

# Esf function #8

Life



Executive Summary Introduction to Emergency Management Taylor Carl Mr. Jonathon Johnson October 12, 2012 The Emergency Support Function #8 (ESF #8) from FEMA details support services related to public health and medical services. The primary agency in control of ESF #8 is the Department of Health and Human Services.

They are responsible for providing assistance during “ a public health and medical disaster, potential or actual incident requiring a coordinated Federal response, and/or during a developing potential health and medical emergency”, (2008, FEMA, p. 1). Assistance for medical needs covers mental and behavioral health as well as substance abuse.

Assistance is provided in the following core function areas under ESF #8: assessment of public health/medical needs, health surveillance, medical care personnel, health/medical/veterinary equipment and supplies, patient evacuation, patient care, safety and security of drugs, biologics, and medical devices, blood and blood products, food safety and security, agriculture safety and security, all-hazard public health and medical consultation, technical assistance and support, behavioral health care, public health and medical information, vector control, potable water/wastewater and solid waste disposal, mass fatality management, victim identification, and decontaminating remains, and veterinary medical support (2008, FEMA, p. 1-2). All Federal responses are handled by the Secretary of Health and Human Services through the Office of the Assistant Secretary for Preparedness and Response (ASPR).

The Secretary is also in charge of the assets during a public health emergency with exception of the member of the Armed Forces. They are <https://assignbuster.com/esf-function-8/>

responsible for coordinating all preparedness, response, and recovery actions consistent with all internal policies and procedures of the Department of Health and Human Services. Once support agencies receive instructions from the Secretary, they are responsible for controlling their resources. The Emergency Management Group (EMG) is responsible for handling the ESF #8 response for the ASPR and must remain in constant contact with the National Operations Center (NOC). All organizations involved in response operations must report public health and medical requirements to their appropriate representative.

These representatives are stationed in the National Response Coordination Center (NRCC), the Regional Response Coordination Center (RRCC), and the Joint Field Office (JFO). A " Joint Information Center (JIC) will be established to coordinate incident-related public information", (2008, FEMA, p. 2). The JIC is able to release information to the public in regards to general medical and public health response. For community issues, a recognized spokesperson will issue communications when possible. Should there be a zoonotic disease outbreak, ESF #8 must coordinate with ESF #11 (Agriculture and Natural Resources). Public information may be released after consultation with the US Department of Agriculture (USDA).

During a oil, chemical, biological, or radiological environmental contamination, ESF #8 must coordinate with ESF #10 (Oil and Hazardous Materials) to release information. When action is needed, the ASPR alerts HHS personnel. The ASPR may also request personnel for liaison communications at the HHS Headquarters command locations. The ESF #8 staff stationed in the RRCC and JFO " will conduct a risk analysis, evaluate,

and determine the capability required to meet the mission objective and provide required public health and medical support” assistance to the appropriate parties (2008, FEMA, p. 3). During initial activation, HHS will coordinate conference calls with supporting agencies to discuss and determine response actions.

During the assessment process, HHS working with the Department of Homeland Security (DHS), mobilizes and deploys ESF #8 personnel. During surveillance, HHS monitors public health using field studies and investigations, monitors disease patterns and potential outbreaks, performs blood and blood product vigilance along with monitoring blood supply levels, and provides technical assistance and consultation on disease prevention. Immediate medical responses are handled by HHS’s internal assets. While most equipment and supplies are deployed from the Strategic National Stockpile (SNS), the Department of Defense (DOD) and the Veterans Affairs (VA) may also provide them to health care facilities in a disaster area.

Should there be a need a veterinary supplies, assets may be requested from the National Veterinary Stockpile (2008, FEMA, p. 4-5). During an emergency situation, ESF #8 is charged with transporting those seriously ill or injured patients, and medical needs population to designated areas. They may request the assistance of the DOD, VA, or FEMA. When patients are not necessarily in a disaster area but still require evacuation assistance, ESF #8 provides personnel for medical services through civil service staff, US Public Health Service Commissioned Corps, regional offices, and States. ESF #8 must ensure safety and security of drugs, biologics, and medical devices.

Biologics, including blood, blood products, organs, and vaccines, must be monitored to ensure availability and safety. Federally regulated foods must meet safety and security requirements monitored by ESF #8 and ESF #11. This authority is extended to all domestic and imported foods except meat, poultry, and egg products. In addition, ESF #8 and ESF #11 must ensure the health and safety of food-producing animals(2008, FEMA, p. 5-6). Worker Safety and Health is led by the Department of Labor (DOL). ESF #8/HHS acts a support agency. ESF #8 may require assistance from regional offices in “ assessing public health, medical, and veterinary medical effects resulting from all hazards”, (2008, FEMA, p. 6).

This may include assessments on the general public and high-risk population groups, field investigations, providing advice on human and animal exposures, advice on indirect exposures such as food, water, and drug contamination, and “ providing technical assistance and consultation on medical treatment, screening, and decontamination of injured or contaminated individuals”, (2008, FEMA, p. 6). Behavioral health care is handled by ESF #8 and partner organizations to assess mental health and substance abuse needs. This may include “ emotional, psychological, psychological first aid, behavioral, or cognitive limitations requiring assistance or supervision”, (2008, FEMA, p. 7).

ESF #8 provides public health, disease, and injury prevention information to the public in multiple languages and formations for those with limited English proficiency or learning disabilities. ESF #8 works with other partner organizations to assess and handle vector-borne disease threats. This includes research and investigation, equipment and supplies, and providing

technical assistance and consultation. ESF #8 assists in potable water, wastewater, and solid waste disposal. This includes examining contaminated water for public health effects. ESF #8 works with partner organizations track and document human remains, including reducing hazards associated with contaminated remains.

They may set up temporary morgue facilities, determine the cause of death, collect postmortem information, use scientific means to identify human remains, and provide technical assistance and consultation. They may request assistance from partner organizations to provide support to families of victims during the postmortem process (2008, FEMA, p. 7). ESF #8 works closely with ESF #11 to provide veterinary medical support. This may include caring for research animals when ESF #11 does not have the expertise. They must protect the health of livestock and companion services animals by ensuring safety of food and drugs administered (2008, FEMA, p. 8). ESF #8 requires many support agencies to be fully functional. The HHS works closely with the USDA for personnel, supplies, and equipment.

They also assist with nutrition, outbreak control of animal disease, and food safety. The DOD performs many functions for ESF #8. They provide support for patient evacuation, logistical support to public health/medical response operations, personnel for casualty clearing, patient reception and tracking, personnel for protection of public health, emergency medical support, managing humaning remains, evaluation and risk management, and provide blood products (2008, FEMA, p. 10-11). The DHS helps with ESF #8 by providingcommunicationsupport, offering transportation support if

necessary, providing hazard predictions relating to atmospheric releases, and enforcing international quarantines.

FEMA assists with mobilization centers, transport of resources, emergency food and water supplies, equipment and medical supplies, and transportation of patients considered too ill or incapable of general evacuation (2008, FEMA, p. 12-13). The HHS must ensure proper staffing to coordinate efforts for medical assistance to an affected area. They must support and assist State, tribal, and local communities in an emergency. Their primary duties include monitoring blood and blood supplies, forming liaisons for communications, coordinating patient evacuation, and working with the USDA to ensure food safety. REFERENCES Emergency Support Function #8 - Public Health and Medical Services Annex. Federal Emergency Management Agency. Retrieved from [www.fema.gov/pdf/emergency/nrf/nrf-esf-08.pdf](http://www.fema.gov/pdf/emergency/nrf/nrf-esf-08.pdf)