**Course Overview**

**Display Visual 1**

**Key Points**

**Purpose:** The purpose of this course is to familiarize you 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)
Course Overview

Key Points

At the end of this course, you 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.
Key Points

Introduce yourself to the members of your table groups, providing:

- Your name.
- Your role in emergency management.
- What you hope to gain from this course.
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.
**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.
### Display Visual 6

#### ESF General Duties

- Commit agency assets.
- Approve and implement mission assignments.
- Maintain situational awareness and report on ESF operations.
- Represent agency on task forces and ad hoc groups.
- Serve as technical experts.

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#### Key Points

Review the general ESF duties listed on the visual.

Why is it important that ESFs have the authority to commit agency assets?
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-Stafford 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.
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.
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.
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.
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.
<table>
<thead>
<tr>
<th>Key Points</th>
</tr>
</thead>
</table>

Following an incident, what health concerns do communities face?

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.
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.
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.
| Topic | ESF #8 Support Agencies |

### Visual 16

**ESF #8 Support Agencies (1 of 2)**

A number of Federal agencies serve as ESF #8 partners. Among them:

- **Department of Defense**: Patient transportation to nearby non-Federal and VA hospitals and DOD facilities.
- **Department of Agriculture**: Addresses public health matters related to animal diseases and food safety.


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**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
<table>
<thead>
<tr>
<th>Topic</th>
<th>ESF #8 Support Agencies</th>
</tr>
</thead>
</table>

### 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
Topics

ESF #8 Actions

Display
Visual 18

<table>
<thead>
<tr>
<th>ESF #8 Actions (1 of 2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>ESF #8 provides for:</td>
</tr>
<tr>
<td>▪ Public health and medical needs assessment</td>
</tr>
<tr>
<td>▪ Public health surveillance</td>
</tr>
<tr>
<td>▪ Medical care personnel deployment</td>
</tr>
<tr>
<td>▪ Medical equipment and supplies distribution</td>
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<tr>
<td>▪ Patient evacuation and care</td>
</tr>
<tr>
<td>▪ Safety and security:</td>
</tr>
<tr>
<td>▪ Drugs, biologics, and medical devices</td>
</tr>
<tr>
<td>▪ Food</td>
</tr>
<tr>
<td>▪ Agriculture</td>
</tr>
</tbody>
</table>

See pages 4-8 of the Annex.

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.
### 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
<table>
<thead>
<tr>
<th>Topic</th>
<th>ESF #8 Actions</th>
</tr>
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<tbody>
<tr>
<td>Display</td>
<td>Visual 20</td>
</tr>
</tbody>
</table>

**Discussion Questions**

- What are examples of activities within the scope of ESF #8?
- What are examples of activities outside the scope of ESF #8?

**Key Points**

**Activity Instructions:**

1. Work in your table teams.
2. Think about activities related to Public Health and Medical Services that DO and DO NOT fall within the scope of ESF #8. List the examples on chart paper.
3. You have approximately 5 minutes to complete your lists. Have a spokesperson from your team present your answers.
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.
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.
**National Disaster Medical System**

**NDMS Teams**

NDMS includes the following teams:

- **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.
Public Health Service Teams

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.
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.
Key Points

Instructions:

- Answer the review questions on pages 29 and 30 of your Student Manual.
- Be prepared to share your answers with the class in 5 minutes.
- If you need clarification on any of the material presented in this course, be sure to ask your instructors.

Additional information about the National Response Framework and Emergency Support Functions can be obtained at the NRF Resource Center at www.fema.gov/nrf.
**Taking the Exam**

**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 . . .
   - Read each item carefully.
   - Circle your answer on the test.
   - 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.

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**Key Points**

Instructions:

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You may refer to your Student Manuals and the annex when completing this test.
Please complete the course evaluation/feedback form.
ESF #8 – Knowledge Review

1. Who serves as the coordinator and primary agency for ESF #8?

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.

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.
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>Monitoring the health of search and rescue teams at a disaster site.</td>
<td>A. Department of Justice (DOJ)</td>
</tr>
<tr>
<td>Limited assistance for the decontamination of victims of a radiological “dirty bomb&quot; explosion.</td>
<td>B. Department of Agriculture (USDA)</td>
</tr>
<tr>
<td>Identification of victims in the aftermath of a hurricane.</td>
<td>C. Department of Energy (DOE)</td>
</tr>
<tr>
<td>Treatment and control of a disease affecting commercial dairy herds.</td>
<td>D. Department of Defense (DOD)</td>
</tr>
<tr>
<td>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.