

**Kentucky Public Health**

Prevent. Promote. Protect.



**Emergency Preparedness  
Year In Review  
2013**

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# ESF 8– Public Health and Medical Annex

The Emergency Support Function (ESF) 8 – Public Health and Medical Services Annex defines how Kentucky’s ESF 8 agencies will coordinate public health and medical related preparedness, response, and recovery activities for any event that occurs within the Commonwealth of Kentucky.

The Kentucky Department for Public Health (KDPH) has the overall responsibility for the maintenance of the ESF 8 Annex in collaboration with the Kentucky Board of Emergency Medical Services (KBEMS) and the Kentucky Community Crisis Response Board (KCCRB). KDPH, KBEMS, and KCCRB serve as ESF 8 Primary Agencies .



On October 16, 2013 the ESF 8 Annex was signed by the Primary ESF 8 Agencies during the Health and Medical Preparedness Advisory Committee. (Left to Right: Jim House, (KDPH) Deborah Arnold (KCCRB), Michael Poynter (KBEMS), Dr. Kraig Humbaugh (KDPH) and Rebecca Gillis (KDPH))

The Emergency Support Function (ESF) 8 – Public Health and Medical Services Annex is the functional annex to the Commonwealth of Kentucky Emergency Operations Plan (EOP) and entails the capabilities for which state level public health and medical efforts will support. The capabilities identified are essential public health services that are assured to the public regardless of the event and are identified as follows:

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

# Public Health Emergency Preparedness Capabilities

The Center for Disease Control and Prevention's (CDC) National Standards for State and Local Planning provide a description of capabilities needed for achieving public health preparedness. The description serves as a planning resource that public health preparedness staff use to assess their jurisdictional preparedness. There are a total of 15 PHEP capabilities.

**Capability 1:** Community Preparedness is the ability of communities to prepare for, withstand and recover, in both short and long term, from public health incidents. Major Programs Associated: Functional and Access Needs (FAN) and Severe Weather Safe Haven Sites

**Capability 2:** Community recovery is the ability to collaborate with community partners, (e.g., healthcare organizations, business, education, and emergency management) to plan and advocate for the rebuilding of public health, medical, and mental/ behavioral health systems to at least a level of functioning comparable to pre-incident levels, and improved levels where possible. Major Programs Associated: COOP Planning, Recovery workgroups and Kentucky Community Crisis Response Board (KCCRB) Strike Teams

**Capability 3:** Emergency operations coordination is the ability to direct and support an event or incident with public health or medical implications by establishing a standardized, scalable system of oversight, organization, and supervision consistent with jurisdictional standards and practices and with the National Incident Management System. Major Programs Associated: Emergency Support Function (ESF– 8)

**Capability 4:** Emergency public information and warning is the ability to develop, coordinate, and disseminate information, alerts, warnings, and notifications to the public and incident management

responders. Major Programs Associated: Kentucky Outreach Information Network (KOIN) and Public Information Officer (PIO)

**Capability 5:** Fatality management is the ability to coordinate with other organizations (e.g., law enforcement, healthcare, emergency management, and medical examiner/coroner) to ensure the proper recovery, handling, identification, transportation, tracking, storage, and disposal of human remains and personal effects; certify cause of death; and facilitate access to mental/ behavioral health services to the family members, responders, and survivors of an incident. Major Programs Associated: Mortality Data Management System (MDMS), Family Assistance Center (FAC) and Victim Identification System

**Capability 6:** Information sharing is the ability to conduct multijurisdictional, multidisciplinary exchange of health-related information and situational awareness data among federal, state, local, territorial, and tribal levels of government, and the private sector. This capability includes the routine sharing of information as well as issuing of public health alerts to federal, state, local, territorial, and tribal levels of government and the private sector in preparation for, and in response to, events or incidents of public health significance. Major Programs Associated: An internet based emergency management information sharing system called WebEOC, Health Alert Network (HAN), and the National Electronic Disease Surveillance System (NEDSS)

**Capability 7:** Mass care is the ability to coordinate with partner agencies to address the public health, medical, and mental/behavioral health needs of those impacted by an incident at a congregate location. This capability includes the coordination of ongoing surveillance and assessment to ensure that health needs continue to be met as the incident evolves. Major Programs Associated: Functional Assessment Service Teams (FAST), Epidemiology Surveillance and Environmental Surveillance and Inspection

# Public Health Emergency Preparedness Capabilities

**Capability 8:** Medical countermeasure dispensing is the ability to provide medical countermeasures (including vaccines, antiviral drugs, antibiotics, anti-toxin, etc.) in support of treatment or prophylaxis (oral or vaccination) to the identified population in accordance with public health guidelines and/or recommendations. Major Programs Associated: Cities Readiness Initiative (CRI) and Points of Dispensing (POD)

**Capability 9:** Medical materiel management and distribution is the ability to acquire, maintain (e.g., cold chain storage or other storage protocol), transport, distribute, and track medical materiel (e.g., pharmaceuticals, gloves, masks, and ventilators) during an incident and to recover and account for unused medical materiel, as necessary, after an incident. Major Programs Associated: Strategic National Stockpile (SNS) and Receiving, Staging, Storage (RSS)

**Capability 10:** Medical surge is the ability to provide adequate medical evaluation and care during events that exceed the limits of the normal medical infrastructure of an affected community. It encompasses the ability of the healthcare system to survive a hazard impact and maintain or rapidly recover operations that were compromised. Major Programs Associated: Hospital Preparedness Coalition (HPC) and Regional HPC Coordinators

**Capability 11:** Non-pharmaceutical interventions are the ability to recommend to the applicable lead agency (if not public health) and implement, if applicable, strategies for disease, injury, and exposure control. Such strategies may include isolation, quarantine and hygiene. Major Programs Associated: Disease Outbreak and Pandemic Flu

**Capability 12:** Public health laboratory testing is the ability to conduct rapid and conventional detection, characterization, confirmatory testing, data

reporting, investigative support, and laboratory networking to address actual or potential exposure to all-hazards. Hazards include chemical, radiological, and biological agents in multiple matrices that may include clinical samples, food, and environmental samples (e.g., water, air, and soil). This capability supports routine surveillance, including pre-event or pre-incident and post-exposure activities. Major Programs Associated: Laboratory Response Network (LRN)

**Capability 13:** Public health surveillance and epidemiological investigation is the ability to create, maintain, support, and strengthen routine surveillance and detection systems and epidemiological investigation processes, as well as to expand these systems and processes in response to incidents of public health significance. Major Programs Associated: Epidemiology Rapid Response Team, Building Epidemiological Capacity in Kentucky (BECKY) and Regional Epidemiologists

**Capability 14:** The responder safety and health capability describes the ability to protect public health agency staff responding to an incident and the ability to support the health and safety needs of hospital and medical facility personnel, if requested. Major Programs Associated: Occupational Safety and Health Administration (OSHA), The National Institute for Occupational Safety and Health (NIOSH)

**Capability 15:** Volunteer management is the ability to coordinate the identification, recruitment, registration, credential verification, training, and engagement of volunteers to support the jurisdictional public health agency's response to incidents of public health significance. Major Programs Associated: Kentucky Health Emergency Listing of Professionals for Surge (K HELPS), Medical Reserve Corps (MRC) and Voluntary Organizations Active in Disaster (VOAD)



# National Preparedness Cycle

The National Incident Management System (NIMS) defines preparedness as "a continuous cycle of planning, organizing, training, equipping, exercising, evaluating, and taking corrective action in an effort to ensure effective coordination during incident response." This 'preparedness cycle' is one element of a broader National Preparedness System to prevent, respond to, recover from, and mitigate against natural disasters, acts of terrorism, and other man-made disasters. The following includes some examples of implementation of KDPH's preparedness cycle:



- Plan
  - ESF 8 Annex
  - The Department Operations Center Support Plan
  - The KDPH COOP Plan
  - Kentucky Radiological Incident Specific Plan
  - Kentucky Mass Casualty Incident Support Plan
  - Disease Outbreak Response Support Plan
  - Strategic National Stockpile (SNS) Plan
- Organize and Equip
  - Information Sharing (WebEOC, Satellite Radios, HAN, K HELPS)
  - Major Equipment: Pharmacy Trailer, Mobile Hospital, Mobile Operation Units, Mass Fatality Units, Med Surge Trailers, Preparedness Program vehicles, generators
- Train
  - Incident Command System (ICS) classes
  - Epidemiology Rapid Response Team
  - Public Information Officer (PIO)
  - Functional and Access Needs (FAN) awareness
  - PHEP Capability Trainings
  - Homeland Security Exercise and Evaluation Program (HSEEP)
  - Lab Specimen Collection
  - Kentucky Helps (K HELPS)
  - National Electronic Disease Surveillance System (NEDSS) Disease Surveillance Module (DSM)
  - Nuts and Bolts of Preparedness
- Exercise
  - Capstone 2014
  - Strategic National Stockpile (SNS) Exercise 2015
- Evaluate and Improve
  - Readiness Review
  - After Action Report (AAR)/ Improvement Plan (IP)

# Exercise Events Across the Bluegrass

## Shelter Management, ESF 6 & 8 Coordination Exercise

During the Ice Storm of '09, the importance of role sheltering played in caring for communities in a larger disaster was highlighted. It has been 4 years since the Ice Storm of '09 and many steps have been taken to better prepare for Mass Care sheltering. On June 14, 2013 the Calloway County Emergency Management, Health Department and American Red Cross demonstrated how their ESF 6 & 8 plans work with the American Red Cross Shelter to keep those with functional access needs in a general population shelter. Other exercise events are shown below.



Calloway County



Mercer County



Ashland-Boyd County Health Department

Louisville -Metro Department of Health and Wellness—  
Bio Detection System Drill



Boyle County



Madison County Emergency Operations Center (EOC)  
during Chemical Stockpile Emergency



# Exercise Events Across the Bluegrass

## Region 1 HPP Mass Casualty Exercise



MASH FSE Somerset, KY

## Multiyear Training and Exercise Plan (MTEP)



NASCAR Sprint Cup at KY Speedway



## Kentucky/Tennessee Community Assessment for Public Health Emergency Response (CASPER) Exercise



The KY/TN UPC CASPER exercise demonstrated the ability to integrate public health staff from Kentucky and Tennessee into a hybrid Incident Command System that operated smoothly, effectively and efficiently at both the command and field staff levels. This exercise also provided an opportunity to test Kentucky's CASPER capabilities and familiarize staff with the CASPER process thereby enhancing Kentucky's preparedness capabilities as well as the ability to co-respond with our partners in Tennessee should the need arise.





# Points Of Distribution (POD) Events

## Boyle County Flu Shot Clinic

The Health Department closed for the day and set up two lanes for a drive through flu clinic in their parking lot on September 30, 2013 from 8 A.M. – 6 P.M. With 11 staff and two student volunteers, 137 flu vaccinations were given. The clinic was geared toward adult vaccinations.



## Lexington-Fayette County Free Flu Friday 2012

LFCHD employees gave 1,669 free flu shots October 12, 2012, as part of its annual Free Flu Friday event, which provides the community with vaccinations while allowing the department to test its emergency preparedness.



## Little Sandy District Drive Thru Clinic



## Laurel County offered Flu shots at its 10th Annual Holiday Health Fair



# Trainings Across the Bluegrass

**Ashland-Boyd County Health Department  
held a WebEoc Training**



**Mercer County Health Department  
hosts ICS 300**



**Graves County promotes Pet Readiness**



**Public Information Officer (PIO) Training at  
Green River District HD**





# Medical Reserves Corps (MRC)



The Kentucky Department for Public Health (KDPH) has established the Kentucky Health Emergency Listing of Professionals for Surge (K HELPS) program. K HELPS is a web-based online registration system developed to facilitate health and medical response through identification, credentialing, and deployment of Kentuckians willing to serve in emergency, as well as non-emergency situations.

K HELPS complements existing Medical Reserve Corps (MRC) programs, which are community-based organizations utilizing medical professional volunteers to supplement existing local emergency and public health resources for emergency response. In Kentucky there are 43 MRC units and over 4,000 volunteers registered.





# Strategic National Stockpile (SNS)

The Strategic National Stockpile is a national repository of life-saving pharmaceuticals and medical supplies. It is designed to supplement and re-supply state and local public health and healthcare agencies, whose supplies may be exhausted in the event of an emergency. During a large-scale natural disaster or act of terrorism, citizens will require immediate access to medical countermeasures. It is the mission of the SNS program to ensure this capacity is maintained. No one can anticipate exactly when or where the need for such assets may arise and few states and local entities have the resources available to create sufficient stockpiles, thus the SNS program has been created as a resource for all.



Lake Cumberland District



The SNS program relates directly to the Public Health Preparedness Capabilities 8 and 9. Capability 8, Medical Countermeasures Dispensing, is concerned with the ability to provide medical countermeasures to an identified population in need. Capability 9, Medical Materiel Management and Distribution, is the ability to acquire, maintain, transport, distribute, and track medical materiel during an incident. This capability also covers the recovery of unused materiel after an incident.

There are 3 additional programs associated with the SNS program. They are: Cities Readiness Initiative (CRI); Federal Medical Station (FMS); and CHEMPACK. The CRI is a program designed to provide additional support to large cities and major metropolitan areas, in their respective SNS mission. The FMS is a temporary and deployable medical care capability that provides a scalable surge capacity for mass casualty events. The CHEMPACK program provides a strategic network of locally-controlled, nerve agent antidote repositories that can be deployed in the event of a large-scale chemical incident.



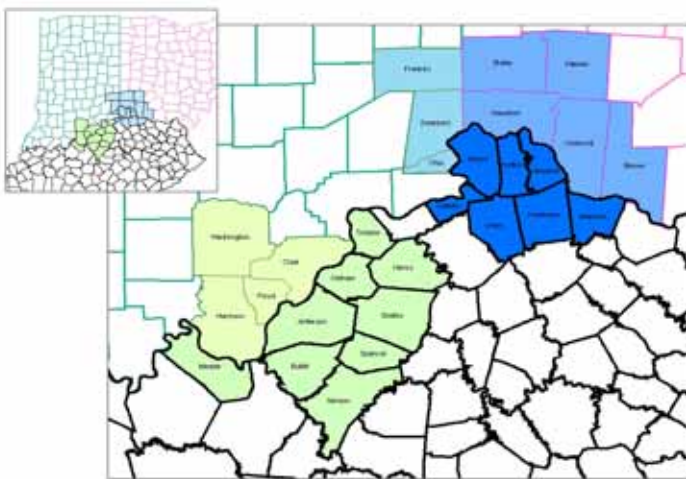
12 hour Push Pack



Receiving Staging and Storage Site (RSS) for Kentucky

# Cities Readiness Initiative (CRI)

In 2004, the U.S. Department of Health and Human Services (HHS) created the Cities Readiness Initiative (CRI) as part of the Cooperative Agreement on Public Health Emergency Preparedness (PHEP) to help the nation's largest metropolitan regions develop the ability to provide life-saving medications in the event of a large-scale public health emergency, either man-made or natural. CRI guidance is administered by the Centers for Disease Control and Prevention's (CDC) Division of Strategic National Stockpile (DSNS). CRI seeks to help respond to a large-scale public health emergency by providing life-saving medical supplies to 100 percent of a population within a 48-hour time frame. The program currently includes 72 metropolitan regions with at least one CRI Metropolitan Statistical Area in every state and covers more than 50 percent of the U.S. population.



CRI focuses specifically on urban areas and provides assistance in the distribution of medications and medical supplies at Point of Dispensing (POD) sites within 48 hours of activation.



# Functional Assessment Service Teams (FAST)

Functional Assessment Service Teams (FAST) is a resource that is available to communities during times of disasters and emergencies.

The purpose of FAST is to provide trained staff who are able to respond to local disaster area shelters in order to assess and identify residents who may have functional and access needs. The assessment will evaluate the needs and determine whether or not these individuals can be supported within the general population shelter. FAST will also assist in facilitating the process of obtaining essential resources for the shelter residents with functional and access needs.

FAST is a critical component of Mass Care, Capability 7 and Community Preparedness, Capability 1.

Functional and Access Needs Coordinator



Prestonsburg



Prestonsburg



**FAST members have collective knowledge, skills, and ability and at least two years' experience working in the following areas:**

- Aging (services/supports, including dietary needs)
- Chronic health conditions
- Developmental and other cognitive disabilities
- Hearing or vision loss
- Behavioral health needs
- Physical concerns
- And other needs people might have in communications, transportation, maintaining independence, and safety and assistance during a disaster

Frankfort





# Tornado Events in Kentucky

Tornados are among the most prevalent natural disasters we face in Kentucky and require much of our focused preparedness efforts. We are still providing support and assisting in recovery as we look back to the tornados of 2012. Tornados swept across the Midwest and the South on Friday, March 2, 2012, hitting hardest in Indiana, Kentucky and Ohio. Kentucky had a total of 24 fatalities.



# Partners & Contracts

The Department of Military Affairs (DMA) and the Kentucky Community Crisis Response Board (KCCRB) serves the Commonwealth by training and maintaining a statewide team of regional response-ready volunteers to provide disaster behavioral health services in the form of assessment, behavioral health triage, Psychological First Aid/critical incident stress management and referrals for first responders, disaster relief workers and affected civilians following disasters and critical incidents across the Commonwealth.

The Department for Aging and Independent Living (DAIL) assisted with the development of a disaster sheltering resource called Functional Assessment Service Teams (FAST). During an emergency or disaster these team members conduct assessments to evaluate resources necessary to support persons with functional and access needs within general population shelters.

Norton's Healthcare activates and maintains a statewide emergency public health hotline that will be available 24 hours a day, seven days per week only during emergencies as needed, to communicate efficiently with Kentuckians regarding bioterrorism, all hazards and public health threats.

Kentucky Hospital Research and Education Foundation (KHREF) enhances the ability of hospitals and supporting health care systems to prepare for and respond to bioterrorism and other public health emergencies.

The Kentucky Pharmacists Association engage a full-time pharmacist and director of communication to assist with a variety of activities in support of the Emergency Preparedness Branch of the Kentucky Department of Health.

The University of Louisville (UL) coordinates development of a comprehensive Crisis Standards of Care proposal for the Commonwealth of Kentucky in collaboration with the Department for Public Health (DPH). Activities include: 1) a series of discussions among lead faculty, subject matter experts and support staff in Frankfort, followed by 2) regional level planning activities involving federal, state, local public health authorities and healthcare providers meeting as the Kentucky Disaster Medical Advisory Committee; and 3) planning and holding series of public health engagement sessions with a representative group of citizens in order to develop the completed Crisis Standards of Care document.

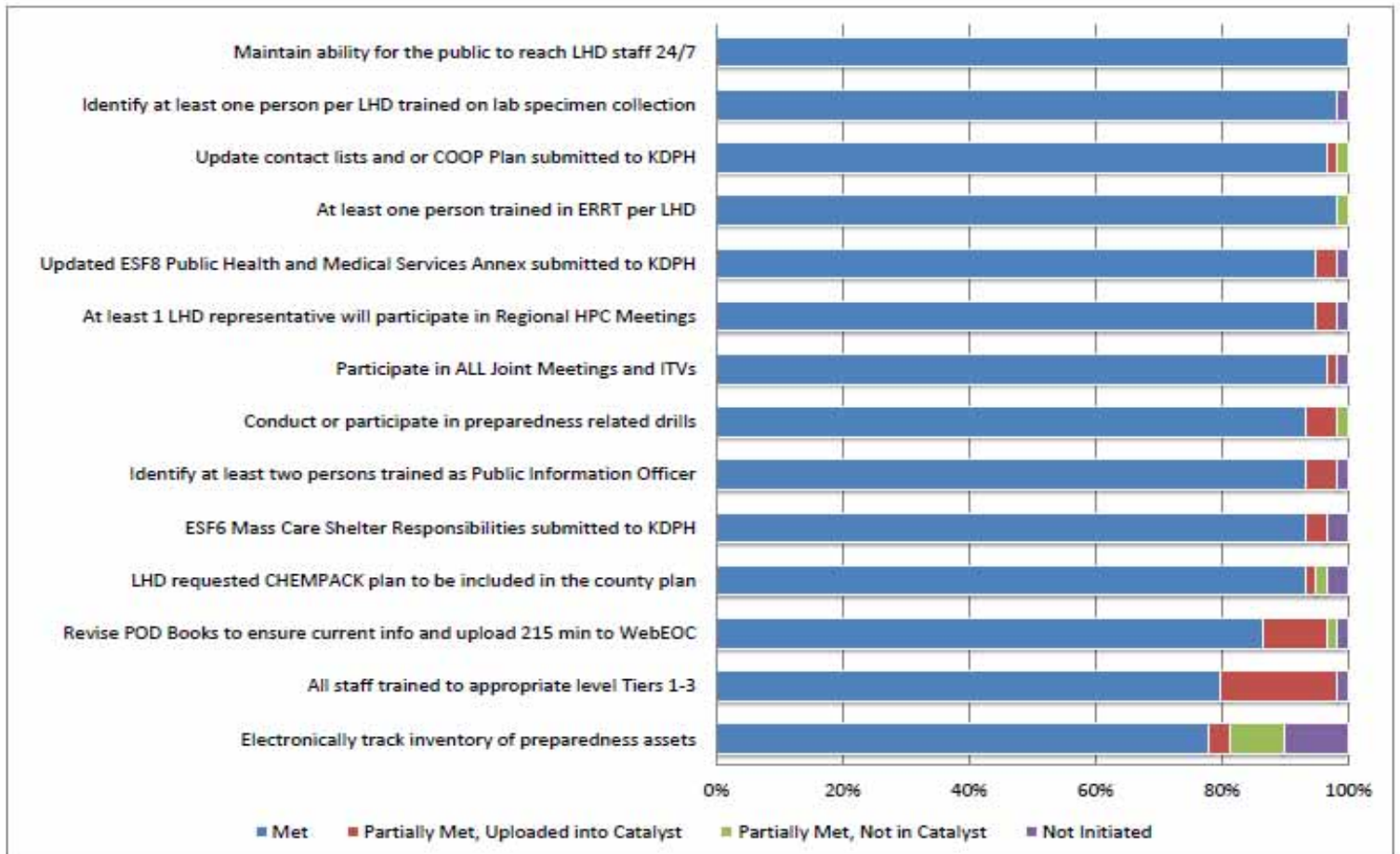
University of Kentucky: Emergency Preparedness for Aging & Long Term Care sub-contracts with the University of Louisville to enable Long Term Care (LTC) facilities across KY to enhance the preparedness level of each facility in order to increase overall surge capacity of the healthcare system

Local Health Departments share responsibility with KDPH to oversee the implementation of public health programs for the prevention, detection, care, and treatment of physical disabilities, illnesses, and diseases, in accordance with KRS Chapter 211. Many of these responsibilities are conducted through the terms of a Multi-Provider Memorandum of Agreement (BIO TC-FY14) between the KDPH and all local jurisdictions.



# Kentucky's Readiness Review Results for Evaluating and Measuring Progress FY 2012– 2013

Kentucky's Local Health Departments are continuing to excel in their preparedness programs. The Readiness Review is a standardized evaluation that was developed by the Preparedness Branch in order to assist local health departments in determining both strengths and areas of improvement for local public health preparedness. The table below reflects progress in meeting the national public health preparedness capabilities. Each deliverable is categorized as Met, Partially Met or Not Initiated.







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