

County of Sutter Emergency Operations Plan



Sutter Operational Area

Annex 13

Public Health Emergency and Bioterrorism

February 2015

Table of Contents

| | |
|--|--|
| <u>Section 1 – Introduction</u> | <u>Page 1</u> |
| General | |
| Emergency Plan management and updates | |
| Authority Citations | |
| <u>Section 2 – Plan Overview</u> | <u>Page 2</u> |
| Concept of Operations | |
| Emergency Organizational Structure | |
| Emergency Organization Chart | |
| <u>Section 3 – Hazard Analysis for Epidemic</u> | <u>Page 5</u> |
| General | |
| <u>Section 4 – Hazard Analysis for Bioterrorism</u> | <u>Page 7</u> |
| General | |
| <u>Section 5 – Plan Responsibilities</u> | <u>Page 8</u> |
| Emergency Operations Center | |
| Management | |
| Operational Structure | |
| Coordination of Disciplines | |
| Inclusion of Non-Profit Agencies/Organizations | |
| Public Information | |
| Safety and Security | |
| Information Sharing and Dissemination | |
| Sheriff’s Office | |
| Public Health | |
| Human Services | |
| Community Services | |
| Emergency Management | |
| Public Works | |
| Operations | |
| Planning and Intelligence | |
| Logistics Support Requirements | |
| Finance | |
| Continuity of Operations | |
| Training and Exercises | |
| <u>Attachments</u> | <u>Page 14</u> |
| Attachment A | Emergency Support Functions – Public Health Emergency / Bioterrorism |

Section 1 – INTRODUCTION

General

Communicable disease can present a widespread, serious threat to the population of Sutter County under certain circumstances. Epidemics, such as pandemic influenza, and bioterrorism are notable examples of this threat.

Pandemic influenza is a naturally occurring event that recurs unpredictably and, if the virus is particularly virulent, can cause significant illness, death and disruption of business and social structures.

Bioterrorism is, by definition, an intentional event perpetrated to instill fear and disrupt society by exposure of the community to biologic agents that can cause serious harm to humans, animals, or both.

The purpose of this annex is to develop a consequence management plan for responding to and recovering from the occurrence of a public health emergency or bioterrorism in Sutter County.

Emergency Plan Management and Updates

The Sutter County of Human Services – Health will be responsible for updates and maintenance of this plan in conjunction with the Sutter County Emergency Operations Plan.

Authority Citations

The authority for Emergency Operations and Disaster Preparedness used in the development of this annex of the Sutter County Operational Area EOP are found in the **Sutter County OA EOP, Basic Plan Chapter A, Section 6**.

The authority for the public health emergency operations and preparedness used in the development of this annex are found in the **Sutter County Public Health All-Hazards Emergency Response Plan** of the Sutter County Human Services – Health (Sutter County Public Health).

This plan augments the Sutter County Operational Area Emergency Operations Plan.

Section 2 – Plan Overview

Concept of Operations

This plan or the applicable portions of this plan will be implemented by the County Health Officer in conjunction with the Emergency Operations Plan.

Guidance for implementation of response to at the OA level to a public health emergency or bioterrorism, beyond the Public Health departmental operational level, is in the **EOP Basic Plan Chapter D, Response Phase – Initial Response**, in **ANNEX 1 – Emergency Support Functions Handbook and Checklists, Section 3, General Response Checklists**, and in **ANNEX 2 – Emergency Operations Center Handbook and Position Checklists**.

Supplemental information is provided in the attachments of this annex.

During a disaster or emergency, this plan will be implemented in accordance with the Standardized Emergency Management System (SEMS).

Personnel assigned to the organizational levels of SEMS will follow checklists/SOPs established by the EOP or the appropriate annex to the EOP. The emergency Operations Director or Director of the Public Health DOC will determine communication equipment usage and any equipment issued to an emergency worker will be documented and tracked to ensure proper accountability of the asset.

Coordination of public or media information releases will be through the PIO. All health-related information for release to the public or the media will be approved by the Health Officer or his/her designee prior to release. The Management Section of the EOC or DOC will determine what information is to be released and when the appropriate timeframe for such a release will occur, with the exception of health-related information. The Health Officer will determine what health-related information is to be released and when the appropriate time frame for such a release to occur, in coordination with the County PIO and, if activated, the Joint Information Center.

For more information on SEMS/ICS refer to the **Sutter County OA EOP Basic Plan, Chapter A, Section 3**.

The SEMS functions are outlined in this annex, **Attachment A, Emergency Support Functions – Public Health Emergency/Bioterrorism**.

The federal Department of Homeland Security has established that the National Incident Management System (NIMS) will be used during an emergency/disaster. The State of California, through Executive Order S-2-05, has established that the implementation of SEMS/ICS substantially meets the requirements of NIMS.

For more information on NIMS refer to the **Sutter County OA EOP Chapter A**.

Emergency Organizational Structure

During a public health emergency, Sutter County Public Health Officer or DOC Director will establish the initial command and control functions based on the Incident Command System.

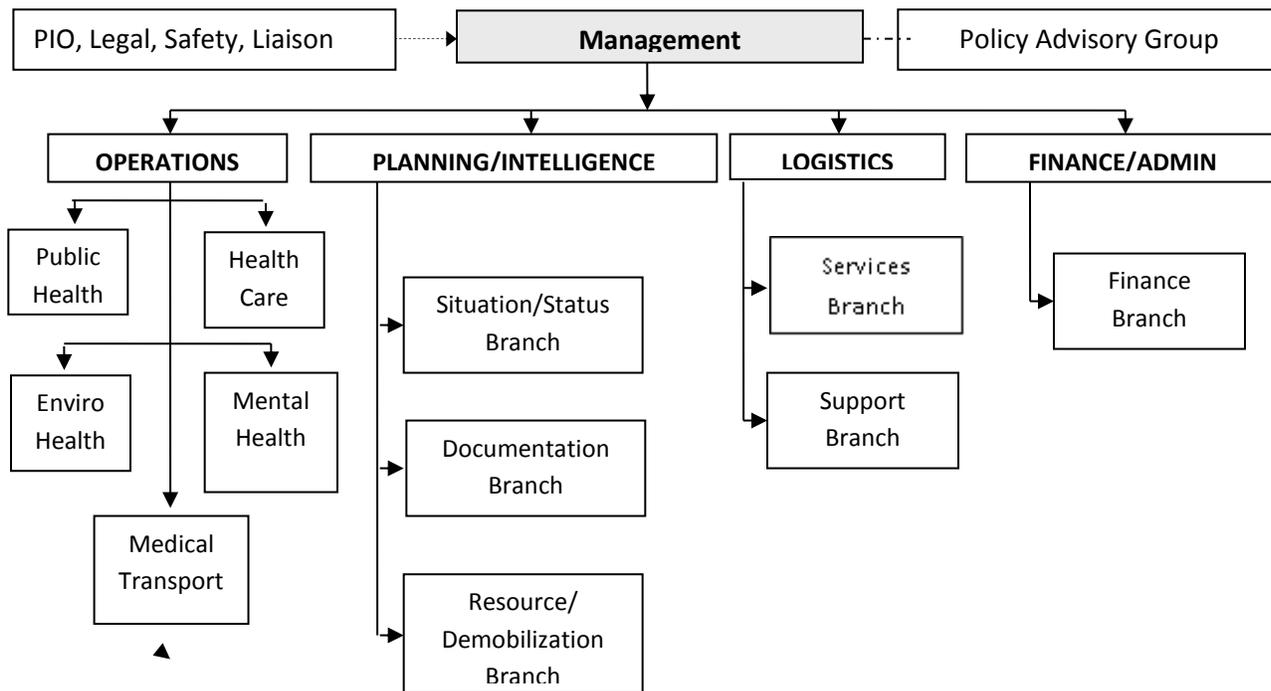
The nature and severity of a public health emergency may not be initially known. If the public health emergency is determined to be pandemic influenza or is having unusually severe effects in the community, the Incident Commander or DOC Director will notify the Sutter County Emergency Operations Manager. Coordination of Operational Area resources will be made through a Level 1 or 2 activation of the Emergency Operations Center when deemed necessary by the County Emergency Operations Manager.

During a Level 3 activation of the emergency Operations Center, the Emergency Organization operates under SEMS, with the Emergency Operations Director providing leadership to the Management Function. The Management Function provides Command and Control to the Emergency Operations Team and consists of the Sheriff, the County Fire Chief, Public Works Director, Health Officer, and the Emergency Operations Manager. This membership may change based on the nature of the emergency. The chart on the following page is representative of a Level 3 Activation of the Emergency Operations Center.

In the event a public health emergency, Public Health will have the lead. In the event of a bioterrorism event, Public Health and Law Enforcement will have joint lead.

Emergency Organization Chart

Public Health DOC (ESF #8) and Functional Organization Chart:



Management –

Dept. Operations Center Director,
Dept. Operations Coordinator
Health Public Information Officer,
Liaison, Legal, Safety

Operations –

Public Health Unit
Health Care Unit
Environmental Health Unit
Mental Health Unit (if needed)
Medical Transport Unit (if needed)

Logistics –

Supplies, Equipment, and Communications
Personnel (County Employees and Volunteers)
Transportation Resources
Facilities (DOC)
Information Systems Technicians (as needed)

Policy Group – Sutter County Board
of Supervisors and/or State/Federal Public Health

Planning & Intelligence –

Situation/Status Unit:

Planning & Forecasting, Surveillance, and
Information Collection/Display

Documentation Unit:

Written and Visual/Graphic

Resource and Demobilization Unit:

Personnel, Equipment, and Material

Finance & Administration –

Invoice Processing and Payroll Tracking

Section 3 – Hazard Analysis for Epidemic

General

Epidemics affecting humans have occurred for thousands years with devastating results. Immunization, sanitation and vector control has dramatically reduced the overall frequency and severity in developed countries. However, the threat still exists.

Epidemic disease may be caused by bacteria (e.g., whooping cough, meningococcal meningitis), viruses (e.g., measles, hepatitis A) and other microorganisms (e.g., malaria, Cryptosporidium). The potential impact on people and the community ranges from small, such as increased absenteeism for a few days, to severe, with significant disruption of business, healthcare becoming overwhelmed and high numbers of deaths. The impact depends upon the nature of the microorganism involved and factors affecting its spread and severity.

Sometimes the risk for an epidemic can be predicted, for example, if a community has a low rate of measles immunization among its children, introduction of measles virus by a traveler could trigger an outbreak that could have serious consequences for vulnerable persons in the community. A breakdown in sanitation facilities may trigger an outbreak of water-borne disease in a community, causing illness and sometimes deaths. Foodborne outbreaks have become more frequent in recent decades with the increasing distances and complexity of the food supply.

Influenza virus causes seasonal outbreaks of illness around the world. Influenza pandemics occur with a novel (new) strain of influenza emerges against which people have little or no immunity. The influenza epidemic of 1918 was a pandemic that killed an estimated 50 million people around the world over a year and a half. The H1N1 influenza pandemic of 2009-10 involved a viral strain that in the first few weeks was associated with many deaths, but over the course of the pandemic was milder, causing widespread illness, but lower risk of death than initially feared. There have been 3 influenza pandemics identified during the 20th century and influenza pandemics can be expected to continue to recur unpredictably with unpredictable severity.

In the event of an epidemic, Public Health will gather information about the nature of the outbreak and attempt to identify the causative agent as quickly as possible, if it isn't already known. Outbreaks of communicable disease generally evolve more slowly than other natural disasters such as earthquakes and floods. The duration of an epidemic can vary from days to months and may occur in waves with little or no illness in between.

Public Health utilizes several tools to control epidemics depending on the nature of the microorganism and route of spread. Vaccines are a very effective tool against many epidemic organisms. Measures to reduce the ability of microorganisms to spread include simple effective measures such as washing hands, covering coughs and staying home when sick. Other measures in a serious epidemic may include isolation of those who are sick, quarantine of those who may be contagious but not sick, closing public events to reduce spread of infection, or control of vectors, such as mosquitoes. Every public health tool utilized must be justifiable based on the potential protection to the health of the community.

A severe epidemic can disrupt the community by reducing business activity, causing high employee and school absenteeism, interfering with harvesting crops, interfering with transportation, and overwhelming healthcare. Healthcare worker illness can also affect the ability of healthcare facilities to cope with the need for their services. Large numbers of fatalities may cause strain on the mortuary services and affect the morale of the community. Mental wellbeing of both responders and people in the community may be affected both short and long term. Businesses and financial institutions may be seriously affected with the risk of some closing permanently and affecting employment.

Section 4 – Hazard Analysis for Bioterrorism

General

Bioterrorism is the deliberate exposure or threat of exposure to biological agents that can cause illness or death in people, animals, or plants. The biological agents can be bacteria, viruses, other agents (germs) or biological toxins (such as botulin toxin).

Bioterrorism is not new. In past centuries, victims of plague were tossed over city walls to infect the defenders. Water was contaminated. In 1984, a religious sect intentionally contaminated a rural Oregon community's restaurant salad bars with salmonella bacteria in an effort to influence a local election. More recently, biological weapons have been developed and emergency plans have been developed to help protect our communities if there is a bioterrorism attack. Biological agents could, under the right circumstances, cause serious illness or deaths in many people. Most agents would have an impact within a confined area, but some could spread in the population if no public health measures were taken.

A bioterrorism attack has a low probability of occurrence, but could have very serious consequences. Bacteria and viruses that could be used as bioterrorism agents have been identified and recommendations for planning and response for these specific agents have been developed and incorporated into public health emergency plans. Planning and preparation for response to bioterrorism has taken place at local, state and federal levels with interagency coordination.

A bioterrorism attack could evolve over hours or over days and weeks, depending on the agent and method of exposure. Detection of a bioterrorism event could happen several different ways; some examples are through routine public health disease monitoring, an observant physician in an emergency room, or by surveillance by law enforcement.

The detection of a possible or confirmed bioterrorism event triggers a joint response from both public health and law enforcement. Threats to the health of the public are the primary concern for public health and law enforcement works stop the perpetrator and investigate the crime. Public health and law enforcement must work very closely together to ensure that both missions are achieved.

Bioterrorism has the potential to disrupt the community by reducing business activity, causing high employee and school absenteeism, interfering with agriculture, interfering with transportation, and overwhelming healthcare. Healthcare worker illness can also affect the ability of healthcare facilities to cope with the need for their services. Large numbers of fatalities may cause strain on the mortuary services and affect the morale of the community. Mental wellbeing of both responders and people in the community may be affected both short and long term. Businesses and financial institutions may be seriously affected with the risk of some closing permanently and affecting employment. Some bioterrorism agents could damage agriculture, both short and long term.

Section 5 – Plan Responsibilities

Emergency Operations Center

Emergency Operations Center activation and staffing levels are found in **ANNEX 2 – Emergency Operations Center Handbook and Position Checklists**.

Management

Management assignments are reflected in **Attachment A, Emergency Function Functions – Public Health Emergency/ Bioterrorism**.

Operational Structure

The County of Sutter will activate the appropriate SEMS functions based upon the level of the public health emergency or bioterrorism event.

Coordination of Disciplines

Sutter County will use multi-agency, multi-discipline coordination in its response to a public health emergency or bioterrorism event.

Inclusion of Non-Profit Agencies/Organizations

Non-profit organizations, such as the American Red Cross and federally qualified health centers, will be involved in a public health emergency and bioterrorism event planning. Sutter County will contact the appropriate non-profit organizations in the event of a potential threat or actual event. Non-profit organizations will be contacted and coordinated through Sutter County Public Health and the Hospital Preparedness Program (HPP).

Public Information

The County and Public Health Public Information Officers (PIOs) will be activated as soon as practical during an emergency. The County and Public Health PIOs will jointly coordinate with media for news releases and assist with dissemination of health-related information to the public.

News release procedures will be agreed upon, and established for the Sutter County EOC, the Unified Command, and other interested parties. The Health Officer and/or the Assistant Director of Human Services – Health will approve all press releases and health-related and healthcare-related information for the public prior to release.

Safety and Security

During a pandemic influenza outbreak or a bioterrorism event, employee safety and operational security will be key concerns for Sutter County.

During actual emergency operations, heightened safety and security procedures will be in force and will be followed by county personnel. Security and safety procedures will also be implemented for all command posts and other operational sites. The Sheriff's Office will serve as lead for security functions.

In the event of a public health emergency or bioterrorism event involving a communicable agent, Public Health will provide guidance to county employees, first responders and other responders on protective measure and personal protective equipment (PPE) for the specific threat, based on guidance from the California Department of Public Health, the Centers for Disease Control and Prevention and other authoritative resources.

Information Sharing and Dissemination

During an actual emergency or disaster, the release of information raises significant issues regarding information sharing and dissemination. Security and confidentiality concerns must be weighed against operational needs and public interest.

The notification of an event and any subsequent updates will be made verbally through the most secure form of landline available. Written confirmations of notification and updates will be used. Emergency response personnel will observe communication security procedures. Sensitive information will not be communicated by radio or cell phones.

Secure health information systems are routinely used by public health for tracking and limiting communicable disease and monitoring the health of the community. These systems would be used as appropriate to track and address a public health emergency or the effects of a bioterrorism event.

Sutter County will have scheduled briefings for EOC staff and other emergency response personnel and will coordinate briefing times, reporting approaches, and news releases as much as possible with other SEMS levels.

Specific information regarding public health emergency operations to the EOC or others will be the responsibility of the County Health Officer and the Assistant Director of Human Services – Health.

Specific information regarding bioterrorism operations to the EOC or others will be the joint responsibility of the County Health Officer and the Assistant Director of Human Services – Health and the Sheriff or designated lead of the Law Enforcement response.

Sheriff's Office

The Sheriff, or designee, will determine and establish SOPs required for the operation and deployment of law enforcement assets controlled by his department and as authorized by local, state, and federal statutes/regulations.

Within the EOC, the Sheriff's Office (SO) will assume the security function.

The Sheriff Office will be the lead for perimeter security, access control, traffic/crowd control, evacuations, and notifications. The Sheriff Office will also coordinate coroner issues and assist with damage assessment and fatalities management.

In the event of a bioterrorism or suspect bioterrorism event, law enforcement, including the FBI, will have the lead in the criminal investigation. Close coordination is necessary between law enforcement and public health to meet the both requirements of law enforcement investigation and the public health disease investigation and measures that may be necessary to protect the health of the public.

The Sheriff's Office will request law enforcement mutual aid, if needed, to accomplish these functions.

Public Health

Public Health will establish SOPs required for the mobilization and deployment of public health assets controlled by the Division and as authorized by local, state, and federal statutes/regulations.

Public Health will be the lead for response to public health emergencies and public health threats. Public Health will be joint lead with law enforcement in a bioterrorism event. Public Health will provide support and guidance to other County agencies for protective measures and personal protective equipment (PPE) related to communicable disease or bioterrorism threats as needed. *Existing procedures may be modified as necessary depending on the situation.*

The County Health Officer or designee will request public health or healthcare mutual aid through the Operational Area, using the procedures established by **the California Public Health and Medical Emergency Operations Manual**.

Human Services

In addition to Public Health, the Department of Human Services also includes Social Services and Mental Health services.

Social Services has primary responsibility for mass care and shelter (non-medical). Social Services will establish SOPs required for mobilization and establishment of non-medical mass care shelters in the event that county residents are displaced or otherwise require shelter within the County outside of their homes.

Sutter-Yuba Mental Health Services is a bi-county agency with Yuba County and has primary responsibility for provision of mental health and drug and alcohol services

Human Services will request mutual aid for shelter and care and for mental health services, if needed.

Development Services

In Sutter County, day-to-day operations for Environmental Health and Animal Services are in the Development Services Department. Environmental Health and/or Animal Services may have response roles in a public health emergency. During a disaster, the Environmental Health Unit is assigned to the Human Services Branch and Animal Services Unit is assigned to the Agriculture Branch in the Sutter County EOC. Response by Environmental Health and/or Animal Services will be coordinated through the Public Health DOC or through the County EOC, depending on the magnitude and nature of the public health emergency.

Emergency Management

The Emergency Operations Manager will assist the Public Health DOC Director during a Level 1/2 Activation of the EOC, or the Health Officer or designee before EOC activation has occurred, to provide information to necessary reporting systems as needed. During a Level 3 activation (Full-scale), assistance to the DOC Director will be coordinated through the appropriate EOC function.

Public Works

Public Works will serve as lead for county facilities and utilities concerns. Potential public works activities during a public health emergency or bioterrorism include:

- Assistance with moving and setting up/taking down public health and shelter assets where needed for alternate locations
- Assistance with access and crowd control and fatalities management
- Building access
- Temporary repairs
- Public Works will assist with Reconnaissance of public infrastructure (roads, bridges, facilities, and utilities)

In a bioterrorism event, Public Works may also perform reconnaissance of public infrastructure (roads, bridges, facilities, and utilities), identify alternate routes, and facilitate utility access re-routing.

The Director of Public Works will request public works mutual aid if needed. They will coordinate with the sheriff Office on security issues if needed.

Operations

The Public Health DOC Director is the Health Officer or Director of Human Services – Health (Director of Public Health) or designee, depending on the nature of the situation and availability of staff.

Planning and Intelligence

Gathering and analysis of health-related data is a core public health function. In a public health emergency or a bioterrorism event, public health would utilize epidemiologic

methods and community health assessment tools to collect data about communicable disease and health threats to monitor the health of the community, plan appropriate public health interventions to protect the community and monitor the effectiveness of response measures to the public health emergency. Public health coordinates healthcare resources for the public health emergency through the **Sutter County EOP, Emergency Support Function-8 Medical Health**.

Public Health will coordinate planning and intelligence data with the healthcare community, including emergency medical services, hospitals, clinics and other healthcare facilities and providers through the Hospital Preparedness Program (HPP).

Logistics Support Requirements

Logistics for Public Health will be performed through the Public Health DOC and coordinated with the Emergency Management function.

Mutual aid for Medical-Health resources is obtained according to the **California Public Health and Medical Emergency Operations Manual (EOM)**. Non-medical mutual aid will be requested according to the **Sutter County EOP**.

In a large magnitude or complex event, the Sutter County Logistics Branch will be responsible for identifying and procuring supplies, services, equipment, and facilities that will be required for Emergency Operations activities as requested by Public Health.

Finance

It will be necessary to track costs associated with an event or potential event. Within the Finance/Administration Branch there may be a separate Cost Unit to track the costs of the event.

Continuity of Operations

It will be necessary to ensure continuity of day-today operations of core public health functions during a potential threat or actual event. This includes, but not limited to, payroll processing, contracts management, personnel actions, file security and certain public health activities such as communicable disease control and vital records.

Training and Exercises

Training will be coordinated as necessary to ensure safe, secure, and effective operation of procedures and equipment. Training for Public Health staff and public emergency response partners is made available as opportunities are offered by the California Department of Public Health, Regional Disaster Medical Health programs, and other emergency management resources. Training is also developed and performed within Sutter County Public Health in public health functions that would be utilized during a public health emergency.

The County Office of Emergency Management will notify departments, jurisdictions, and agencies of training opportunities, as they are available. Any Operational Area grant

funds identified to be expended for exercise/training will be coordinated with the Office of Emergency Management to ensure proper allocation/tracking of the funds before expenditure occurs.

Attachment A

Emergency Support Functions – Public Health Emergency / Bioterrorism

| Emergency Support Functions | Management | Operations | Plan/Intel | Logistics | Fin/Admin |
|---|--|-----------------------|--|---|--------------------------|
| ESF-1 Transportation | EO Director, Agency Reps | PW and SO | Resource Tracking and Demobilization | Procurement Branch | |
| ESF-2 Communication and Information Technology | EO Director, Agency Reps | SO Dispatch | Situation Analysis | Info Tech & Communications Branch | |
| ESF-3 Public Works and Engineering | OA Public Works Branch Chief | PW & Agency Reps | Situation Analysis | | |
| ESF-4 Firefighting | | | | | |
| ESF-5 Emergency Management | EO Director | Ops Chief | Planning & Intel Chief | Logistics Chief | Admin Chief |
| ESF-6 Mass Care, Housing, and Social Services | OA Human Services Branch Chief | OA Human Services | Situation analysis | Procurement Branch | |
| ESF-7 Resource Support | OA Logistics Branch Chief | | Resource Tracking | Procurement Branch | Finance |
| ESF-8 Public Health and Medical Services | Health Branch Chief / Health Officer | Health Unit Leader | Situation Analysis / PH surveillance | Procurement Branch | Public Health Finance |
| ESF-9 Urban Search and Rescue | | | | | |
| ESF-10 Oil and HazMat Response | OA Fire Coordinator* | Fire* | Situation Analysis* | | |
| ESF-11 Agriculture and Natural Resources | Ag Commissioner* | AG* | Situation Analysis* | | |
| ESF-12 Energy | | | | | |
| ESF-13 Public Safety and Security | OA Law Coordinator | SO | Situation Analysis | | |
| ESF-14 Long Term Community Recovery | EO Director | | Demobilization | | Finance |
| ESF-15 External Affairs | EO Director/ County PIO/ Public Health PIO | | Planning & Intel Chief | | |

* Added in a bioterrorism event