphere of mutual cooperation between local emergency officials and DHSS/DPH. Similarly, federal assistance is intended to be supportive of State and local efforts, not a substitute for them. The National Response Plan/Federal Response Plan makes this abundantly clear as a matter of federal operational policy.

The Division of Public Health sections have the assigned responsibility of developing, maintaining and exercising their sectional Hazard specific plan. Hazard specific plans will contain more detailed procedures as needed, to include readiness action checklists and specific reporting requirements.

Each regional health clinic is required to develop and maintain an emergency operations plan. These plans shall be district responses to natural and other disasters tailored to the region and local governments.

The Office of the Chief Medical Examiner is required to develop and maintain plans and procedures for management of mass fatalities.

## OPERATIONAL PHASES

Public Health crisis operations are conducted in three phases; pre-disaster, disaster and recovery.

### **1. Pre-disaster/Routine Operations**

Many disasters permit a period of time between being made aware of a potential disaster and the actual occurrence of the disaster. An example would be

- A flood that is predicted based on rainfall
- A large scale disease outbreak that starts in another state
- A terrorist act that is predicted based on intelligence.

It is expected that during this period of time (this is sometimes referred to as the "crisis management" phase for terrorist events) agencies will increase their level of awareness and update contingency plans as necessary.

Within DHSS/DPH actions such as;

- Monitoring of the developing situation
- Advise Director of Public health
- Ensure operational readiness of the EOC.
- Enhanced surveillance,
- Special training,

- Increased frequency of collaboration with partner agencies and participation in Homeland Security meetings would be undertaken during the pre-disaster phase of a potential terrorist attack.

DPH observes five levels of preparedness as depicted in Appendix 2 to Annex A, *Threat Conditions and Recommended Actions*. The green (low) and the blue (guarded) Public Health Disaster Preparedness Levels generally portray actions associated with the pre-disaster phase.

## **2. Disaster Response**

A Public Health emergency may be received from a variety of sources.

- Public Health nurses
- Hospitals & Clinics
- Laboratories
- Physicians
- Police
- EMS personnel
- General public
- Federal Government

Upon determining that an emergency/disaster exists, the Director of Public Health or their Designee will authorize the implementation of the Public Health Disaster Response Plan. Department and division personnel will be directed to fill pre-assigned disaster response positions. DHSS/DPH will organize and respond in accordance with this plan and support the Division of Homeland Security and Emergency Management or Department of Environmental Conservation by providing information and expertise as well as staffing the State Emergency Coordination Center (SECC) and/or DEC Emergency Operations Center (EOC) with a liaison officer and providing qualified personnel to respond as part of a state incident management team.

Within DHSS/DPH a strategic planning team will be established (see EOC Annex A) along with an incident management team organized according to the incident command system. The Director determines the location of the EOC. The type and scope of event will determine if a real or virtual EOC or both will be established.

To the extent possible day-to-day assignments will be carried out. However, disaster response will take priority over routine operations except in those cases where normal operations involve the live and safety of citizens. For example, a disaster in Southeast Alaska should not preclude response of our Epidemiological Investigation team to another region for an unrelated breakout of infectious disease.

DHSS/DPH personnel who are assigned to the region/community affected by disaster will provide direct support to the community within local planning guidelines and personal capabilities. Locally assigned DPH personnel can also expect to fill a liaison role for the state response within the local EOC.

Actions to be considered for the disaster response phase are those identified with the Yellow (elevated), Orange (high) and Red (severe) Public Health Disaster Preparedness Levels depicted in Appendix 2 to Annex A, *Threat Conditions and Recommended Actions*.

### **3. Recovery**

This phase occurs after the State has effectively dealt with the health and life threatening situations. Within DPH, it essentially involves the following:

- Replenishing resources used and assisting DHS&EM in the recovery process.
- Assisting communities in follow-up care issues associated with various diseases.
- Reestablishing regular services provided by the department/division.
- Participating in interagency and intra-agency after action reviews

## **VI. ORGANIZATION AND ASSIGNMENT OF RESPONSIBILITIES**

### **1. Responsibilities**

In the DHSS disaster response and recovery guide, the Director of the division of Public Health is designated as the DHSS Emergency Management Coordinator.

A. Disaster Health services coordinated by DPH include critical services in the following areas:

- Prevention of Disease including surveillance, investigation and intervention measures.
- Mass Prophylaxis includes providing life-saving pharmaceuticals and medical supplies with or without the activation of the National Strategic Stockpile.
- Mass Patient Care including pre-hospital emergency medical services, hospital care and partnership with the National Disaster Medical System
- Emergency Mental Health Services including crisis counseling managed by the division of Behavioral Health.
- Mass Fatality Management provided by the Office of the Chief Medical Examiner.
- Emergency evacuation of People with Special Medical Needs
- Coordination of EMS Services by the CHEM division.

B. Field operations are initially carried out by PHN (by region), local EMS agencies and other local and or regional “first responder” agencies. First responders are part of local emergency plans and will respond as indicated in those plans.

C. State Agencies that have a major support functions for Health Services include:

- DEC
- HS&EM

A detailed organizational diagram and description is contained in Annex A, *Emergency Center Operations Center*.

In general, DHSS/DPH will participate in various organizations at five levels of government.

- National/Federal
- State – Departmental
- State – Divisional
- Local Government – Local EOCs
- On Scene – Incident Management Team

Personnel from DHSS/DPH can expect to be assigned to a disaster response team at any of these five levels. Some examples may help clarify this process:

- National/Federal: The section chief for Epidemiology might well be asked to sit on a national Multi-Agency Coordination (MAC) Group to help formulate national response procedures. Any of our Epidemiologists could well be asked to be part of the Unified

Command Team at the Federal Joint Operations Center (JOC) established in Alaska for a terrorist event.

- State – Departmental: The Commissioner of DHSS or his/her designee will no doubt be asked to participate on a State MAC Group (in the state plan the DPC =MAC) in accordance with the State Emergency Response Plan. Our Commissioner or his/her designee will participate in the Disaster Policy Cabinet process.
- State – Divisional: Any number of DPH personnel can expect to participate in the DPH EOC or act as the DPH liaison to the State Emergency Coordination Center.
- Local Government – Local EOCs: Locally assigned PHNs will likely play a vital role in many community EOCs. Many of our local governments have identified roles and responsibilities for our PHNs in their Emergency Operations Plans.
- On Scene – Incident Management Team: DPH PHNs and/or one of our Epidemiological Investigation Teams will likely participate as part of a larger interagency Incident Management Team deployed for a terrorist attack.

The above are some examples of how DHSS/DPH personnel could be assigned during a disaster. It should be noted here that to one degree or another each of the above kinds of assignments have taken place in the past during actual disaster response operations.

## **2. DHSS/DPH Organization**

DHSS/DPH disaster response organization will be driven by strategic and tactical considerations. The Incident Command System will be used as our management model for Strategic and Tactical planning and operations.

## **1. Strategic:**

A strategic planning team led by the Commissioner or his/her designee will consist of appropriate Division Directors, Section Chiefs and possibly Unit Managers. The Commissioner and the scope and nature of the disaster will determine the exact composition of this group. In view of the need for the Commissioner to sit on the State Multi-Agency Coordination (MAC) Group and to avoid confusion we will name this departmental team the DHSS Strategic Planning Team (the SPT). The SPT will provide policy and priority guidance to the Division's tactical assets. An important part of this team will be the SPT Coordinator.

The Coordinator will update the SPT on the current situation, coordinate meetings, communicate with the Department/Division tactical assets and prepare regular situation reports to the Governor. The SPT will normally be convened in Juneau. This team will not be together on a 24/7 basis. They will meet on a pre-determined schedule or when need exists as determined by the Commissioner (meetings will normally be a combination of face to face and teleconference – video conferencing will be added as capabilities expand). Core membership, roles/responsibilities and procedures are contained in checklist format in Annex A.

## **2. Tactical:**

Tactical disaster response operations will be managed from the Division of Public Health Emergency Operations Center (DPH EOC). The DPH EOC may be a centrally located facility with all assigned staff members present or it may be a “virtual” EOC relying on telecommunications, radio communications and electronic communications between members. The concept of a virtual EOC is not uncommon and special software applications have been developed to enhance this procedure. The decision to deploy to a central EOC or use the virtual EOC will be made by the SPT. Specific organizational structure is located in Annex A.

The DPH EOC is organized under ICS guidelines. This tactical team will be referred to as the Incident Command Team (ICT). The ICT will take policy and priority direction from the SPT but will direct tactical operations autonomously. Simply put, the SPT provides the “what” and “why” the ICT takes care of “who”, “when”, “where” and “how”. The ICT will keep the SPT informed of their activities via regularly scheduled reports as well as timely updates on emergent situations. When questions of authority arise the IC is responsible for clarifying the issue ASAP. When clarification is not possible due to degraded communications or other factors the IC must make the call and backfill the SPT at the earliest opportunity. To this end redundant and reliable communication pathways between the SPT and ICT are critically important. Regular testing of our Satellite Phone backup system is essential.

Composition of the ICT will be determined in part by the SPT, in part by the assigned Incident Commander and in part by referral to the organizational assignment list maintained by the Preparedness Program Management Staff in the Director's Office. Team composition will vary according to the scope and nature of the disaster. Assignment of Command Staff, Planning Chief, Logistics Chief and Finance/Admin Chief need not be based on the nature of the disaster – their duties will be fairly consistent regardless of the type of disaster. The Operations Chief should be a subject matter expert in the nature of the disaster as should be the Branch Chief responsible for active field operations. As an example; if the disaster is a Smallpox outbreak and subsequent need for mass vaccination then our Incident Commander, Operations Chief and Branch Chief should embody expertise in Management/Command (i.e. Senior Nurse), Immunization (i.e. Immunization Program Manager) and infections disease (i.e. Epidemiologist).

**Incident Command System:** State and Federal law mandate use of the Incident Command System (ICS) for disaster response. DHSS/DPH will comply with that requirement. However, ICS will not be instituted where existing organizational structure meets routine and disaster response needs. For example, ICS may support the deployment of an Epidemiological Investigative team but that does not mean that the team itself would need to modify its existing internal organization to meet ICS guidelines. Another example is our Public Health Laboratories. It would not be prudent to shift the internal organization of the Lab to an ICS organization. Once again the larger ICS organization put in place to serve disaster response organization would support shipment of samples to the Lab but not testing of the samples in the Lab. This concept is common in ICS operations. ICS documents to support our Strategic and Tactical teams are included or referred to in Annex A

## **VII. PLAN REVIEW, MAINTENANCE (TRAINING AND EXERCISE)**

### **A. General**

This plan will be reviewed and updated on at least an annual basis. The plan will be available on line and it is our intention to keep the online version current. It is not our intention to mail hardcopies of the plan to everyone in DHSS/DPH. It is expected that each section and/or concerned individual will maintain a current paper copy that can be used for offsite training and exercises. Notification will be sent out when the plan is changed. The existing Preparedness Planning Team will review and perform necessary plan maintenance. They will consider changes in technology, changes in national standards of response, changes to the State Emergency Response Plan, results from real world events, results from exercises and results from training sessions.

## **B. Training**

Regular training will be conducted on the contents and intentions of this plan. This training will be conducted or coordinated by the Preparedness Management Team in the Director's office. Training for Executive (SPT), Management (ICT) and operational (field) personnel will be scheduled on a quarterly basis. Schedule and course materials are defined within the divisions training plan.

## **C. Exercises**

Internal seminars, tabletop and functional exercises will be conducted on a quarterly basis to support this plan and DHSS/DPH disaster response operations. Internal as well as interagency exercise participation with local, state and federal agencies will be coordinated by the Preparedness Management Team in the Director's Office. Exercise schedule and plans are under development. In particular, command post exercises that enhance our ability to function in a real or virtual EOC environment will play an important role in enhancing our response capabilities.

# **VIII. AUTHORITY AND REFERENCES**

Alaska's Governor tasked the Department of Health and Social Services (DHSS) with a number of emergency tasks with his promulgation of two plans. The Division of Homeland Security and Emergency Management in the Department of Military and Veterans Affairs maintains the **State Emergency Response Plan (SERP)**. The Department of Environmental Conservation maintains the **State and Regional Oil and Hazardous Substance Discharge Prevention and Contingency Plan**. The Commissioner, DHSS specified DPH responsibilities pursuant to both plans in the department's Disaster Response & Recovery Guide.

ORGANIZATION FUNCTION CHART														
P = Primary Functional Responsibility S = Support Responsibility	EVENT	Coordination & Control	Communications	Warning	Public Information	Public Safety	Human Services	Public Works	Natural Resources	Damage Assessment	Mass Casualty	Mass Care	Finance & Administration	Recovery
	Organization													
Governor		S			S									
State Emergency Coordination Center (SECC)		S	S	S	S	S	S	S	S	S	S	S	S	S
AK Dept of Mil & Veteran's Affairs (DMVA)		P	P	P	S	S	S	S	S	P	S	S	P	P
AK Dept of Administration (DOA)		S	S		S				S	S			S	S
AK Dept of Community & Economic Dev (DCED)		S	S		S		S	S	S	S				S
AK Dept. of Corrections (DOC)		S			S	S								S
AK Dept of Education & Early Development (DEED)		S			S		S					S		S
AK Dept of Environmental Conservation (DEC)		S	S	S	S	S	S	S	S	S				S
AK Dept of Fish & Game (DFG)		S			S	S			S	S				S
AK Dept of Health & Social Services (DHSS)		S		S	S	S	P		S	S	P	S		S
AK Dept of Labor & Workforce Development (DOL)		S			S		S		S					S
AK Dept of Law (DLAW)		S			S				S			S	S	S
AK Dept of Natural Resources (DNR)		S		S	S		S		P	S				S
AK Dept of Public Safety (DPS)		S			S	P					S	S		S
AK Dept of Revenue (DOR)		S			S		S							S
AK Dept of Trans & Public Facilities (DOTPF)		S			S	S		P	S	S				S
Office of Management & Budget (OMB)					S				S				S	
Affected Jurisdictions		S		S	S					S	S	S	S	S
Alaska Earthquake Information Center (AEIC)				S	S									
Alaska Volcano Observatory (AVO)				S	S									
Alaskan Command (ALCOM)		S	S	S	S					S				
Amateur Radio Emergency Services (ARES)			S	S	S									
American Red Cross (ARC)					S		S			S	S	P		S
Civil Air Patrol (CAP)			S		S	S			S	S				
Environmental Protection Agency (EPA)					S	S		S	S					S
Federal Emergency Management Agency (FEMA)		S		S	S		S			S			S	S
MAC Group		S			S	S	S	S			S	S	S	
National Resource Conservation Services (NRCS)					S				S					S
National Warning Center (NWC)				S	S									
National Weather Service (NWS)			S	S	S									
NAWAS State Area Warning Points				S	S									
U.S. Army Corps of Engineers (USACE)					S			S		S				S
U.S. Coast Guard (USCG)			S	S	S	S		S	S	S				
U.S. Postal Service (USPS)					S									S
U.S. Public Health Service (USPHS)								S		S				
Volunteer Organizations Active in Disasters (AKVOAD)					S		S					S		
West Coast and AK Tsunami Warning Center (WC&ATWC)				S	S									

Agency Supporting Tasks by Type Event											
Agency/Organization	EVENT	Agroterrorism	Assassination	Bioterrorism	Chemical Attack	Cyberterrorism	High Explosive Attack	Hostage Taking	Incendiary Attack	Nuclear Attack	Radiological Attack
		SECC	X	X	X	X	X	X	X	X	X
AK Dept of Administration (DOA)					X	X		X	X	X	X
AK Dept of Education & Early Development (DEED)			X							X	X
AK Dept of Environmental Conservation (DEC)	X		X	X						X	X
AK Dept of Fish & Game (DFG)	X			X							
AK Dept of Health & Social Svcs (DHSS)	X	X	X	X			X	X	X	X	X
AK Dept of Labor & Workforce Development (DOL)											X
AK Dept of Law (DLAW)	X	X	X	X	X	X	X	X	X	X	X
AK Dept of Mil & Vet Affairs (DMVA)	X	X	X	X	X	X	X	X	X	X	X
AK Dept of Natural Resources (DNR)	X	X	X	X			X	X	X	X	X
AK Dept of Public Safety (DPS)	X	X	X	X	X	X	X	X	X	X	X
AK Dept of Trans & Public Facilities (DOT/PF)		X		X			X	X		X	
AK State Hospital & Nursing Home Assoc.(ASHNHA)			X	X	X		X	X	X	X	X
Alaskan Command (ALCOM)		X	X	X			X	X	X	X	X
American Red Cross (ARC)			X	X			X		X	X	X
Bureau of Alcohol, Firearms & Explosives (ATF)		X					X		X		X
Business & Industry	X		X	X	X	X	X	X	X	X	X
Centers for Disease Control (CDC)			X								X
Civil Air Patrol (CAP)	X						X	X	X	X	X
Environmental Protection Agency (EPA)			X	X						X	X
Fairbanks North Star Borough (FNSB)			X	X						X	X
Federal Aviation Administration (FAA)			X	X				X			X
Federal Bureau of Investigation (FBI)	X	X	X	X	X	X	X	X	X	X	X
Hospitals		X	X	X			X	X	X	X	X
Joint Terrorism Task Force (JTTF)	X	X	X	X	X	X	X	X	X	X	X
Affected Local Jurisdictions	X	X	X	X	X	X	X	X	X	X	X
MAC Group	X	X	X	X	X	X	X	X	X	X	X
Municipality of Anchorage (MOA)			X	X			X			X	X
National Attack Warning System (NAWAS)											X
Native Corporations	X		X	X					X	X	X
Transportation Security Agency (TSA)								X			
U.S. Army Corps of Engineers (ASACE)							X			X	
U.S. Attorney	X	X	X	X	X	X	X	X	X	X	X
U.S. Coast Guard (USCG)				X			X		X		
U.S. Department of Agriculture (USDA)	X						X		X		
U.S. Department of Homeland Security/FEMA	X	X	X	X	X	X	X	X	X	X	X
U.S. Department of Interior (DOI)							X		X		
U.S. Marshal's Service		X					X	X			
U.S. Postal Service (USPS)			X	X			X				X
U.S. Public Health Service (USPHS)	X		X	X							X

**HUMAN SERVICES**

**PRIMARY FUNCTIONAL RESPONSIBILITY:** DEPARTMENT OF HEALTH AND SOCIAL SERVICES

**PURPOSE:** To protect a variety of human services during disaster emergencies.

	RESPONSIBILITY/TASK	TASK ORG
Disaster Emergency	-Activate the DHSS EOC.	<b>DHSS/DPH</b>
	-Provide DHSS Liaison to SECC.	<b>DHSS/DPH</b>
	-Coordinate the use of emergency medical, health care, public health and mental health resources.	<b>DHSS/DPH</b>
	-Provide technical assistance to control disease and identify public health hazards.	<b>DHSS/DPH, DEC</b>
	<p><b>DOR</b>-Alaska Department of Revenue</p> <p><b>DHSS/DBH</b>-State Division of Behavioral Health</p>	

**HUMAN SERVICES  
(CONT.)**

	RESPONSIBILITY/TASK	TASK ORG
Disaster Emergency	-In coordination with affected communities, provide notification to the public about air quality and contamination of drinking water, food resources, and agricultural products.	<b>DEC, DNR, DEED, DHSS/DPH,</b>
	-Provide healthcare information and clinic support to health care providers through the Health Alert Network (HAH).	<b>DHSS/DPH</b>
	-Assist those providing assistance to victims requiring special care.	<b>DHSS/DPH</b>
	-Arrange for disaster related education or specialized vocational training.	<b>DEED</b>
	-Assist in disaster relief matters involving occupational health and safety.	<b>DOL, DHSS/DPH</b>
	-Use employment services to identify a potential disaster relief work force and operate the unemployment insurance program.	<b>DOL</b>
	-Assist communities in assessing the socio-economic impacts and develop remedial plans to continue government services.	<b>DCED, DOR</b>
	-Provide State grants to communities as required.	<b>DCED, DEC</b>
	-Provide assistance in obtaining rebuilding funds and technical support.	<b>DOR</b>

**MASS CASUALTY**

**PRIMARY FUNCTIONAL RESPONSIBILITY:** DEPARTMENT OF HEALTH AND SOCIAL SERVICES

**PURPOSE:** To reduce the loss of life and injury severity in mass casualty incidents.

	RESPONSIBILITY/TASK	TASK ORG
Pre-Disaster	·Encourage and foster mutual aid agreements within the medical community.	<b>DHSS/DPH, DMVA/DHS&amp;EM</b>
	·Maintain resource lists of basic medical assets available within Alaska.	<b>DHSS/DPH</b>
Disaster Emergency	·Coordinate activation of the MAC Group, if warranted.	<b>DMVA/DHS&amp;EM</b>
	·Implement appropriate elements of the State of Alaska Mass Casualty Plan or local mass casualty plans.	<b>Local Jurisdictions, SECC, DHSS/DPH</b>
	·Inform local medical agencies, AST and SECC of event severity and resource needs.	<b>Affected Jurisdictions</b>
	·Activate DHSS/DPH EOC.	<b>DHSS/DPH</b>
	·Provide DHSS/DPH liaison to SECC.	<b>DHSS/DPH</b>
	·Set up triage at incident.	<b>Affected Jurisdictions</b>
	·Implement internal/external hospital disaster plans.	<b>Hospitals, Affected Jurisdictions</b>
	·Coordinate transport of injured (both within Alaska and to the lower 48).	<b>DHSS/DPH</b>

**BIOTERRORISM**

**MAJOR SUPPORTING STATE AGENCY:** DEPARTMENT OF HEALTH AND SOCIAL SERVICES

**PURPOSE:** To protect life, property, and the environment in the event of an attack involving biological agents.

	RESPONSIBILITY/TASK	TASK ORG
Pre-Disaster	-Disseminate information about potential bioterrorism attack scenarios and about the biological agents that can be used in an attack.	DHSS/DPH, DMVA/DHS&EM, FBI
	-Assemble intelligence about specific bioterrorism threats to Alaska and provide it to the JTTF and DHS&EM for dissemination.	DHSS/DPH, DMVA/DHS&EM, DMVA/AKNG, JTTF, CDC, USPHS, USPS
	-Conduct surveillance activities to detect indications of possible attacks.	DHSS/DPH, DEC, CDC, USPHS, USPS
	-Designate an SECC co-manager.	DHSS/DPH
	-Designate a representative to the MAC Group.	DMVA, DPS, DLAW, DEC, DEED, FBI, DHS/FEMA, US Attorney, CDC, USPS, EPA, TSA, ALCOM, ASHNHA, ARC, Affected Jurisdictions, Affected Companies/Industries, Native Corporations, Hospitals
	ARC-American Red Cross CDC-Centers for Disease Control DEED-Alaska Dept. of Education and Early Development DMVA/CST-103 <sup>rd</sup> Civil Support Team DNR/DOF-Alaska Division of Forestry FNSB-Fairbanks North Star Borough MOA-Municipality of Anchorage USPHS- US Public Health Service	

**BIOTERRORISM  
(CONT.)**

RESPONSIBILITY/TASK	TASK ORG
·Open a departmental EOC.	<b>DHSS/DPH,</b>
·Develop agent specific response plans to be implemented by the SECC, to include plans for mass inoculations, if necessary.	<b>DHSS/DPH, DMVA/DHS&amp;EM</b>
·Make recommendations to the MAC Group with regard to isolation quarantines, evacuations, and airport closures.	<b>DHSS/DPH, DLAW, DMVA/DHS&amp;EM, FAA, Affected Jurisdictions</b>
·If necessary, coordinate casualty distribution among Alaska's hospitals and between Alaska and other EMAC states.	<b>DHSS/DPH, DMVA/DHS&amp;EM</b>
·Make a recommendation to the MAC Group regarding deployment of the Strategic National Stockpile (SNS).	<b>DHSS/DPH</b>
·Be prepared to provide support to local jurisdictions statewide.	<b>DMVA/CST, DMVA/AKNG, DNR/DOF, DHSS/DPH, USPHS, CDC, MOA, FSNB</b>
·Provide representatives for local Unified Commands and to local MAC Groups, as required.	<b>DHSS/DPH</b>
·Prepare to provide site security.	<b>DMVA, DPS, Affected Jurisdictions</b>
·Develop a plan for handling contaminated human remains.	<b>DHSS/DPH, DEC, DMVA/DHS&amp;EM</b>

## IX. ACRONYMS

<b>EMERGENCY MANAGEMENT ACRONYMS</b>			
<b>ARC</b>	American Red Cross	<b>IC</b>	Incident Commander
<b>DEC</b>	Department of Environmental Conservation	<b>ICS</b>	Incident Command System
<b>DHSS</b>	Department of Health and Social Services	<b>IMT</b>	Incident Management Team
<b>DHS&amp;EM</b>	Department of Homeland Security & Emergency Management	<b>MAC</b>	Multi-Agency Coordination Group
<b>DMATs</b>	Disaster Medical Assistance Teams	<b>MCI</b>	Multi-Casualty Incident
<b>DMORGs</b>	Disaster Mortuary Teams	<b>MOU</b>	Memorandum of Understanding
<b>DOD</b>	Department of Defense	<b>NDMS</b>	National Disaster Medical System
<b>DOJ/FBI</b>	Department of Justice/Federal Bureau of Investigation	<b>OA EOC</b>	Operational Area Emergency Operations Center
<b>DPH</b>	Division of Public Health	<b>PHN</b>	Public Health Nurse
<b>EAS</b>	Emergency Alert System	<b>PHEOC</b>	Public Health Emergency Operations Center
<b>EMS</b>	Emergency Medical Services	<b>PIO</b>	Public Information Officer
<b>EPA</b>	Environmental Protection Agency	<b>PPE</b>	Personal Protective Equipment
<b>EOC</b>	Emergency Operations Center	<b>SECC</b>	State Emergency Coordination Center
<b>EOP</b>	Emergency Operations Plan	<b>SERP</b>	State Emergency Response Plan
<b>FEMA</b>	Federal Emergency Management Agency	<b>SNS</b>	Strategic National Stockpile
<b>FRP</b>	Federal Response Plan	<b>SPT</b>	Strategic Planning Team
<b>HAN</b>	Health Alert Network	<b>VMAT</b>	Veterinary Medical Assistance Team
<b>IAP</b>	Incident Action Plan	<b>WMD</b>	Weapons of Mass Destruction

## Personnel Contact List

### Department of Health & Social Services:      Office Phone

Commissioner: Karleen Jackson	465-3030
Deputy Commissioner: Tony Lombardo	465-3030
Deputy Commissioner Of Operations: Bill Hogan	465-3030
Deputy Commissioner Office of Children's Services: Tammy Sandovall	465-3030

### Finance & Management Services:

Assistant Commissioner: Janet Clarke	465-1630
Facilities: Larry Streuber	465-1870

### Division of Public Health:

Director: Richard Mandsager, MD	465-3090
Deputy Director: Deborah Erickson	465-3090
Preparedness Program Manager: Jim Mackin	269-2040

### Section of Injury Prevention and Emergency Medical Services:

Chief: Deborah Hull-Jilly	269-8078
EMS Unit Manager: Kathy McLeron	465-3027
Public Health Specialist: Doreen Risley	465-3027

### Section of Nursing:

Chief: Rhonda Richtsmeier	465-3150
Deputy Chief: Corrine Olson	465-3150

### Section of Epidemiology:

Chief: Jay Butler, MD	269-8000
Deputy Chief: Beth Funk, MD	269-8000

### Medical Examiner:

Chief: Franc Fallico, MD	334-2214
Acting Lead Investigator: Kathleen Hickman	334-2205

### Section of Laboratories:

Chief: Dr. Bernd Jilly	334-2109
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# Emergency Operations Plan

## Annex A: Emergency Operations Center (EOC)

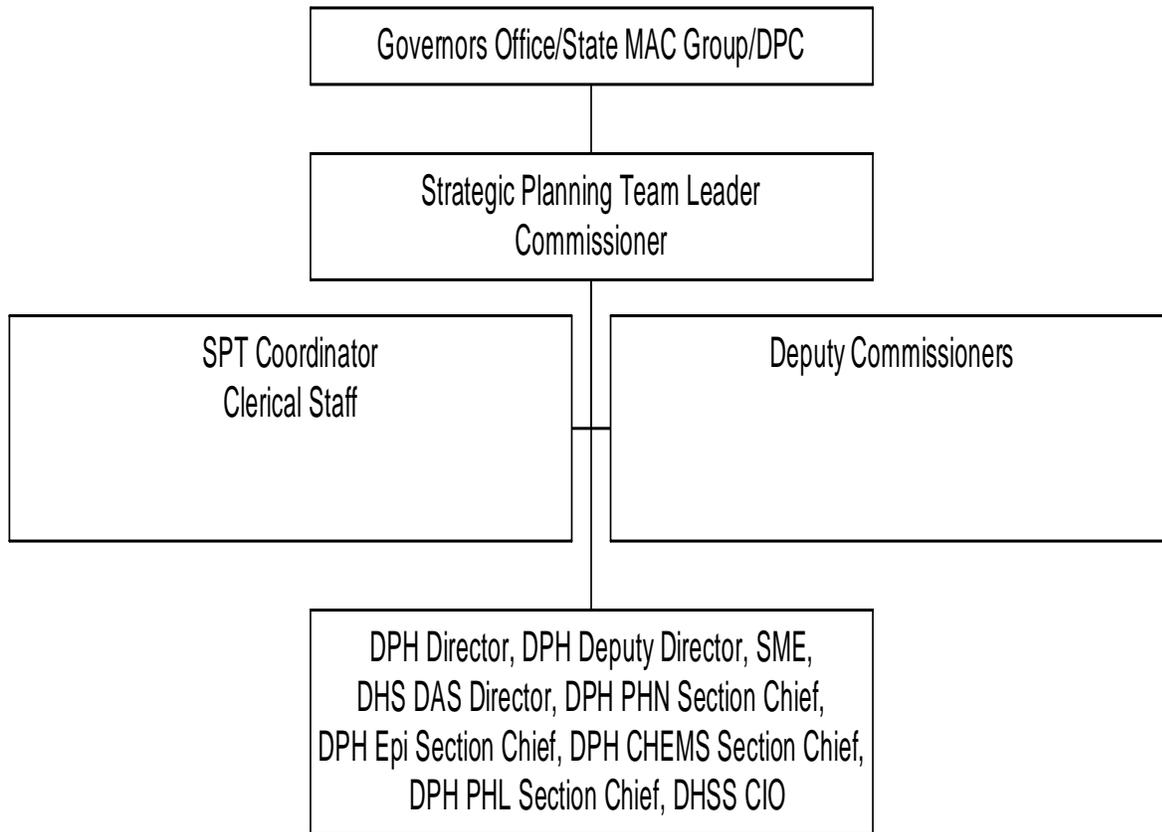


Draft compiled 1/2006

Division of Public Health  
Department of Health and Social Services

## *DRAFT (March 2004)*

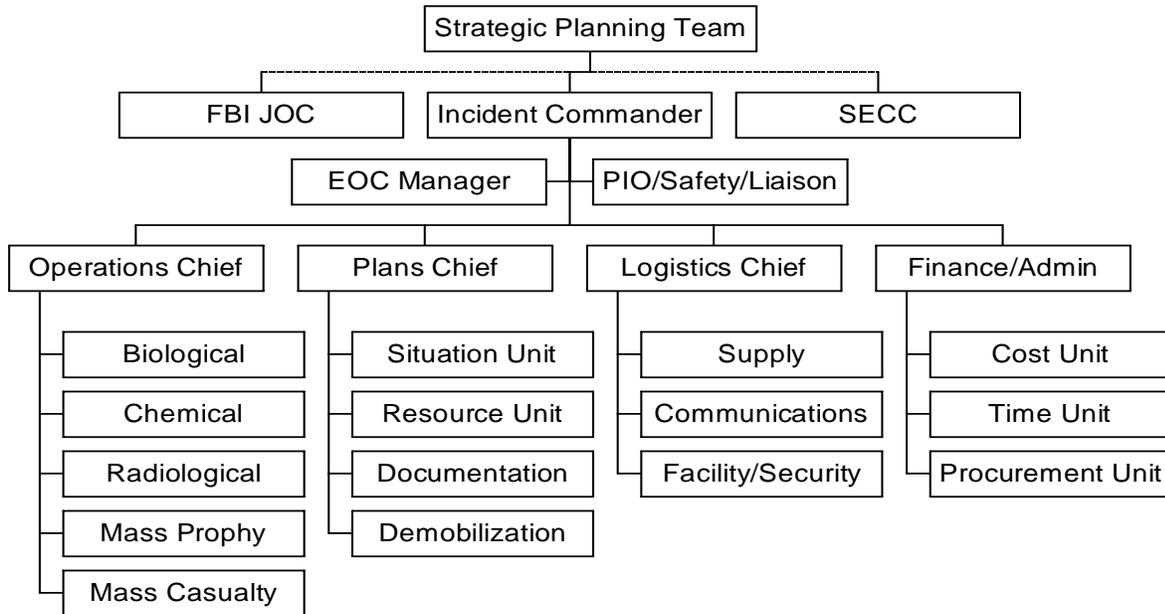
### DHSS/DPH Strategic Planning Team (SPT)



It should be noted that some of these individuals might also have a role to play on other teams or groups – that is very common during disasters but does require scheduling consideration.

- **SPT roles and responsibilities:**
  - **Advise Governor and State MAC Group**
  - **Set Departmental Objectives**
  - **Provide Policy and Priorities to DPH tactical assets**

## DPH EOC



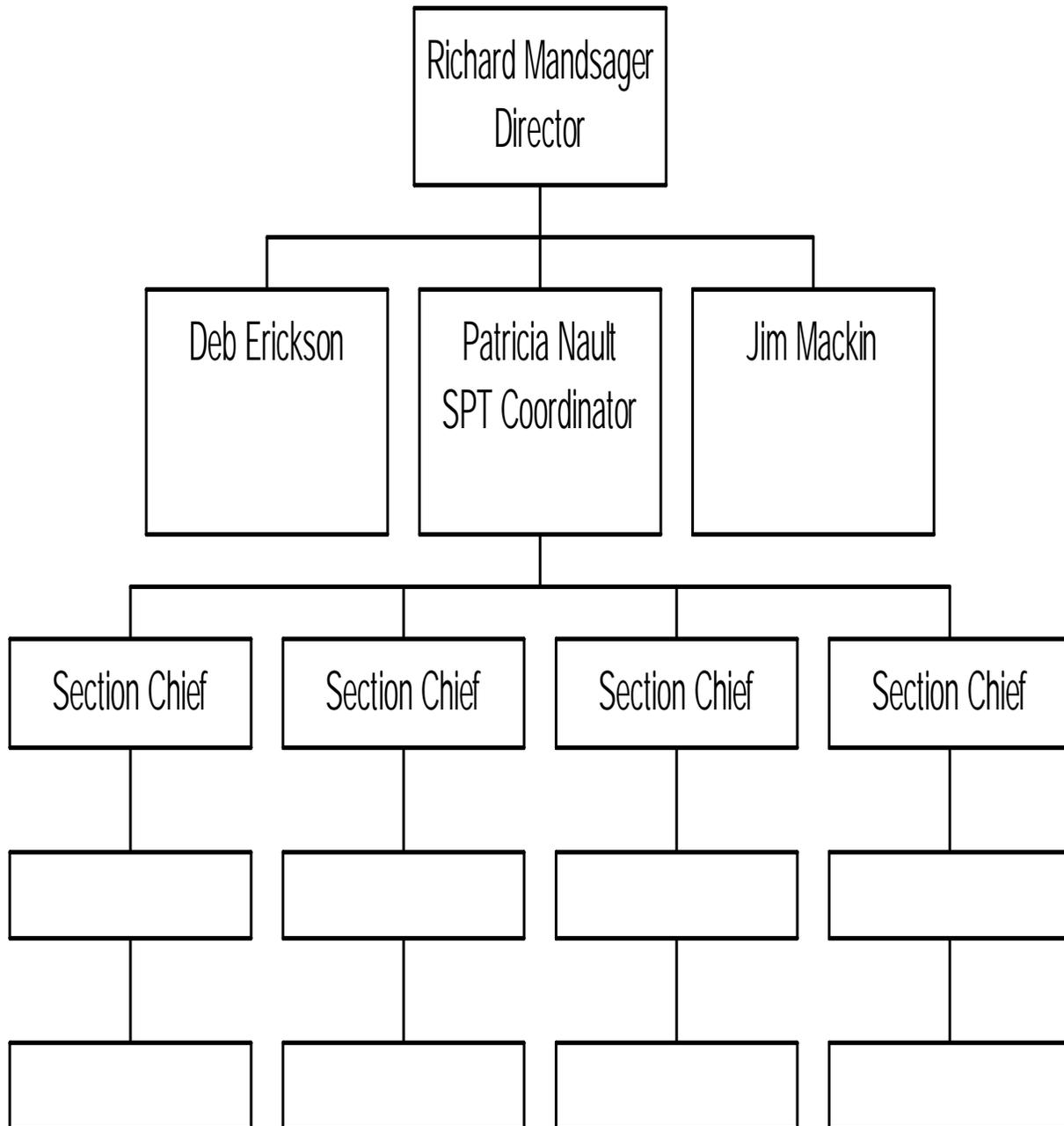
Dotted lines indicate coordination and solid lines indicate chain of command. It should be noted that some of these individuals might also have a role to play on other teams or groups – that is very common during disasters but does require scheduling consideration.

## DRAFT

# THREAT CONDITIONS AND RECOMMENDED ACTIONS

<b>Red Severe Condition</b>	<p>Severe risk of terrorist attack or significant health emergency. The State Emergency Coordination Center (SECC) may be activated. In addition to the previously listed protective measures, the following steps may be taken:</p> <ul style="list-style-type: none"> <li>• Announce change in threat level to staff.</li> <li>• Deploy staff to Emergency Operations Center as appropriate.</li> <li>• Deny access to critical facilities</li> <li>• Cancel or delay employees travel and leave, as appropriate.</li> <li>• Coordinate a timely release of information to the media.</li> <li>• Heighten surveillance</li> <li>• Update employees and the public regularly</li> </ul>
<b>Orange High Condition</b>	<p>High Risk of terrorist attacks or significant health emergency. This condition may or may not require activation of the Division EOC or the State SECC depending on local assessment. In addition to the previously listed measures, the following steps may be taken.</p> <ul style="list-style-type: none"> <li>• Announce change in threat level to employees</li> <li>• Advise staff of their responsibilities</li> <li>• Be alert to suspicious activity and report it to the proper authorities</li> <li>• Discuss actions to be taken and activate emergency plans if necessary</li> <li>• Require identification, sign-in and escorts for building visitors.</li> <li>• Exercise communication plan</li> <li>• Monitor current events</li> <li>• Satellite phones must be out of their cases and able to receive calls.</li> <li>• Ensure cell phones and pagers are fully charged.</li> <li>• Check all 24/7 contact information and ensure that it is up to date and accurate.</li> <li>• Ensure local emergency managers, law enforcement and other emergency response partners have access to the 24/7 contact information.</li> </ul>
<b>Yellow Elevated Condition</b>	<p>Significant risk of terrorist attacks. This condition may or may not activate the EOC, depending on local assessment. In addition to the previously listed protective measures, the following steps may be taken:</p> <ul style="list-style-type: none"> <li>• Announce change in threat level to employees</li> <li>• Be alert to suspicious activity and report it to the proper authorities</li> <li>• Review mail handling procedures with employees</li> <li>• Monitor current news events</li> <li>• Keep public informed on threats and advisories</li> <li>• Conduct emergency plan exercises to ensure procedures are understood</li> <li>• Ensure that satellite phones are charged and operable.</li> </ul>
<b>Blue Guarded Condition</b>	<p>General risk of terrorist attacks. In addition to the previously listed protective measures, the following steps may be taken:</p> <ul style="list-style-type: none"> <li>• Check communications with field offices</li> <li>• Review division emergency responsibilities with employees</li> <li>• Encourage employees to have personal emergency plans in place including emergency day care arrangement, family communications etc.</li> <li>• Review emergency call list and procedures for emergency mobilization.</li> <li>• Conduct emergency response training exercises.</li> </ul> <p>Provide on going community education on emergency preparedness.</p>
<b>Green Low Condition</b>	<p>Low risk of terrorist attacks. The division should consider the following general measures:</p> <ul style="list-style-type: none"> <li>• Review and update emergency preparedness plans</li> <li>• Conduct exercises to practice emergency preparedness plans</li> <li>• Conduct routine inventories of emergency supplies and medical kits</li> <li>• Establish and maintain emergency notification list of key personnel</li> <li>• Ensure employees receive training on the Homeland Security Threat Levels and specific division protective measures.</li> <li>• Ensure division satellite phones are being adequately maintained.</li> </ul>

# Division of Public Health Emergency Calling Tree



**Personnel Contact List**

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Deputy Commissioner: Tony Lombardo                      465-3030  
Deputy Commissioner  
Of Operations: Bill Hogan                      465-3030  
Deputy Commissioner  
Office of Children’s Services: Tammy Sandovall                      465-3030

**Finance & Management Services:**

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**Section of Laboratories:**

Chief: Dr. Bernd Jilly                      334-2109

# **EOC ACTIVATION PROCEDURES**

## **I. PURPOSE**

To establish procedures for activation and operation of the Public Health Emergency Operations Center (EOC).

## **II. NOTIFICATION**

Notification of an emergency or disaster may come from a variety of sources. Standing DHSS communications and media protocols will always be followed to alert leadership of a real or potential problem. The SPT (see concept of operations under organization) will meet to provide leadership support to agency personnel, interagency team and the Governor.

## **III. CONCEPT OF OPERATIONS**

### **A. ACTIVATION**

1. The decision to activate the EOC will be made by the Director and SPT members when it is determined that the activation of the EOC is required to coordinate the response to a Public Health emergency.
2. Activation will involve the use of the EOC activation list to notify and assemble EOC personnel. Only the Director or their designee has the authority to activate the EOC Activation List. The Director will contact the SPT coordinator for assistance in notifying personnel.

### **B. ACTIVATION LEVELS**

The Director or their designee will determine the EOC activation level.

Level –1-Normal Operations-during level 1 activation the staff will monitor developing situations under normal operating conditions.

Level – 2-Partial Activation-When the director determines there is sufficient reason or when requested by the State Emergency Operations Center (SECC), a partial activation may be ordered. Response activities and information are coordinated through the Emergency Operations Center. Daily briefings will be held for the SPT.

Level-3-Full Activation – Represents full activation, with the SPT, Command Staff and Section Chiefs either reporting to a determined location or by VEOC using the 1<sup>st</sup> class system.

### **C. ASSIGNMENT OF RESPONSIBILITIES**

- Operation of the EOC will be coordinated by the Incident Commander (IC), who could either be the Public Health Preparedness Program Manager, SNS Program Manager, Section Chief(s), Deputy Director or Director, depending upon the nature of the incident, staff availability and duration of incident.
- A checklist approach will be taken to initiate activation of the EOC.
- The Strategic Planning Team (SPT), as described in the Basic Plan will make policy decisions.
- The Incident Command Team (ICT), as described in the Basic Plan will make tactical decisions.
- The SPT Coordinator will serve as liaison between the SPT and the ICT.
- When the EOC is activated, space will be utilized as suits the operation and designated by the IC.
- When the EOC is activated, the IC will provide the initial situation briefing. Subsequent meetings will be held as needed.

### **D. COMMUNICATIONS**

- Communication protocols are to be made following the Departments communication and media plan.
- Communication within the EOC will be via a combination of one-to-one conversations, written messages (utilizing message form, group briefings and computer access.
- Communications between non-EOC staff and responders, SECC, and other stakeholders will be telephone to include satellite, fax, and the 1<sup>st</sup> class system.

**EOC ACTIVATION CHECKLIST**  
**DIVISION OF PUBLIC HEALTH EOC**

Upon notification of a significant event occurring or possibility of occurring:	✓ DATE/TIME
SPT coordinator convenes meeting either physical or virtual of the SPT, to include Division Directors, Commissioner and other stakeholder representatives.	<input type="checkbox"/> _____
Based on information obtained in situation briefs from the affected area EOC, Public Health Nurses, Epidemiology etc. SPT determines:	<input type="checkbox"/> _____
<ul style="list-style-type: none"> <li>➤ Identifies Incident Commander</li> <li>➤ Determine level of activation and staffing for the EOC</li> <li>➤ Determine physical or Virtual EOC or both</li> <li>➤ If physical determine location of EOC</li> </ul>	
Initiate Crisis communication plan	<input type="checkbox"/> _____
Virtual EOC via 1 <sup>st</sup> class system- set-up conference folder and password	<input type="checkbox"/> _____
Call up personnel needed to staff the EOC Sections and Units as needed for the incident. (Logistics, Operations etc.)	<input type="checkbox"/> _____
Analyze initial status information and prepare Incident Action Plan for Public Health.	<input type="checkbox"/> _____
Notify appropriate partner agencies	<input type="checkbox"/> _____
Coordinate public health emergency information as necessary	<input type="checkbox"/> _____

## **EOC SUPPLIES**

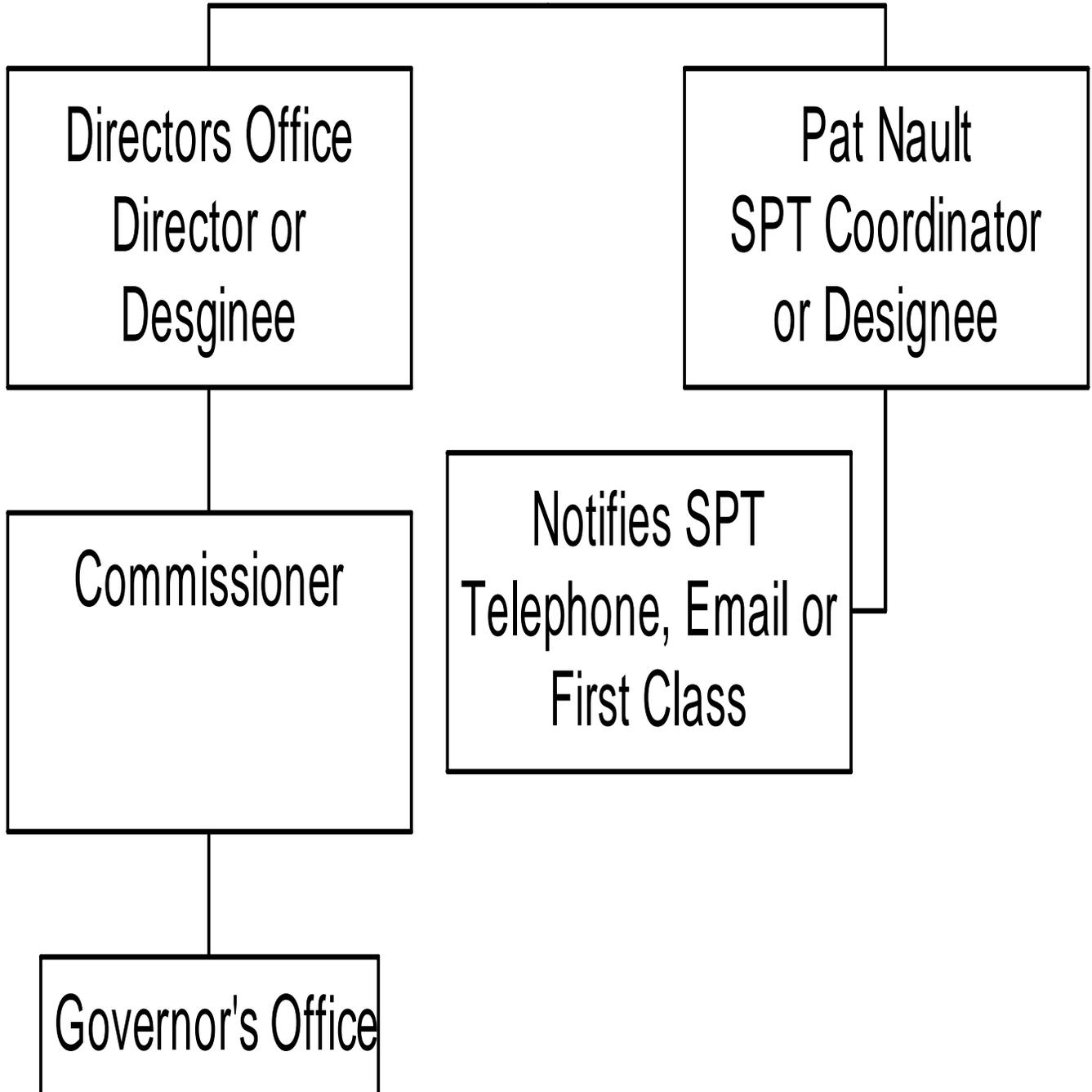
_____	Auxiliary power
_____	Telephones
_____	handsets
_____	lines
_____	switchboard
_____	Satellite Phones
_____	Fax machine
_____	Copy Machine
_____	Computer terminal
_____	Typewriters/word processors
_____	T.V.s
_____	VCR
_____	Radios
_____	Extension cords
_____	Tables
_____	Chairs
_____	Overhead with screen
_____	Bulletin boards
_____	Display boards
_____	Maps
_____	Map Pens (Vis a Vis) 8 colors
_____	Clear plastic mylar
_____	Flip Chart easel
_____	Flipchart pads
_____	Large manila envelopes 12" x 16"
_____	Heavy duty staplers
_____	Heavy duty staples
_____	Standard desk top staplers
_____	Standard desk top staples
_____	Paper clips
_____	Staple puller
_____	Push pins
_____	1" masking tape
_____	Writing pads
_____	Pencils
_____	Pens; black and red ink
_____	Assorted rubber bands
_____	Scotch Tape
_____	Standard file folders

*DRAFT (March 2004)*

**EOC SUPPLIES, continued.**

_____	Erasers
_____	Post-it- pads,
_____	small
_____	medium
_____	large
_____	Legal size writing pads
_____	Legal size clipboards
_____	Three hole punch
_____	File folder labels
_____	2" x 3" blank labels
_____	Telephone memo call pads
_____	Dictionary
_____	Erasable felt tip pens, assorted colors
_____	Copy paper
_____	Computer printer paper
_____	Fax paper
_____	Boxes for filing
_____	ICS forms
_____	Other forms
_____	Name tags
_____	Physical needs
_____	coffee
_____	smoking area
_____	restrooms
_____	food

# Notification Sequence



ORGANIZATION ASSIGNMENT LIST	<u>DATE PREPARED</u>	<u>TIME PREPARED</u>	<u>OPERATIONAL PERIOD</u>
<u>INCIDENT NAME</u>			
<b>INCIDENT COMMANDER AND STAFF</b>			
INCIDENT COMMANDER		Information Officer	
EOC Manager		Liaison Officer	
Safety Officer		Legal Officer	
<b>OPERATIONS SECTION</b>			
SECTION CHIEF		Mass Casualty Branch Chief	
Biological Branch Chief			
		Mass Prophylaxis Branch Chief	
Chemical Branch Chief			
		Radiological Branch Chief	
<b>PLANNING SECTION</b>			
SECTION CHIEF		Resources Unit Leader	
Situation Unit Leader			
		Demobilization Unit Leader	
Documentation Unit Leader			
<b>LOGISTICS SECTION</b>			
SECTION CHIEF		Communications Unit Leader	
Supply Unit Leader			
		Facilities/ Security Unit Leader	
<b>FINANCE/ADMINISTRATION SECTION</b>			
SECTION CHIEF		Procurement Unit Leader	
Cost Unit Leader			
		Time Unit Leader	

Figure 3, Public Health Emergency Operations Plan (DRAFT) May 2003

**PUBLIC HEALTH EOC  
STRATEGIC PLANNING TEAM COORDINATOR  
CHECKLIST**

*Responsibilities:*

Provide event situation updates to the Strategic Planning Team members. Coordinate meetings and assist with notifying division personnel. Provide situation reports to Governor.

	<u>DATE/TIME</u>
- Assist with the activation of the Public Health Emergency Operations Center	<input type="checkbox"/> _____
- Obtain briefing on the extent of incident from operational area EOC or PHN field personnel.	<input type="checkbox"/> _____
- Notify members of the SPT	<input type="checkbox"/> _____
- Coordinate SPT meetings: - Arrange meeting space - Set-up teleconferences - Notify team members	<input type="checkbox"/> _____
-Provide situation assessments and status reports to the Strategic Planning Team (SPT).	<input type="checkbox"/> _____
- In coordination with plans section, provide situation reports for governor.	<input type="checkbox"/> _____
- Maintain unit log of activities	<input type="checkbox"/> _____
- Submit all documentation to the Documentation Unit upon completion of the response.	<input type="checkbox"/> _____

**PUBLIC HEALTH EOC  
INCIDENT COMMANDER  
CHECKLIST**

*Responsibilities:*

Direct, manage and coordinate the Public Health Division response. Identify resource requirements and maintain contact with the other operational area EOC's.

	<u>DATE/TIME</u>
- Activate the Public Health Emergency Operations Center	<input type="checkbox"/> _____
- Establish contact with the affected area EOC.	<input type="checkbox"/> _____
- Assemble Section Chiefs for a briefing to assess the situation. Determine immediate needs in public health response. Obtain initial information on: <ul style="list-style-type: none"> <li>- Communications capability</li> <li>- Location and capacity of shelters opened by the American Red Cross</li> <li>- Location of environmental hazards, sewage, hazardous spills etc.</li> <li>- Evacuation underway</li> <li>- Hospital operational capacity, damages to hospitals.</li> <li>- Clinic operational capacity, damages to clinics</li> <li>- Road closures, weather reports, other hazard projections, e.g. aftershocks, flooding, etc.</li> <li>- Operational Area for EOC, staffing and hours.</li> </ul>	<input type="checkbox"/> _____
- Appoint Public Information Officer, Liaison Officer, Safety Officer and the EOC Manager.	<input type="checkbox"/> _____
- Approve media releases submitted by PIO	<input type="checkbox"/> _____
Ensure status boards are set up and incident documentation started.	<input type="checkbox"/> _____
Coordinate with the plans sections to begin development of the Incident Action Plan (IAP)	<input type="checkbox"/> _____
Direct Section Chiefs to notify personnel and develop assignment rosters.	<input type="checkbox"/> _____
Provide situation assessments and status reports to the Strategic Planning Team (SPT).	<input type="checkbox"/> _____
Determine resource needs (personnel, equipment, supplies, medicines, etc.) and transmit resource requests to the Logistics Section Chief.	<input type="checkbox"/> _____
Determine Staffing and operational hours.	<input type="checkbox"/> _____
Set briefing schedule	<input type="checkbox"/> _____
Monitor plans for delivery of health care in shelters and to high risk populations	<input type="checkbox"/> _____
Assist Operational Area EOC Director in decisions to evacuate or shelter in place in situations affecting health and safety	<input type="checkbox"/> _____
Ensure that Finance Section maintains documentation of response costs, including equipment, overtime labor hours, and travel.	<input type="checkbox"/> _____
At shift change provide detailed status report and all written materials to replacement staff.	<input type="checkbox"/> _____

**PUBLIC HEALTH EOC  
EOC MANAGER  
CHECKLIST**

*Responsibilities:*

Coordinate EOC set-up and ensure operation capacity of equipment, communications, and the facility. Monitor staff needs and provide support services during response. Monitor and assess hazardous and unsafe situations and develop measures for ensuring personnel safety and security during response.

	<u>DATE/TIME</u>
- Upon activation of the EOC by the Director, relocate activities in progress in the designated area in order to accommodate EOC operations.	<input type="checkbox"/> _____
- Document operational capacity of the facility, (power, water, building damage).	<input type="checkbox"/> _____
- Determine personnel support requirements for the EOC facility <ul style="list-style-type: none"> <li>➤ Identify additional personnel required for establishing, operating, and demobilizing the EOC.</li> <li>➤ Request additional personnel from Logistics Chief. Request should include:               <ul style="list-style-type: none"> <li>• Number of personnel needed</li> <li>• Qualifications</li> <li>• Reporting location</li> <li>• Reporting time</li> </ul> </li> <li>➤ Release any excess personnel</li> </ul>	<input type="checkbox"/> _____
- Obtain facility information from other DHSS divisions sites and assist in relocating services, if needed.	<input type="checkbox"/> _____
- Determine communication available and obtain additional communications equipment, as needed, e.g. cell phones.	<input type="checkbox"/> _____
- Set up EOC status boards	<input type="checkbox"/> _____
- Place EOC Section Chief name cards on conference table.	<input type="checkbox"/> _____
- Determine comfort level in EOC provide services, as needed to maintain sanitation, air circulation, food, water, etc.	<input type="checkbox"/> _____
- Manage relocation to another facility if necessary	<input type="checkbox"/> _____
- Set up security and access control at the EOC if necessary.	<input type="checkbox"/> _____
- Maintain Documentation of response costs, including equipment, overtime labor hours and mileage.	<input type="checkbox"/> _____
- At a shift change, provide a detailed status report and all written materials to replacement staff.	<input type="checkbox"/> _____
- Coordinate building security	<input type="checkbox"/> _____
- Demobilize facilities in accordance with incident demobilization plan.	<input type="checkbox"/> _____
- Maintain Unit Log (ICS Form-214)	<input type="checkbox"/> _____

**PUBLIC HEALTH EOC  
PUBLIC INFORMATION OFFICER  
CHECKLIST**

*Responsibilities:*

Coordinate with SPT, EOC Incident Commander and Section Chiefs to provide disaster related public information to the community. Coordinate contact with the media and preparation of news releases with the Operational Area EOC Public Information Officer.

**DATE/TIME**

- Obtain a situation briefing from the EOC Incident Commander.	<input type="checkbox"/> _____
- Obtain copies of current situation reports from the Plans Section.	<input type="checkbox"/> _____
- Contact the Operational Area EOC Public Information Officer for a report of health related public information activities managed from the Operational Area EOC.	<input type="checkbox"/> _____
- Determine and observe constraints on the release of information imposed by the EOC Incident Commander or Operational Area EOC.	<input type="checkbox"/> _____
- Attend EOC briefings.	<input type="checkbox"/> _____
- Establish a Joint Information Center in coordination with public information staff from other response organizations.	<input type="checkbox"/> _____
- Obtain IC approval for media releases.	<input type="checkbox"/> _____
- Obtain and review Incident Action Plan. Provide input to the IAP, as needed.	<input type="checkbox"/> _____
- Prepare an initial information summary as soon as possible after arrival, establish a schedule for summary updates and prepare updates.	<input type="checkbox"/> _____
- Inform on-site media of the physical areas they have access to, and those areas that are restricted.	<input type="checkbox"/> _____
- Coordinate with the Operational Area Public Information Officer to release information to the news media and post information in the EOC and other appropriate locations.	<input type="checkbox"/> _____
- In coordination with Operational Area EOC Public Information Officer, arrange from meetings between the media and incident personnel.	<input type="checkbox"/> _____
- In coordination with the Operational Area EOC Public Information Officer, provide escort service to the media and VIPs.	<input type="checkbox"/> _____
- Maintain documentation of public information and news media releases.	<input type="checkbox"/> _____
- Maintain documentation of response costs, including equipment, overtime labor hours, and mileage.	<input type="checkbox"/> _____
- At a shift change, provide a detailed status report and all written materials to replacement staff.	<input type="checkbox"/> _____

**Key DPH Communication Staff Roles and Responsibilities:**

**Director:** Deputy Director Erickson will also fill the following roles when the Director is unavailable.

- Provide oversight and direction of public communication activities
- Approve all Division media releases
- Act as spokesperson for broad policy issues

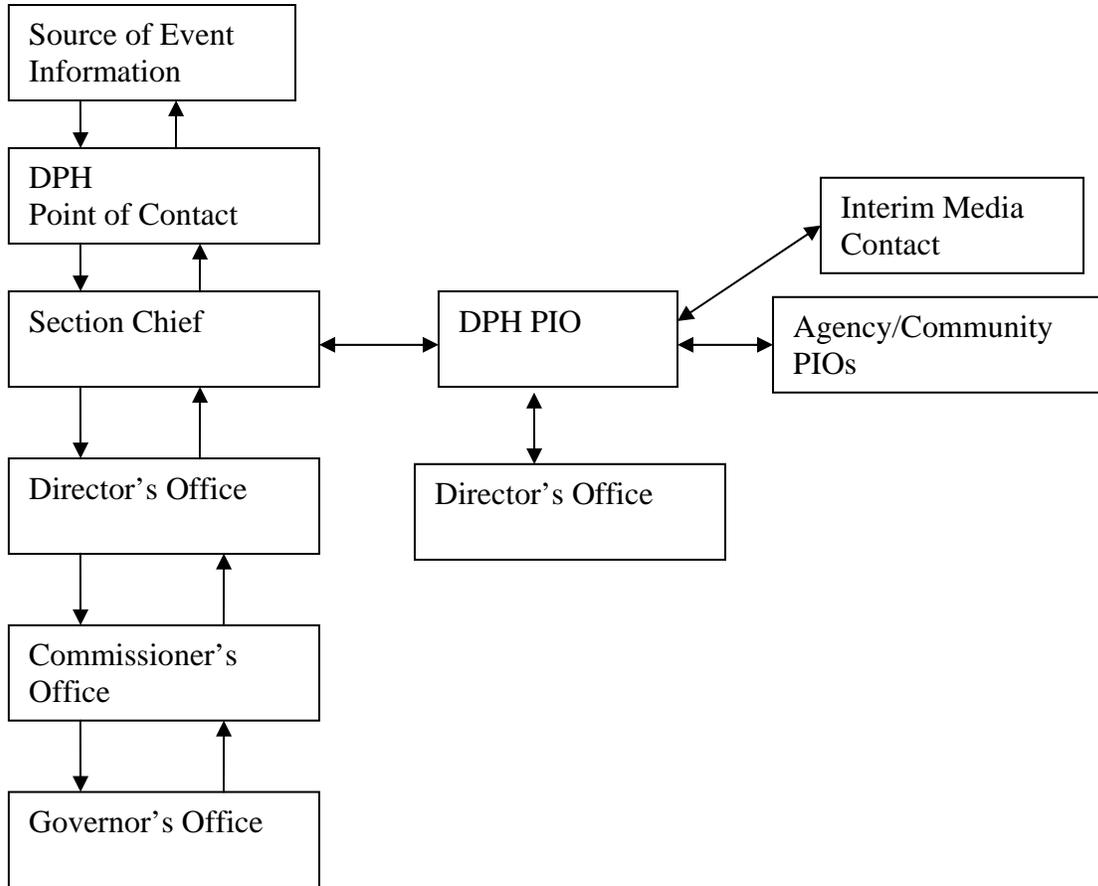
**Public Information Officer:** Primary DPH PIO is Kerre Fisher; Department PIO Ross Soboleff will be alternate for the Division if Kerre is unavailable. The DPH Director's office will have all contact information for Ross and Kerre.

- Arrange interviews with media and Division spokesperson(s)
- Provide background information and situation status updates to media
- Develop news releases and key messages
- Coordinate information release with other involved agency PIOs
- Refer media to other agency PIOs when appropriate
- Respond to public queries
- Respond or prepare response to legislative queries, when requested by Director

**Spokesperson:** Primary public health emergency spokesperson for DPH is Dr. Beth Funk, Medical Epidemiologist; primary spokesperson for laboratory issues and specimen handling questions is Dr. Bernd Jilly. Other subject matter experts within the Division or public health nurses may also be called upon to give interviews on specific topics as necessary.

- Participate in media interviews and press conferences as DPH representative
- Discuss division operations, intentions, and policy matter (as appropriate)

**Communication Flowchart for Notification of DPH and DH&SS  
Senior Management Staff**



<b>PUBLIC HEALTH EOC LEGAL OFFICER CHECKLIST</b>
--

*Responsibilities:*

Advise and provide legal counsel to IC and SPT.

	<b><u>DATE/TIME</u></b>
- Report to the Division Emergency Operations Center	<input type="checkbox"/> _____
- Obtain briefing from Incident Commander	<input type="checkbox"/> _____
- Advise and provide legal counsel to the SPT and IC regarding legal implications of the organization's response.	<input type="checkbox"/> _____
- Provide legal counsel and direction for the organization's investigation effort.	<input type="checkbox"/> _____
- Provide documentation guidance for maintaining a legal record of the incident.	<input type="checkbox"/> _____
- Maintain a unit log of activities	<input type="checkbox"/> _____
- Submit all documentation to the Documentation Unit upon completion of the response.	<input type="checkbox"/> _____

**PUBLIC HEALTH EOC  
LIAISON OFFICER  
CHECKLIST**

*Responsibilities:*

Assist in establishing and coordinating interagency contacts.

	<b><u>DATE/TIME</u></b>
- Report to the Division Emergency Operations Center	<input type="checkbox"/> _____
- Obtain briefing from Incident Commander	<input type="checkbox"/> _____
- Provide a point of contact for assisting cooperating Agency Representatives.	<input type="checkbox"/> _____
- Identify Agency Representatives from each agency including communications link and location.	<input type="checkbox"/> _____
- Identify all stakeholders including affected communities, interest groups, government agencies etc.	<input type="checkbox"/> _____
- Maintain a list of assisting and coordinating interagency contacts	<input type="checkbox"/> _____
- Respond to requests for information from stakeholders.	<input type="checkbox"/> _____
- Identify current or potential concerns of stakeholders, and convey to Incident Commander.	<input type="checkbox"/> _____
- Keep agencies supporting incident aware of incident status.	<input type="checkbox"/> _____
- Monitor incident operations to identify current or potential inter-organizational issues and advise IC as appropriate.	<input type="checkbox"/> _____
- Participate in planning meetings, provide current resource status information, including limitations and capabilities of assisting agency resources.	<input type="checkbox"/> _____
- Arrange meetings between response staff and stakeholders as required.	<input type="checkbox"/> _____
- Maintain a unit log of all activities	<input type="checkbox"/> _____
- Submit all documentation to the Documentation Unit upon completion of the response.	<input type="checkbox"/> _____

<b>PUBLIC HEALTH EOC SAFETY OFFICER CHECKLIST</b>
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*Responsibilities:*

Monitor and assess hazardous and unsafe situations and develop measures for ensuring personnel safety and security during response.

- Ensure safety of the Public Health EOC facility. Remove obvious hazards and obtain assistance for debris clearance and emergency bracing or shoring. Determine any building areas off-limits and place barricade tape, as needed.	□ _____
- Obtain emergency assignment rosters from Section chiefs and use to determine location of field personnel.	□ _____
- Visit field sites to identify hazardous and unsafe conditions associated with the incident.	□ _____
- Exercise emergency authority to stop and prevent unsafe acts or correct obvious hazards.	□ _____
- Investigate accidents that have occurred within incident areas and assist with accident claims.	□ _____
- Attend EOC briefings	□ _____
- Provide safety instruction published with the Incident Action Plan at each operational period.	□ _____
- Coordinate with the Claims Group to investigate and manage disaster-related injury and property claims.	□ _____
- Maintain documentation of response costs, including equipment, overtime labor hours and mileage.	□ _____
- At shift change, provide a detailed status report and all written materials to replacement staff.	□ _____

**PUBLIC HEALTH EOC  
OPERATIONS SECTION CHIEF  
CHECKLIST**

*Responsibilities:*

Activate and supervise the Public Health response operations. Assist in the development of the Incident Action Plan. Assist in maintaining contact with operational area EOC, Public Health Field Responders and other responding agencies.

	<u>DATE/TIME</u>
- Report to the Division Emergency Operations Center	<input type="checkbox"/> _____
-Request status reports from the Plans Section. <ul style="list-style-type: none"> <li>➤ Communications Capability</li> <li>➤ Location and capacity of shelter opened by the American Red Cross</li> <li>➤ Location of Environmental hazards, sewage, hazardous spills etc.</li> <li>➤ Evacuation underway</li> <li>➤ Hospital operational capacity, damages to hospitals.</li> <li>➤ Clinic Operational capacity, damage to clinics</li> <li>➤ Road closures, weather reports, other hazard projections, e.g. aftershocks, flooding etc.</li> <li>➤ Operational Area EOC staffing and hours</li> <li>➤ Casualty Status</li> </ul>	<input type="checkbox"/> _____
Coordinate with the Plans Section Chief to write the Incident Action Plan	<input type="checkbox"/> _____
Obtain emergency assignment rosters from Branch Chiefs and assign personnel in accord with the Incident Action Plan.	<input type="checkbox"/> _____
Monitor implementation of public health, environmental health, and mental health response.	<input type="checkbox"/> _____
Determine need for resources (personnel, equipment, and supplies) and transmit request to Logistics Section.	<input type="checkbox"/> _____
Attend EOC briefings	<input type="checkbox"/> _____
Consider staffing and resource needs for the next operational period (8 hours).	<input type="checkbox"/> _____
Obtain ongoing status reports and resource requests from SECC, Boroughs and City EOC's.	<input type="checkbox"/> _____
Provide briefings and status updates for arriving Operations Branch personnel at each shift change.	<input type="checkbox"/> _____
Prepare and updated Incident Action Plan and staffing list to the EOC Incident Commander before leaving Operational duties to the next shift.	<input type="checkbox"/> _____
Prepare Operations Section documentation to the plans section when the EOC is demobilized	<input type="checkbox"/> _____
Maintain contact with other Section Chiefs to assist in coordinating resources.	<input type="checkbox"/> _____
Maintain contact with the Department Mental Health Unit to assist in coordinating Critical Incident Stress Debriefings.	<input type="checkbox"/> _____
Ensure that status logs and time sheets for the Operations Sections EOC personnel are complete for each operational period.	<input type="checkbox"/> _____

**PUBLIC HEALTH EOC  
OPERATIONS  
BIOLOGICAL BRANCH CHIEF  
CHECKLIST**

***Responsibilities:***

***Provide Public Health nursing services at shelters and disaster facilities. Conduct infection control and surveillance. Conduct emergency immunizations. Provide disaster-related assistance to high-risk and medically dependent populations. Establish public health response teams to provide disaster-related services in the affected community.***

	<u>DATE/TIME</u>
- Report to the EOC Operations Section Chief	☐ _____
- Obtain information on the status of the incident from the Operations Section Chief and the Plans Section Chief.	☐ _____
- As needed refer to Alaska Public Health Emergency Operations Plan: - Biological Annex - Mass Prophylaxis Annex. - Pandemic Flu Annex Or the - Section of Epidemiology Investigation Manual	☐ _____
- Coordinate with local health care providers and local emergency management and government officials.	☐ _____
- In coordination with Public Health Nurse (at the affected area EOC) and epidemiologist determine the need for emergency immunization and coordinate immunization efforts.	☐ _____
- Coordinate with the division of Labs sampling and shipping procedures.	☐ _____
- Coordinate with SECC if response teams are part of larger Incident Management team.	☐ _____
- Verify notification of partner agencies and health care providers.	☐ _____
- Ensure that healthcare information and clinic support to health care providers has been provided through the Health Alert Network.	☐ _____
- Determine assignments to Public Health Response Teams and develop duty roster.	☐ _____
- Ensure Division responders have proper (PPE) personal protective equipment.	☐ _____
- Coordinate travel, lodging, equipment and supply needs with the logistics section.	☐ _____
- Monitor Public Health services and provide status reports to the Plans section chief.	☐ _____
- Establish daily briefing schedule with field teams.	☐ _____

**PUBLIC HEALTH EOC  
OPERATIONS  
BIOLOGICAL BRANCH CHIEF  
CHECKLIST**  
*Continued*

- Coordinate field reports with State and Federal officials as necessary.	<input type="checkbox"/> _____
- Coordinate with DEC to monitor food safety and sanitation at shelters and correct deficiencies.	<input type="checkbox"/> _____
- Coordinate with the Division of Mental Health to monitor delivery of critical incident stress debriefing for response personnel and grief/stress counseling for the affected community.	<input type="checkbox"/> _____
- Determine number and location of shelters.	<input type="checkbox"/> _____
- Monitor Public Health Nursing staff assigned to shelters and assist in identifying needs and obtaining resources.	<input type="checkbox"/> _____
- Identify the high-risk population at shelters and in the community and provide assistance.	<input type="checkbox"/> _____
- Determine the need for public health information. Coordinate with the Public Information Officer to prepare new materials or obtain existing materials for distribution at shelters and in the community.	<input type="checkbox"/> _____
- Coordinate with the American Red Cross to identify and assist shelter clients needing emergency medications or medical care.	<input type="checkbox"/> _____
- Maintain documentation of response costs, including equipment; overtime labor hours, and mileage.	<input type="checkbox"/> _____
- At a shift change, provide detailed status report and all written materials to replacement staff.	<input type="checkbox"/> _____

**PUBLIC HEALTH EOC  
OPERATIONS  
CHEMICAL BRANCH CHIEF  
CHECKLIST**

***Responsibilities:***

***Provide Public Health nursing services at shelters and disaster facilities. Conduct infection control and surveillance. Conduct emergency immunizations. Provide disaster-related assistance to high-risk and medically dependent populations. Establish public health response teams to provide disaster-related services in the affected community.***

	<b>DATE/TIME</b>
- Report to the EOC Operations Section Chief	□ _____
- Obtain information on the status of the incident from the Operations Section Chief and the Plans Section Chief.	□ _____
- As needed refer to Alaska Public Health Emergency Operations Plan Chemical Annex.	□ _____
- Coordinate with local officials and other 1 <sup>st</sup> responder agencies to identify course of action. (shelter in place, evacuation).	□ _____
- Coordinate with the Division of labs the, 1 <sup>st</sup> responder sampling, packaging and shipping of samples.	□ _____
- Coordinate with CDC for subsequent shipment to CDC lab.	□ _____
- Coordinate with SECC level A Hazmat or CST 103 <sup>rd</sup> support as necessary.	□ _____
- Ensure that healthcare information and clinic support to health care providers has been provided through the Health Alert Network.	□ _____
- Coordinate travel, lodging, equipment and supply needs with the logistics section.	□ _____
- Determine assignments to Public Health Response Teams and develop duty roster.	□ _____
- Ensure Division responders have proper (PPE) personal protective equipment.	□ _____
- Monitor Public Health services and provide status reports to the Status Report Group Leader.	□ _____
- Establish daily briefing schedule with field teams.	□ _____
- Coordinate field reports with State and Federal officials as necessary.	□ _____
- Verify notification of partner agencies	□ _____
- Coordinate with DEC to monitor food safety and sanitation at shelters and correct deficiencies.	□ _____

**PUBLIC HEALTH EOC  
OPERATIONS  
CHEMICAL BRANCH CHIEF  
CHECKLIST**  
*Continued*

- Coordinate with the Division of Mental Health to monitor delivery of critical incident stress debriefing for response personnel and grief/stress counseling for the affected community.	<input type="checkbox"/> _____
- Identify the high-risk population at shelters and in the community and provide assistance.	<input type="checkbox"/> _____
- Determine the need for public health information. Coordinate with the Public Information Officer to prepare new materials or obtain existing materials for distribution at shelters and in the community.	<input type="checkbox"/> _____
- Coordinate with the American Red Cross to identify and assist shelter clients needing emergency medications or medical care.	<input type="checkbox"/> _____
- Maintain documentation of response costs, including equipment; overtime labor hours, and mileage.	<input type="checkbox"/> _____
- At a shift change, provide detailed status report and all written materials to replacement staff.	<input type="checkbox"/> _____

**PUBLIC HEALTH EOC  
OPERATIONS  
RADIOLOGICAL BRANCH CHIEF  
CHECKLIST**

***Responsibilities:***

***Assess the impact of the effects of the radiological incident/accident on the health of the populace in the affected area.***

	DATE/TIME
- Report to the EOC Operations Section Chief	<input type="checkbox"/> _____
- Obtain information on the status of the incident from the Operations Section Chief and the Plans Section Chief.	<input type="checkbox"/> _____
- As needed refer to State Health Lab Section of Radiology for statewide Radiological Response Plan.	<input type="checkbox"/> _____
- Alert the US Food and Drug Administration (US FDA) and the US Nuclear Regulatory Commission (NRC) of the potential for radiological contamination impacting the State of Alaska.	<input type="checkbox"/> _____
- Coordinate with local officials and other 1 <sup>st</sup> responder agencies to identify course of action and advise on the potential health hazards resulting from the deposition of radiological contamination.	<input type="checkbox"/> _____
- Coordinate with SECC	<input type="checkbox"/> _____
- Maintain contact with health facilities and provide them with updated status reports.	<input type="checkbox"/> _____
- Ensure that healthcare information and clinic support to health care providers has been provided through the Health Alert Network.	<input type="checkbox"/> _____
- Determine assignments to Public Health Response Teams and develop duty roster.	<input type="checkbox"/> _____
- Ensure Division responders have proper (PPE) personal protective equipment.	<input type="checkbox"/> _____
- Coordinate travel, lodging, equipment and supply needs with the logistics section.	<input type="checkbox"/> _____
- Establish daily briefing schedule with field teams.	<input type="checkbox"/> _____
- Coordinate field reports with State and Federal officials as necessary.	<input type="checkbox"/> _____
- Coordinate with DEC to monitor food safety and sanitation at shelters and correct deficiencies.	<input type="checkbox"/> _____
- Coordinate with the Division of Mental Health to monitor delivery of critical incident stress debriefing for response personnel and grief/stress counseling for the affected community.	<input type="checkbox"/> _____
- Identify the high-risk population at shelters and in the community and provide assistance.	<input type="checkbox"/> _____
- Determine the need for public health information. Coordinate with the Public Information Officer to prepare new materials or obtain existing materials for distribution at shelters and in the community.	<input type="checkbox"/> _____
- Coordinate with the American Red Cross to identify and assist shelter clients needing emergency medications or medical care.	<input type="checkbox"/> _____
- Maintain documentation of response costs, including equipment; overtime labor hours, and mileage.	<input type="checkbox"/> _____
At a shift change, provide detailed status report and all written materials to replacement staff.	<input type="checkbox"/> _____

<p><b>PUBLIC HEALTH EOC OPERATIONS MASS PROPHYLAXIS BRANCH CHIEF CHECKLIST</b></p>
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**Responsibilities:**

*Conduct emergency immunizations. Provide disaster-related assistance to high-risk and medically dependent populations. Establish public health response teams to provide disaster-related services in the affected community.*

	<u>DATE/TIME</u>
- Report to the EOC Operations Section Chief	<input type="checkbox"/> _____
- Obtain information on the status of the incident from the Operations Section Chief and the Plans Section Chief.	<input type="checkbox"/> _____
- Review components of the Mass Prophylaxis Planning Guide	<input type="checkbox"/> _____
- Establish planning committee with community partners; identify local, regional, state and federal response partners.	<input type="checkbox"/> _____
- Inventory community high-density population areas to determine priority clinic locations, high-risk worker groups and vulnerable population groups.	<input type="checkbox"/> _____
- Appoint Clinic Command Staff	<input type="checkbox"/> _____
- Establish communication and public information plan. Review risk communication annex to EOP.	<input type="checkbox"/> _____
- Appoint a community volunteer coordinator	<input type="checkbox"/> _____
- Review proposed clinic site with facility officials	<input type="checkbox"/> _____
- Develop traffic control plan	<input type="checkbox"/> _____
- Develop security plan	<input type="checkbox"/> _____
- Coordinate personnel, supply and equipment needs with logistics section.	<input type="checkbox"/> _____
- Ensure staff/worker safety including proper PPE.	<input type="checkbox"/> _____
- Establish directory of key staff/volunteers for each clinic/facility site.	<input type="checkbox"/> _____
- Develop clinic operations plan including the following for each clinic: <ul style="list-style-type: none"> <li>- procedures for receipt, transport, storage SNS supplies if required.</li> <li>- Procedure to prioritize high risk/essential work groups</li> <li>- Ensure availability of emergency transport to clinic site if needed.</li> <li>- Procedures for segregating sick from well</li> <li>- Procedures for dispense medication to vulnerable populations.</li> <li>- Procedures for tracking, follow-up, recall if second clinic provided</li> <li>- Procedures for deactivation clinic.</li> </ul>	<input type="checkbox"/> _____

**PUBLIC HEALTH EOC  
OPERATIONS  
MASS PROPHYLAXIS BRANCH CHIEF  
CHECKLIST  
Continued**

- Coordinate with the Division of Mental Health to monitor delivery of critical incident stress debriefing for response personnel and grief/stress counseling for the affected community.	☐ _____
- Identify the high-risk population at shelters and in the community and provide assistance.	☐ _____
- Determine the need for public health information. Coordinate with the Public Information Officer to prepare new materials or obtain existing materials for distribution at shelters and in the community.	☐ _____
- Coordinate with the American Red Cross to identify and assist shelter clients needing emergency medications or medical care.	☐ _____
- Maintain documentation of response costs, including equipment; overtime labor hours, and mileage.	☐ _____
At a shift change, provide detailed status report and all written materials to replacement staff.	☐ _____

**PUBLIC HEALTH EOC  
OPERATIONS  
MASS CASUALTY BRANCH CHIEF  
CHECKLIST**

**Responsibilities:**

*Coordinate response efforts for Mass Casualty Incident to include: emergency medical, health care, public health and mental health resources. Establish public health response teams to provide disaster-related services in the affected community.*

	<u>DATE/TIME</u>
- Report to the EOC Operations Section Chief	□ _____
- Obtain information on the status of the incident from the Operations Section Chief and the Plans Section Chief.	□ _____
- Review components of the Mass Casualty Annex to the EOP.	□ _____
- Coordinate response with SECC	□ _____
- Ensure that healthcare information and clinic support to health care providers has been provided through the Health Alert Network.	□ _____
- Coordinate with State Medical Examiners Office.	□ _____
- Make recommendations regarding, Strategic National Stockpile (SNS), Disaster Medical Teams (DMAT's) and Disaster Mortuary Teams (DMORG'S).	□ _____
- Establish communication and public information plan. Review risk communication annex to EOP.	□ _____
- Provide patient tracking information.	□ _____
- Coordinate the notification of next of kin for injured and deceased.	□ _____
- Coordinate request for medical resources from Federal Government if necessary.	□ _____
- Coordinate division personnel, supply and equipment needs with logistics section.	□ _____
- Ensure staff/worker safety including proper PPE.	□ _____
- Coordinate with the Division of Mental Health to monitor delivery of critical incident stress debriefing for response personnel and grief/stress counseling for the affected community.	□ _____
- Determine the need for public health information. Coordinate with the Public Information Officer to prepare new materials or obtain existing materials for distribution at shelters and in the community.	□ _____
- Maintain documentation of response costs, including equipment; overtime labor hours, and mileage.	□ _____
At a shift change, provide detailed status report and all written materials to replacement staff.	□ _____

**PUBLIC HEALTH EOC  
LOGISTICS SECTION CHIEF  
CHECKLIST**

*Responsibilities:*

Assist to obtain resources for response. Assist the EOC Manager in maintaining the EOC. Participate in development of the Incident Action Plan. Supervise the Support and Service Branches.

	<u>DATE/TIME</u>
- Report to the Division Emergency Operations Center	<input type="checkbox"/> _____
- Obtain briefing from Incident Commander	<input type="checkbox"/> _____
- Assemble and brief logistics Section Branches & Unit Leaders <ul style="list-style-type: none"> <li>➤ Provide a summary of the incident. Distribute the Incident Action Plan if available.</li> <li>➤ Assign primary work tasks based on incident objectives in the Incident Action Plan.</li> <li>➤ Review emergency purchasing procedures and limits.</li> </ul>	<input type="checkbox"/> _____
- Upon receiving requests for additional resources, provide assistance and support in locating personnel, supplies, or equipment and coordinate procurement, as required.	<input type="checkbox"/> _____
- Brief and update the EOC Incident Commander on logistics resources and support. Include the following information in briefings: <ul style="list-style-type: none"> <li>➤ Priority requirements</li> <li>➤ Resource shortfalls/problems</li> <li>➤ Major new problems since the previous briefing</li> <li>➤ Assistance needed and requested from other agencies and the status of mutual aid information developed by logistics that should be passed on to other EOC Sections, Affected area EOC's, SECC or the Public.</li> </ul>	<input type="checkbox"/> _____
- Coordinate with the EOC Incident Commander, Plans Section Chief and Operations Section Chief to assist in development of Incident Action Plan.	<input type="checkbox"/> _____
- Establish shift transition procedures and conduct shift change briefings at the end of each shift.	<input type="checkbox"/> _____
- Ensure that logistics group/unit leaders maintain documentation of the incident and that this information is assembled at each shift transition and at the conclusion of the emergency. Include the following records: <ul style="list-style-type: none"> <li>➤ Messages received and transmitted</li> <li>➤ Actions pending/Actions completed</li> <li>➤ Duty rosters including time on duty</li> <li>➤ Active vendor records (purchase orders, rental agreements, purchase records)</li> <li>➤ Vehicle records (if applicable) and vehicle accident reports.</li> </ul>	<input type="checkbox"/> _____
➤ Maintain Documentation of response costs, including equipment, overtime labor hours and mileage.	<input type="checkbox"/> _____

<p><b>PUBLIC HEALTH EOC COMMUNICATIONS SUPPORT GROUP LEADER CHECKLIST</b></p>
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*Responsibilities:*

Assist the EOC in obtaining communications equipment to support the EOC and the Public Health Department response operations.

	<u>DATE/TIME</u>
- Report to the Division Emergency Operations Center	□ _____
- Obtain briefing from the Logistics Section Chief	□ _____
- Assist in setting up telephone, fax and radio equipment in the EOC.	□ _____
- Determine location of field operations and communications requirements for personnel at field sites.	□ _____
- Coordinate with operational area EOC Communications Unit Leader to arrange communications between Operational EOC and DPH EOC.	□ _____
- Distribute instructions on the use of communications equipment (phones, cell phones, satellite phones and radios) to response personnel.	□ _____
- Coordinate with the Logistics section to obtain additional communications equipment, as needed.	□ _____
- In coordination with the IC and the Public Information Officer, establish public information line.	□ _____
- Maintain Documentation of response costs, including equipment, overtime labor hours and mileage.	□ _____

**PUBLIC HEALTH EOC  
PLANS SECTION CHIEF  
CHECKLIST**

*Responsibilities:*

Manage the evaluation, distribution, and use of incident information.

	<u><b>DATE/TIME</b></u>
Direct Documentation Group Leader to begin collection and display of significant disaster events in Situation Logs and on Status Boards.	☐ _____
Compile analysis of disaster information (assignment rosters, messages, situation logs etc.) for the SPT.	☐ _____
Contact Operational Area EOC Plans Section for updated incident information.	☐ _____
With the Operations Section Chief, assess the impact of the emergency on the Division and prepare Incident Objectives and Incident Action Plan for each operational period.	☐ _____
Ensure that Division protocols for information collection and reporting requirements are met.	☐ _____
Maintain Documentation of response costs, including equipment, overtime labor hours, travel etc.	☐ _____
At a shift change, provide a detailed status report and all the written materials to replacement staff.	☐ _____
Oversee demobilization activities, including incident documentation, return of equipment obtained through mutual aid, cost reporting, and post event debriefing.	☐ _____

<b>PUBLIC HEALTH EOC DOCUMENTATION UNIT LEADER CHECKLIST</b>
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**Responsibilities:**

The Documentation Unit Leader is responsible for the maintenance of accurate, up-to-date incident files. Examples of incident documentation include: initial briefing, IAP(s), incident reports, communication logs, injury claims, situation status reports, photographs, etc. Thorough documentation is critical to post-incident analysis. Some of these documents may originate in other sections. This unit ensures each section is maintaining and providing appropriate documents

	<u><b>DATE/TIME</b></u>
- Report to the Division Emergency Operations Center	<input type="checkbox"/> _____
- Obtain briefing from Planning Section Chief	<input type="checkbox"/> _____
- Participate in Planning Meetings as required	<input type="checkbox"/> _____
- Establish and organize incident files	<input type="checkbox"/> _____
- Determine locations of status boards, maps, and information displays at the EOC.	<input type="checkbox"/> _____
- Establish photocopying and faxing services and monitor use as needed.	<input type="checkbox"/> _____
- With the IC and Plans Section Chief, prepare memos and instructions to Public Health Division personnel and distribute or post information as required.	<input type="checkbox"/> _____
- Maintain Documentation of incident messages, cost report forms, duty assignment rosters,	<input type="checkbox"/> _____
- Start and maintain the incident history (in chronology format) of key events as they happen during the incident.	<input type="checkbox"/> _____
- Assist Command and General staff members in keeping a written historical record of their activities.	<input type="checkbox"/> _____
-Check on accuracy and completeness of records submitted for files and correct errors or omissions by contacting appropriate section.	<input type="checkbox"/> _____
-Prepare and maintain comprehensive unit log	<input type="checkbox"/> _____

<b>PUBLIC HEALTH EOC RESOURCE UNIT LEADER CHECKLIST</b>
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*Responsibilities:*

The Resource Unit Leader is responsible for maintaining the status of all resources (primary and support) at an incident. This unit is also responsible for preparing parts of the IAP and compiling the entire plan in conjunction with other members of the EOC (e.g. Situation unit, Operations, Logistics) and determines the availability of resources.

	<u>DATE/TIME</u>
- Report to the Division Emergency Operations Center	<input type="checkbox"/> _____
- Obtain briefing from Planning Section Chief	<input type="checkbox"/> _____
- Participate in Planning Meetings as required	<input type="checkbox"/> _____
- Establish Check-in/out function at EOC	<input type="checkbox"/> _____
- Use the Incident Briefing (ICS 201) to prepare and maintain the Resource Status portion of the Incident Situation Display (organization chart, T-cards, and resource allocation (ICS 215) and deployment sections of display).	<input type="checkbox"/> _____
- Gather, post, and maintain incident resource status	<input type="checkbox"/> _____
- Prepare Organization Chart (ICS 203)	<input type="checkbox"/> _____
- Maintain a unit log of activities (ICS 214)	<input type="checkbox"/> _____
- Submit all documentation to the Documentation Unit upon completion of the incident.	<input type="checkbox"/> _____

<b>PUBLIC HEALTH EOC SITUATION UNIT LEADER CHECKLIST</b>
--

*Responsibilities:*

Collect status and situation reports from the Operations Sections. Obtain status reports from the Operational Area EOC. Prepare situation and status reports for the IC and SPT. Assist the Operations Section Chief in analyzing response and resources and develop an Incident Action Plan with priorities, objectives, and assignments for each operational period (8-12hrs.)

	<u>DATE/TIME</u>
- Report to the Division Emergency Operations Center	<input type="checkbox"/> _____
- Obtain briefing from Planning Section Chief	<input type="checkbox"/> _____
- Collect status reports from Section Chiefs, Liaison officer, Operational Area EOC's etc. Analyze status reports and situation reports to prepare the Incident Action Plan and plan for future resource needs.	<input type="checkbox"/> _____
- Participate in planning meetings as required.	<input type="checkbox"/> _____
- Establish contacts and initiate flow of information into unit with provision for updates.	<input type="checkbox"/> _____
- Develop schedule for receiving field information and updating status boards	<input type="checkbox"/> _____
- Collect and maintain most current data	<input type="checkbox"/> _____
- Prepare visual aids such as maps and photographs depicting the current situation.	<input type="checkbox"/> _____
- Prepare the Situation Status Summary (ICS 214)	<input type="checkbox"/> _____
- Maintain a unit log of activities (ICS 214)	<input type="checkbox"/> _____
- Submit all documentation to the Documentation Unit upon completion of the response.	<input type="checkbox"/> _____

# PLANNING CYCLE

## MEETING & BRIEFING AGENDAS

**NOTE:** *STRIVE FOR MEETING BREVITY, LIMIT MOST MEETINGS TO 30 MINUTES OR LESS. A.M. & EVENING PLANNING MEETINGS MAY REQUIRE UP TO 1 HOUR, BUT NO MORE.*

- ***TIME TBD by EVENT ONSET – INITIAL PLANNING MEETING*** (SPT COORDINATOR, COMMAND STAFF, SECTION CHIEFS)
  - Review Situation (as known)
  - Establish Initial Objectives (see model)
  - Develop Initial Intentions (see model)
  - Identify & Order Initial Resources
  - Identify staffing requirements to include EOC staff.
  
- ***0600 – TURNOVER MEETING*** (DAY AND NIGHT SHIFT SPT COORDINATOR, COMMAND STAFF, SECTION CHIEFS)
  - Situation Update (night shift briefs)
  - Review / modify objectives (all)
  - Review draft
    - SitRep
    - Brief
    - Event Action Plan (Intentions)
  
- ***0630 – EOC STAFF SHIFT CHANGEOVER MEETING***
  - Situation Update
  - Work in progress
  - If there is no counterpart, update the day shift supervisor on project status
  
- ***0700 – ALL HANDS TURNOVER BRIEFING*** (BY INCIDENT COMMANDER)
  - Situation Update
  - Objectives
  - Event Action Plan (Intentions)
  
- ***0830 – A.M. PLANNING MEETING*** (SPT COORDINATOR, COMMAND STAFF, SECTION CHIEFS)
  - Problems
  - Short term
    - Resources
    - Staffing
    - Scheduling
  - Long Term
    - Demob • Recovery

**PLANNING CYCLE**  
**MEETING & BRIEFING AGENDAS** (cont)

- ***1130 – AFFECTED AREA EOC TELECONFERENCE*** (SPT COORDINATOR, COMMAND STAFF, SECTION CHIEFS)
  - Situation Update
  - SECC Event Action Plan (Intentions)
  - Community Resource Needs
  
- ***1600 – P.M. PLANNING MEETING*** (SPT COORDINATOR, COMMAND STAFF, SECTION CHIEFS)
  - Progress / Status (Intentions)
  - Resource Order Status (note: RO's due to Logistics @ 1600)
  - Intentions for night shift & next day shift
  
- ***1800 – TURNOVER MEETING*** (SPT COORDINATOR, COMMAND STAFF, SECTION CHIEFS)
  - Situation Update
  - Objectives
  - Night Shift intentions
  - Review short term / long term plan
  - Special projects
  
- ***1830 – EOC STAFF CHANGEOVER MEETING***
  - Situation Update
  - Work in progress
  - If there is no counterpart, update the day shift supervisor on project status
  
- ***1900 – ALL HANDS TURNOVER BRIEFING*** (BY INCIDENT COMMANDER)
  - Situation Update
  - Objectives
  - Action Plan (Intentions)
  
- ***2030 – EVENING PLANNING MEETING*** (SPT COORDINATOR, COMMAND STAFF, SECTION CHIEFS)
  - Problems
  - Short term
    - Resources
    - Staffing
    - Scheduling
  - Long Term
    - Demob
    - Recovery

# SHIFT SCHEDULE AND PLANNING CYCLE FOR DISASTER OPERATIONS

## SHIFT SCHEDULE:

- 0600-1900 (INCIDENT COMMANDER, GENERAL STAFF, SECTION CHIEFS)
- 1800-0700 (INCIDENT COMMANDER (*NIGHTS*), GENERAL STAFF, SECTION CHIEFS)
- 0630-1900 & 1830-0700 (EVERYBODY ELSE)

## PLANNING CYCLE:

- TIME TBD BY EVENT ONSET – INITIAL PLANNING MEETING WITH INCIDENT COMMANDER, GENERAL STAFF, SECTION CHIEFS:
- 0600 – TURNOVER MEETING WITH DAY & NIGHT SHIFT SECTION COORDINATORS.
- 0630 – PH EOC STAFF SHIFT CHANGEOVER MEETING
- 0700 – DAY SHIFT ALL HANDS TURNOVER BRIEFING BY INCIDENT COMMANDER OR DESIGNEE; NIGHT SHIFT DEPARTS
- 0800 – PH EOC DAILY SITUATION UPDATE PUBLISHED (INCIDENT COMMANDER, GENERAL STAFF, SECTION CHIEFS)
- 0830 – A.M. PLANNING MEETING WITH (INCIDENT COMMANDER, GENERAL STAFF, SECTION CHIEFS)
- 1000 – DAILY BRIEFING
- 1600 – P.M. PLANNING MEETING WITH (INCIDENT COMMANDER, GENERAL STAFF, SECTION CHIEFS; RESOURCE ORDERS DUE TO LOGISTICS)
- 1800 – TURNOVER MEETING WITH DAY & NIGHT SHIFT WITH EOC SECTION COORDINATORS
- 1830 –PH EOC STAFF SHIFT CHANGEOVER MEETING
- 1900 – NIGHT SHIFT ALL HANDS TURNOVER BRIEFING BY INCIDENT COMMANDER OR DESIGNEE; DAY SHIFT DEPARTS
- 2000 – EVENING PLANNING MEETING WITH (INCIDENT COMMANDER, GENERAL STAFF, SECTION CHIEFS)
- 2100 – EVENING CHECK ON FIELD STAFF
- 0300 – DRAFT DAILY SITUATION UPDATE COMPLETED
- 0400 – DRAFT PH EOC INTENTIONS & ACTION PLAN COMPLETED
- 0500 – DRAFT DAILY BRIEFING COMPLETED

## DIVISION OF PUBLIC HEALTH INCIDENT ACTION PLAN

<b>Event Name:</b>		
Date: _____	Operational Period: _____	Report Time:
Objectives for this operational period (Include Alternatives):		
Weather Forecast for this operational period:		
General /Safety Message:		
<b>Attachments:</b>		
DPH EOC & OA EOC hours & contacts _____	List of Clinics, Surgery Centers Open _____	Incident Area Maps _____
Organization Chart _____	List of Shelters Open _____	Communications Plan _____
Damage Report Forms _____	Area Hospital Status _____	Roads, Highways, Bridge Closures & Alternate Route information _____
Prepared By (Plans Section Chief:		<b>SITUATION:</b> <b>NO CHANGE</b> _____ <b>WORSENING</b> _____ <b>IMPROVED</b> _____
Approved By:		

**STATE OF ALASKA  
DIVISION OF PUBLIC HEALTH  
SITUATION REPORT**  
(Incident Name) \_\_\_\_\_

Incident # _____	Date/Time:	Prepared By:
<b>JURISDICTION NAME:</b>		
<b>CASUALTY STATUS:</b>		
A. Confirmed Dead:		
B. Injured:		
C. Missing		
D. Estimated Sheltered		
<b>POPULATION:</b>		
<b>GENERAL SITUATION:</b>		
A. Current Sheltering/evacuation status:		
1. Total Shelters Open:		
2. Total Registered at Shelters:		
3. Total persons sheltered last night:		
A. Current Priority Needs:		
B. Future Outlook/Planned Actions:		
C. Weather:		
D. State EOC (SECC) Operations:		
Hours of Operations:		
Phone Contacts:		
A. Operational Area EOC Operations:		
Hours of Operations:		
Phone Contacts:		
G: Other Comments		

<p><b>PUBLIC HEALTH EOC</b>  <b>FINANCE AND ADMINISTRATION SECTION CHIEF</b>  <b>CHECKLIST</b></p>
--

*Responsibilities:*

Provide advice and support to the EOC Incident Commander concerning financial issues. Ensure adequate records to document response costs. Track emergency personnel labor hours and provide cost analysis and projections. Supervise the Cost/Time Tracking Group, the Claims Group and the Procurement Group.

	<u>DATE/TIME</u>
- Report to the EOC Incident Commander	<input type="checkbox"/> _____
- Obtain briefing from the EOC Incident Commander and Plans Section Chief.	<input type="checkbox"/> _____
- Establish contact with the Operational Area EOC Finance & Administration Section Chief.	<input type="checkbox"/> _____
- Establish personnel roster for staffing the EOC Finance & Administration Section.	<input type="checkbox"/> _____
- Ensure that the Cost/Time Group collects and maintains records of personnel time worked on the disaster and costs for emergency purchases and contracts.	<input type="checkbox"/> _____
- Develop instructions on emergency labor hours, payroll, injury claims, and emergency purchases and distribute these to Public Health Division personnel.	<input type="checkbox"/> _____
- Ensure that the Claims Group manages all legal claims for compensation filed against the Public Health Division.	<input type="checkbox"/> _____
- Maintain Documentation of response costs, including equipment, overtime labor hours, and mileage.	<input type="checkbox"/> _____
- At a shift change, provide detailed status report and all written materials to replacement staff.	<input type="checkbox"/> _____

**PUBLIC HEALTH EOC  
COST/TIME GROUP LEADER  
CHECKLIST**

*Responsibilities:*

Provide instruction for recording disaster related costs. Document costs in formats acceptable for state and federal reimbursement. Provide cost estimates and cost savings recommendations.

	<u>DATE/TIME</u>
- Report to the EOC Finance & Administration Chief	<input type="checkbox"/> _____
- Obtain briefing from the Finance & Administration Chief	<input type="checkbox"/> _____
- Establish contact with Group Leaders and agency personnel responsible for maintaining labor hour and emergency purchase records	<input type="checkbox"/> _____
- Develop and distribute instructions for reporting emergency work hours	<input type="checkbox"/> _____
- Ensure that daily personnel time records are prepared and submitted.	<input type="checkbox"/> _____
- Develop and distribute instructions for Documentation of emergency purchases and contracts.	<input type="checkbox"/> _____
- Compile vendor purchase orders, service contracts, invoices and other documents submitted by Unit Leaders into a single Public Health Division cost Documentation report for State and Federal reimbursement.	<input type="checkbox"/> _____
- Maintain Documentation of response costs, including equipment, overtime labor hours, and mileage	<input type="checkbox"/> _____
- At shift change, provide a detailed status report and all written materials to replacement staff.	<input type="checkbox"/> _____

<p><b>PUBLIC HEALTH EOC PROCUREMENT GROUP LEADER CHECKLIST</b></p>
--

*Responsibilities:*

Assess resource requirements and coordinate emergency purchase orders. Prepare and distribute instructions for emergency purchasing and contracting. Document emergency purchases in a format consistent with requirements for state and federal reimbursement.

**DATE/TIME**

- Report to the EOC Finance & Administration Chief	□ _____
- Obtain briefing from the Finance & Administration Chief	□ _____
- Develop and distribute instructions for emergency purchases and establish cost accounting codes.	□ _____
- Develop and distribute procurement documentation instructions for emergency purchases and contracting.	□ _____
- Develop and distribute instructions for Documentation of emergency purchases and contracts.	□ _____
- Compile vendor purchase orders, service contracts, invoices and other documents submitted by Unit Leaders into a single Public Health Division cost Documentation report for State and Federal reimbursement.	□ _____
- Upon request from Section Chiefs and Group Leaders, assist in obtaining additional equipment and supplies	□ _____
- Maintain Documentation of response costs, including equipment, overtime labor hours, and mileage	□ _____
- At shift change, provide a detailed status report and all written materials to replacement staff.	□ _____

# Incident Command System Forms

This chapter contains the various forms used with the job assignments. The forms are very simple and self-explanatory. While paper work is often portrayed as burdensome, it should also be pointed out that through accurate documentation an event can be reconstructed so that lessons may be learned. Sound documentation is also the beginning step in the road to financial recovery.

The pages in this chapter have not been indexed with page numbers so that the forms may be reproduced on a photocopy machine. The following is an indexing of the forms and those positions intended to use them:

<i>Activity Log</i>	All officers
<i>Section Personnel Time Sheet</i>	Each Section Chief or aide
<i>Procurement Summary Report</i>	Procurement Unit Leader
<i>Volunteer Staff Registration/ Credentialing Form</i>	Labor Pool Unit Leader
<i>Facility Systems Status Report</i>	Damage Assessment and Control Officer
<i>Resource Accounting Record</i>	Each Section Chief or aide
<i>Patient Tracking Sheet</i>	Patient Tracking Officer
<i>Action Plan</i>	Incident Commander, Section Chiefs and individuals
<i>Emergency Incident Message Forms</i>	All personnel

# ACTIVITY LOG

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Section: \_\_\_\_\_

Position Title: \_\_\_\_\_

Individual Name: \_\_\_\_\_

#	Time	Incident - Problem Situation	Action
1			
2			
3.			
4			
5			
6			
7			
8			
9			
10			
11			

**This form is intended for use by all individuals as an accounting of their personal action or the section activity.**

*Original: Immediate Supervisor or  
Section Chief*

*Copy: Position/Section Documentation*

# SECTION PERSONNEL TIME SHEET

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Section: \_\_\_\_\_

Hours: From: \_\_\_\_\_ To: \_\_\_\_\_

#	(Please Print) Employee/Volunteer Name	Title/Job Class	Signature	Time In	Time Out	Total Hours
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						

Certifying Officer: \_\_\_\_\_

Date/Time: \_\_\_\_\_

*Original = TIME UNIT LEADER (Finance Section) every 12 hours.*

**DIVISION OF PUBLIC HEALTH  
PROCUREMENT SUMMARY REPORT**

#	P.O. #	Date/Time	Item/Service	Vendor	\$ Amount	Requestor	Approval
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							

Certifying Officer: \_\_\_\_\_

Date/Time: \_\_\_\_\_

**DIVISION OF PUBLIC HEALTH  
VOLUNTEER STAFF REGISTRATION/CREDENTIALING FORM**

DATE: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Event: \_\_\_\_\_

#	(Print) Name	(Print) Address	Signature	Driver's License #	PROF/TECH LIC #	Specialty Skills	Employer Address	Time IN	Time OUT	Security Follow-up
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										

Certifying Officer: \_\_\_\_\_

Date/Time: \_\_\_\_\_

*Original:* Labor Pool Unit Leader

*Copy:* Safety/Security Officer

**DIVISION OF PUBLIC HEALTH  
FACILITY SYSTEM STATUS REPORT**

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Time: \_\_\_\_\_

Certifying Officer: \_\_\_\_\_

<b>System</b>	<b>Operational Status</b>	<b>Comments</b> (If Non-Operational, Give Reason And Estimate Time/Resources To Necessitate Repair)
Structural Components		
Electrical Power-Primary Service		
Electrical Power Backup Generator		
Water		
Natural Gas		
Oxygen		
Other Medical Gases		

<b>System</b>	<b>Operational Status</b>	<b>Comments</b> (If Non-Operational, Give Reason And Estimate Time/Resources To Necessitate Repair)
<p>Air Compressor</p> <p>Fire Prevention/Mitigation Components</p> <p>Vacuum (for patient use)</p> <p>Steam Boiler</p> <p>Water Heater and Circulators</p> <p>Heating-Air Conditioning</p> <p>ETO</p> <p>Pneumatic Tube</p>		

System	Operational Status	Comments (If Non-Operational, Give Reason And Estimate Time/Resources To Necessitate Repair)
Telephone		
FAX		
Radio Equipment		
Paging - Public Address		
Food Preparation Equipment		
Laundry Service Equipment		
Video-Television Cable		
Non-structural Components		
Other		





# INCIDENT ACTION PLAN

Incident: \_\_\_\_\_

Date: \_\_\_\_\_

Section/Position: \_\_\_\_\_

<b>Officer:</b>	<b>For Time Period:</b>
<b>GOAL(S):</b>	<b>OBJECTIVES for Goal Achievement:</b>
	1.
	2.
	3.
	4.
	5.
	6.
<b>Resources Needed:</b>	<b>Obtained from/time:</b>
1.	
2.	
3.	
4.	
5.	
6.	
<b>Goals(s) Completed/Status</b>	<b>Reported to/time:</b>

Signature: \_\_\_\_\_ Position: \_\_\_\_\_ Time: \_\_\_\_\_

# DIVISION OF PUBLIC HEALTH EMERGENCY INCIDENT MESSAGE FORM

---

***FILL IN ALL INFORMATION***

**TO (Receiver):** \_\_\_\_\_

**FROM(Sender):** \_\_\_\_\_

**DATE&TIME:** \_\_\_\_\_

<b>PRIORITY</b>
<input type="checkbox"/> Urgent-Top <input type="checkbox"/> Non Urgent-Moderate <input type="checkbox"/> Informational-Low

<i>Message:</i>

Received By:	Time Received:	Comments:
Forward To:		

Received By:	Time Received:	Comments:
Forward To:		

**KEEP ALL MESSAGES REQUESTS BRIEF, TO THE POINT AND VERY SPECIFIC.**

**(SOPHN Regional) Community Emergency Information**

**Community:**

**Date Reviewed/Reviewer:**

<b>Population Base</b>			
Seasonal Population Surge			
Geographical Area Served			
Primary Languages			
Vulnerable Populations			
<b>Emergency Response Agencies</b>	<b>Point of Contact</b>	<b>Contact number</b>	<b>Contact email</b>
Mayor			
City Manager			
Emergency Manager			
EOC Incident Commander			
EOC Plans Chief			
EOC Logistics Chief			
EOC Finance Chief			
LEPC			
Community Hospital			
Administrator			
Infection Control			
Safety Officer			
ER/ED Manager			
Local Law Enforcement			
Local FBI			
Local Fire Department			
Local EMS			
Local Search and Rescue			
Local Ambulance Service			
Local Airport			
Local Public Works			
Electric			
Water			
Gas			
Sewer			
Phone			
Road Maintenance			
Local Behavioral Health			
Local Red Cross			
Local School District			
Local Harbor Master			
Local Media (print, radio, television)			
Local Public Health			
<b>Past Emergency Events (all hazard)</b>			
<b>Important Community Information:</b>			
<b>Vulnerable Population Support Agencies:</b>			

(SOPHN Regional) Community Emergency Resource Inventory:

Community:

Date Reviewed/Reviewer:

Local Emergency Operations Plan Location:

<b>RESOURCE</b>	<b>LOCATION</b>	<b>POINT OF CONTACT</b>
<b>Local Emergency Operations Plan</b>		
<b>Local Emergency Operations Center</b>		
<b>Emergency Power</b>		
<b>Emergency Food/Water</b>		
<b>Emergency Communications:</b> Channels Equipment		
<b>Evacuation Points</b> Tsunami/Flood		
<b>Shelters</b>		
<b>Mass Immunization Sites</b>		
<b>Alternate Care Sites</b>		
<b>Emergency Medical Supplies</b>		
<b>Pharmaceutical Supplies</b>		
<b>Emergency Transportation Resources</b>		
<b>Local Volunteer Resources/Coordinator</b>		
<b>Morgue Facilities</b>		

SOPHN	COMPETENCY	ACTIVITIES	<p style="text-align: center; font-size: 2em; margin: 0;">G R E E N</p> <p style="text-align: center; margin-top: 20px;">Low Risk of terrorist attack</p>
<p>Mgt. Team Chief, Deputy Chief, RNM, NM</p>	<p>1,2,3,4, 5, 6, 7,8,9</p>	<p><b>* Review State Emergency Operations Plan, Department Disaster Response and Recovery Guide, Bioterrorism Resource Guide</b></p> <p>Locate copies online or in staff resource area. Work with management team to develop, conduct, participate in training exercises (inhouse &amp; with partner agencies) to clarify all staff emergency response roles, communications and chain of command. Evaluate drill response.</p> <p><b>* Identify additional intra-inter agency resources.</b>Assure updated emergency contact information for local emergency response partners and ICS system</p> <p><b>* Become familiar with local natural/manmade hazards/risks</b></p> <p><b>* Review SOPHN Emergency Phone Tree, Assure scheduled updates</b></p> <p>Assure that all facility communication equipment in good working order</p> <p>Assure staff proficiency with phone, computer, radio, fax, sat phone communications</p> <p><b>* Maintain /Delegate Surveillance Activity Review First Class PHN and ADES Updates daily.</b> Assure staff access to First Class info, EPI Bulletins, Health Alerts &amp; Advisories. Assure relevant public information available to clients/community</p> <p><b>* Review Safety Plan.</b> Assure adequate levels of routine protective gear/disease surveillance/investigation/specimen shipping supplies. Conduct regular fire/evacuation, shelter in place and facility security drills to assure proficiency in use of equipment and staff knowledge of response roles.</p>	
<p>PHN Staff, Nurse II NC, PHN-A</p> <p>Technical &amp; Administrative Support Staff</p>	<p>1,2,3,4,5,6 7,8,9</p>	<p><b>* Locate and review State Emergency Operations Plan, Department Disaster Response and Recovery Guide, Bioterrorism Resource Guide</b></p> <p><b>*Identify role responsibilities relative to nature of public health threat</b></p> <p><b>* Identify additional intra-inter agency resources.</b></p> <p><b>* Participate in emergency preparedness, response,risk communication training</b></p> <p><b>* Develop proficiency: use of communication equip (phone/fax/computer)</b></p> <p><b>*Assist with role appropriate public/community preparedness education</b></p> <p><b>* Review SOPHN Emergency Phone Tree: provide updated information</b></p> <p><b>*Review Epi Bulletins, Advisories, First Class Health Alerts</b></p> <p><b>*Participate in Safety Plan drills,post-drill evaluations &amp; role appropriate use of surveillance/investigation/specimen shipping supplies&amp; PPE equipment</b></p> <p><b>* Become familiar with local natural/manmade hazards/risks</b></p> <p><b>* Develop personal/family response plan</b></p>	

SOPHN	COMPETENCY	ACTIVITIES	<p style="text-align: center; font-weight: bold; font-size: 2em;">B L U E</p> <p>General risk of terrorist attack</p>
<p>Mgt. Team Chief, Deputy Chief, RNM, NM</p>	<p>1,2,3,4,5,6 7,8,9</p>	<p style="text-align: center;"><i>Continue recommended actions at lower level and:</i></p> <ul style="list-style-type: none"> <li>* <b>Communicate local, regional concerns at weekly management teleconferences to assure development of or updates to SOPHN emergency response protocol</b></li> <li>* <b>Establish inhouse method to inform staff of local threat concerns and planned SOPHN response i.e. during weekly staff meetings</b> <i>Assure staff/public access to relevant threat alert information</i></li> <li>* <b>Participate/delegate participation in local community emergency planning sessions (hospital, emergency services, LEPC) to assure clarification, coordination of agencies' response</b></li> <li>* <b>Review/delegate review of facility infrastructure, communication equipment routine &amp; 'emergency response' supplies to assure adequate/optimal staff protection and response capability to public health threat</b></li> <li>* <b>Review/update/expand personal &amp; family emergency plan</b></li> </ul>	
<p>PHN Staff, Nurse II NC, PHN-A</p> <p>Technical &amp; Administrative Support Staff</p>	<p>1,2,3,4,5,6, 7,8,9</p>	<p style="text-align: center;"><i>Continue recommended actions at lower level and:</i></p> <ul style="list-style-type: none"> <li>* <b>Participate with management in role appropriate staff and client/public information relative to threat risk, preparation, and response</b></li> <li>* <b>Continue community surveillance activities, report increased public or provider concerns; changes in level of local disease or other health risk factors to supervisor. Assure that management receives local information relevant to response plan development</b></li> <li>* <b>Participate in position appropriate review of facility infrastructure, inventory of routine and 'emergency' response supplies and equipment</b></li> <li>* <b>Review/update/expand personal &amp; family emergency plan</b></li> </ul>	

SOPHN	COMPETENCY	ACTIVITIES	
Mgt. Team Chief, Deputy Chief, RNM, NM	1,2,3,4,5,6, 7,8,9	<p style="text-align: center;"><i>Continue recommended actions at lower level and:</i></p> <ul style="list-style-type: none"> <li>* <b>Confer with management team to determine potential for activation of State or local emergency response plans</b></li> <li>* <b>Establish level of communications with local emergency response partners</b></li> <li>* <b>Review status of state/regional/local mutual aid or MOA plans should threat level increase and require initial response activities</b>  <i>Assure interagency support and coordination of anticipated response activities</i></li> <li>* <b>Inform staff as to alert level, current SOPHN response activity</b>  <i>Assure staff awareness of alert status and communicate any change in routine staff role responsibilities</i></li> <li>* <b>Monitor/ delegate monitoring of First Class &amp; Outlook twice daily</b>  <i>Assure timely staff access to health advisories and alerts</i>  <i>Assure public/community access to relevant threat information</i></li> <li>* <b>Continue to review/update personal/family emergency plan</b></li> </ul>	
PHN Staff, Nurse II NC, PHN-A  Technical & Administrative Support Staff	1,2,3,4,5,6, 7,8,9	<p style="text-align: center;"><i>Continue recommended actions at lower level and:</i></p> <ul style="list-style-type: none"> <li>* <b>Increase alertness to physical surroundings, monitor client, community concerns and report to supervisor</b></li> <li>* <b>Review routine responsibilities and immediate work plans</b>  <i>Prepare to inform supervisor should threat level increase and require prioritization of routine and emergency response activities</i></li> <li>* <b>Review supply stocks and equipment function in areas of responsibility report any needs for additional supplies, or equipment maintenance to supervisor</b>  <i>Assure response capacity should threat level increase</i></li> <li>* <b>Continue to review/update personal/family emergency plan</b>  <i>Assure staff ability to provide self &amp; family with sufficient security to assume agency emergency response role should threat level increase</i></li> </ul>	Significant Risk of Terrorist Attack

SOPHN	COMPETENCY	ACTIVITIES	<p style="text-align: center; font-size: 2em; font-weight: bold; color: white;">O R A N G E</p> <p style="text-align: center; font-weight: bold; color: white;">High Risk of Terrorist Attack</p>
<p>Mgt. Team Chief, Deputy Chief, RNM, NM</p>	<p>1,2,3,4,5,6, 7,8,9</p>	<p style="text-align: center;"><i>Continue recommended actions at lower level and:</i></p> <ul style="list-style-type: none"> <li>* <b>Review and update Emergency Phone tree information including physical address contact information</b></li> <li>* <b>Confer with management team, schedule emergency communication drill utilizing Emergency Phone Tree, fax, Outlook, First Class, Sat-phones (or other designated alert system)</b> <i>Evaluate effectiveness of communication plan/equipment function</i></li> <li>* <b>Confer with senior management, determine status of State wide response plan, contact and inform local emergency response partners</b> <i>Update local emergency response partner contact information</i></li> <li><i>Assure inter/intra-agency response plan coordination</i></li> <li>* <b>Meet with staff to review work schedules, clinic and field service plans and review current status of State/local emergency response plan</b> <i>Assure staff awareness of threat alert level and possible change in routine responsibilities should threat level increase</i></li> <li>* <b>Monitor/ delegate monitoring of First Class &amp; Outlook 3x daily designate times/locations for staff updates. Determine need for additional training, review or inservice</b> <i>Assure timely staff access to health advisories and alerts</i> <i>Assure public/community access to relevant threat information</i></li> <li>* <b>Continue to review/update personal/family emergency plan</b></li> </ul>	
<p>PHN Staff, Nurse II NC, PHN-A</p> <p>Technical &amp; Administrative Support Staff</p>	<p>1,2,3,4,5,6, 7,8,9</p>	<p style="text-align: center;"><i>Continue recommended actions at lower level and:</i></p> <ul style="list-style-type: none"> <li>* <b>Review emergency response role, participate in communication drill</b></li> <li>* <b>Follow established method of accessing health alert/threat level updates</b></li> <li>* <b>Continue surveillance and public concern monitoring. Inform supervisor of changes in routine or "suspicious" activity</b></li> <li>* <b>Participate in relevant information updates or threat specific training</b></li> <li>* <b>Continue to review/update personal/family emergency plan</b></li> </ul>	

SOPHN	COMPETENCY	ACTIVITIES	<p style="text-align: center; font-size: 2em; font-weight: bold;">R E D</p> <p style="text-align: center; font-size: 0.8em;">Severe or Imminent risk of terrorist attack</p>
<p>Mgt. Team Chief, Deputy Chief, RNM, NM</p>	<p>1,2,3,4,5,6, 7,8,9</p>	<p style="text-align: center;"><i>Continue recommended actions at lower level and:</i></p> <ul style="list-style-type: none"> <li>* <b>Section Chief/designee confers with Director/Commissioner to confirm threat situation &amp; establish level of State/Department/Division/Section response</b> <i>Assure clear communication and coordination of threat response</i></li> <li><i>Establish &amp; maintain chain of command and communication links between agencies at State,Federal, local level, <u>assume DPH-EOC roles as assigned</u></i></li> <li>* <b>Activate SOPHN Emergency Phone Tree</b></li> <li>* <b>Consider use of designated phone with pre-recorded management updates, response instructions for staff call in or creation of First Class conference</b></li> <li>* <b>Assign staff to position appropriate response activities</b></li> <li>* <b>Meet at regular intervals with staff to review threat level/nature of threat and review planned emergency response</b></li> </ul> <p><i>Assure clear communication,coordination,and evaluation of role responsibilities</i></p>	
<p>PHN Staff, Nurse II NC, PHN-A</p> <p>Technical &amp; Administrative Support Staff</p>	<p>1,2,3,4,5,6 7,8,9,</p>	<p style="text-align: center;"><i>Continue recommended actions at lower level and:</i></p> <ul style="list-style-type: none"> <li>* <b>Participate in assigned emergency response activities</b></li> <li>*<b>Remain alert to threat related activities, community or provider concerns and inform supervisor .</b> <i>Contribute to accurate situation assessment</i></li> <li>* <b>Monitor use of supplies and equipment, report to supervisor</b></li> </ul>	

# Emergency Operations Plan

## Annex B: Risk Communication Plan



Draft compiled 1/2006

Division of Public Health  
Department of Health and Social Services

For more information about  
Annex B: Risk Communication Plan, please visit  
[http://www.hss.state.ak.us/prepared/eop/pdfs/annex\\_B.pdf](http://www.hss.state.ak.us/prepared/eop/pdfs/annex_B.pdf)

# Emergency Operations Plan

## Annex C: Biological Response Plan



Draft compiled 1/2006

Division of Public Health  
Department of Health and Social Services

For more information about  
Annex C: Biological Response Plan, please visit  
[http://www.hss.state.ak.us/prepared/eop/pdfs/annex\\_C.pdf](http://www.hss.state.ak.us/prepared/eop/pdfs/annex_C.pdf)

# Emergency Operations Plan

## Annex D: Chemical Emergency Response Plan



Draft compiled 1/2006

Division of Public Health  
Department of Health and Social Services

For more information about  
Annex D: Chemical Response Plan, please visit  
[http://www.hss.state.ak.us/prepared/eop/pdfs/annex\\_D.pdf](http://www.hss.state.ak.us/prepared/eop/pdfs/annex_D.pdf)

# Emergency Operations Plan

## Annex E: Radiological Response Plan



Draft compiled 1/2006

Division of Public Health  
Department of Health and Social Services

**No materials available at this time.**

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# Emergency Operations Plan

Annex F: Planning Guide for  
Local Mass Prophylaxis



Draft compiled 1/2006

Division of Public Health  
Department of Health and Social Services

For more information about  
Annex F: Mass Prophylaxis Plan, please visit  
[http://www.hss.state.ak.us/prepared/eop/pdfs/annex\\_F.pdf](http://www.hss.state.ak.us/prepared/eop/pdfs/annex_F.pdf)

# Emergency Operations Plan

## Annex G: Mass Casualty Plan



Draft compiled 1/2006

Division of Public Health  
Department of Health and Social Services

For more information about  
Annex G: Mass Casualty Plan, please visit  
[http://www.hss.state.ak.us/prepared/eop/pdfs/annex\\_G.pdf](http://www.hss.state.ak.us/prepared/eop/pdfs/annex_G.pdf)

# Emergency Operations Plan

## Annex H: Behavioral Health Emergency Response Plan



Draft compiled 1/2006

Division of Public Health  
Department of Health and Social Services

For more information about  
Annex H: Behavioral Health Plan, please visit  
[http://www.hss.state.ak.us/prepared/eop/pdfs/annex\\_H.pdf](http://www.hss.state.ak.us/prepared/eop/pdfs/annex_H.pdf)

# Emergency Operations Plan

Annex I: Environmental Health



Draft compiled 1/2006

Division of Public Health  
Department of Health and Social Services

**No materials available at this time.**

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# Emergency Operations Plan

## Annex J: Pandemic Influenza Plan



Draft compiled 1/2006

Division of Public Health  
Department of Health and Social Services

For the current version of the Division of Public Health Draft  
Pandemic Influenza Response Plan, please visit  
<http://www.pandemicflu.alaska.gov/panfluplan.pdf>.

# Emergency Operations Plan

Annex K: Alternate Care Site Plan



Draft compiled 1/2006

Division of Public Health  
Department of Health and Social Services

For more information about  
Annex K: Alternate Care Site Plan, please visit  
[http://www.hss.state.ak.us/prepared/eop/pdfs/annex\\_K.pdf](http://www.hss.state.ak.us/prepared/eop/pdfs/annex_K.pdf)

# Emergency Operations Plan

Reference Section



Draft compiled 1/2006

Division of Public Health  
Department of Health and Social Services

For more information about the  
Emergency Operations Plan Reference Section, please visit  
<http://www.hss.state.ak.us/prepared/eop/pdfs/EOPref.pdf>

