Instructor Guide

Course Overview

Display Visual 1

**ESF #8**
Public Health and Medical Services

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**Instructor Notes:** Present the following key points.

**Purpose:** The purpose of this course is to familiarize participants with the function and composition of ESF #8 – Public Health and Medical Services.

**Approximate Time:** 1 hour

**Content Outline:** This module includes the following major topics:

- ESF Overview
- ESF #8 Purpose and Scope
- ESF #8 Coordinator and Primary Agency
- ESF #8 Support Agencies
- ESF #8 Actions
- Concept of Operations
- National Disaster Medical System
- Public Health Service Teams
- Strategic National Stockpile
- Summary

**Materials:**

- Instructor Guide
- Student Manual (including the ESF #8 – Public Health and Medical Services Annex)
Instructor Notes: Present the following key points.

At the end of this course, participants will be able to:

- Describe the overall purpose and scope of ESF #8.
- Identify the supplemental assistance ESF #8 provides to State, tribal, and local governments.
- Identify typical activities accomplished by ESF #8 resources.
- Describe the types of partnerships formed between ESF #8 and other response agencies and organizations.
Instructor Notes: Present the following key points.

Welcome the participants and introduce yourself. Then ask the participants to introduce themselves to the members of their table groups. Ask for:

- Their names.
- Their roles in emergency management.
- What they hope to gain from this course.
Instructor Notes: Present the following key points.

The National Response Framework (NRF):

- Is a guide to how the Nation conducts all-hazards response.
- Builds upon the National Incident Management System (NIMS) coordinating structures to align key roles and responsibilities across the Nation, linking all levels of government, nongovernmental organizations, and the private sector.

The NRF is comprised of:

- The Core Document, which describes the doctrine that guides our national response, roles and responsibilities, response actions, response organizations, and planning requirements to achieve an effective national response to any incident that occurs.
- Emergency Support Function Annexes, which identify Federal resources and capabilities that are most frequently needed in a national response (e.g., transportation, firefighting, mass care).
- Support Annexes, which describe essential supporting aspects that are common to all incidents (e.g., financial management, volunteer and donations management, private-sector coordination).
- Incident Annexes, which address the unique aspects of how we respond to seven broad categories or types of incidents (e.g., biological, nuclear/radiological, cyber, mass evacuation).
- Partner Guides, which provide ready references describing key roles and actions for local, tribal, State, Federal, and private-sector response partners.
### Instructor Notes: Present the following key points.

The Federal Government and many State governments organize many of their resources and capabilities—as well as those of certain private-sector and nongovernmental organizations—under Emergency Support Functions (ESFs).

The ESFs:

- Are coordinated by the Federal Emergency Management Agency (FEMA) through the National Response Coordination Center (NRCC), Regional Response Coordination Centers (RRCCs), and Joint Field Offices (JFOs).
- Are a critical mechanism to coordinate functional capabilities and resources provided by Federal departments and agencies, along with certain private-sector and nongovernmental organizations.

Note that some States also have organized an ESF structure along this approach.
Instructor Notes: Present the following key points.

Review the general ESF duties listed on the visual.

Why is it important that ESFs have the authority to commit agency assets?
Instructor Notes: Present the following key points.

The ESF structure includes:

- **ESF Coordinator.** The entity assigned to manage oversight for a particular ESF.
- **Primary Agencies.** ESF primary agencies are Federal agencies with significant authorities, resources, or capabilities for a particular function within an ESF. A Federal agency designated as an ESF primary agency serves as a Federal executive agent under the Federal Coordinating Officer (or Federal Resource Coordinator for non-Stanford Act incidents) to accomplish the ESF mission.
- **Support Agencies.** Support agencies are those entities with specific capabilities or resources that support the primary agencies in executing the mission of the ESF.

ESFs provide support to other ESFs. For example: ESF #3 – Public Works and Engineering may support rural ESF #5 – Emergency Management forces to obtain heavy equipment and/or demolition services as needed to suppress incident-related fires.
Instructor Notes: Present the following key points.

The ESF coordinator has management oversight for that particular ESF.

Note that, as described on the visual, the ESF coordinator has a role throughout the incident management cycle.
Instructor Notes: Present the following key points.

When an ESF is activated in response to an incident:

- **The primary agency** is responsible for:
  - Serving as a Federal executive agent under the Federal Coordinating Officer (or Federal Resource Coordinator for non-Stafford Act incidents) to accomplish the ESF mission.
  - Orchestrating Federal support within its functional area for an affected State.
  - Providing staff for the operations functions at fixed and field facilities.
  - Notifying and requesting assistance from support agencies.
  - Managing mission assignments and coordinating with support agencies and appropriate State agencies.
  - Working with appropriate private-sector organizations to maximize use of all available resources.
  - Supporting and keeping other ESFs and organizational elements informed of ESF operational priorities and activities.
  - Maintaining trained personnel to support interagency emergency response and support teams.

- **Support agencies** are responsible for:
  - Conducting operations, when requested by the Department of Homeland Security (DHS) or the designated ESF primary agency, using their own authorities, subject-matter experts, capabilities, or resources.
  - Participating in planning for short- and long-term incident management and recovery operations and the development of supporting operational plans, standard operating procedures (SOPs), checklists, or other job aids, in concert with existing first-responder standards.
  - Assisting in the conduct of situational assessments.
  - Furnishing available personnel or other resource support as requested by DHS or the ESF primary agency.
  - Providing input to periodic readiness assessments.
  - Participating in training and exercises aimed at continuous improvement of response and recovery capabilities.
  - Identifying new equipment or capabilities required to prevent or respond to new or emerging threats and hazards, or to improve the ability to address existing threats.
## Instructor Notes: Present the following key points.

ESFs may be selectively activated for both Stafford Act and non-Stafford Act incidents under circumstances as defined in Homeland Security Presidential Directive 5 (HSPD-5). Not all incidents requiring Federal support result in the activation of ESFs.

FEMA can deploy assets and capabilities through ESFs into an area in anticipation of an approaching storm or event that is expected to cause a significant impact and result. This coordination through ESFs allows FEMA to position Federal support for a quick response, though actual assistance cannot normally be provided until the Governor requests and receives a Presidential major disaster or emergency declaration.
Instructor Notes: Present the following key points.

The 15 ESFs are listed on the visual. The complete ESF Annexes are available at the NRF Resource Center at www.fema.gov/nrf.

This course focuses on ESF #8 – Public Health and Medical Services.

Describe your roles or associations with ESF #8.
Instructor Notes: Present the following key points.

Following an incident, what health concerns do communities face?

Facilitate a discussion. If not mentioned by participants, present the following:

- Sanitation and hygiene concerns due to crowded shelters, lack of utilities, and/or unsafe water.
- Spread of disease carried by insects, rodents, or other vectors.
- Measures to control infection, including prompt treatment of infections and immunizations.
- Supplies of medical equipment and products, including drugs, medical devices, blood, and blood products.
- Environmental health measures to ensure the safety of residents and response workers.
- Behavioral health needs of community members and response workers.
- Veterinary medical needs for service and companion animals.
- Mass fatality management, including the decontamination and identification of remains.
- And access to needed health care, including displaced individuals who need help managing chronic diseases.

This course covers how ESF #8 – Public Health and Medical Services provides the mechanism for coordinated Federal assistance to help communities address the health and medical impacts of incidents.
Public Health and Medical Services include responding to medical needs associated with mental health, behavioral health, and substance abuse considerations of incident victims and response workers. Services also cover the medical needs of members of the “at risk” or “special needs” population described in the Pandemic and All-Hazards Preparedness Act and in the National Response Framework (NRF) Glossary, respectively. It includes a population whose members may have medical and other functional needs before, during, and after an incident.

Public Health and Medical Services include behavioral health needs consisting of both mental health and substance abuse considerations for incident victims and response workers and, as appropriate, medical needs groups defined in the core document as individuals in need of additional medical response assistance, and veterinary and/or animal health issues.
### ESF #8 Purpose and Scope

**ESF #8: Scope**

ESF #8 addresses disaster medical needs associated with:
- Mental health
- Behavioral health
- Substance abuse considerations
- At-risk and special-needs populations
- Veterinary and/or animal health issues

Instructor Notes: Present the following key points.

ESF #8 provides supplemental assistance to State, tribal, and local governments in the following core functional areas:

- 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
- Veterinary medical support

The scope information can be found on pages 1-2 of the ESF #8 – Public Health and Medical Services Annex.
Instructor Notes: Present the following key points.

The Department of Health and Human Services (HHS) is the ESF #8 coordinator and primary agency. As the ESF #8 primary agency, HHS:

- Leads the Federal effort to provide public health and medical assistance to the affected area.
- Requests appropriate ESF #8 organizations to activate and deploy public health, medical, and veterinary medical personnel, equipment, and supplies.
- Assists and supports State, tribal, and local officials in delivery of needed services.
- Coordinates public health and medical support, patient evacuation, and movement requirements with other primary and supporting departments, agencies, and governments throughout the incident.
- Assures the safety and security of food by the Food and Drug Administration (FDA) in coordination with other responsible Federal agencies (e.g., the Department of Agriculture).

More information can be found on pages 9-10 of the ESF #8 – Public Health and Medical Services Annex.
Instructor Notes: Present the following key points.

Partners in providing ESF #8 services include:

- Department of Defense (DOD): Patient transportation to nearby non-Federal and VA hospitals and DOD facilities
- Department of Agriculture (USDA): Public health matters related to animal diseases and food safety
Instructor Notes: Present the following key points.

Other ESF #8 partner agencies include:

- Department of Energy (DOE): Monitoring and decontamination for radiological emergencies
- Department of Justice (DOJ): Victim identification, coordinated through the FBI
- Department of Labor (DOL): Health of emergency workers
### Instructor Notes: Present the following key points.

ESF #8’s actions include:

- Public health and medical needs assessment
- Public health surveillance
- Medical care personnel deployment
- Medical equipment and supplies distribution
- Patient evacuation and care
- Safety and security of:
  - Drugs, biologics, and medical devices
  - Food
  - Agriculture

Refer to pages 4-8 of the ESF #8 – Public Health and Medical Services Annex for more information.
Instructor Notes: Present the following key points.

ESF #8 also addresses:

- Blood, organ, and blood tissue needs
- Behavioral health care
- Public health and medical information
- Vector control
- Mass fatality management
- Veterinary medical support
- Public health aspects of potable water/wastewater and solid waste
Instructor Notes: Present the following key points.

Conduct the activity as follows:

1. Tell the participants to work in their table teams.
2. Ask the participants to think about activities related to Public Health and Medical Services that DO and DO NOT fall within the scope of ESF #8. Instruct the participants to list the examples on chart paper.
3. Give the teams approximately 5 minutes to complete their lists. Ask spokespersons from each team to present their answers.
4. If necessary, suggest the following responses:
   1. The following activities are included in the scope of ESF #8:
      • Eradicating disease-causing pests in the event of a disease outbreak.
      • Transporting patients injured in a disaster to DOD hospitals.
      • Assisting in identifying deceased disaster victims.
      • Treating service and companion animals injured in a disaster.
   2. The following activities are not included in the scope of ESF #8:
      • Providing daycare for children displaced by a disaster.
      • Establishing temporary housing for elderly residents whose housing was damaged in a disaster.
Instructor Notes: Present the following key points.

Upon activation, HHS alerts identified personnel to represent ESF #8, as required, in or on the:

- Domestic Readiness Group.
- National Operations Center.
- National Response Coordination Center.
- Regional Response Coordination Center/Joint Field Office.
- National/regional teams.
- Joint Information Center.
- Other operations centers as required by the mission.

HHS notifies and requests all supporting departments and agencies to participate in headquarters coordination activities. The HHS Office of the Assistant Secretary for Preparedness and Response (ASPR) may request ESF #8 support agencies and organizations to provide liaison personnel to the HHS Headquarters command locations. HHS Headquarters and ESF #8 staff provide liaison and communications support to regional ESF #8 offices. Regional ESF #8 staff may be assisted by supporting Federal partners and HHS components.

Refer to page 3 of the ESF #8 – Public Health and Medical Services Annex for more information.
Instructor Notes: Present the following key points.

The mission of the National Disaster Medical System (NDMS) is to maintain a national capability to deliver quality medical care to the victims of—and responders to—a domestic disaster. NDMS provides a single, integrated national medical response capability for assisting State and local authorities in responding to:

- Natural disasters.
- Major transportation accidents.
- Acts of terrorism including weapons of mass destruction events.

The NDMS teams are staffed by agency personnel and private citizens with specialized training and expertise. These teams are activated as needed during disasters or other events to provide:

- Medical care, including specialized treatment like crush injuries or burn treatment.
- Patient movement from a disaster site to unaffected areas of the Nation.
- Victim identification and mortuary services.
- Veterinary services for animals affected by an incident.
Instructor Notes: Present the following key points.

NDMS includes the following teams:

- The **Disaster Medical Assistance Teams (DMATs)** provide medical care until other resources can be mobilized or the situation is resolved. DMATs deploy to disaster sites with sufficient supplies and equipment for a 72-hour deployment. In addition to the standard DMATs, there are highly specialized DMATs.
- The four **National Medical Response Teams (NMRTs)** are equipped and trained to provide medical care for victims of weapons of mass destruction.
- The **Disaster Mortuary Operational Response Teams (DMORTs)** provide victim identification and mortuary services. One team specializes in response to incidents involving weapons of mass destruction. The DMORTs may use one of FEMA’s two Disaster Portable Morgue Units (DPMUs) that are deployed to disaster sites. The DPMU contains a complete morgue, with designated workstations and prepackaged supplies.
- The **Family Assistance Center Team** works in conjunction with the DMORT, the American Red Cross, and other agencies or private companies involved in an incident. The team collects victim information and conducts death notifications.
- The **National Nurse Response Teams (NNRTs)** are activated in any scenario that overwhelms the Nation’s supply of nurses. The NNRTs are composed of approximately 200 civilian nurses.
- The **National Veterinary Response Teams (NVRTs)** assess the medical needs of animals affected by a disaster or event. In addition to medical treatment of animals, NVRTs are also involved in disease surveillance, food and water quality assurance, and animal decontamination.
- The **National Pharmacy Response Teams (NPRTs)** are located in each of the 10 Federal regions. The NPRTs are used to assist in mass prophylaxis or the vaccination of hundreds of thousands, or even millions, of Americans.
- **Mental health teams** provide counseling and other assistance to the DMAT and DMORT teams serving at an incident. Rescue and recovery workers often face special emotional challenges.
Instructor Notes: Present the following key points.

The U.S. Public Health Service Commissioned Corps, a uniformed service led by the Surgeon General, includes the following teams, or team support:

- The **Incident Response Coordination Team (IRCT)** represents ESF #8 in the field and performs liaison and leadership functions required of ESF #8. The 30 IRCT members include Operations, Logistics, Planning, Administration/Finance, and Information Chiefs and staffers.
- The **Applied Public Health Team (APHT)** is composed of experts in public health assessments, environmental health, infrastructure integrity, food safety, vector control, epidemiology, and surveillance. These APHTs can be described as a “public health department in a box,” as they represent most of the required skills for carrying out those functions.
- **Mental Health Teams (MHTs)** are comprised of team leaders, mental health providers, and incident stress team members and provide a range of services, including:
  - Crisis intervention for incident survivors.
  - Assessment of community mental health prevention and treatment needs.
  - Referrals of survivors and responders to needed community services.
  - Screening and assessment of individuals for a variety of mental health conditions.
  - Stress management and counseling services including exit interviews to support responders.
- The **Rapid Deployment Force (RDF)** is comprised of 105 U.S. Public Health Service Commissioned Corps Officers, including clinical staff (physicians, nurses, mental health providers, etc.), public health staff (epidemiologists, nutritionists, veterinarians, etc.), and command staff.
Instructor Notes: Present the following key points.

ESF #8 may also coordinate the deployment of assets from the Strategic National Stockpile. The stockpile has large quantities of medicine and medical supplies to protect the American public in an incident severe enough to cause local supplies to run out.

Push Packages are caches of pharmaceuticals, antidotes, and medical supplies designed to provide rapid delivery. These Push Packages are positioned in strategically located, secure warehouses for delivery within 12 hours. Each State has plans to receive and distribute the medicines and medical supplies to local communities as quickly as possible, including providing adequate staffing of dispensing sites or treatment centers, and managing the inventory.
Display Visual 26

Instructor Notes: Present the following key points.

Conduct the review as follows:

- Direct the participants to the Knowledge Review located at the end of their Student Manuals.
- Allow 5 minutes for the participants to answer the questions.
- Monitor the time. When 5 minutes have passed, ask for volunteers to provide their answers.
- If not mentioned by participants, provide the correct responses from the answer key on the next page.
- Ask the participants if they have any questions on the material covered in this course. Be sure to answer all questions before moving on to the exam.

Additional information about the National Response Framework and Emergency Support Functions may be obtained at the NRF Resource Center at www.fema.gov/nrf.
<table>
<thead>
<tr>
<th>Topic</th>
<th>Summary</th>
</tr>
</thead>
<tbody>
<tr>
<td>Display Visual 27</td>
<td><img src="image" alt="Taking the Exam" /></td>
</tr>
</tbody>
</table>

Instructor Notes: Present the following key points.

Present the following instructions:

1. Take a few moments to review your Student Manuals and identify any questions.
2. Make sure that you get all of your questions answered prior to beginning the final test.
3. When taking the test . . .
   1. Read each item carefully.
   2. Circle your answer on the test.
   3. Check your work and transfer your answers to the computer-scan (bubble) answer sheet or enter the answers online.

You may refer to your Student Manuals and the Annex when completing this test.

Tell the participants that they may refer to their Student Manuals and the annex when completing this test.

Important Instructor Note: It is important that you allow the participants enough time for them to review the course materials prior to taking the exam. If time permits, you can facilitate a structured review of the materials using the following techniques:

- Assign each team a lesson and have them summarize and present the key points to remember.
- Select five to seven of the most critical points from each lesson. Present a brief review of these points. Ask questions to ensure that the participants remember the most important information.

When the review is completed, distribute the exams. Remain in the room to monitor the exam and to be available for questions. Collect the completed exams.

Instructor Note: To receive a certificate of completion, students must take the 10-question multiple-choice posttest, submit an answer sheet (to EMI’s Independent Study Office), and score 75% on the test. Explain that students may submit their tests online, and receive a certificate in the mail. Direct them to:

- Click on "Download Final Exam Questions" (found at the bottom of the page). You may want to print the test.
- Click on "Take Final Exam" (found at the bottom of the page).
### Instructor Notes: Present the following key points.

Ask the participants to complete any course evaluation/feedback forms. Use standard course evaluation forms from your agency or jurisdiction.
ESF #8 – Knowledge Review

1. Who serves as the coordinator and primary agency for ESF #8?
   
   **Answer:** Department of Health and Human Services

2. Read the following scenario, and then list three priority actions for ESF #8.

   **Scenario:** A Category 3 Hurricane is intensifying off the coast and predicted to make landfall in the next 24 hours. Local responders are working with the State to make preparations for the approaching storm, but are predicting that their combined resources will be overwhelmed. The State has turned to the Federal Government for assistance.

   **Sample Answers:**
   
   a. Coordinate conference calls with the ESF #8 supporting departments and agencies, and public health and medical representatives from State, tribal, and local governments, to discuss the situation and determine the appropriate initial response actions.
   b. Designate a Senior Health Official to serve as the senior Federal health official in the JFO.
   c. Activate liaisons from Health and Human Services at the State operations center, Federal regional coordination centers, and the JFO.
   d. Place Public Health Service officers and volunteer health care workers on alert in case of deployment.
   e. Prepare equipment and supplies for medical shelters for rapid deployment.
   f. Prepare ready caches of medical supplies and materials for shipping.

3. Decide whether the following statement is **TRUE** or **FALSE:** These services are intended to support, rather than replace, the local, tribal, and State responses to the health emergency.

   **Answer:** True
4. Match the activities with the ESF #8 support agencies that perform them.

<table>
<thead>
<tr>
<th>Activities</th>
<th>Support Agencies</th>
</tr>
</thead>
<tbody>
<tr>
<td>E. Monitoring the health of search and rescue teams at a disaster site.</td>
<td>A. Department of Justice (DOJ)</td>
</tr>
<tr>
<td>C. Limited assistance for the decontamination of victims of a radiological “dirty bomb” explosion.</td>
<td>B. Department of Agriculture (USDA)</td>
</tr>
<tr>
<td>A. Identification of victims in the aftermath of a hurricane.</td>
<td>C. Department of Energy (DOE)</td>
</tr>
<tr>
<td>B. Treatment and control of a disease affecting commercial dairy herds.</td>
<td>D. Department of Defense (DOD)</td>
</tr>
<tr>
<td>D. Transportation of patients from a hospital damaged in an earthquake to a nearby non-Federal hospital.</td>
<td>E. Department of Labor (DOL)</td>
</tr>
</tbody>
</table>

5. Use the space below to make note of any questions you have about the material covered in this course.