

Primary Care Health Services, Inc.

All-Hazards Plan Orientation

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Welcome to the Primary Care Health Services All-Hazards Plan Orientation. I am Doctor Sam Stebbins, Director of the Center for Public Health Preparedness at the University of Pittsburgh.

This presentation is an initial orientation and is intended for any Primary Care Health Services employees – including but not limited to: administrative, medical and other personnel.

This orientation will provide you with basic information about the PCHS All-Hazards Plan and when the plan would need to be activated, as well as background information on federal, state and local level emergency preparedness and response priorities.

The University of Pittsburgh Center for Public Health Preparedness developed this training based on input from personnel at PCHS. Depending on your background and training, completion of this module may qualify you for CNE, CME or CEU credits.

We sincerely appreciate your willingness to complete this training and familiarize yourself to the PCHS All-Hazards Plan. In the event of an emergency, your knowledge of the All-Hazards Plan will help to keep you, your patients, and your family safe and healthy! As you know, the clinics and facilities of PCHS play a vital role in serving community members throughout Allegheny County. All-hazards planning will help to maintain continuity of care in the event of an emergency.

Learning Objectives

At the end of this module you will be able to:

1. Explain the purpose of the All-Hazards Plan
2. Describe under what circumstances an all-hazards plan could be activated for PCHS
3. Understand the organizational structure of the Incident Command System
4. Define the function of specific roles within the Incident Command System for PCHS
5. Know the organizations and agencies who play important roles in emergency and disaster response in the region
6. Describe actions included in a personal preparedness plan

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2. Describe under what circumstances an all-hazards plan could be activated for PCHS
3. Understand the organizational structure of the Incident Command System
4. Define the function of specific roles within the Incident Command System for PCHS
5. Be familiar with the local organizations and agencies who play important roles in emergency and disaster response in the region
6. Describe actions included in your own personal preparedness plan

What is PCHS?

"Quality health care in your neighborhood and within your budget"
PCHS, Inc. brochure

- Private non-profit community based corporation in Pittsburgh, PA
- 13 centers and 5 special initiatives
- Services:
 - » Adult medicine
 - » Women's health
 - » Dental
 - » Laboratory, pharmacy, and social services
 - » Pediatrics
 - » Podiatry
 - » Mental health

PCHS was founded in 1976 and is a private non-profit community-based corporation in Pittsburgh, Pennsylvania. It consists of 13 health centers and 5 special initiatives located in four Pittsburgh neighborhoods and six municipalities in Allegheny County. As a network of Federally Qualified Health Centers, PCHS is committed to providing quality health care at an affordable cost.

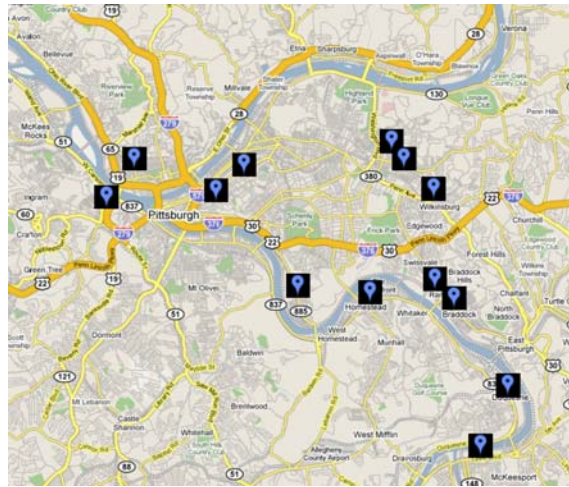
PCHS offers a full array of medical services, including:

- Adult medicine
- Women's health services
- Preventive and restorative dental services for adults and children
- Laboratory, pharmacy, and social services
- Pediatric services
- Podiatry services
- Mental health services

The development of an all-hazards plan will help PCHS maintain their mission of offering and providing comprehensive health care services to the medically underserved and indigent populations residing in Allegheny County during an emergency.

Reference: Primary Care Health Services, Inc. [Brochure].

PCHS Clinic Sites



This slide shows a map of the immediate Pittsburgh and Allegheny County Region where the 13 clinics of PCHS are located. As you can see there is a broad distribution geographically, and a number of them are close to rivers, rail lines, highways or other sites where potential disasters, accidents, or emergencies may occur.

PITTSBURGH

- Alma Illery Medical Center, 7227 Hamilton Avenue, Pittsburgh, PA 15208; 412-244-4760
- East End Community Health Center, 117 North Negley Avenue, Pittsburgh, PA 15206; 412-261-0937
- Hazelwood Family Health Center, 4918 Second Avenue, Pittsburgh, PA 15207; 412-422-9520
- West End Health Center, 514 Neptune Street, Pittsburgh, PA 15220; 412-921-7200
- Manchester & West End Dental, 441 South Main, Pittsburgh, PA 15215; 412-922-5636
- Westinghouse High School, 1101 North Murtland, Pittsburgh, PA 412-361-0909

ALLEGHENY COUNTY

- Braddock Family Health Center, 404 Braddock Avenue, Braddock, PA 15104; 412-351-6300
- Duquesne Family Health Center, 2 Duquesne Plaza, Duquesne, PA 15120; 412-466-6300
- Steel Valley Family Health Center, 208 East 8th Avenue, Munhall, PA 15120; 412-461-3863
- McKeesport Family Health Center, 627 Lysle Boulevard, McKeesport, PA 15132; 412-664-4112
- Rankin Family Health Center, 300 Rankin Boulevard, Rankin, PA 15104; 412-351-4555
- Wilkinsburg Family Health Center, 807 Wallace Avenue, Wilkinsburg, PA 15221; 412-247-5216

PCHS Special Initiatives

- Special Initiatives
 - » Health Care for the Homeless
 - » Preparing for Childbirth
 - » Supportive Housing Program
 - » Senior Care Program
 - » Wilkinsburg Family Support



Ben Earwicker/stock.xchng



Anissa Thompson/stock.xchng

PCHS also includes a number of special initiatives including programs on

- Health Care for the Homeless (412-244-4775)
- Preparing for Childbirth (412-244-4986)
- Supportive Housing Program (412-371-3475)
- Senior Care Program (412-244-4988)
- Wilkinsburg Family Support (412-871-7948)

Why have a plan?

- A working plan is required by funding agencies
- The planning process allows the organization to grapple with issues that may have been set aside for “another day”
- Orientation to the plan provides employees with important safety information
- An effective plan helps protect employees, patients, and facilities

So you may be wondering, why does there need to be such a plan at all?

First, a working plan is required by funding agencies. More importantly, the planning process allows your organization to grapple with issues that may have been set aside for another day. In addition, orientation to the plan provides employees with important safety information. And most importantly, an effective plan helps protect employees, patients, and facilities.

Purpose of an All-Hazards Plan

The All-Hazards Plan serves to:

- Safeguard human resources
 - Protect clinic staff and patients
- Protect physical resources
 - Keep the building safe and secure
- Ensure business continuity
 - Safeguard the ability of the clinic to deliver health care



HRSA Bureau of Primary Health Care Policy Information Notice 2007-15, p 2

What is an all-hazards plan? It's a standardized plan of action that can be applied to the full array of emergencies and disasters which may affect your region or worksite.

At the core of emergency management planning and preparation are three key elements: (1) safeguarding human resources, (2) protecting physical resources, and (3) ensuring business continuity. For health centers, this translates to protecting health center staff and patients as well as safeguarding its ability to deliver health care.

(HRSA BPHC Policy Information Notice 2007-15, p 2)

PCHS All-Hazards Plan

- Applies to all PCHS sites.
- Designed to address response to emergency situations that have an adverse impact on the daily operation of the health care facility.



The PCHS All-Hazards Plan applies to all of the 13 centers, 5 programs and other entities within PCHS.

It is designed to address response to emergency situations that have an adverse impact on the daily operations of each health care facility and the people who either work there or visit there.

In this plan you will find matters pertaining to the recognition and declaration of emergencies, response by emergency organizations, information on emergency communications, recovery operations, staff training, and maintenance of the plan itself.

Basics of Emergency Response

National Incident Management System (NIMS)

- A comprehensive, national approach to emergency response
- Enables emergency response to be:
 - Coordinated
 - Standardized
 - Interoperable



Emergencies occur every day somewhere in the United States. These emergencies are both large and small and may range from fires, to hazardous materials incidents, to natural and technological disasters. Each incident requires a response. Whether from different departments within the same jurisdiction, or from mutual aid partners, or from State and Federal agencies, responders need to be able to work together, to communicate with each other and to depend on each other.

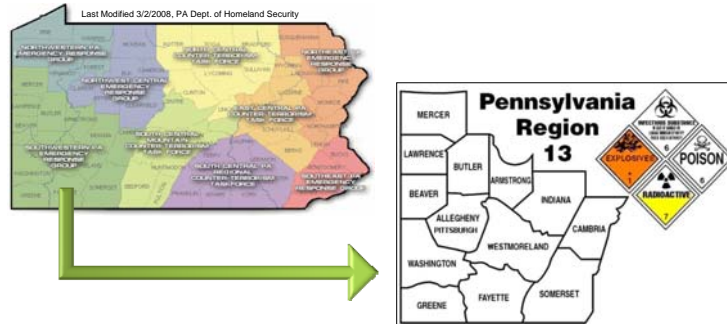
In recent years the Federal government has developed NIMS, The National Incident Management System and has also required that all responders utilize this system as part of their standard method of responding.

NIMS is comprised of several components that work together as a system to provide a national framework for preparing for, preventing, responding to, and recovering from disasters or emergencies in the United States.

NIMS is a coordinated, standardized, and interoperable plan that may be used by anyone.

Pennsylvania Region 13

Regional Counter-Terrorism Task Forces



- Website: www.homelandsecurity.state.pa.us
- Website: www.pa-region13.org

In the event of a large-scale emergency a response from multiple counties might be necessary, either because the event affects more than one county or one county is overwhelmed and needs assistance. As a result, nine counter-terrorism task forces have been created throughout Pennsylvania to prepare for and plan for large scale emergencies.

We are in Region 13. Region 13 was the first such region created and is called that because it includes 13 counties and the City of Pittsburgh. These counties and the city have regional mutual aid and intergovernmental agreements for preparing and responding to emergency events. These agreements allow for the easy sharing of resources and communication and coordination across a wide geographic area.

Region 13 includes representatives from each of the counties and city that play a role, as well as representatives from fire departments, police departments, emergency medical service agencies, hospitals and public health (Pennsylvania Region 13, 2008).

Allegheny County Health Department



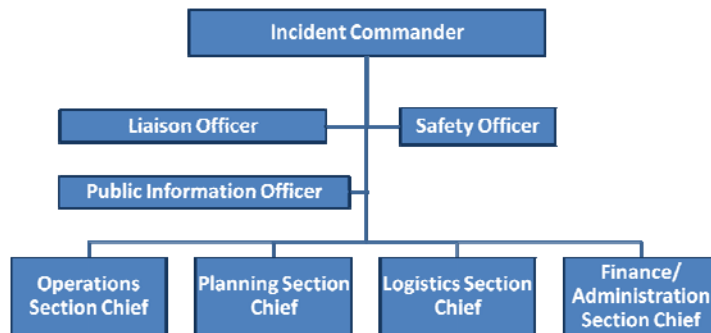
- » Responds to outbreaks of disease;
 - » Assesses health risks;
 - » Issues health advisories and warnings;
 - » Provides direct medical services to control the spread of infectious diseases;
 - » Is an integral member of the county's hazardous materials response teams;
 - » Assists responders in acquiring and distributing needed medical equipment and supplies during disasters;
 - » Performs environmental sampling and monitoring; and
 - » Provides technical information to responders and the general public.
- Website: www.achd.net

The Allegheny County Health Department plays a central role in any emergency or disaster response. The Department works closely with the County Human Services Department and Emergency Medical Services to assure that public health, medical, and mental health services are available for all victims, their families, and affected communities.

As you can see from the list, the Health Department has a long list of activities that it addresses, including responding to outbreaks, assessing health risks, issuing advisories and warnings, providing direct medical services, being an integral member of the county's hazardous materials response teams, assisting responders, performing environmental sampling and monitoring, and providing technical information to responders and the general public.

<http://www.achd.net/emergency/pubs/htm/main.htm>

Basics of Emergency Response Incident Command System (ICS)



So as you have seen NIMS, the National Incident Management System, provides the overall framework for emergency response. Within that is ICS, the Incident Command System. This is the standard model for on-scene, all-hazards management of disasters.

ICS was developed in the 1970s following a series of catastrophic fires in California. After the fires were over analysis showed that many of the responders came from different agencies and counties and were unable to efficiently coordinate their equipment, their training, their gear, or their actual response. (FEMA IS-100)

The diagram you see here is a generic ICS organizational chart and illustrates the core defined positions and their responsibilities.

First, the **Incident Commander**, who is the overall leader of an individual response.

Reporting to him/her are three key personnel, the **Safety Officer** who assures the safety of emergency response staff, the **Liaison Officer** who interacts with other folks, and the **Public Information Officer** who maintains communication both internally and externally.

At the bottom of the chart are the four main sections within ICS. There is the **Operations Section**, these are the “doers” who carry out the actual response to an emergency. Next are the **Planners**, who develop plans for the response. Next is **Logistics**, these are the “getters” who obtain necessary supplies. And last is **Finance**, these includes the “payers” who help pay for the event, during and after it is over.

Emergency Operations Center

- PCHS
- City of Pittsburgh
- Allegheny County
- Region 13



Jacinta Quesada/FEMA

An **Emergency Operations Center**, or **EOC**, is the central command and control facility. It is typically a centralized site where people work, meet, and plan their response. The most important requirement of an EOC is the ability to communicate internally within an organization and externally with other partners and responders.

PCHS will have a designated site, or EOC, in the case of an emergency.

The City of Pittsburgh, Allegheny County, and Region 13 have a joint EOC located in Point Breeze. It is conveniently co-located with the 911 call center for the county.

In the event of a disaster, the PCHS EOC would communicate with the joint EOC in order to both receive and provide updates, request aid and assistance, and share other information on support functions and activities.

PCHS All-Hazards Plan: Applicability

The All-Hazards Plan will be activated when:

- Natural, human, or technological events have an adverse impact on the daily operation of the health care facility
 - Natural events: Flooding or other natural disaster
 - Human events: Bioterrorism or riot
 - Technological events: electrical failure or chemical leak

- The All-Hazards Plan DOES NOT apply to patient medical emergencies

The All-Hazards Plan applies to all PCHS health centers and other sites and is designed to address response to a number of emergency situations. The plan will be activated when an emergency of sufficient scale has an adverse impact, or potential adverse impact, on the daily operation of one or more PCHS sites.

Possible events that may warrant the activation of the Plan include:

- **Natural events**, such as severe thunderstorms, flooding, tornados or hurricanes, temperature extremes, fire, or biological events such as an epidemic;
- **Human events**, such as civil disturbance, or mass trauma casualty incident or hostage situation or;
- **Technological events**, including electrical failure, information systems failure, structural damage, or chemical or other exposure.

The Plan, including activation of EOC and development of Incident Commander and ICS structure, will allow PCHS sites and leaders to coordinate their response, provide services to those who need them, protect staff, and also get information out to patients and other clients who use PCHS sites and services.

It is important to note the plan does **not apply** to patient medical emergencies.

PCHS All-Hazards Plan: Content

- Program Description
- Training, Drills, Exercises
- Maintaining Emergency Preparedness
- Emergency Classification
- Position Specific Checklists



The PCHS Plan includes five main sections.

First is the **Program Description**, which includes the overall structure of the program.

Second, there's a section on procedures for **Training, Drills, and Exercises**.

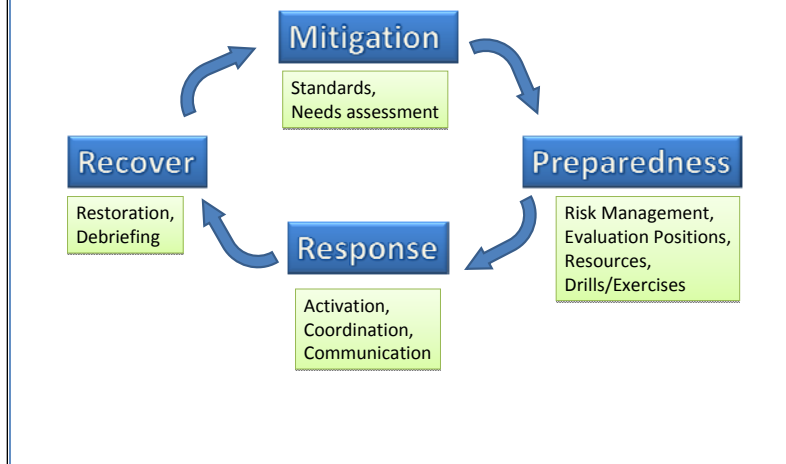
Third, are procedures for **Maintaining Emergency Preparedness** at individual PCHS sites and for the PCHS system as a whole.

Fourth, are **Emergency Classifications**, or descriptions of the kinds of emergencies that may occur.

And fifth, there are **Position Specific Checklists** to guide and direct personnel on their duties during a declared emergency.

We will be discussing the content within each of these sections in greater detail in the following slides.

PCHS All-Hazards Plan: Key Concepts



What you are viewing now is the standard four phases of disaster planning and response. All agencies use these same four phases.

The first is **Mitigation**, which is activities designed to lessen the impact of a disaster by thinking ahead. Next is **Preparedness**, which ensures that personnel have the adequate and appropriate training and that supplies are in place to respond in the event of a disaster. The third is the actual **Response** itself. And the fourth is the **Recovery** after the disaster and restoration of services and supplies.

PCHS All-Hazards Plan: Mitigation

- Maintenance of emergency preparedness program
- Hazard and vulnerability analysis
- Identification of unmet needs



There are three main components written into the Plan to mitigate the impact of disasters on PCHS sites.

First, the development and maintenance of the plan itself is mitigation. It must meet the requirements of HRSA the funding agency. The procedures in the plan manual can serve as stand alone documents or may be modified to meet the needs of an individual PCHS site.

Second, it is important to identify the types of hazards and emergencies that are likely to have an impact on daily operations. If a clinic or site is at low water level and near a river and the risk of flooding may be much higher than another site which is at the top of a hill, then they need to plan accordingly. Each site should consider what kinds of natural events, human events, and technological events may interfere with their operations. In addition, each center should contact their municipality to better understand what risks are inherent in the region, and also to establish a working relationship with local emergency organizations.

Third, items that are not available to each center but are needed to respond to situations which were identified in the hazards and vulnerability analysis will need to be identified. These are called 'unmet needs' and include personnel, equipment, facilities and any other items deemed necessary.

PCHS All-Hazards Plan: Preparedness

- Organizational structure consistent with NIMS
- Dedicated emergency equipment
- Points of contact & communication
- Training, Drills, and exercises



Preparedness is, of course, an essential element to planning and effective response.

Part of this aspect is to develop an organizational structure consistent with the National Incident Management System or NIMS. This will ensure that in the event of a disaster PCHS sites can coordinate and communicate effectively with response organizations.

Another aspect of the Plan is to have dedicated equipment for emergencies. Equipment should be identified, procured, and mutual aid agreements made to ensure that the necessary equipment is on hand or readily available. A system to maintain inventory and testing of the equipment should be implemented.

Communication is another major aspect of any preparedness plan. Each center should have an identified point of contact to ensure that those involved in the emergency response know who to communicate with during an emergency. No time should be lost during the response because people do not know who to call.

A major component of any preparedness plan is the execution of various trainings, drills, and exercises. The presentation you are watching right now is an important part of the efforts to familiarize you with the All-Hazards Plan before in-depth training occurs. Training is key to ensuring that PCHS personnel are prepared to deal with any emergencies which may occur.

PCHS All-Hazards Plan: Response

- Recognize & declare an emergency
 - » Limited emergency
 - » Full emergency
- Activation of EOC and the Incident Command System



In the event of a disaster PCHS has designated two different levels of emergency declaration – limited and full.

A **Limited Emergency** is a “situation wherein a potential or actual hazard has reached a dangerous level and could affect the safety and operation of [a] health facility” or other site.

A **Full Emergency** is “a situation where the . . . conditions have increased to the point of threatening public safety and facility safety and a total mobilization of all resources are required on a 24-hour basis to cope” with the hazard.

For example, if during the winter, the National Weather Service declared that a major blizzard was bearing down on Pittsburgh, PCHS might activate the EOC and Incident Command System in a limited fashion to begin initial planning. In the event the blizzard actually hit the city full activation would then follow.

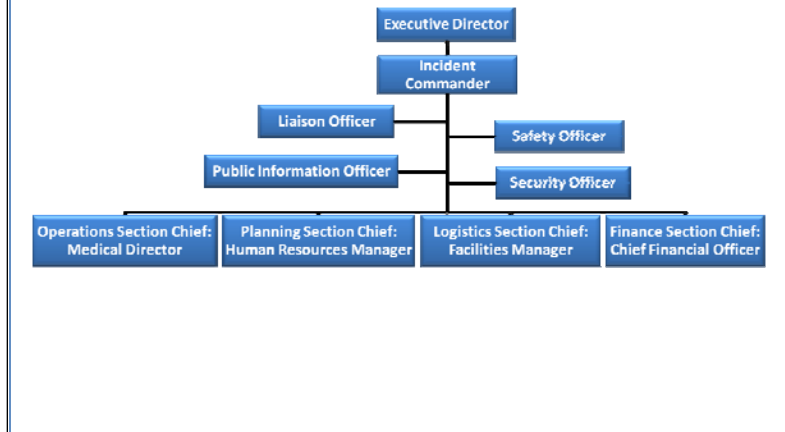
PCHS All-Hazards Plan: Recovery

- Assessment of facility damage to include
 - » Inventories
 - » Structural integrity
 - » Decontamination
 - » Restoration of utility services and occupancy permitted by the local authorities
- Debriefing & After-Action Report

As the emergency subsides recovery operations will begin. Consideration should be given to ensure that necessary documentation is collected to facilitate financial reimbursement and the facility should be assessed to determine the impact of the hazard. Inventories of equipment, structural integrity, decontamination, restoration of utility services and occupancy permitting by local authorities, such as the Health Department or Pittsburgh Police, should be considered.

In addition, there should be a systematic debriefing of personnel to identify the lessons learned and the establishment of Action Plans to include an after-action report. At this time mental health needs for workers and patients with special needs should be identified and addressed accordingly.

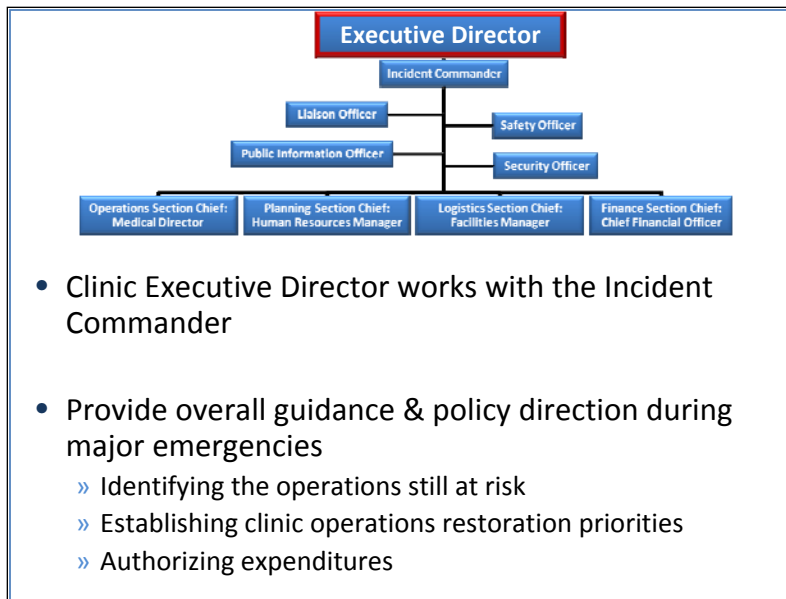
PCHS All-Hazards Plan Incident Command System (ICS)



Here is the ICS diagram specific for PCHS. The people most likely to serve in a given position are identified for some of the positions.

In the event of a disaster in the ICS system,

- The **Executive Director** retains responsibility for overall oversight
- The **Incident Commander**, which is also referred to as the **Incident Manager** in some of your documents, would likely be a senior medical or administrative person
- The **Operations Section Chief** would be the Medical Director
- The **Planning Section Chief** would be the Human Resources Manager
- The **Logistics Section Chief** would be the Facilities Manager and
- The **Finance Section Chief** would be the Chief Financial Officer for PCHS



The line of authority flows from the PCHS Executive Director, to the Incident Commander, and then to the Section Chiefs in the EOC.

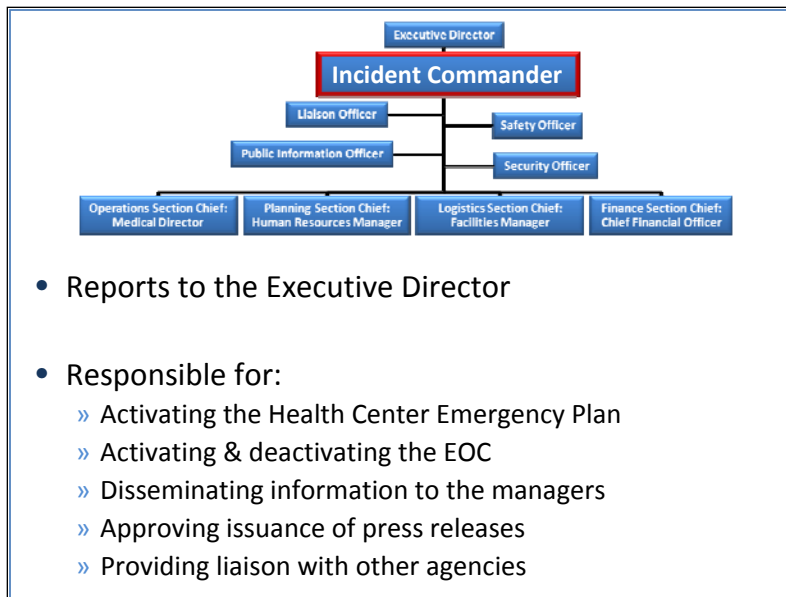
The Director and the Commander should discuss all aspects of the major emergency, provide overall guidance and policy direction for the response and recovery, and this includes:

- Identifying operations still at risk
- Establishing clinic operations response and restoration priorities and
- Authorizing expenditure of funds for acquisitions and additional personnel as needed.

During the emergency response the Director acts a bridge to the world outside of the PCHS system so that outside influences do not interrupt the response and recovery process.

The Executive Director may also play the role of the PIO, or Public Information Officer.

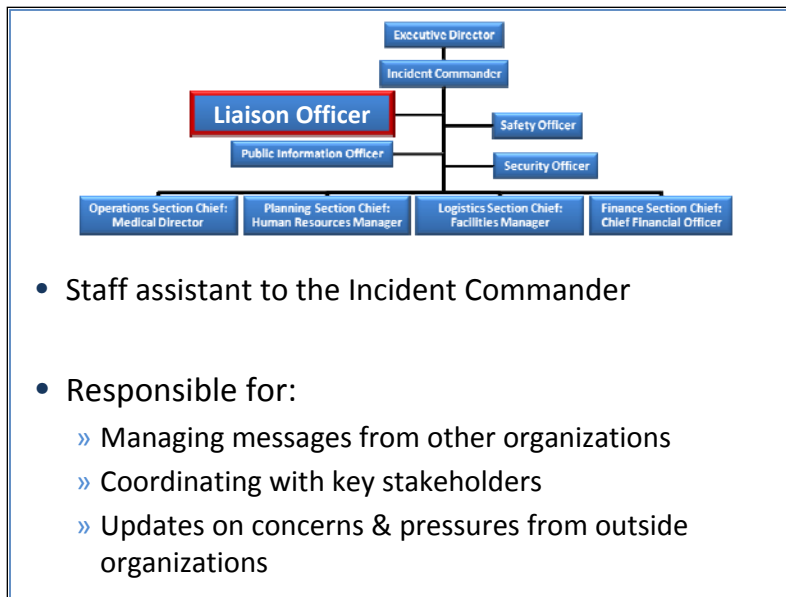
In some cases, the Executive Director may also assume the role of the Incident Commander, though this is not considered optimum.



The Incident Commander is responsible for the overall response to the disaster or emergency. This means that they may have to give up their regular job which will have to be covered by someone else.

The Incident Commander is responsible for

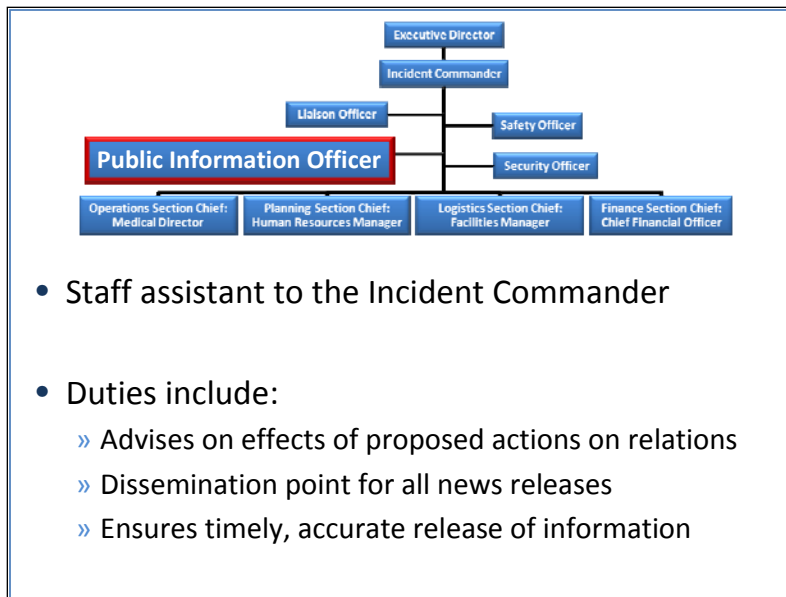
- Activating the emergency plan
- Activating, deactivating, and staffing the EOC
- Disseminating information to and directing the actions of the section chiefs
- Providing for issuance of press releases with the approval of the Executive Director and
- Providing liaison with the many other agencies that may be involved.



The Liaison Officer is a staff assistant to the Incident Commander and is not in the direct line of authority. This position is the point of contact for assisting and cooperating with other agency representatives, such as law enforcement, social services agencies, administrative agencies, and regulators.

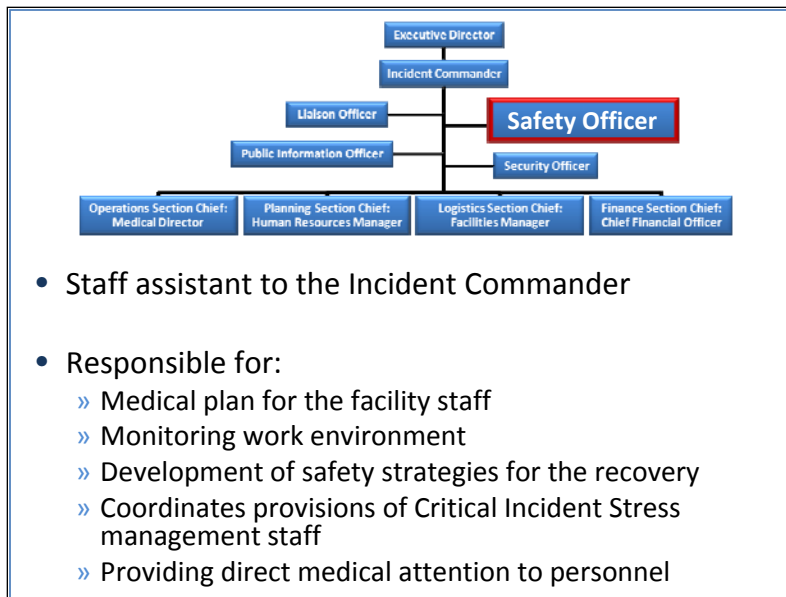
Depending on the size, scale, and scope of the disaster this can actually be a very, very, busy job as the officer is responsible for:

- Answering calls and managing messages from the various outside organizations
- Coordinating with key stakeholders
- Requesting assistance directly to other organizations and
- Keeping the Executive Director and Incident Commander informed about concerns and pressures from outside organizations



The Public Information Officer is another staff assistant to the Incident Commander and is responsible for the development and release of information about the response and recovery to the news media and other appropriate agencies and organizations. In addition, the PIO may also be directly responsible for disseminating information to patients and/or clients to keep them up-to-date.

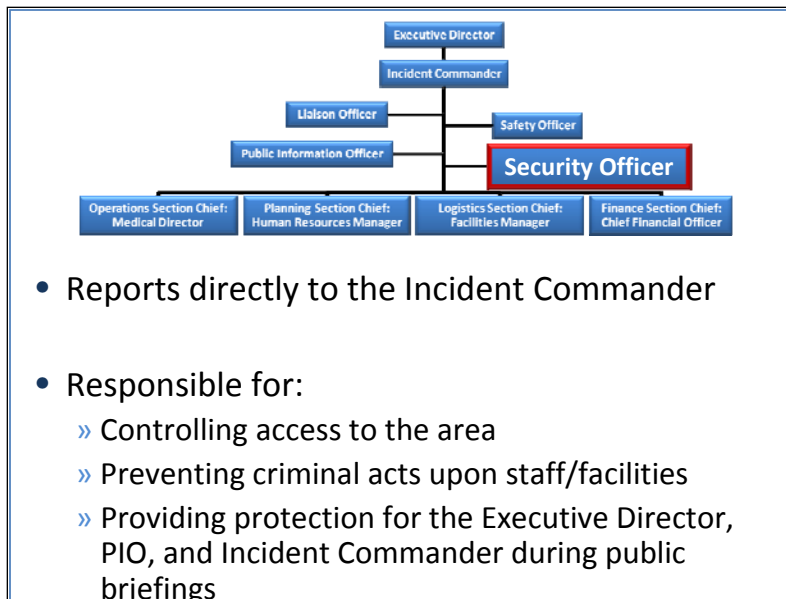
All requests for information from outside of PCHS must be directed to the PIO and cleared by the Incident Commander before information is released.



The Safety Officer is another one of those important positions that you often don't hear much about. They provide direct support to the Incident Commander and are responsible for monitoring and assessing hazardous and unsafe situations, as well as developing measures for assuring personnel safety. The Safety Officer may exercise emergency authority to stop or prevent unsafe acts when immediate action is required, and will also correct unsafe acts or conditions through the regular line of authority.

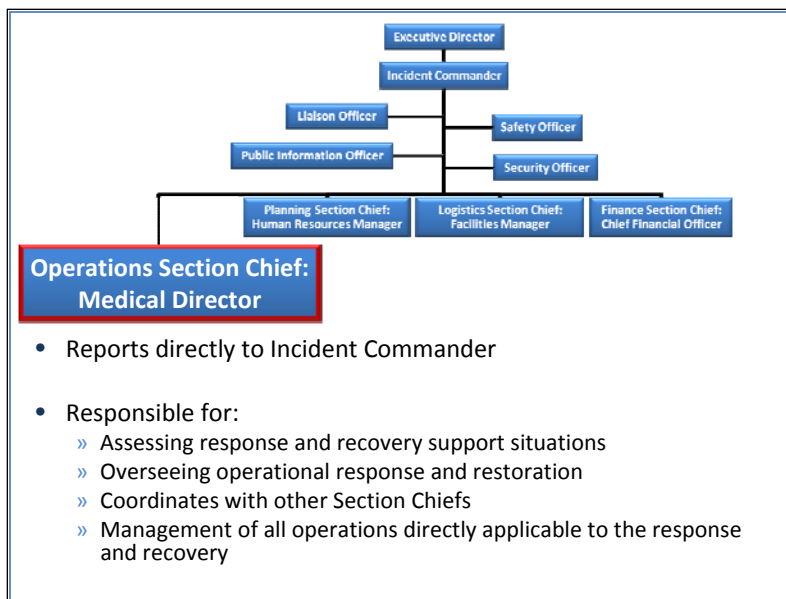
Additional responsibilities include:

- Developing safe strategies for the recovery in conjunction with the Incident Commander and the Logistics Section Chief
- Coordinating the provision of the Critical Incident Stress management for staff and
- Providing direct medical attention to ill or injured personnel until professional medical help can arrive.



The Security Officer also provides direct support to the Incident Commander. In contrast to the Safety Officer who you just heard about, this person ensures security and physical safety of the facility and staff by

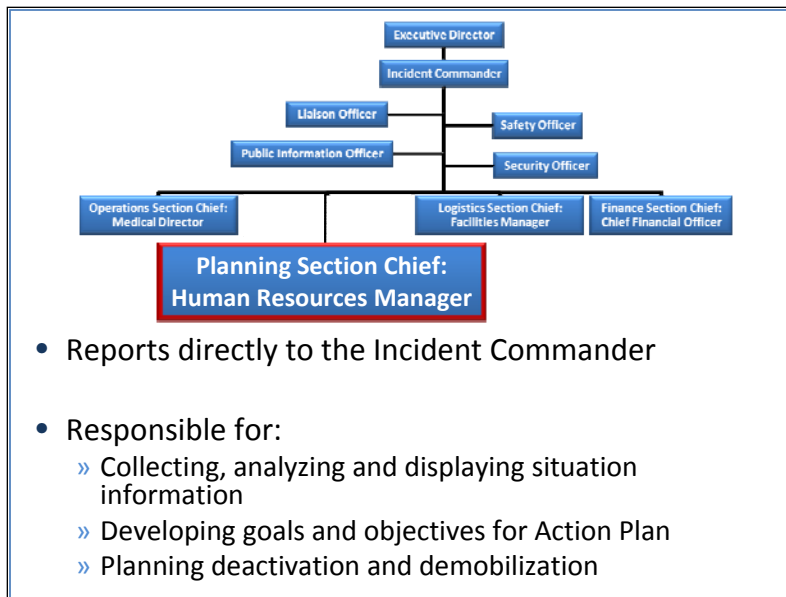
- Controlling ingress and egress into the area, that is people’s coming and going, including maintenance of a sign-in and sign-out log
- Controlling parking and general traffic flow after a major emergency or in the event of a coordinated response
- Verifying identification of people who are working, either at one of the sites or as part of the response
- Preventing criminal acts upon staff or facilities.



We will next discuss the four major sections of any response. It is important to know that depending on the scale of the disaster and the type of the disaster or emergency threat not all sections may need to be activated. It is not unusual for a small or medium scale disaster to require only the activation of Operations and Logistics sections, or perhaps Operations and Planning. However in a large disaster such as a pandemic, major hurricane, or other activity that affects most or all of the PCHS sites it is likely that all four sections would be needed.

The first we will discuss is Operations. This is the section that ‘does’ things. The Medical Director will act as the Operations Chief and report directly to the Incident Commander and who will contact, inform, and coordinate with all other clinic and PCHS sites. For example, the Operations Chief should work closely with the Logistics Chief and the Planning Chief to determine if full or partial closure of clinic facilities is likely and/or warranted, and then determine how to ensure effective response and recovery strategies and tactics.

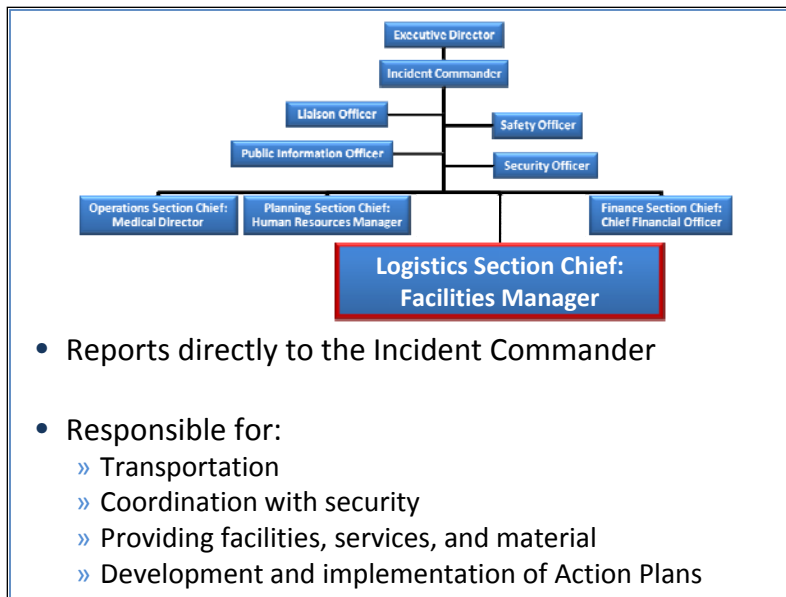
The Operations Chief is responsible for all of the ‘operations’ of the system during the response and recovery period. This is typically a very busy job.



The Planning Section Chief is also a very important role. At PCHS the Human Resources Manager is the predetermined Planning Section Chief when the EOC is activated.

Some of the main duties of this position include:

- Collecting, analyzing and displaying situation information
- Preparing status reports for the Incident Commander and the other chiefs
- Developing goals and objectives for the Action Plan response
- Planning for deactivation and demobilization as the disaster and the workload decrease
- Keeping the Incident Commander updated on significant planning and other findings such as advance reports, serious changes in weather, and projected reductions in resources or support.



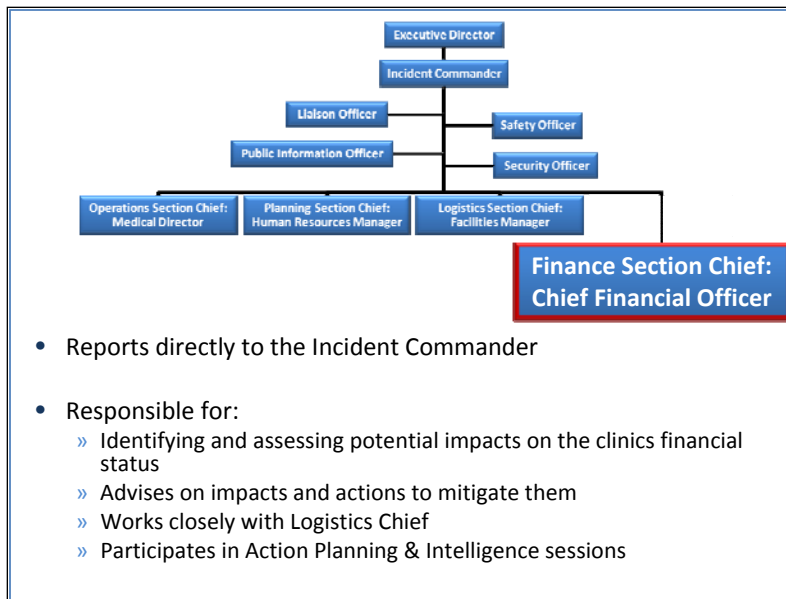
The Logistics Section is one of those operations that doesn't get a lot of fame and glory but is integrally important.

The position of Logistics Section Chief will be filled by the PCHS Facilities Manager. This position is responsible for providing facilities, services, and material in support of the emergency.

Additional responsibilities include:

- Organizing transportation,
- Coordinating with Security, and
- Continuous communication with the other Section Chiefs to ensure that resources match the other Sections' needs.

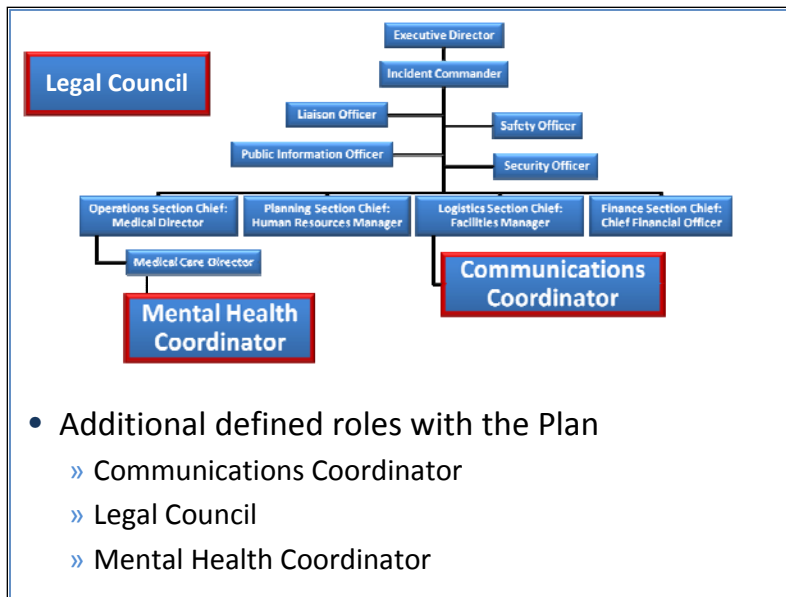
As with all the other Section Chiefs, this position participates in the development and implementation of the Action Plans. This position also has a very important role as liaison to many other responding organizations in the process of locating needed supplies or personnel.



The Chief Financial Officer of PCHS will fill the role of Finance Section Chief, and is also responsible for Administration.

A sample of key responsibilities includes:

- Monitoring the emergency response to identify and assess potential impacts on the system's financial status including cash flow, unusual expenses, budget impacts, and the need for funding to meet the emergency requirements
- Advising the Incident Commander and other Section Chiefs on how to mitigate, that is reduce, the financial impact, and
- Working closely with the Logistics Chief to ensure that expenses related to the response are recorded for governmental and insurance reimbursements



Three other positions are also of great importance.

The **Communications Coordinator** is assigned by the Incident Commander to implement communications activities in order to ensure reliable, redundant, and quality communications capability and to make certain that interpersonal communications between staff and outside contacts are efficient, accurate, and consistent.

The **Legal Council** is an adviser to the EOC and its staff and is responsible for scanning situation information, guidelines, directives, and Action Plans for potential legal exposure including but not limited to liability, compliance with existing contracts, and statutory compliance.

Operations during an emergency response can also be very stressful. The **Mental Health Coordinator** reports to the Operations Section Chief and is responsible for providing intervention during emergencies as appropriate, keeping track of staff's general stress level and intervening when necessary and evaluating the longer term needs of all responders.

PCHS Incident Command Review



So, to review:

The Incident Command structure is one of the most important aspects of the PCHS All-Hazards Plan.

Any PCHS employee may be pulled out of their regular duties and assigned to a section for the duration of the emergency, so it is important for everyone to have an understanding of what the responsibilities are for each major position within the system.

Although only the person filling each position is responsible for understanding and knowing all the requirements and duties for that job, if everyone within PCHS understands the role of each key position the response will be smoother when and if it is needed.

Personal Preparedness

- To be an effective PCHS worker, you should:
 - Have a Plan!
 - Make an Emergency Supply Kit
 - Attend in relevant trainings
 - Participate in drills and exercises
 - Be certain that PCHS has your most current credentials and contact information



Photo: FEMA/Red Cross

In order for you to be able to go to work during a disaster or emergency and be comfortable that your family, loved ones, or pets are safe it is important that you and your family are personally prepared. This means having a Family Disaster Plan and having at least the basic supplies for an Emergency Supply Kit.

In ADVANCE of a disaster, that is to say tomorrow, be sure to meet with family members to discuss the types of disasters that might occur and what to do in each case. Agree on a place or places to meet in the event that you are unable to return to your home. Make certain that your Plan identifies names and addresses of those caring for your children, parents, pets and others for whom you may be a guardian.

Ten essential emergency supply kit items include: three day supplies of water, food, clothes and medications as well as a flashlight (with batteries), can opener, battery powered radio, basic hygiene items, first aid supplies and identification papers.

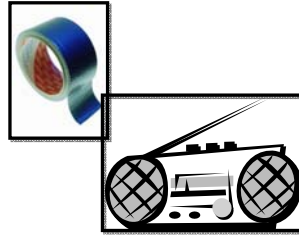
In addition to this particular training, you will be advised of and should participate in other emergency preparedness related education sessions, drills and exercises.

By personally preparing for a disaster or emergency you will help to ensure the safety of you and your loved ones and be able to staff PCHS facilities in the event of an emergency.

Lastly, it's very important to have a redundant communications plan. It's very important to make sure your cell phone and other phone numbers are up-to-date and also have a back-up plan in case cell phone coverage is temporarily knocked out.

Personal Preparedness

- Shelter-in-Place
 - Seek immediate shelter and stay there during a chemical emergency



There are two kinds of disasters that may result in a recommendation to shelter-in-place. The first is during a chemical release or spill, especially if it is a gas that is toxic or otherwise poisonous. The second, which is much rarer, would be some kind of a release from a nuclear facility.

Sheltering-in-place involves taking the following actions:

- Going inside, preferably into an interior room without windows
- Closing and locking all windows and doors
- Closing all outside air vents and turning off cooling, heating or ventilating systems
- Covering cracks under doors with damp towels
- Placing plastic sheeting over windows and taping in place and
- Listening for instructions from emergency officials on a portable radio.

Sheltering-in-place typically lasts no more than one to two hours, until whatever contaminate in the air has had a chance to disperse. However even after the immediate threat has passed it may be some time before an affected facility or region returns to normal functioning in order to give the hazardous materials professionals a chance to assess and make sure that no remaining exposure is in place.

There are other circumstances when you may be advised to stay inside, such as during a severe thunderstorm or blizzard, however this is different from sheltering-in-place. In the case of a blizzard or thunderstorm you are remaining inside for your safety but you do not have take the other precautions, such as turning off the ventilation system.

Personal Preparedness

- Evacuation
 - These orders are given if the emergency has the potential to put your life in danger



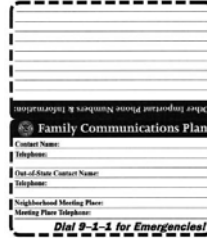
Depending on the emergency you may be asked to evacuate. You may be given little notice, so it is important to be prepared and also know what hazards are a threat in your region.

If you do have to evacuate pack only the essentials including medicines, a flashlight, a portable radio, cash, and your checkbook. If there is someone in your household who would need extra help or time during an evacuation, such as a person in a wheelchair, a person on home oxygen or other medical therapy, it is important to let your town, city, or county emergency management agency know in advance so they can plan for this. If you do not have a personal vehicle it is important to work out a plan with your friends and/or neighbors so you can get a ride. If you have pets it's also very important to think in advance about how to take care of them since most shelters typically do not accept pets.

Lastly, it's very important to listen to your radio and also to know what your emergency broadcast station is in your region, since the radio may be the only way for you to get rapid updates as to the nature of the situation and the threat and which roads would be your best choices.

Personal Preparedness

- Communications
 - » Know how to contact family members if you are separated
 - » FEMA Family Communications Card
 - http://www.fema.gov/areyouready/emergency_planning.shtm

A FEMA Family Communications Plan card. The card has a dashed border and contains the following text: "Other Important Phone Numbers & Information", "Family Communications Plan", "Contact Name:", "Telephone:", "Out-of-State Contact Name:", "Telephone:", "Neighborhood Meeting Place:", "Meeting Place Telephone:", and "Dial 9-1-1 for Emergencies!".

We cannot stress strongly enough the importance of good communication. If you are not comfortable that your family and loved ones are safe it'll be very hard for you to focus on your job.

One good idea is to create a contact card for each family member with information about a friend or relative that lives out-of-state for everyone to notify that they are safe, or for other updates.

Reference: http://www.fema.gov/areyouready/emergency_planning.shtm

Additional Training in Emergency Response



- IS-100: Introduction to the Incident Command System
 - <http://training.fema.gov/EMIWeb/IS/is100a.asp>
- IS-200: Applying ICS to Healthcare Organizations
 - <http://training.fema.gov/EMIWeb/IS/is200HC.asp>
- IS-700: Introduction to the National Incident Management System (NIMS)
 - <http://training.fema.gov/emiweb/is/is700.asp>
- IS-800: Intro to the National Response Framework
 - <http://training.fema.gov/EMIWeb/IS/IS800b.asp>

This presentation has provided an overview of the PCHS All-Hazards Plan, with a focus on Incident Command. The structure and workings of the plan come from the National Response Framework and the National Incident Management System.

However depending upon your role it may be important or even required for you to take one or more of the courses listed on this slide, which include:

- IS-100, an introductory course
- IS-200, Applying ICS to Healthcare Organizations
- IS-700, Introduction to NIMS
- IS-800, an introduction to the National Response Framework.

Volunteer!

- Allegheny County Health Department and the Region 13 Medical Reserve Corps
 - » <http://www.achd.net/hr/pubs/pdf/mrcbrochure2005.pdf>
- Statewide, SERVPA
 - » <https://www.servpa.state.pa.us/>
- American Red Cross
 - » <http://swpa.redcross.org/>

Depending on your skills and interests there are also lots of opportunities to volunteer to help.

One excellent local choice is the Allegheny County Health Department and Region 13 **Medical Reserve Corps**, or **MRC**. As a volunteer you can utilize your professional skills to strengthen and increase emergency response capacity. The MRC also supports public health initiatives such as mass vaccinations, mass shelters, screenings, and works in supportive of clinical settings during a public health emergency.

You may also want to volunteer for the statewide Reserve Corps, called **SERVPA**. Registering does not mean you are required to respond if you are called. It merely provides a list of people for the State to contact in the event of an emergency if volunteers are needed. You also don't need to be a medical expert to join. Other skills such as public health skills, language skills, administrative skills, and others would all be needed in the event of a large scale disaster.

In addition, **Southwestern Pennsylvania Chapter of the American Red Cross** is always in need of volunteers. Their website listed here has a multitude of resources for you and describes several areas where volunteers would be greatly appreciated.

We hope that this presentation was helpful to you!



In order to complete this process, please:

- Close this presentation
- Fill out the required post-training test
- Fill out the evaluation

Thank you for your participation!

While we hope that the PCHS All-Hazards Plan never needs to be activated, it is essential to be prepared for responding to emergency events. As we hope you will see, the process of planning is also very important as it helps to identify areas that need to be addressed prior to an actual disaster.

Your efforts, your experience, and your ideas are all critical to that effort. Again, by learning about emergency response and being trained in preparedness, you are helping to protect and prevent harm to community members served by the clinics and other facilities of PCHS.

THANK YOU VERY MUCH!

When you are finished with this presentation, please close by clicking on the X in the upper right-hand corner and return to the main training page for this module. You must complete and pass the quiz and also fill out the evaluation in order to complete the process and receive your continuing education credits.

Thank you.