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# ESF #8 Public Health and Medical Services

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## Planning Team

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### ESF Coordinator

KDHE

### Support Agencies:

- KDEM
- KSNG
- KAHD
- BEMS
- KBI
- KDOL
- SRS
- Kansas Department on Aging
- KHP

### Federal Agencies:

### Primary Agency:

KDHE

### Non-Governmental Organizations:

- Kansas Funeral Directors Association (KFDA)

### Private Sector:

## Purpose

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ESF #8 provides the mechanism for coordinated state assistance to supplement local resources in response to public health and medical care needs for potential or actual disaster/emergencies. For this document, public health and medical services include: medical needs associated with behavioral health needs of victims and responders, medical needs of "at risk" populations, and environmental health concerns associated with activities outlined in other portions of the KRP.

## Scope

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ESF #8 provides supplemental assistance to local governments in identifying and meeting the public health and medical needs of victims of a disaster/emergency. This support is categorized in the following functional areas:

1. The provision of medical equipment and supplies to clinics, hospitals and long-term care facilities (see Kansas Biological Incident Annex (BIA) for details);
2. The BIA will be implemented when necessary;

3. Emergency medical transportation including medical evacuation;
4. Emergency mental health crisis counseling for individuals and the community;
5. Identification and mitigation of environmental health issues (water contamination/clean-up, vector control);
6. Fatality management;
7. Worker health and safety;
8. Public health and medical information; and
9. Re-establishment of all health and medical systems.

## Policies

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The secretary of KDHE, through the state health officer, coordinates state ESF #8 preparedness, mitigation, response, and recovery actions. These actions do not alter or impede the existing authorities of any department or agency supporting ESF #8. KDHE coordinates all ESF #8 preparedness, mitigation, response, and recovery actions consistent with agency regulations, policies, and plans attached to this ESF Annex and the BIA.

## Concept of Operations

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### General

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Throughout the response and recovery periods, ESF #8 will evaluate and analyze information regarding medical, health, and public health assistance requests for response, develop and update assessments of medical and public health status in the impact area and do contingency planning to meet anticipated demands.

### Organization

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During an actual or potential emergency or disaster, the primary agency of ESF #8 will assign personnel to the SEOC. The ESF #8 Coordinator will report to the emergency services branch director, if activated, or the response section chief. During the response phase, the ESF #8 coordinator will evaluate and analyze information regarding medical and public health assistance requests. Also, ESF #8 will develop and update assessments of medical and public health status in the impact area and do contingency planning to meet anticipated demands.

### Notifications

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- a. KDEM will notify the ESF #8 primary agency when an area of the state is threatened or has been impacted by an emergency or disaster event;
- b. Conversely, if KDHE or other tasked agencies are aware of such threat, they will notify KDEM of the situation, to the extent appropriate with the current or potential scope of the incident;
- c. The primary agency notified will report to the SEOC if so advised or requested by KDEM;
- d. If additional support is necessary; the ESF #1 primary agency and/or KDEM will contact the supporting agencies and request applicable support activities;
- e. The coordinator will notify all ESF #8 primary and support agencies and will continue to update those agencies as the situation progresses; and

- f. The agencies designated to report to the SEOC will notify supporting agency personnel of the impending or actual event.

## Direction and Control

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- a. During a state of emergency, state health and medical response activities will be coordinated through the SEOC; which will serve as the source of all direction and control;
- b. The TAG or his/her KDEM designee provides direction and control for ESF #8 to include mission assignments, mutual aid, SEOC Team, contracts for goods and services, and recovery and mitigation activities;
- c. Agencies of ESF #8 may serve in Field Operations (i.e., the KAT, JFO operations, DRC, intrastate and/or interstate mutual aid assistance, etc.);
- d. When a request for assistance is received by ESF #8 it is assigned to the agency or agencies that have the most appropriate resources and expertise to accomplish the task; and
- e. KDEM will assist in the coordination of federal response efforts under the provisions of a presidential disaster declaration.

## Actions

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The ESF #8 coordinator will be responsible for coordinating public health and medical preparedness, mitigation, response, and recovery efforts on an on-going basis. On-going efforts of the ESF #8 coordinator will include:

### Mitigation

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- 1) Increase use of GIS to identify location of vulnerable sites or populations;
- 2) Stockpile critical medical supplies in strategic locations throughout the state;
- 3) Identify critical health and medical facilities; and
- 4) Promote mitigation activities and resources to health and medical organizations and facilities.

### Preparedness

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- 1) Conduct planning with support agencies and local partner agencies;
- 2) Develop and refine procedures to be utilized by the ESF #8 coordinator in the SEOC
- 3) Maintain liaison with health and medical volunteer organizations, local, state, and federal medical teams;
- 4) Develop rapid response mechanism for crisis mental health counseling and assist in the development of public health nursing disaster protocols; and
- 5) Conduct epidemic intelligence, evaluation, and prevention of communicable diseases and injuries.

### Response

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- 1) Coordinate deployment of health and medical assets;
- 2) Coordinate the deployment of personnel to conduct field assessments and surveys;
- 3) Provide staff and services for monitoring public health conditions;
- 4) Determine needs for health surveillance programs;
- 5) Assist with patient evacuation coordination as requested and post-event relocation;
- 6) Identify available hospital bed space;

- 7) Arrange for emergency mental health services to individuals and communities;
- 8) Support response personnel with critical incident stress debriefing resources;
- 9) Arrange for disaster mortuary services or victim identification services;
- 10) Coordinate laboratory facilities for analyses of public health patient and environmental samples; and
- 11) Initiate on-site public education programs on the health problems associated with the emergency or disaster.

### Recovery

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- 1) Maintain support of the JFO including provision of vital records to affected citizens;
- 2) Coordinate restoration of essential health and medical components of delivery systems and permanent medical facilities to operational status;
- 3) Monitor epidemiological systems;
- 4) Compile health reports for state officials;
- 5) Initiate grants for environmental and epidemiological surveillance;
- 6) Identify populations requiring event-driven health, medical or social services post-event; and
- 7) Initiate financial reimbursement process for support services.

## Responsibilities

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### Coordinating Agency

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The KDHE is designated as the coordinator for ESF #8. As ESF coordinator, KDHE coordinates meetings, plans, exercises, training, and other activities with the private sector and the ESF #8 support agencies.

### Primary Agency

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#### KDHE: Division of Health

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##### **Mitigation**

- 1) Increase vaccination rates among the general public and response organizations for preventable diseases;
- 2) Identify state-level critical infrastructure criteria and nominate applicable facilities, organizations, and structures to the state critical infrastructure list based upon the criteria;
- 3) Promote healthy lifestyle choices by all Kansans to increase their physical, social, and mental resiliency to disaster situations;
- 4) Designate a representative to serve on the KHMT.

##### **Preparedness**

- 1) Provide assistance and guidance to county health departments, hospitals, laboratories, emergency medical services and health/medical providers regarding preparedness and response to emergencies;
- 2) Maintain the Kansas System for the Early Registration of Volunteers (K-SERV) database of registered volunteers willing to respond to disasters;
- 3) Maintain a statewide Health Alert Network (KS-HAN) as a secure electronic communications system for health and safety officials to exchange emergency health and medical information;
- 4) Develop procedures to expedite processing of vital records requests;

- 5) Pre-designate official(s) to meet and sign for Strategic National Stockpile (SNS) assets;
- 6) Maintain an epidemiological hotline, staffed 24/7, to take reports and respond to disease outbreaks;
- 7) Maintain the Kansas Countermeasure Response Administration (KS-CRA) System for tracking disaster related medical material from initial inventory to administration to a patient; and
- 8) Develop methodologies for conducting disease surveillance in emergency shelters.

#### **Response**

- 1) Detect and investigate unusual disease incidents or clusters;
- 2) Prepare incident information material for general public and clinicians;
- 3) Provide recommendations and decisions on mass prophylaxis and treatment:
  - a) Request the SNS Push Package or Managed Inventory;
  - b) Maintain control of SNS assets and provide continued tracking; and
  - c) Assist dispensing agencies with media relations and risk communication issues;
- 4) Supply information to the public on personal protective measures thorough the JIC;
- 5) Provide information to providers on prophylaxis and treatment guidelines;
- 6) Distribute information to clinicians and hospitals;
- 7) Provide two-way communication with other states through EPI-X;
- 8) Implement public health control measures:
  - a) Recognize and determine the need for isolation and quarantine measures; and
  - b) Perform epidemiological investigations.

#### **Recovery**

- 1) Expedite processing of vital records (birth, marriage, and death certificates) for disaster victims Provide resource information and technical assistance for vector and mosquito control;
- 2) Provide resources and guidance regarding restoration for mold;
- 3) Provide resource information and technical assistance for restoration of health and medical services including: restoration of local health department services, restoration of hospital and medical facilities, restoration of laboratories, etc.; and
- 4) Provide long-term surveillance of community and responder personnel for possible exposures as a result of the incident.

### Kansas Health and Environmental Laboratories (KHEL)

#### **Preparedness**

- 1) Maintain a Bio-safety Level 3 (BSL3 Laboratory);
- 2) Maintain a Laboratory Response Network (LRN) Level 2 Diagnostic Chemistry Laboratory Capabilities at KHEL;
- 3) Maintain protocols and instrumentation for the analysis of analytes specified by LRN and the Food Emergency Response Network (FERN);
- 4) Maintain a Kansas Sentinel Laboratory network capable of microbiology as defined by CDC protocols;
- 5) Maintain protocols for specimen submission, chain of custody and criteria for acceptance;
- 6) Provide guidance on federal packaging and shipping regulations, inclusive of evidence control measures;
- 7) Pre-position packing materials for human biological and chemical specimens;
- 8) Provide a list of packing materials that are required when submitting human clinical samples collected in relationship to a chemical exposure event to the KHEL;

- 9) Provide guidance on available specimen transportation modes available, including hot shot services; and
- 10) Provide support for hazardous material and weapons for mass destruction incident response planning.

**Response**

- 1) Implement protocols to process clinical and environmental samples from local health facilities, medical professionals, law enforcement officials, hazardous material responders and the Civil Support Team (CST);
- 2) Provide clinical or environmental analytical support during and post incident;
- 3) Provide specimen shipping information and containers as needed;
- 4) Report analytical results to the requesting authority;
- 5) Activate mutual aid agreements for biological agent analysis;
- 6) Provide technical support to the CST, SFMO and first responders as requested during an incident; and
- 7) Communicate through a secure system with sentinel laboratories to gather information that will assist in determining the extent of exposure to the population.

**KDHE: Division of Environment**

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**Response**

Assist in the preparation of technical information as it relates to the environment and possible impacts.

## Support Agencies

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**KDEM**

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**Response**

- 1) Coordinate supplemental assistance for the identification, movement, storage, and disposition of victims; and
- 2) Maintain liaison with the information clearinghouse regarding missing persons and casualties managed by the ARC.

**KSNG**

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**Preparedness**

Identify possible medical resources for deployment such as Expeditionary Medical Support System (EMEDS)

**Response**

- 1) Provide limited medical support and first aid services to civilian casualties; and
- 2) Provide emergency transportation of blood, blood products, and medical equipment  
Provide patient evacuation support (ground and air).

**CAP**

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**Response**

Provide emergency transportation of blood, blood products, medical supplies, and donor organs.

**KBI**

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**Response**

Provide technical expertise and assistance in identification of human remains.

**BEMS**

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**Preparedness**

Maintain procedures for emergency licensing of out-of-state EMS personnel and equipment

**Response**

Provide technical expertise on modifications of EMS scope of practice waivers, if needed.

**KHP**

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**Preparedness**

Maintain receipt, staging, and storage (RSS) warehouse security plan for possible sites and personnel.

**Response**

- 1) Provide security for the SNS shipment and security of the RSS; and
- 2) Provide assistance in the rapid transportation of samples for analysis as necessary.

**ARC**

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**Response**

- 1) Provide blood and blood products; and
- 2) Report medical needs for sheltered populations to the ESF #8 coordinator.

**KFDA**

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**Preparedness**

- 1) Maintain the KFDA Mass Fatality Standard Operating Guide (SOP);
- 2) Recruit and train members to augment local responders in disaster; and
- 3) Provide technical assistance to responders regarding mass fatality management.

**Response**

Activate the Kansas Disaster Mortuary Response Team (DMORT) as outlined in the Kansas Mass Fatality Plan.

**KAHD**

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**Response**

Implement identification procedures and prevention practices for zoonotic diseases.

**KDOL**

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**Response**

Provide guidance and direction in regards to worker health and safety issues.

**SRS**

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**Preparedness**

- 1) Assist community mental health centers in development of emergency operations procedures; and
- 2) Maintain the State Crisis Counseling Program Administrative Plan.

**Response**

- 1) Activate the Kansas All-Hazard Behavioral Health (KAHBH) Program;

- 2) Provide crisis counseling service to disaster victims in support of community mental health centers, local behavioral health providers, and volunteer agencies;
- 3) Administer the Crisis Counseling Program during a presidentially declared disaster;
- 4) Complete the FEMA Immediate Services Program (ISP) grant application following a disaster;
- 5) Complete the Regular Services Program (RSP) grant application according to the schedule established by FEMA;
- 6) Coordinate with state owned or operated mental health facilities regarding resource requests and status of the facilities; and
- 7) Coordinate provision of psychotropic medications in the aftermath of disasters.

**Recovery**

Administer the FEMA ISP and RSP grants through the grant's term.

[Kansas Department on Aging](#)

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**Preparedness**

Provide guidance to regulated facilities related to emergency preparedness and recovery issues

## Authorities and References

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### State Statutes

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- a. K.S.A. 48-901a Interstate Emergency Management Assistance Compact;
- b. K.S.A. 48-904 et seq. K.S.A. 48-924 – 945 Emergency Preparedness for Disasters;
- c. K.S.A. 48-948 – K.S.A. 48-958 – Kansas Intrastate Emergency Mutual Aid Act;
- d. K.S.A. 65-Articles 1 and 2 Public Health System;
- e. K.S.A. 65-101 et seq. the secretary of health and environment shall exercise general supervision of the health of the people of the state; and
- f. K.S.A. 65-5701 – 5731 EPCRA.

### Federal Statutes

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- a. Public Law 106-390, 114 Stat. 1552-1578 (1974) The Robert T. Stafford Disaster Relief and Emergency Assistance Act, as amended;
- b. Public Law 107-188, 116 Stat. 294 (2002) The Public Health Security and Bioterrorism Preparedness and Response Act of 2002;
- c. Public Law 107-296, 116 Stat. 2135 (2002) The Homeland Security Act of 2002;
- d. 10 U.S.C. 382 (2002) Emergencies Involving Chemical or Biological Weapons;
- e. 42 U.S.C. 201 et seq., The Public Health Service Act; and
- f. 50 U.S.C. 1601-1651 (2003) The National Emergencies Act.