



United States Department of

Health & Human Services

Office of the Assistant Secretary for Preparedness and Response



# Federal

# “Public Health and Medical”

# Disaster Response

**CDR John Gibbons**  
Regional Emergency Coordinator

*HHS/ASPR Region 8*

# Circular Discussion Ahead!



**Linear Thinkers Beware!**

# Different Scales of Disasters

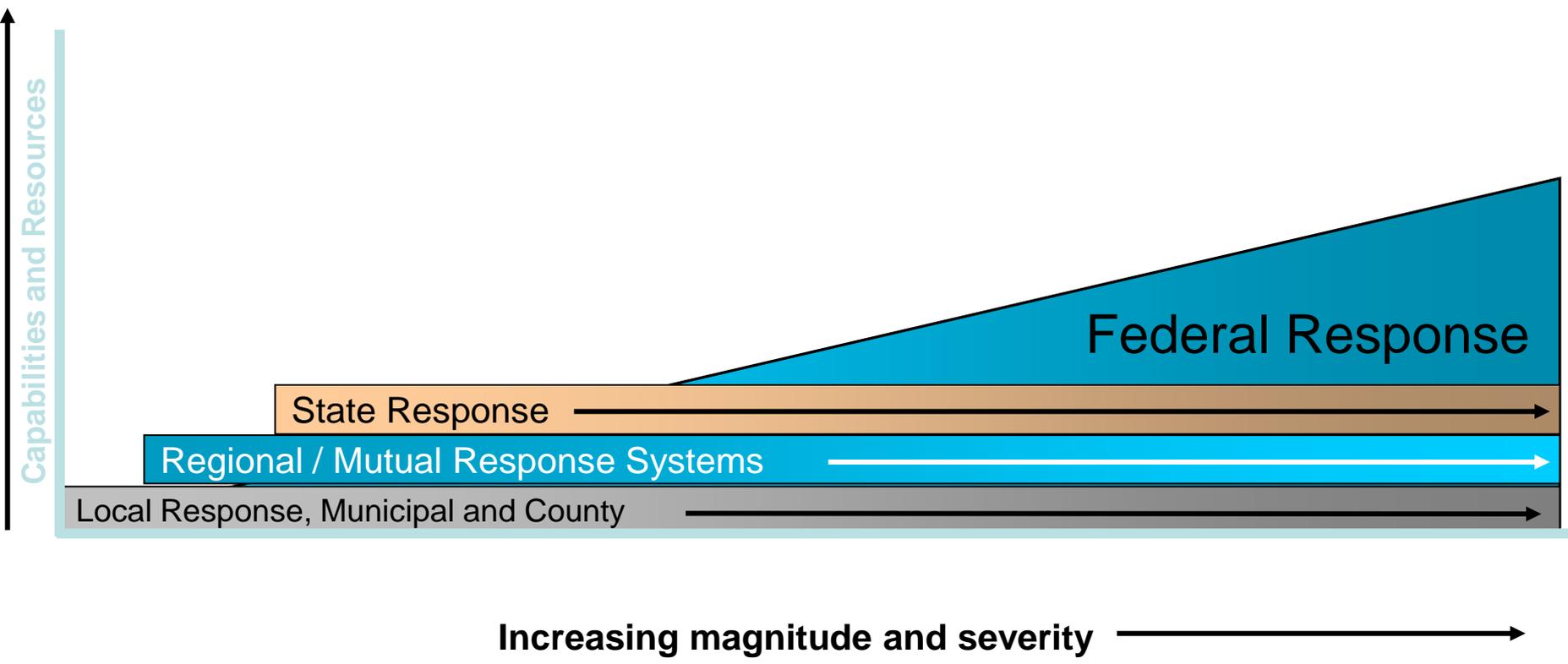


# Different Scales of Response

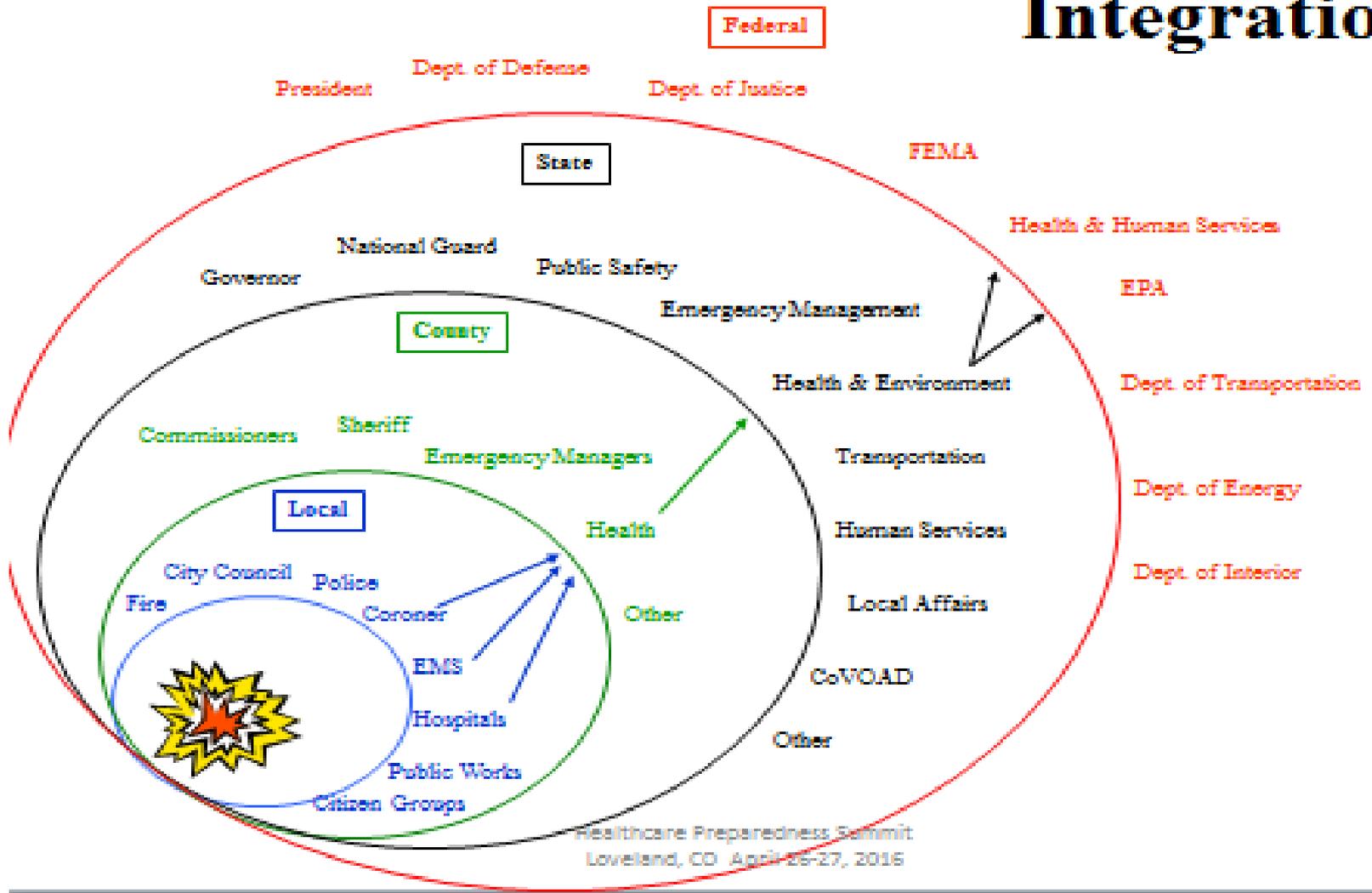


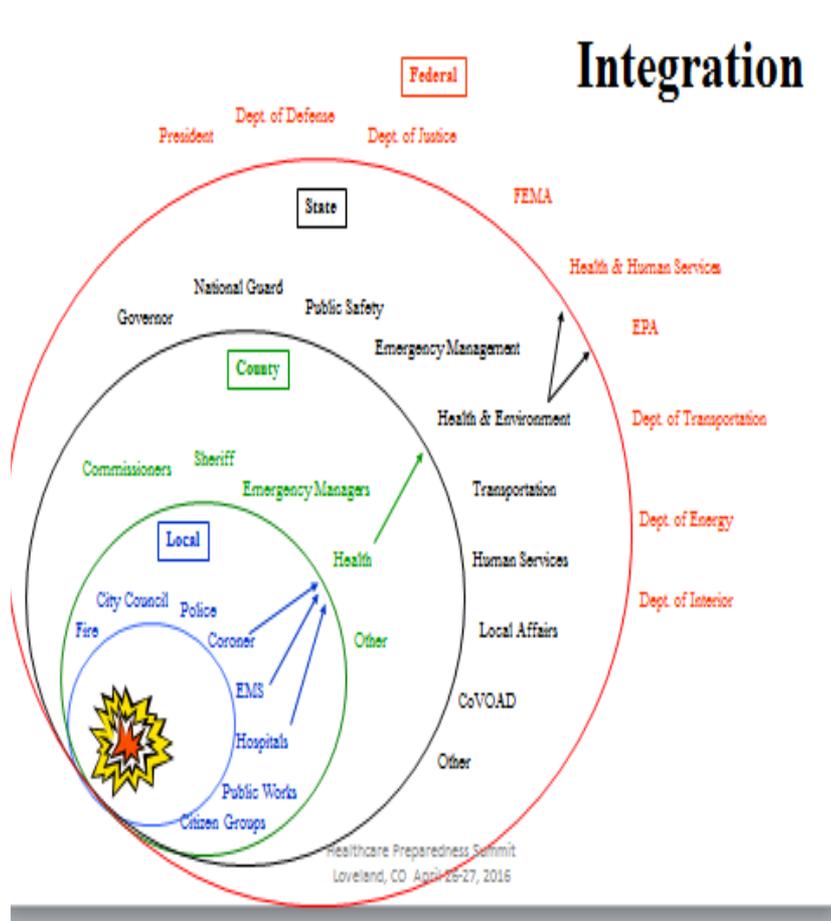


# All Disasters Are Local



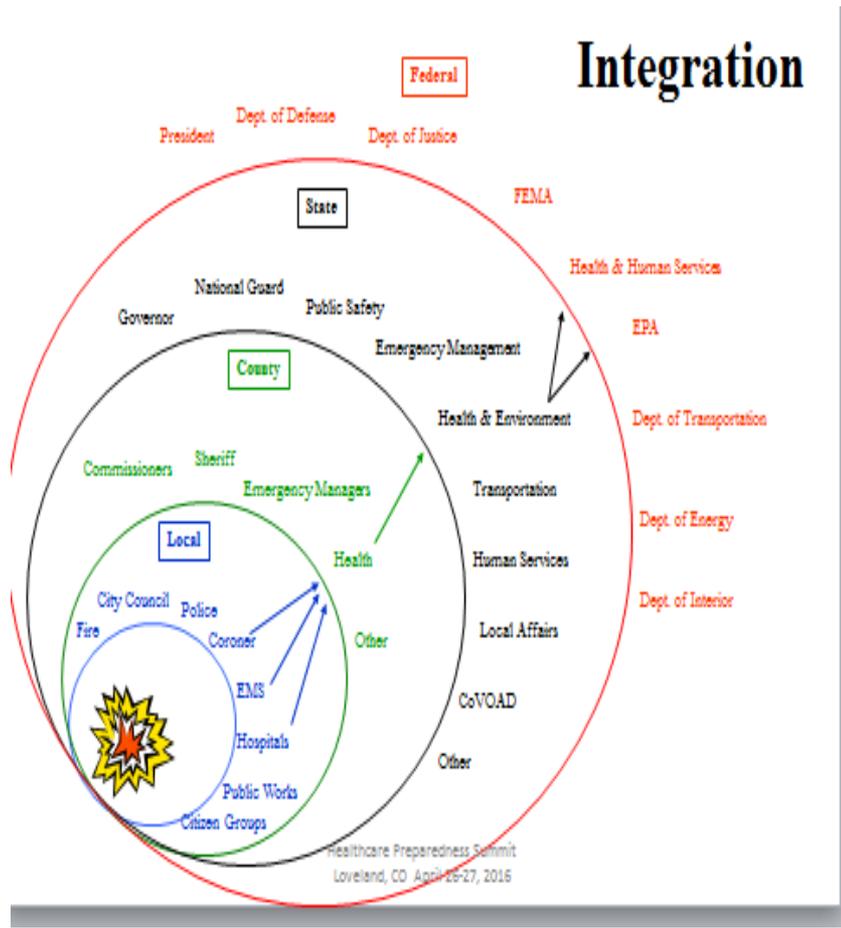
# Integration





- Administration for Children and Families (ACF)
- Administration for Community Living (ACL)
- Agency for Healthcare Research and Quality (AHRQ)
- Agency for Toxic Substances and Disease Registry (ATSDR)
- Centers for Disease Control and Prevention (CDC)
- Centers for Medicare and Medicaid (CMS)
- Food and Drug Administration (FDA)
- Health Resources and Services Administration (HRSA)
- Indian Health Service (IHS)
- National Institutes of Health (NIH)
- Substance Abuse and Mental Health Services Admin (SAMSHA)

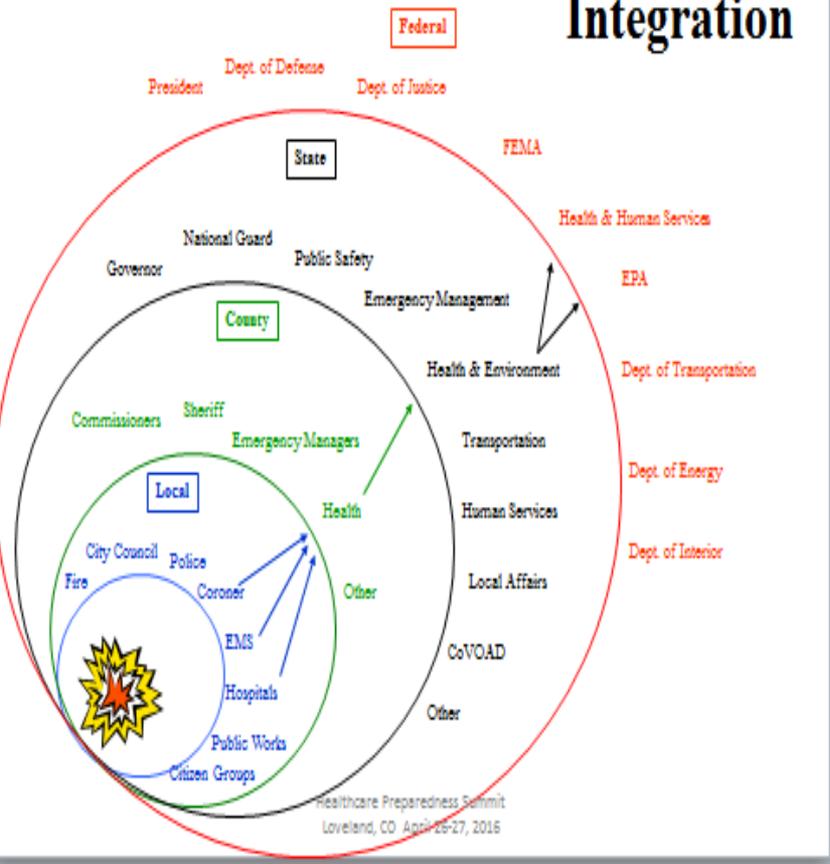
# Federal ESF-8 Partners



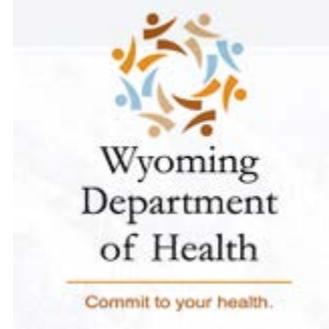
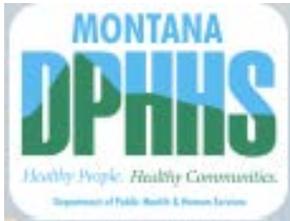
- Department of Agriculture
- Department of Transportation
- Department of Defense
- Department of Veterans Affairs
- Department of State
- Agency for International Development
- Department of Energy
- Environmental Protection Agency
- Department of Homeland Security / FEMA
- General Services Administration
- Department of Interior
- U.S. Postal Service
- Department of Justice
- American Red Cross
- Department of Labor

# State Partners

## Integration



Healthcare Preparedness Summit  
 Loveland, CO April 26-27, 2016



HHS/ASPR Region 8



**COLORADO**  
 Department of Public  
 Health & Environment





# Federal ESF-8





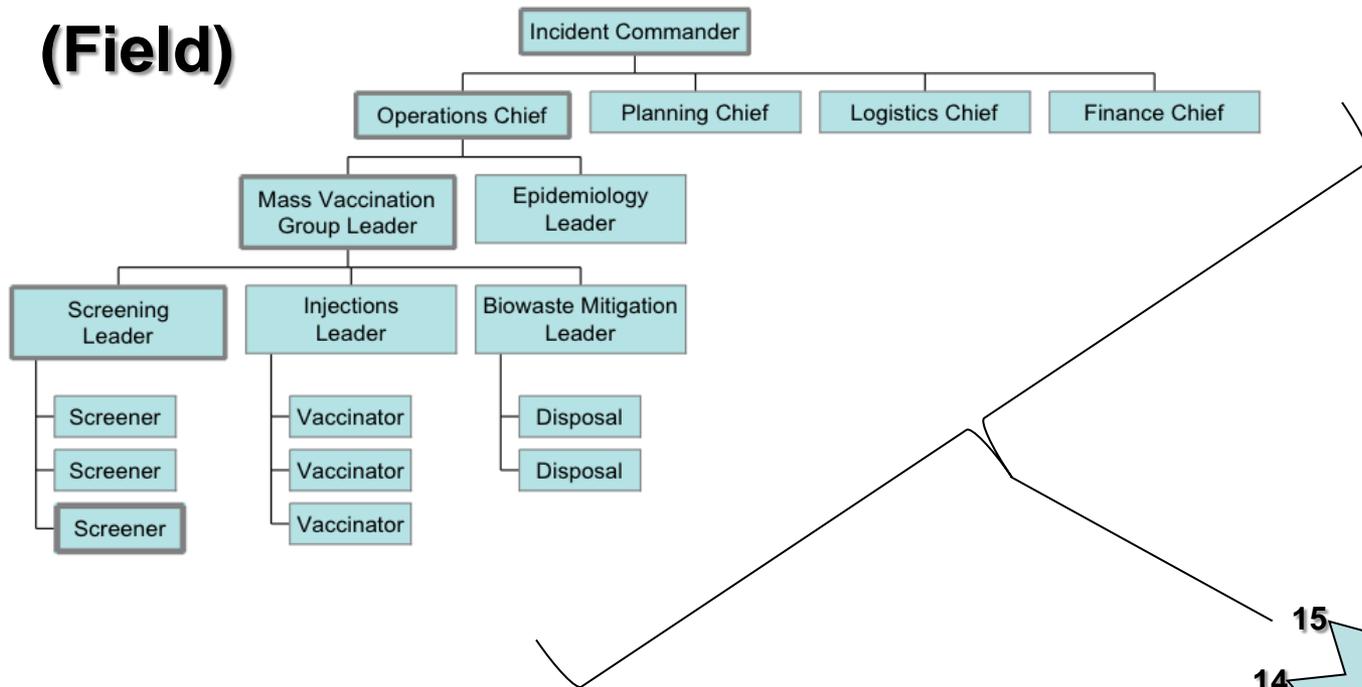
# Organizational Systems



- Incident Command System
  - A flexible structure to manage an incident
  - 1970s FIRESCOPE Program
  
- Emergency Support Functions
  - A coordinating structure for managing resources
  - Plan for Federal Response to a Catastrophic Earthquake
    - Region 9 developed and featured precursors to ESFs
  - Federal Response Plan (April 1992)
    - All Hazard Plan
    - Twelve ESFs
  - Hurricane Andrew (August 1992)

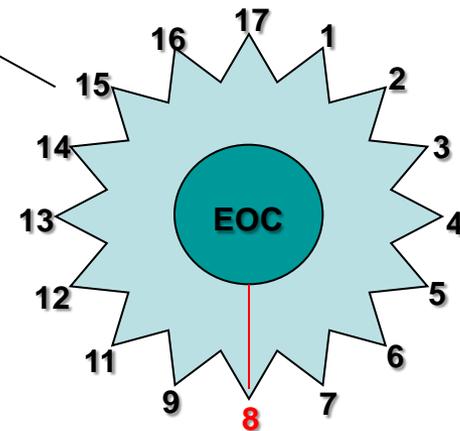
## “Operations”

(Field)



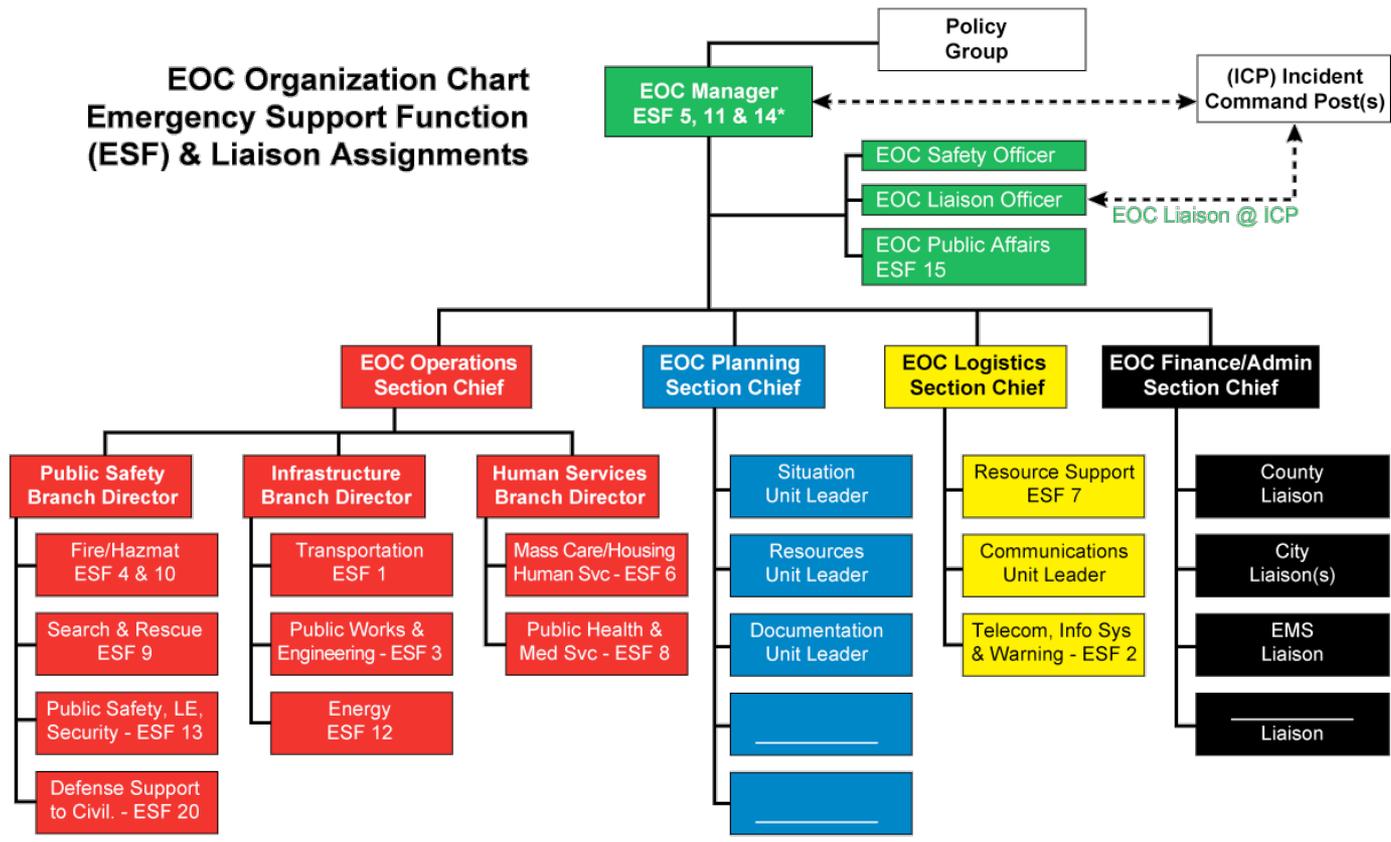
## “Support”

(EOC)



# Hybrid ICS/ESF in an EOC

**EOC Organization Chart  
Emergency Support Function  
(ESF) & Liaison Assignments**



\*ESF 5 - Emergency Management  
 ESF 11 - Agriculture & Natural Resources  
 ESF 14 - Long Term Community Recovery & Mitigation

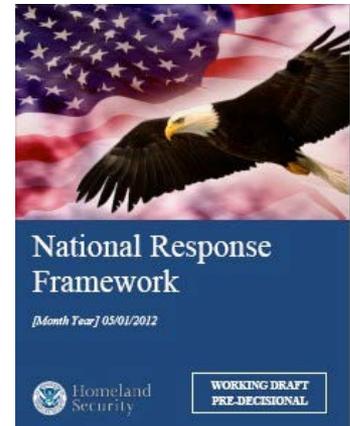
Skamania County, Washington



# Organizational Systems - Evolved



- National Preparedness Goal: “A secure and resilient nation with the capabilities required across the whole community to prevent, protect against, mitigate, respond to, and recover from the threats and hazards that pose the greatest risk.”
- National Planning Framework (March 2008)
  - Core Capabilities Focused
    - National Prevention Framework
    - National Protection Framework
    - National Mitigation Framework
    - **National Response Framework**
      - ESFs are Annexes to the Response Framework
    - National Disaster Recovery Framework





# Current Federal ESFs



- ESF1 Transportation
- ESF2 Communications
- ESF3 Public Works and Engineering
- ESF4 Firefighting
- ESF5 Emergency Management
- ESF6 Mass Care, Housing, and Human Services
- ESF7 Resources Support
- ESF8 Public Health and Medical Services**
- ESF9 Urban Search and Rescue
- ESF10 Oil and Hazardous Materials Response
- ESF11 Agriculture and Natural Resources
- ESF12 Energy
- [2004]-----
- ESF13 Public Safety and Security
- ESF14 Long-term Community Recovery and Mitigation
- ESF15 External Affairs



# Federal ESF-8 Tasks



- Assessment of public health/medical needs
- Public health surveillance
- Medical care personnel
- Medical equipment and supplies
- Patient movement
- Hospital care
- Outpatient services
- Victim decontamination
- Safety and security of human drugs, biologics, medical devices, veterinary drugs, etc.
- Blood products and services
- Food safety and security
- Agriculture feed safety and security
- Worker health and safety
- All hazard consultation and technical assistance and support
- Mental health and substance abuse care
- Public health and medical information
- Vector control
- Potable water/wastewater and solid waste disposal, and other environmental health issues
- Victim identification/mortuary services
- Veterinary services
- Medical materiel, personnel, and technical assistance



# Requesting Assistance / Support



## Requests for HHS/ESF8 assistance are coordinated through the FHO and RECs

### HHS Assistance

(No Presidential Declaration)

- Local → **State / Tribe** → HHS/ASPR (FHO)
- ASPR Request Form or formal letter
- Cost share TBD

### HHS/ESF8 Assistance

(Stafford Act/Presidential Declaration)

- Local → **State (SCO) / Tribe** → FEMA (FCO) → HHS/ESF8 (FHO)
- Resource Request Form (RRF) ... *old Action Request Form (ARF)*
- Cost share (75% Federal / 25% State)



# Requesting Assistance / Support



## Effective requests include the following:

- Capability (not asset)
- Location
- Hours of operation (12 hours / 24 hours)
- Duration of operation (days)
- Point of Contact

## Requesting capability allows HHS/ESF8 the ability to:

- Match appropriate asset
- Right size asset
- Flexibility in assigning assets (especially in scarce resource environment)



# Categories of Response



- Technical Assistance
- HHS Regulatory Waivers
  - Public Health Emergency Declaration (PHE)
    - Social Security Act Section “1135 Waivers”
    - Emergency Use Authorizations (EUA)
- Response Assets
  - Teams and personnel
  - Equipment and supplies



# Technical Assistance and Coordination



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- Department of Justice
- American Red Cross
- Department of Labor

**The nine most terrifying words in the English language?**



# Regulatory Waivers



## Social Security Act, Section 1135 Waivers

- Assists with medical surge activities
- Requirements:
  - HHS Secretary Public Health Emergency (PHE) Declaration and;
  - Presidential Disaster Declaration (Stafford Act)
- Able to waive:
  - Bed type and number
  - Professional licensure and certification
  - Emergency Medical Treatment and Labor Act (EMTALA)
  - Health Insurance Portability and Accountability Act (HIPAA)
- *April 8, 2011 - HHS Secretary Declares Public Health Emergency for North Dakota Flooding*
  - The public health emergency is declared under section 319 of the Public Health Service Act and, under section **1135** of the Social Security Act, the Secretary has authorized the waiver or modification certain Medicare, Medicaid and CHIP requirements. The state can submit waiver requests through Centers for Medicare and Medicaid Services (CMS) Regional Office.
  - The **1135 waiver** authority will permit CMS to temporarily relax certain operating procedures as needed so health care services can be delivered, such as allowing critical access hospitals to take more than the statutorily mandated limit of 25 patients and not count the expected longer lengths of stay for evacuated patients against the 96-hour average.



# Regulatory Waivers

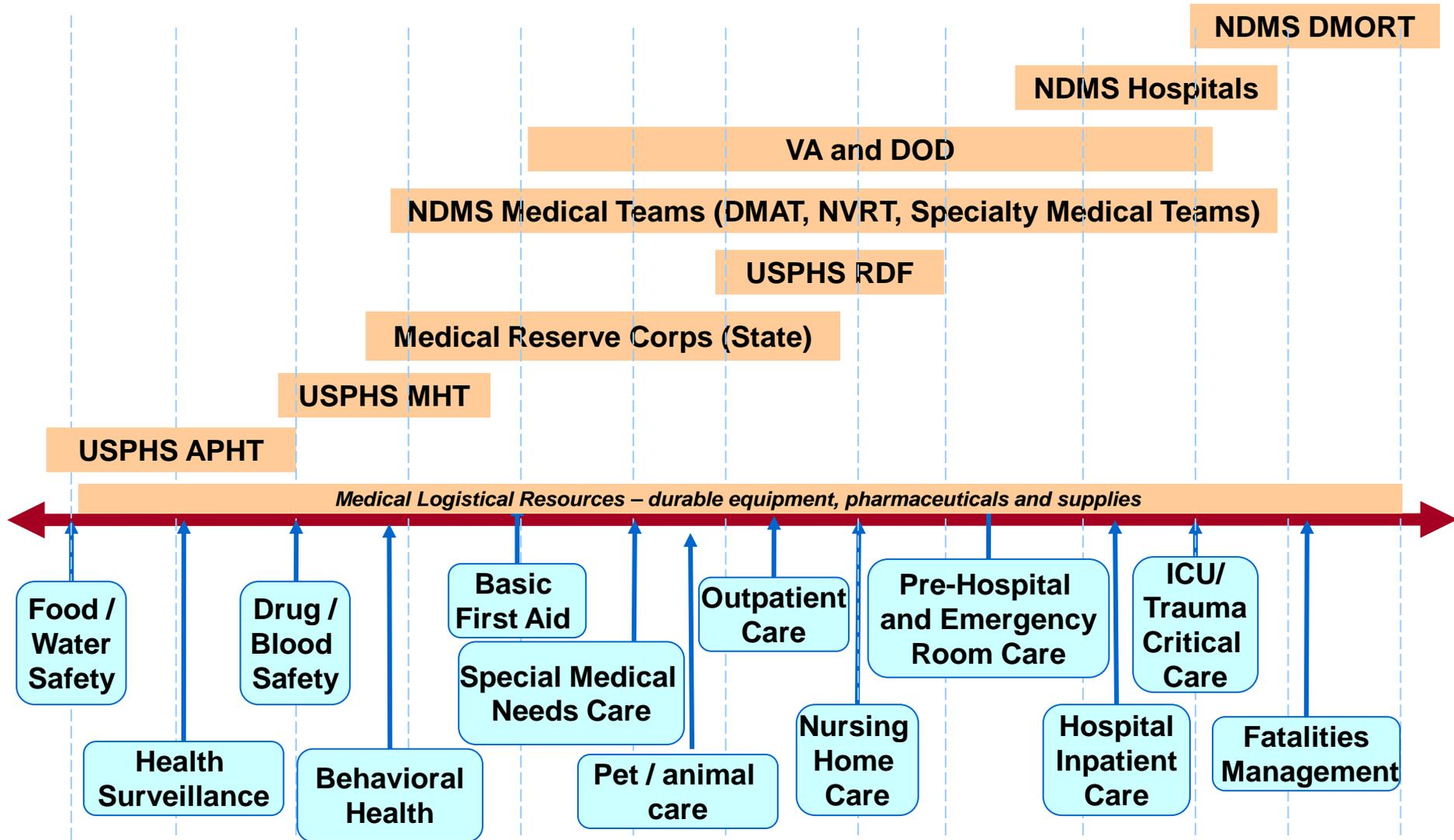


## Emergency Use Authorization (EUA) - 564

- Requirement:
  - HHS Secretary Public Health Emergency (PHE) Declaration
- Permits the FDA to authorize the use of an unapproved medical product or an unapproved use of an approved medical product
- *April 19, 2013 - Avian Influenza A (H7N9) Virus*
  - Determination of a Significant Potential for a Public Health Emergency and Declaration that Circumstances Exist Justifying an Authorization Pursuant to **Section 564** of the Federal Food, Drug, and Cosmetic Act, 21 U.S.C. § 360bbb-3(b)
  - As of this date, I hereby determine that there is a significant potential for a public health emergency that has a significant potential to affect national security or the health and security of United States citizens living abroad and that involves the avian influenza A (H7N9) virus.
  - On the basis of this determination, I also hereby declare that circumstances exist justifying the **authorization of emergency use** of in vitro diagnostics for detection of avian influenza A (H7N9) virus pursuant to section 564 of the Federal Food, Drug and Cosmetic (FD&C) Act



# Spectrum of Federal Medical Resources





# NDMS



*A public / private sector partnership*  
*HHS DHS DOD VA*

## National Disaster Medical System

### **A Nationwide Medical Response System to:**

- Supplement state and local medical resources during disasters or major emergencies
- Provide backup medical support to the military and VA medical care systems during an overseas conventional conflict



# NDMS



## 3 Major Components of NDMS

### Medical Response

**HHS Response Teams**

**DMAT, IMSuRT,  
NVRT, DMORT**

### Patient Movement

**DOD AE Evacuation**

**HHS Patient Return  
Contract**

### Definitive Care

**VA / DOD Federal  
Coordinating Centers**

**Public / Private  
Participating Hospitals**



# USPHS Teams



## US Public Health Service (USPHS) Commissioned Corps

**Health and medical professionals in a  
number of disciplines**



6500 active-duty uniformed officers

- (5) - Rapid Deployment Force Teams (RDF)
- (5) - Mental Health Teams (MHT)
- (5) - Applied Public Health Teams (APHT)
- (5) - Services Access Teams (SAT)
- (10) - Regional Incident Support Teams (RIST)
- (5) - National Incident Support Teams (NIST)



# Strategic National Stockpile (SNS)



- **Managed by CDC, deployment authorized by ASPR**
- **Repository of Medical Countermeasures (MCM)**
  - Antibiotics, chemical antidotes, antitoxins, vaccines, and antiviral drugs
  - Life-saving medical materiel
- **Unknown Threat → Push Package**
  - 50 ton cache of MCMs and medical supplies
  - 12 hours of the federal decision to deploy
- **Known Threat or Re-supply → Managed Inventory**
  - Prescribed/tailored MCMs and medical supplies
  - 24 to 36 hours of the federal decision to deploy



# Federal Medical Stations (FMS)



- **Managed by CDC, deployment authorized by ASPR**
- **Multi-purpose asset to provide low-acuity medical care in:**
  - Medical shelters
  - Alternate care facilities
  - Quarantine/isolation
- **Deployable configurations**
  - 50 beds (cots)
  - 250 beds (cots)
- **Staffing**
  - Federal, State, local (or a mix)
- ***Requires a building of opportunity and significant “Wrap Around” services***



## National EMS Contract

- **FEMA contracted, HHS managed**
- **Resource utilization**
  - Patient transport
  - Emergency medical services (EMS)
- **Assets available per zone**
  - **Ground Ambulances:** 300 (ALS & BLS)
  - **Air Ambulance:** 25 helicopter and/or fixed wing
  - **Para-transit Capability:** Transport 3,500 individuals
- **Medical Direction**
  - Provided by State or Local authorities. *If unavailable, a federal medical director can be designated*





# Prescription Assistance

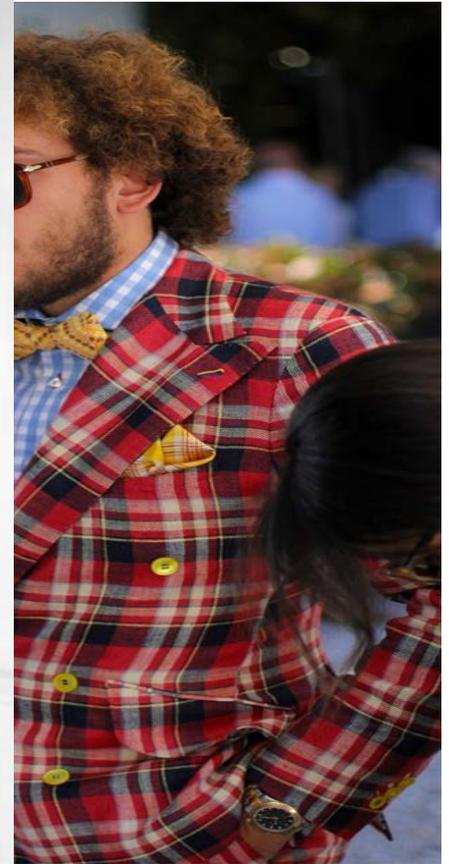


## Emergency Prescription Assistance Program (EPAP)

- **FEMA funded, HHS managed**
- **Provides disaster survivor with:**
  - 30 day supply of medication
  - Durable medical equipment (i.e. wheelchairs, crutches, etc.)
- **Provides pharmacies with:**
  - Web-based system for reimbursement
- **Disaster survivor must provide proof of:**
  - Residency (zip codes from impacted area)
  - Prescription

# Parting thoughts

Sometimes the whole **IS just NOT** more than the sum of its parts.



Sometimes it is...



# Questions?



## The HHS/ASPR Region 8 Team

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Regional Emergency Coordinator

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