

ANNEX H

HEALTH AND MEDICAL

I. PURPOSE.

This annex establishes effective, workable procedures which will provide emergency health and medical service to the people of Oklahoma County during and after a natural or manmade disaster.

II. SITUATION AND ASSUMPTIONS.

See Section II, Basic Plan.

III. CONCEPT OF OPERATIONS.

General.

A. Emergency medical and public health service will be an extension of normal duties. Health/medical care will be adjusted to the size and type of disaster.

B. Each medical facility's medical coordinator will maintain a list of victims handled through their facility and will coordinate with the County Medical/Health Coordinator located in the EOC concerning victim name, age, condition, patient location, and if next of kin have been notified.

B. One of the primary concerns of public health officials is disease control. This involves the detection and control of disease causing agents, maintaining a source of pure water, and continuation of waste water disposal under disaster conditions.

C. In mass casualty situations, funeral home directors can be extremely useful for counseling victims of a disaster and the personnel conducting the response and recovery operations along with members of the mental health and the ministerial communities.

IV. TASK ORGANIZATION AND RESPONSIBILITIES.

A. Organization.

1. The Oklahoma City Metro area emergency health and medical organizational structure will remain as it currently exists. Each medical organization will operate as part of the county wide MMRS (Metropolitan Medical Response System, rendering and receiving support and assistance in accordance with existing agreements. The MMRS Coordinator at EMSA (Emergency Medical Services Authority) will act to

coordinate the actions of medical personnel/facilities with each other and with other sources of medical aid.

2. Supporting Organizations.

- a. City/County Health Department.
- b. Area hospitals.
- c. Medical clinics.
- d. Medical, dental, veterinarian, nursing and medical technical personnel residing in the county.
- e. Pharmacies.
- f. Funeral homes.
- g. State agencies as required.
- h. Companies which own and service Portable Toilets.

B. Task Assignment and Responsibilities.

1. City/County Health Department is responsible for:

- a. Developing agreements and cooperation between:
 - (1) County medical society, nursing association and other professional groups.
 - (2) All hospitals, clinics, and other medical related facilities.
 - (3) Veterinary Medicine facilities for care of injured animals
 - (4) Animal Control facilities in all jurisdictions having such facilities for housing dislocated or lost, stray animals
- b. Planning and coordinating emergency medical services to include:
 - (1) Care of sick and injured.
 - (2) Sorting and evacuation of mass casualties.

- (3) Patient transfer between facilities and their transportation.
- (4) Responsible for providing medical, transportation, and other related support to disabled and elderly persons during emergencies.
- c. Plan and supervise health services to include:
 - (1) Inspection of food and water supplies.
 - (2) Insect and rodent control and other health measures to reduce the threat of disease.
 - (3) Immunization programs, when required.
 - (4) Environmental health services as needed.
- d. Assignment of doctors and nurses to larger shelters in coordination with the agency responsible for the shelters, usually the American Red Cross or Salvation Army.
- e. Coordinate with the State Health Department and Law Enforcement on the protection, movement, and distribution of critical medical supplies.
- f. Develop a system to assemble medical personnel and equipment needed in an emergency.

2. Each facility's Medical Coordinator is responsible for coordinating all medical and health service activities within their facility. These responsibilities include those listed in paragraph IV, 1 above. They will keep the appropriate State and County health officials informed of all actions taken to ensure complete coordination of medical relief efforts.

- a. They will also coordinate all support requirements, such as transportation or communication.
- b. They will maintain current personnel rosters, facility lists and material location needed in emergencies to meet medical needs.

V. DIRECTION AND CONTROL.

The County Medical/Health Director and appointed representatives coordinating with the MMRS are responsible for the direction and control

of all public health activities. Within each facility, the Health and Medical Coordinator will coordinate all public health activities and those of the private sector and keep the County EOC informed.

A. Public Health Emergency may be declared by the State Health Commissioner as outlined in O.S. Title 63 Chapter 80 Oklahoma Health Care Authority Act

VI. CONTINUITY OF GOVERNMENT.

A. Lines of Succession.

The order of succession will be in accordance with local Standing Operating Procedures (SOP's).

B. Indispensable Operating Records.

Each involved agency will be responsible for maintaining the appropriate records.

VII. ADMINISTRATION AND LOGISTICS.

A. Health Statistics.

1. Vital Statistics. The Health Department will continue to collect vital statistics as under normal operating procedures.

2. Disease Statistics. Data related to disease out-break will be collected and forwarded to appropriate state and federal officials.

B. Testing and Inspections.

All testing of materials or substances will be accomplished under normal procedures used by the Health Department or the Department of Environmental Quality. Inspections will be conducted in normal fashion but with increased frequency.

VIII. PLAN DEVELOPMENT AND MAINTENANCE.

The City/County Health Department will coordinate with the Emergency Management Director, medical personnel and other agencies specified in this annex for this plan's development and maintenance.

IX. AUTHORITIES AND REFERENCES.

A. Authorities

O.S. Title 63 Chapter 80 Oklahoma Health Care Authority Act
Chapter 62 University Hospitals Authority Act
Chapter 1 Public Health Code - Article 25 Oklahoma
Emergency Medical Services

B. References.

1. FEMA SLG 100, Guide for Increasing Local Government Civil Defense Readiness During Periods of International Crisis.
2. FEMA, CPG 1-6 Disaster Operations - A Handbook for Local Governments.

X. IMPLEMENTATION.

This annex will be implemented upon occurrence of a local disaster at which time a declaration of emergency may be made by county authorities.