

EMERGENCY SUPPORT FUNCTION
8: PUBLIC HEALTH & MEDICAL SERVICES

Coordinating:

Yakima Health District

Primary(s):

Emergency Medical Services
Yakima County Coroner’s Office
Yakima Health District

Support(s):

American Red Cross—Serving Central and Southeast Washington
Central Washington Comprehensive Healthcare
Fire Services
Hospitals/Clinics—Public and Private
Law Enforcement
Private Ambulance Services [American Medical Response (AMR) and Advanced Life Systems (ALS)]
Public Services (County)/Public Works (Cities/Towns)
Yakima Valley Emergency Management

Other Emergency Support Functions (ESFs) or Recovery Functions exist that coordinate with or support this ESF:

- **On the ESF Core Capabilities Matrix, find Primary core capabilities (P) within this ESF and then move vertically and add all Supporting (S) core capabilities and equate them to ESFs.**
- **Next find all Supporting (S) ESFs in the column and then move horizontally along each row of a Supporting (S) core capability to find all Primary (P) ESFs.**

ESF 1	ESF 4	ESF 5	ESF 6	ESF 7	ESF 10	ESF 11	ESF 13	ESF 15	Health & Social Services
Response									Recovery
Support									
ESF 8									

1. Purpose

- 1.1. Emergency Support Function (ESF) #8 – Public Health & Medical Services coordinates the provision of medical care and the dissemination of public health information necessary to support an emergency response or recovery effort or other disaster assistance initiative.
- 1.2. Disasters have the capacity to produce large numbers of fatalities. The profound effects of mass fatalities on both loved ones and the entire community, and the ability to coordinate and obtain the needed fatality management resources are critical emergency response functions of Yakima County jurisdictions.

EMERGENCY SUPPORT FUNCTION
8: PUBLIC HEALTH & MEDICAL SERVICES

Primary Core Capabilities	
Response Mission Area	
Fatality Management Services	Provide fatality management services, including decedent remains recovery and victim identification, and work with local, state, tribal, and Federal authorities to provide mortuary processes, temporary storage or permanent internment solutions, sharing information with mass care services for the purpose of reunifying family members and caregivers with missing persons/remains, and providing counseling to the bereaved.
Public Health, Healthcare, & EMS	Provide lifesaving medical treatment via Emergency Medical Services and related operations and avoid additional disease and injury by providing targeted public health, medical, and behavioral health support and products to all affected populations.

Primary Core Capabilities	
Recovery Mission Areas	
Health and Social Services	Restore and improve health and social services capabilities and networks to promote the resilience, independence, health (including behavioral health), and well-being of the whole community.

Support Core Capabilities	
Response Mission Area	
Public Information & Warning	Deliver coordinated, prompt, reliable, and actionable information to the whole community through the use of clear, consistent, accessible, and culturally and linguistically appropriate methods to effectively relay information regarding any threat or hazard and, as appropriate, the actions being taken, and the assistance being made available.
Operational Coordination	Establish and maintain a unified and coordinated operational structure and process that appropriately integrates all critical stakeholders and supports the execution of Core Capabilities.
Critical Transportation	Provide transportation (including infrastructure access and accessible transportation services) for response priority objectives, including the evacuation of people and animals and the delivery of vital response personnel, equipment, and services into the affected areas.
Environmental Response/Health & Safety	Conduct appropriate measures to ensure the protection of the health and safety of the public and workers, as well as the environment, from all hazards in support of responder operations and the affected communities.
Logistics & Supply Chain Management	Deliver essential commodities, equipment, and services in support of impacted communities and survivors, to include emergency power and fuel support, as well as the coordination of access to community

EMERGENCY SUPPORT FUNCTION
8: PUBLIC HEALTH & MEDICAL SERVICES

Support Core Capabilities	
	staples. Synchronize logistics capabilities and enable the restoration of impacted supply chains.
Mass Care Services	Provide life-sustaining and human services to the affected population, to include hydration, feeding, sheltering, temporary housing, evacuee support, reunification, and distribution of emergency supplies.

2. Policies and Authorities

2.1. Policies

- 2.1.1. Priority is given to LIP: Life safety, Incident stabilization or Property protection (preservation).
- 2.1.2. The Yakima Health District is to provide guidance to political jurisdictions, agencies and individuals on basic public health principles involving safe drinking water, home and office air quality, food sanitation, personal hygiene, and proper disposal of human waste, garbage and infectious or hazardous waste spills.
- 2.1.3. Local jurisdictions will activate mutual aid agreements when their resources are depleted or committed. Additional state and federal assistance will be requested through the Yakima County Emergency Operations Center (YCEOC) and coordinated and provided through the Washington State Military Department, Emergency Management Division (WAEMD)/State Emergency Operations Center (SEOC), when local public and private resources have been exhausted.
- 2.1.4. State coordinated health and medical assistance to local jurisdictions is directed by the Washington Military Department through the Secretary of Health or the designated representative.
- 2.1.5. The Coroner has jurisdiction over the bodies of the deceased.
- 2.1.6. Yakima County jurisdictions will follow policies regarding the removal of human remains authorized by the Yakima County Coroner or designee and protocols established in this plan.
- 2.1.7. Human remains will be treated with the utmost respect and dignity during the collection and removal process. In addition, personnel involved in the collection, removal, and transportation of human remains must use the appropriate levels of protective equipment to prevent any injury or exposure to pathogens.

2.2. Authorities

- 2.2.1. [Revised Code of Washington \(RCW\) 43.20.050\(5\)](#) – In part, states all police officers, sheriffs, constables and all other officers and employees of the state or any county, city or township thereof, shall enforce all rules adopted by the State Board of Health.
- 2.2.2. [RCW 70.05.060](#) – Outlines the powers and duties of the local board of health; each local board

EMERGENCY SUPPORT FUNCTION
8: PUBLIC HEALTH & MEDICAL SERVICES

of health has supervision over all matters pertaining to the preservation of the life and health of the people within its jurisdiction.

- 2.2.3. [RCW 70.05.070](#) – Outlines the powers and duties of the local health officer. In part, states that the local health officer shall control and prevent the spread of any dangerous contagious or infectious disease that may occur in his/her jurisdiction.
- 2.2.4. [Washington Administrative Code \(WAC\) 246-101-425](#) – Outlines the responsibilities of the general public. In part, states that members of the general public shall cooperate with public health authorities in the investigation of cases and suspected cases and cooperate with the implementation of infection control measures including isolation and quarantine.
- 2.2.5. [WAC 246-101-505](#) – Outlines the duties of the local health officer or local health department. In part, states that local health officers shall review and determine the appropriate action for instituting disease prevention and infection control, isolation, detention and quarantine measures necessary to prevent the spread of communicable disease, invoking the powers of the courts to enforce these measures when necessary.

3. Situation Overview

- 3.1. A significant disaster event may cause injuries to a considerable number of people, produce physical or biological health hazards throughout the affected area, and create a widespread need for medical care and/or public health assistance and guidance.
- 3.2. A mass fatality incident is defined as any situation in which there are more fatalities than can be handled in a timely and professional manner using the usual available local resources to address a single incident or multiple incidents.
- 3.3. These incidents may be a result of, but not limited to, natural or man-made events including: fire, flood, hurricane, tornado, earthquake, weapons of mass destruction (WMD's), bomb/blast, chemical, nuclear, biological, pandemic, structural collapse, and transportation disasters.
- 3.4. Deaths resulting from acts of homicide, suicide, or accident, and those constituting a public health hazard, fall in the jurisdiction of the Coroner.
- 3.5. The extent of damage to the public infrastructure of the affected area, in addition to the condition of the transportation network in the area (including air transport), will influence the strategy or ability to provide support. The extent of damage to medical, mental health, and extended care facilities within the affected area will influence the strategy and ability to coordinate care and provide appropriate treatment.
- 3.6. The large number of casualties resulting from a disaster incident will overwhelm the capabilities of emergency response agencies to meet the needs of the situation. Medical supplies (including pharmaceuticals) and equipment may likely be in short supply. Disruptions in local communications and transportation systems may prevent timely re-supply.

EMERGENCY SUPPORT FUNCTION
8: PUBLIC HEALTH & MEDICAL SERVICES

- 3.7. Hospitals, nursing homes, pharmacies and other medical/health care facilities may be structurally damaged or destroyed. Even those facilities which survive with little or no structural damage may be rendered unusable or only partially usable because of damage to, or reduction of utilities (power, water, sewer), because staff are unable to report for duty due to personal injuries, or damage or disruption of communication and transportation systems. Medical and health care facilities which remain in operation and have the necessary utilities and staff will probably be overwhelmed by the "walking wounded" and seriously injured victims who are transported there in the immediate aftermath of the occurrence. In the face of massive increases in demand and the damage sustained, medical supplies (including pharmaceuticals) and equipment will likely be in short supply. Most health care facilities maintain inventory stock to meet their normal patient needs. Disruptions in local communications and transportation systems could prevent timely re-supply.
- 3.8. The psychological effects of a natural or man-made disaster or public health event could have a severe impact on the community well. The implications of such an event could cause panic among a wider population than is actually affected, with greater numbers of people seeking treatment than have been physically harmed. These individuals are referred to as "worried well". Health facilities still in operation will likely be overwhelmed by many incoming patients, including the "worried well" from the community, as well as patients transferred from damaged or endangered health care facilities.
- 3.9. Uninjured persons who require daily maintenance medications or treatment (e.g., insulin and dialysis) may have difficulty in obtaining them because of damage or destruction of normal supply locations and general shortages within the disaster area.
- 3.10. Although other disasters such as fires and floods do not generate the casualty volume of a major earthquake, a noticeable emphasis on health may exist for relocation, shelters, vector control, and returning water, wastewater, and solid waste facilities to operation. Pets, livestock, and wild animals may also be affected, and may become a health and safety problem.
- 3.11. An emergency resulting from an explosion, toxic gas, radiation, or biological release could occur that may not damage the local medical system. However, such an event could produce a large concentration of specialized injuries that would overwhelm the local jurisdictions' medical system, and/or result in the contamination of medical treatment personnel or medical facilities which could reduce or eliminate the ability of those personnel or facilities to continue providing aid.

4. Concept of Operations

- 4.1. When there is a potential for, or occurrence of, a significant emergency or disaster, YVEM is to be notified. This notification could be to advise of a need for some level of activation of the Yakima County Emergency Operations Center (YCEOC), or to pass on a request for assistance to the state.

EMERGENCY SUPPORT FUNCTION
8: PUBLIC HEALTH & MEDICAL SERVICES

- 4.1.1. When activated, the Yakima County Director of Emergency Services will request necessary personnel to staff the EOC.
- 4.1.2. Based on the situation, Yakima Health District (YHD), medical facilities and response agencies will be notified of the potential for, or occurrence of the event. This may be done by the Public Safety Dispatch Centers (i.e. SunComm 9-1-1), response agencies, or EOC staff, but the YCEOC is to verify that it has been completed.
- 4.1.3. Medical and public health facilities, response agencies, and support agencies will activate their own emergency or disaster procedures as needed for the potential or actual event and will maintain communication with the YCEOC for situational awareness.
- 4.1.4. In the event of a public health emergency where the YHD ECC has been activated but not the YCEOC, the Local Emergency Response Coordinator or designee will notify the Director of Emergency Services and the Washington State Secretary of Health of the activation.
- 4.2. Once the YCEOC is operational, all Emergency Support Function (ESF) 8 response and recovery activities will be directed from the EOC. YHD is the lead agency for the ESF 8 Public Health, Medical Services.
- 4.3. Necessary support agencies and organizations will be notified and requested to provide 24-hour representation to the YCEOC or be available by direct communication. Each support agency and organization are responsible for ensuring that sufficient staff is available to support the YCEOC and carry out the activities tasked to their agency or organization on a continuous basis. Individuals staffing the YCEOC, or acting as liaison with the EOC, need to have extensive knowledge of the resources and capabilities of their respective agencies or organizations, and have access to the appropriate authority for committing those resources during response and recovery operations.
- 4.4. The YVEM and YHD staff will maintain communication and coordination with response agencies, medical and health facilities, and other organizations and officials to identify current and projected medical and public health status and requests for assistance. Written situation reports will assist other EOC staff, and other officials with a need for this information.
- 4.5. Response agencies and health care facilities will report needs or potential needs to the YCEOC. Medical and health needs that cannot be met with local and regional resources and mutual aid will be directed to the Washington State Military Department, Emergency Management Division (WAEMD)/State Emergency Operations Center (SEOC). WAEMD/SEOC may provide advice or technical assistance, and they may provide direct support with personnel, equipment, and/or supplies.
- 4.6. Fatality Management
 - 4.6.1. The Yakima County Coroner's Office (YCCOO) shall be notified with any reportable death in Yakima County. The on-duty or on-call Deputy Coroner will first make notification to the Coroner and Chief Deputy Coroner and then respond to the incident. Upon evaluation of initial information

EMERGENCY SUPPORT FUNCTION
8: PUBLIC HEALTH & MEDICAL SERVICES

and/or surveying the scene, a determination will be made by the Coroner as to the level of initial response by the YCCO. It must also be acknowledged that the normal day-to-day operations of the YCCO must be satisfied.

- 4.6.2. At the discretion of the Coroner, temporary Deputy Coroners may be sworn-in with limited and temporary jurisdiction. Medical professionals, emergency services personnel and Funeral Directors may be utilized as temporary Deputies in the event of a mass fatalities or pandemic event.
- 4.6.3. The coroner will maintain direct contact with local, county, state and federal officials in regard to declaration of disaster.
- 4.6.4. The YCCO has established three levels of response to a mass fatality incident within figure 1 below. The Coroner will determine what level is warranted based on the information available at that time. The level of response may be upgraded or downgraded as necessary.

EMERGENCY SUPPORT FUNCTION
8: PUBLIC HEALTH & MEDICAL SERVICES

Level 1

- Coroner will determine the number of personnel to be called out to the scene and place a Deputy Coroner “on-call” for normal daily office functions. Staff will be activated to respond to the scene or a standby notification only.
- Most activities will be handled “in-house” with the exception of a few certain limited tasks. Morgue operations will take place at the county morgue and/or local hospital morgues. Autopsies will be performed through the current contracted forensic pathology group. A Family Assistance Center (FAC) will be implemented with the assistance of the American Red Cross and Emergency Management.

Level 2

- Upon further evaluation by the Coroner and staff, a Level 2 response would still include the actions and notifications as indicated in Level 1.
- Determine a location for a holding morgue and/or a temporary morgue.
- A DMORT activation would only be considered at this point if any of the following three criteria has been met:
 - An act of terrorism;
 - A federally declared disaster; or
 - A transportation accident resulting in the loss of 20 or more lives

Level 3

- Upon further evaluation by the Coroner and staff, a Level 3 response would still include notifications and activations as indicated in Level 1 and Level 2.
- Make additional notifications to the Federal Emergency Management Agency (FEMA), the National Funeral Directors Association, and DMORT response.

Figure 1: Three Levels of Response to Mass Fatality Incident

4.7. Whole Community Involvement

- 4.7.1. A successful Whole Community public health and medical services program assesses local assets and capabilities, bolsters identified weaknesses, and supports locally-driven solutions. This includes, but is not limited to, inclusive disaster planning, supporting local response organizations and processes, developing partnerships with supportive groups and agencies, and ensuring a place at the table for government, residents, NGOs, businesses, churches, advocacy organizations, and other stakeholders.

EMERGENCY SUPPORT FUNCTION
8: PUBLIC HEALTH & MEDICAL SERVICES

4.7.2. The Whole Community includes populations with individuals with disabilities and Access and Functional Needs (AFN). Any agency or organization that receives federal funding is required to have a plan or policy for addressing the needs of individuals with Limited English Proficiency (LEP), pursuant to Title VI, the Civil Rights Act. The Washington State Emergency Management Division and this ESF expects all agencies and organizations to comply with federal law. For more information on how each agency or organization complies with federal law, please contact the individual agency or organization.

4.7.3. ESF #8 recognizes that inclusion and accessibility is about more than language translation. Inclusion and accessibility mean a concerted effort to engage populations with limited English proficiency (LEP), disabilities, or other conditions that limit access to recovery services, and to promote effective resource accessibility – that is, that no impacted individuals face a unique burden in securing resources for which they qualify, and that are available to others.

4.8. Critical Tasks

Mission Area	Critical Task I.D.	Critical Tasks
Fatality Management Services		
Response	1	Establish and maintain operations to recover a significant number of fatalities over a geographically dispersed area.
	2	Mitigate hazards from remains, facilitate care to survivors, and return remains for final disposition.

Mission Area	Critical Task I.D.	Critical Tasks
Public Health, Healthcare, & EMS		
Response	1	Deliver medical countermeasures to exposed populations.
	2	Complete triage and initial stabilization of casualties and begin definitive care for those likely to survive their injuries and illnesses.
	3	Return medical surge resources to pre-incident levels, complete health assessments, and identify recovery processes.

Mission Area	Critical Task I.D.	Critical Tasks
Operational Coordination		
Response	1	Mobilize all critical resources and establish command, control, and coordination structures within the affected community, in other coordinating bodies in surrounding communities and neighboring counties and maintain as needed throughout the duration of an incident.
	2	Enhance and maintain command, control, and coordination structures consistent with the National Incident Management System (NIMS) to meet basic human needs, stabilize the incident, and transition to recovery.

EMERGENCY SUPPORT FUNCTION
8: PUBLIC HEALTH & MEDICAL SERVICES

Mission Area	Critical Task I.D.	Critical Tasks
Public Information & Warning		
Response	1	Inform all affected segments of society of critical lifesaving and life-sustaining information by all means necessary, including accessible tools, to expedite the delivery of emergency services and aid the public to take protective actions.

Mission Area	Critical Task I.D.	Critical Tasks
Critical Transportation		
Response	2	Ensure basic human needs are met, stabilize the incident, transition into recovery for an affected area, and restore basic services and community functionality.

Mission Area	Critical Task I.D.	Critical Tasks
Environmental Response/Health & Safety		
Response	1	Identify, assess, and mitigate worker health and safety hazards, and disseminate health and safety guidance and resources to response and recovery workers.
	2	Minimize public exposure to environmental hazards through assessment of the hazards and implementation of public protective actions.

Mission Area	Critical Task I.D.	Critical Tasks
Logistics & Supply Chain Management		
Response	1	Mobilize and deliver governmental, nongovernmental, and private sector resources to save lives, sustain lives, meet basic human needs, stabilize the incident, and transition to recovery, to include moving and delivering resources and services to meet the needs of disaster survivors.
	2	Enhance public and private resource and services support for an affected area.

Mission Area	Critical Task I.D.	Critical Tasks
Mass Care Services		
Response	1	Move and deliver resources and capabilities to meet the needs of disaster survivors, including individuals with access and functional needs.

Mission Area	Critical Task I.D.	Critical Tasks
Health, Public Health and Social Services		
Recovery	1	Identify affected populations, groups, and key partners in short-term, intermediate, and long-term recovery.

EMERGENCY SUPPORT FUNCTION
8: PUBLIC HEALTH & MEDICAL SERVICES

Mission Area	Critical Task I.D.	Critical Tasks
Health, Public Health and Social Services		
	2	Complete an assessment of community health and social service needs; prioritize these needs, including accessibility requirements, based on the whole community’s input and participation in the recovery planning process; and develop a comprehensive recovery timeline.
	3	Restore health care (including behavioral health), public health, and social services functions.
	4	Restore and improve the resilience and sustainability of the health care system and social service capabilities and networks to promote the independence and well-being of community members in accordance with the specified recovery timeline.

5. Organization

- 5.1. The ESF #8 position is staffed by the Yakima Health District (YHD), or designee. Personnel assigned to this position are recommended by the YHD Director, or designee, and coordinated through the YVEM and the Yakima County Emergency Services Director, or designee. The ESF #8 position, when activated, operates in the Yakima County EOC. This position is the link to the medical service operations in the field and the public health of the entire county.

- 5.2. The ESF #8 position provides subject-matter expertise to other EOC positions. Based on potential need, this ESF may operate on a 24-hour basis. Supporting agencies have representatives available at the county EOC or by telephone on a 24-hour basis while ESF #8 is operational.

- 5.3. **Emergency Medical Services**
 - 5.3.1. The EMS Department is the lead agency for the coordination of EMS disaster planning.

 - 5.3.2. Upon request, or upon the occurrence of a disaster, the EMS staff should report to the Yakima County EOC. Appropriate staffing should be determined, depending upon the situation, to cover 24-hour operations if needed.

 - 5.3.3. Yakima County has hospitals identified for the provision of on-line medical control on a day-to-day basis. Astria Regional Medical Center and Virginia Mason Memorial Hospital rotate on a daily alternating schedule as medical control. That facility shall maintain control of the incident for the duration. The remaining hospitals shall maintain medical control services for other day-to-day operations.

 - 5.3.4. Upon occurrence of a disaster, each hospital should assess damages to the facility, condition and availability of staff, condition of patients, resource inventory information to include pharmaceutical supplies, communication capabilities, and bed space. This information should be relayed as soon as possible to the WATrac system, and periodically updated. WATrac is a web-based healthcare resource tracking and alert system for statewide collaboration.

 - 5.3.5. Emergency medical staffing and supplies not available in Yakima County may be requested through existing mutual aid or through the State Emergency Operations Center (SEOC). These requests should be coordinated through the Yakima County EOC (YCEOC).

EMERGENCY SUPPORT FUNCTION
8: PUBLIC HEALTH & MEDICAL SERVICES

5.3.6. Private ambulance organizations may provide the nucleus for emergency medical transportation. Additional transportation requirements may be coordinated by the local jurisdiction ECC or the YCEOC.

5.4. **Health District**

5.4.1. During an incident that threatens the health and/or sanitation condition of the residents of the county, the Yakima Health District will provide, or provide for the coordination of, health and sanitation services within the community through their Emergency Response Plan.

5.4.2. If the threat to public health is of such magnitude that supplemental assistance is necessary (i.e. Jurisdictional State of Emergency), the state and federal government may provide such assistance through WebEOC or by direct request to the Director, State Department of Health. This request should be coordinated through the Yakima County EOC.

5.5. **Mortuary Services**

5.5.1. The Yakima County Coroner's Office has jurisdiction over the bodies of the deceased within Yakima County.

5.5.2. Local funeral directors and other designated personnel may assist in the processing of human remains at the discretion of the Yakima County Coroner.

5.5.3. If local resources for proper handling and disposition of the deceased are exceeded, the state and/or federal government may provide supplementary assistance for the identification, movement, storage, and disposition of the deceased. The Yakima County Coroner may make a request for such assistance to the State Department of Health. This request should be coordinated through the Yakima County EOC.

5.5.4. The Coroner may designate temporary morgues if the normally established morgues are overwhelmed and may coordinate with local funeral directors to identify staff to support these temporary morgues. The Coroner is responsible for notifying local agencies of the locations of morgues and coordinating transportation of the deceased to these sites. This should be coordinated with the Yakima County Area EOC.

5.5.5. If no authorized Coroner staff is available due to the circumstances of the event, remains should be covered, removed to a secure location, chilled, if possible, and the circumstances of death documented. If appropriate, care should be given to not disturb the death scene for later documentation of evidence.

5.5.6. Law enforcement may assist the coroner in notification of the next of kin following a mass fatality incident. The American Red Cross may assist both the coroner and law enforcement by providing emotional support and spiritual care during these notifications.

5.5.7. Figure 1 below shows a potential organizational flowchart for ESF #8.

EMERGENCY SUPPORT FUNCTION
8: PUBLIC HEALTH & MEDICAL SERVICES

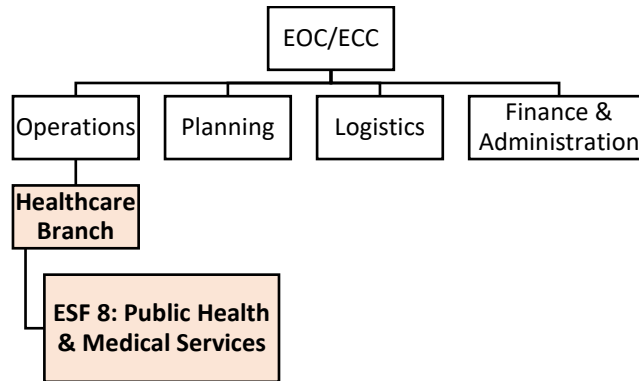


Figure 2: YCEOC, ESF #8, Organizational Chart Example

6. Direction, Control, & Coordination

- 6.1. Yakima County has hospitals identified for the provision of on-line medical control on a day-to-day basis. Astria Regional Medical Center and Virginia Mason Memorial Hospital rotate on a daily alternating schedule as medical control. These facilities will monitor the patient load at medical facilities and action will be taken to moderate the influx of patients at all available treatment sites.
- 6.2. Circumstances may require special advisory groups of subject matter experts to be assembled by the Yakima County EOC due of the potential complexity of the health and medical response. They would review health and medical intelligence information and advise on specific strategies to be employed to appropriately manage and respond to a specific situation.
- 6.3. Throughout response and recovery activities, the Yakima County EOC should evaluate and analyze medical and public health assistance requests and responses and develop and update assessments of medical and public health status. The Yakima County EOC should attempt to confirm the actual need upon receiving conflicting or questionable requests. The Yakima County EOC will maintain accurate and extensive logs to support after-action reports and other documentation of the event conditions.
- 6.4. Public service announcements will be broadcasted offering health and safety guidance, through the lead Public Information Officer (PIO) or Joint Information Center (JIC), if established.

7. Information Collection, Analysis, & Dissemination

- 7.1. Information collection on public health and/or medical services status will be coordinated through ESF #8 and the YCEOC or other designated point as appropriate to the incident.
- 7.2. The local Incident Commander (IC) or designee is responsible for providing situation reports and periodic updates to keep the YCEOC informed. YCEOC, Yakima Health District (YHD), or designee, shall provide situation reports to local support agencies/jurisdiction ECCs and the Washington State Emergency Management Division (WAEMD) – State Emergency Operations Center (SEOC) as appropriate.

**EMERGENCY SUPPORT FUNCTION
8: PUBLIC HEALTH & MEDICAL SERVICES**

- 7.3. Jurisdiction, agency, private-sector, non-governmental, and volunteer organization representatives within the YCEOC will assist with meeting the information collection, analysis, and dissemination needs/methods of the JIC and YCEOC. This will include maintaining contact with their local PIOs for reports and updates.
- 7.4. Some incoming public health or medical services information/requests (e.g. expenditures and entering into contracts) into the YCEOC may require a vetting process through the Policy Group and the YCEOC Manager due to legal, policy, ethical, or other concerns.
- 7.5. The YCEOC will be responsible for collection, analysis, and dissemination of the latest incident information and resources as depicted in Figure 2: YCEOC Information Collection, Analysis, and Dissemination process.

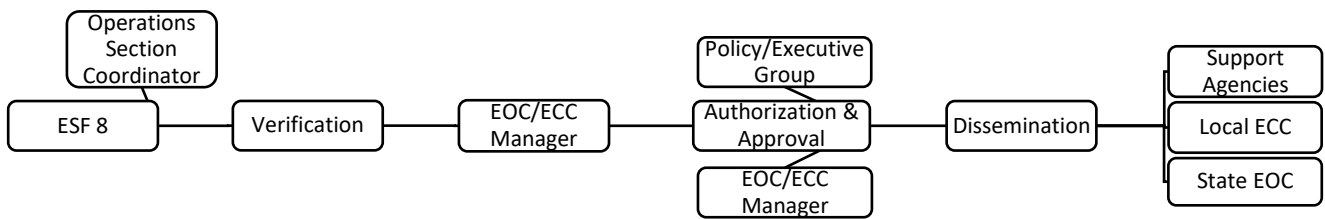


Figure 3: YCEOC Information Collection, Analysis, and Dissemination Process

8. Responsibilities

Response Mission Area			
Core Capability	Critical Task I.D.	Activity/Action	Organization(s) Name
Fatality Management Services	1	Establish and maintain operations to recover fatalities over a geographically dispersed area and coordinate designates sites/locations for temporary morgues in coordination with YHD.	Yakima County Coroner’s Office
Fatality Management Services	1	Mass fatality incidents will be considered “crime scenes” unless it can be positively proven otherwise. Coordinate search, location and recovery for fatality victims including body parts and personal effects.	Yakima County Coroner’s Office
Fatality Management Services	2	Coordinate release and disposition of human remains.	Yakima County Coroner’s Office
Fatality Management Services	2	Coordinate a Family Assistance Center (FAC) mobilization in the early stages of the mass fatality incident including security.	Yakima County Coroner’s Office Central Washington Comprehensive Healthcare YVEM

EMERGENCY SUPPORT FUNCTION
8: PUBLIC HEALTH & MEDICAL SERVICES

Response Mission Area			
Core Capability	Critical Task I.D.	Activity/Action	Organization(s) Name
			Law Enforcement
Fatality Management Services	1, 2	Provides for victim identification and mortuary services in coordination with YHD, Hospitals, EMS, and YVEM.	Yakima County Coroner's Office
Fatality Management Services	1, 2	Coordinate for multiple mass casualty processing stations (if needed) for mass fatality scenarios.	Yakima County Coroner's Office
Fatality Management Services	1, 2	Establish a disaster records management system for the victims separate from normal office records.	Yakima County Coroner's Office
Public Health, Healthcare, & EMS	1	Coordinate the implementation of the Strategic National Stockpile Program, if needed.	Yakima Health District
Public Health, Healthcare, & EMS	1, 2	Provide assessments of hospital capabilities and damages to the DMCC and provide acute-care medical services.	Hospitals/Clinics— Public and Private
Public Health, Healthcare, & EMS	1, 2	Ensure out-patient and/or home health medical services/resources are mobilized through standard contract procedures.	Hospitals/Clinics— Public and Private
Public Health, Healthcare, & EMS	2	Coordinate and/or provide mental health services for the community and emergency responders during and following the emergency.	Central Washington Comprehensive Healthcare
			Yakima Health District
Operational Coordination	1	Act as the coordinating agent for all health-related and medical resources; develop operations assignments, and direct deployment.	Yakima Health District
Operational Coordination	1	Provide logistics support through the EOC for mobilizing medical resources.	Yakima County Coroner's Office
			Emergency Medical Services
			Yakima Health District
Operational Coordination	1	Assist in the review and maintenance of this annex.	Yakima County Coroner's Office
			Emergency Medical Services
			Yakima Health District

EMERGENCY SUPPORT FUNCTION
8: PUBLIC HEALTH & MEDICAL SERVICES

Response Mission Area			
Core Capability	Critical Task I.D.	Activity/Action	Organization(s) Name
Operational Coordination	1, 2	Provide qualified representatives to serve as ESF #8 coordinators at the county level and conduct event command and control through the Incident Command System.	Yakima County Coroner's Office
			Emergency Medical Services
			Yakima Health District
			YVEM
Public Information & Warning	1	Provide public information and education through the Yakima County EOC PIO, or JIC, if established.	All Primary and Support Organizations
Public Information & Warning	1	Coordinating information dissemination and support for the Limited English Proficiency and functional needs populations.	Yakima Health District YVEM
Critical Transportation	2	Provide available emergency personnel and equipment to stabilize the incident.	Law Enforcement Public Services/Works
Critical Transportation	2	Assist with transition into recovery for an affected area and restore basic services and community functionality.	Fire Services Public Services/Works
Environmental Response/Health & Safety	1	Provide health and safety guidance and resources to response and recovery workers regarding any biological and/or chemical contamination hazards.	Yakima Health District
Environmental Response/Health & Safety	2	Minimize public exposure to environmental hazards through assessment of public water systems and inspection of temporary food facilities.	Yakima Health District
Environmental Response/Health & Safety	2	Have training and equipment to treat and decontaminate victims of an event.	Fire Services Hospitals
Logistics & Supply Chain Management	1, 2	Provide emergency medical transportation resources and support in the affected jurisdiction EOC or Yakima County EOC.	Fire Services Private Ambulance Providers (AMR & ALS)
Logistics & Supply Chain Management	2	Activate mutual aid agreements if local resources and normal re-supply methods are inadequate. If this is inadequate or unavailable, then requests for aid are to be made to WAEMD/SEOC.	All Primary Organizations YVEM
Mass Care Services	1	Acquaints and assists families with available health resources and services, in coordination with Yakima Health District (YHD).	American Red Cross – Central & Southeastern WA

EMERGENCY SUPPORT FUNCTION
8: PUBLIC HEALTH & MEDICAL SERVICES

Response Mission Area			
Core Capability	Critical Task I.D.	Activity/Action	Organization(s) Name
			Yakima Health District
Mass Care Services	1	Assist with a Family Assistance Center upon request by supplying mental health professionals and spiritual care volunteers, security, in coordination with Yakima Health District (YHD)	American Red Cross – Central & Southeastern WA
			Central Washington Comprehensive Healthcare
			Yakima Health District
			Law Enforcement

Recovery Mission Area			
Core Capability	Critical Task I.D.	Activity/Action	Organization(s) Name
Health and Social Services	1	Coordinating information dissemination and support for the Limited English Proficiency and functional needs populations.	All Primary Organizations
			YVEM
Health and Social Services	2	Participate in the after-action review process of the disaster/emergency response to develop a comprehensive recovery timeline.	All Primary Organizations
			YVEM
Health and Social Services	3, 4	Coordinate and/or support recovery activities consistent with their organization missions and capabilities.	All Primary and/or Support Organizations

9. Resource Requirements

Resources	Providers
Desktop or Laptop	Yakima County EOC (may bring home agency laptop)
WebEOC login	Primary Agency/Organization
Contact list (phone & email) of organizations (master list)	Yakima County EOC or Home Agency/Organization
Internet and folder drive access	Yakima County EOC
Appropriate Home Agency/Org SOPs (hard & soft copies)	Primary Agency/Organization
Desk Phone	Yakima County EOC
Tiered communication structure with Incident Management Teams (IMT)	Yakima County EOC
Two-way Radio	Yakima County EOC or Home Organization

EMERGENCY SUPPORT FUNCTION
8: PUBLIC HEALTH & MEDICAL SERVICES

Training	Providers
E/G0191 (Emergency Operations Center/Incident Command System Interface)	Various locations (in-residence)
IS 100, 200, 700, 800	FEMA Emergency Management Institute (online)
ICS 300, 400	Various locations (in-residence)
Position training	Yakima Valley Emergency Management (YVEM)

10. References and Supporting Plans

- 10.1. ESF 1 – Transportation, Yakima County CEMP
- 10.2. ESF 4 – Firefighting, Yakima County CEMP
- 10.3. ESF 5 – Emergency Management, Yakima County CEMP
- 10.4. ESF 6 – Mass Care, Yakima County CEMP
- 10.5. ESF 7 – Logistics Management & Resource Support, Yakima County CEMP
- 10.6. ESF 10 – Oil and Hazardous Materials Response, Yakima County CEMP
- 10.7. ESF 11 – Agriculture and Natural Resources, Yakima County CEMP
- 10.8. ESF 13 – Public Safety, Law Enforcement, and Security, Yakima County CEMP
- 10.9. ESF 15 – Public Affairs, Yakima County CEMP
- 10.10. [National Incident Management System \(NIMS\), 3rd Edition, October 2017](#)
- 10.11. Yakima Health District Emergency Response Plan
- 10.12. Yakima Health District’s Isolation and Quarantine Procedures Manual, September 2005

11. Terms and Definitions

- 11.1. WATrac – A web-based system that serves two important roles for healthcare organizations in Washington State: 1) daily tracking of facility status and bed availability and, 2) incident management and situational awareness during a disaster response. WATrac provides tools for organizations to track resources, locate available trauma care, notify partners of emergency events, communicate on-line in real-time, identify vulnerabilities, share documents, and export system data in reports.
- 11.2. WebEOC – Software designed to bring real-time crisis information management to local, state and federal EOCs. Secure access to details of operations in the local jurisdiction, neighboring jurisdictions, including regional, state and national data vital to the efficient management of any contingency (e.g., weather trends, satellite images, mapping information, and local, regional or national resource status).