

Annex 8 – Public Health and Medical Services

- Primary Agency: Illinois Department of Public Health (IDPH)
- Support Agencies: American Red Cross (Red Cross)
Illinois Department of Agriculture (IDOA)
Illinois Department of Children and Family Services (DCFS)
Illinois Department of Corrections (IDOC)
Illinois Department of Financial and Professional Regulation (IDFPR)
Illinois Department of Healthcare and Family Services (HFS)
Illinois Department of Human Services (IDHS)
Illinois Department of Transportation (IDOT)
Illinois Department of Veterans' Affairs (IDVA)
Illinois Department on Aging (IDoA)
Illinois Emergency Management Agency (IEMA)
Illinois Environmental Protection Agency (IEPA)
Illinois National Guard (ILNG)
Illinois State Police (ISP)
- Other Organizations: Illinois Medical Emergency Response Team (IMERT)
Illinois Poison Control
Mutual Aid Box Alarm System (MABAS)

I. Introduction

A. Purpose

1. To provide strategic and operational guidance for coordination of state support to public health and medical services throughout response and short, intermediate and long-term recovery.

B. Scope

1. For the purposes of this annex, "public health emergency" is defined as an occurrence or imminent threat of an illness or health condition that:
 - a) is believed to be caused by any of the following:
 - 1) bioterrorism;
 - 2) the appearance of a novel or previously controlled or eradicated infectious agent or biological toxin;
 - 3) a natural disaster;
 - 4) a chemical attack or accidental release; or
 - 5) a nuclear attack or accident; and

- b) poses a high probability of any of the following harms:
 - 1) a large number of deaths in the affected population;
 - 2) a large number of serious or long-term disabilities in the affected population; or
 - 3) widespread exposure to an infectious or toxic agent that poses a significant risk of substantial future harm to a large number of people in the affected population.
- 2. For the purposes of this annex, the term local health department or district (herein after referred to as “local health department”) refers to the local governmental agency that administers and ensures health related programs and services within a particular jurisdiction.
- 3. IDPH retains overall primary authority and responsibility to determine public health related risks and public health response measures throughout response and short, intermediate and long-term recovery.
- 4. IEMA retains overall command, coordination and management of state disaster response and recovery.
- 5. State supported operations are scalable and modular based on the scope and magnitude of event and ability of an Authority Having Jurisdiction (AHJ) to provide for life-safety and life-essential services.
- 6. This annex is applicable to all local, state and federal governments, voluntary and private public health care agencies and coordinating elements having a role or responsibility in state public health and medical operations.
- 7. This annex does not address:
 - a) Fatality management, found in IEOP Annex 26, Fatality Management;
 - b) IDPH plans for specific illnesses including, but not limited to, Ebola, Zika, etc.;
 - c) Novel influenza response, found in Illinois Pandemic Influenza Preparedness and Response Plan;
 - d) Implementation of medical counter measures (MCM), found in State of Illinois Strategic National Stockpile Plan; and
 - e) Radiological hazardous materials operations, found in IEOP Annex 24, Radiological Hazardous Materials Management.

C. Policy

1. Implementation of this annex will not supersede federal laws, rules and regulations.
2. To the extent possible, implementation of prevention, protection, response and recovery processes will be consistent with federal and industry guidance.
3. Procedures for utilization, control and use of public health and medical resources will incorporate and consider operational priorities that include, but are not limited to, the protection of life, public health and safety, property protection, environmental protection, restoration of essential utilities, restoration of essential program functions and coordination as appropriate.
4. At the direction of the governor or designee, state agencies without a direct response role may be tasked with providing agency personnel in support of public health and medical operations.
5. State employees and resources may be reassigned in accordance with the IEMA Act.
6. State agency personnel will be trained to the assigned mission to the extent possible and will be made aware of potential risks involved.
7. Upon notification of the potential need for public health and medical operations, the State Emergency Operations Center (SEOC) and IDPH will consult public health and medical subject matter experts on requirements and resources.
8. The state will authorize proactive deployment of public health and medical liaisons from state agencies and recognized mobile support teams (MST) appropriate to the event to designated state field locations and areas of operation (AO).
9. The governor or designee will authorize and direct the use of state resources to provide support and assistance to public health and medical efforts, including those of the private sector, after consideration of both priority of need and cost.
10. Implementation of this annex will not supersede existing contractual or other legal obligations between the state of Illinois and the private sector.
11. IDPH has authority in matters of isolation and quarantine and may declare and enforce quarantine and isolation when none exists and modify or relax when it has been instituted. This authority may be delegated to local health departments.

D. Situation Overview

1. An incident has occurred or has the potential to occur resulting in severe illness or injuries, fatalities, disruption of normal life systems

and possible loss of critical facilities necessary to sustain public health and medical networks.

2. Local governmental and private sector public health or medical capabilities are insufficient, creating potential life, health and safety consequences.

E. Assumptions

1. A trained local workforce and volunteers are available.
2. Local governments have primary responsibility to provide emergency medical and public health services.
3. State agencies will provide or augment emergency medical and health services exceeding capabilities of local governments.
4. Federal agencies and departments will support health and medical operations as requested by the state of Illinois.
5. Secondary and cascading events will increase complexity and magnitude of public health impacts.
6. Local health departments will notify whole community partners and coordinate initial incident response.
7. Local and departmental emergency operations centers (EOC) will be activated to coordinate response and recovery actions.

II. Concept of Operations

A. General

1. The regional hospital coordinating center (RHCC) is the lead hospital for coordination of public health and medical operations for hospitals within its region.
2. The RHCC, in consultation with IDPH, determines the prioritization of medical supplies and equipment allocation for the public health and health care systems in its region.
3. Non-medical requests for resources will be coordinated through the local EOC.
4. IDPH will provide primary coordination for the state's public health and medical operations from the SEOC and support the SEOC as necessary through activation of the IDPH Public Health Emergency Operations Center (PHEOC).

B. Notification, Alert and Warning (NAW)

1. SEOC notification, alert and warning of SEOC liaisons will be handled in accordance with IEOP Base Plan, Appendix X-1, Notification, Alert and Warning.
2. Primary and support agencies are responsible for internal and support partner notification.
3. IDPH is responsible for notification, alert and warning of public health and medical partners in accordance with Illinois Department of Public Health Emergency Support Function 8 Plan.

C. Activation

1. The SEOC will provide state support through the activation of identified liaisons in accordance with SEOC Activation Level Standard Operating Procedure (SOP).
2. SEOC Activation Level SOP will be used to determine staffing levels necessary for public health and medical services coordination.
3. IDPH is responsible for determining the need for public health and medical services resource notification, activation, deployment and coordination in accordance with IDPH Emergency Support Function (ESF) 8 Plan.
4. IDPH may activate the PHEOC to provide support, coordination and intelligence and information sharing with the SEOC, public health and medical partners, stakeholders and emergency personnel in accordance with IDPH ESF 8 Plan.

D. Communications

1. Communications throughout response and recovery will be conducted in accordance with standard operating procedures and managed using established procedures, processes and policy outlined in IEOP Annex 3, Communications.
2. Communications will be conducted in a NIMS-compliant manner utilizing clear-text and frequencies coordinated with the SEOC.
3. IDPH is responsible for communications with public health and medical partners in accordance with IDPH ESF 8 Plan.

E. Resource Management and Logistics

1. Resource management and logistics will be carried out in accordance with IEOP Annex 9, Resource Management.
2. Resource management includes mutual aid agreements and assistance agreements, the use of special federal and state teams, and resource mobilization protocols.

F. Reporting Requirements

1. SEOC information, intelligence and situation reporting will be conducted in accordance with the SEOC Situation and Rapid Needs Assessment Standard Operating Guideline.
2. Mandated reporters are required to provide notification to IDPH on specific reportable diseases in accordance with laws, rules, regulations and policy.
3. The IDPH PHEOC will coordinate with SEOC through the SEOC IDPH liaison officer (LNO).

G. Implementation Requirements

1. Coordination and sustainment requirements of public health and medical must be fully addressed prior to implementation of operations.
2. Local AHJs that have signed mutual aid assistance pacts through the Illinois Public Health Mutual Aid System (IPHMAS) shall request assistance or resources from another member entity prior to requesting aid and assistance from the state.

H. Organization

1. Direction and Control
 - a) IDPH and IEMA will consult on and coordinate state response and recovery measures to a public health emergency.
 - b) State agencies and external organizations retain operational control of resources.
 - c) The SEOC is the single point of coordination for state support of response and short, intermediate and long-term recovery operations.
 - d) The SEOC manager, in coordination with the SEOC IDPH LNO or designees, may establish an Element Specific Support Function (ESSF) for public health and medical operations.
2. Coordinating Elements
 - a) Upon activation of the IDPH PHEOC, the PHEOC incident commander and the SEOC manager will coordinate through the SEOC IDPH LNO to ensure overall situational awareness and coordination.
 - b) State-deployed MST may be assigned to support or coordinate local or state strategic operations.

- c) State Unified Area Command (SUAC) or State Area Command (SAC) elements may be deployed by the SEOC to coordinate information and resource requirements for operations.
- d) One or more ESSFs may be implemented by the SEOC for specific strategic action planning for public health and medical operations.
 - 1) Strategic and operational guidance on ESSF operations can be found in IEOP Base Plan A-4, Element Specific Support Function Coordination and Management.

3. Federal Coordination

- e) Direct coordination with federal agencies will occur through appropriate and designated agencies.
- f) IDPH may coordinate with Department of Health and Human Services, IDHS and IDVA to activate The National Disaster Medical System (NDMS).

III. Roles and Responsibilities

A. Illinois Department of Public Health (IDPH)

- 1. Coordinate communications between the response effort and the public health and medical communities.
- 2. Provide technical assistance in assessing and evaluating threats to public health, public welfare and the environment.
- 3. Coordinate the activities of:
 - a) health care facilities;
 - b) local health departments;
 - c) emergency medical services;
 - d) medical mobile support teams;
 - e) other requested medical resources.
- 4. Coordinate implementation of the State of Illinois Strategic National Stockpile (SNS) Plan.
- 5. Assist with the procurement of potable water, ice and portable toilets.
- 6. Advise the public on the treatment and processes for emergency hauling, handling or disinfection of drinking water.
- 7. Provide information to the public on health and safety issues.

8. Provide confirmatory laboratory testing for Bio-Watch program and technical assistance as appropriate.
9. Coordinate public information and rumor control with internal and external partners.
10. Perform epidemiological studies and maintain surveillance and records on reportable diseases.
11. Provide technical assistance and coordination for:
 - a) planning and implementing the evacuation of health care facilities,
 - b) assuring safe and healthy living conditions at mass care facilities,
 - c) assisting with inspections and investigations of structural pest and vector control,
 - d) assisting with inspections of fixed and mobile food establishments, and
 - e) ensuring safety of food and dairy products, non-community public water supply and private water wells.
12. Provide clinical and environmental laboratory testing capabilities.
13. Assist with determining proper alternate medical care facilities for persons whose placement in mass care facilities would not be medically appropriate.
14. Coordinate state supported fatality management.
15. Coordinate investigation of disease outbreaks in multi-jurisdictional and multi-disciplinary settings.
16. Coordinate expanded scope of practice for medical licenses of EMS professionals.
17. Coordinate local to local mutual aid requests for emergency medical services.
18. Coordinate activation of mutual aid agreements for disaster medical service providers.
 - a) For the purpose of supporting medical needs, activation of Illinois Helps volunteers and Medical Reserve Corps may be requested.

- b) For the purposes of specialized consultation support and supporting poison-specific and general public health call centers, the Illinois Poison Center may be utilized.
 - c) For the purposes of medical support, Illinois Medical Emergency Response Team (IMERT) may be activated jointly by IDPH and IEMA and placed under the direct coordination of IDPH, based on resource availability.
- B. American Red Cross (Red Cross)
- 1. Provide basic health support services at Red Cross managed facilities.
 - 2. Provide emotional counseling and psychological first aid services to the affected population and disaster workers.
 - 3. Establish and maintain public information, messaging and education for the affected population.
 - 4. Provide blood and blood products from Red Cross blood centers as needed and requested.
 - 5. Coordinate the provision of blood and blood products through the American Association of Blood Banks Disaster Task Force as requested.
- C. Illinois Department of Agriculture (IDOA)
- 1. Assist IEMA in coordinating with USDA – Veterinary Services for the deployment of needed assets from the National Veterinary Stockpile.
 - 2. Following SEOC activation, the IDOA will inform its agricultural partners of the incident and will seek situational information to be reported back through the SEOC.
- D. Illinois Department of Children and Family Services (DCFS)
- 1. Provide assistance to hospitals, hospital or regionally based alternate care sites, hospital or regionally based alternate treatment site and state temporary medical treatment station in:
 - d) securing placement for non-injured and ill children who have been unable to be reunited with their families;
 - e) providing consent for treatment of youth in care in need of medical care;
 - f) providing consent for patient transfer during the decompression process for youth in care; and
 - g) verifying guardianship of unaccompanied minors who are in the DCFS database.

2. Report any missing children for whom the department is legally responsible to the local law enforcement agency, the child's case manager and the Child Intake and Recovery Unit.
 3. Coordinate and support communications between IDPH and day care and child care centers.
- E. Illinois Department of Corrections (IDOC)
1. Provide personnel, equipment, security and transportation support to assist with the distribution of SNS, to include the following:
 - a) Transportation and security for distribution of the Illinois Pharmaceutical Stockpile.
 - b) Management of eight regional distribution centers.
 2. Provide secondary support personnel and equipment to assist with the distribution of SNS as necessary, to include the following:
 - a) Security at receiving, staging and shipping (RSS) facilities.
 - b) Warehouse operators at the RSS facilities.
 - c) Storage and transportation for emergency medications and medical supplies.
- F. Illinois Department of Financial and Professional Regulation (DFPR)
1. Will take the following actions upon gubernatorial disaster proclamation and in coordination with IEMA and IDPH for any persons working under the direction of IEMA and IDPH:
 - a) Suspend requirements for permanent or temporary licensure of persons who are licensed in another state.
 - b) Modify the scope of practice restrictions under any licensing act administered by IDFP, to include restrictions under the Pharmacy Practice Act.
- G. Illinois Department of Healthcare and Family Services (DHFS)
1. Coordinate the provision of durable medical equipment from network providers.
 2. Provide lists of individuals in the Medicaid program who have been issued durable medical equipment.
- H. Illinois Department of Human Services (IDHS)
1. Coordinate evacuation of Substance Use Disorder (SUD) treatment facilities in the impacted areas, to include the following:

- a) arranging for dispensing of methadone to clients in the disaster impacted areas when the normal dispensing facility has been destroyed or relocated due to the disaster;
 - b) coordinating the relocation of any impacted treatment facilities and any treatment clients who cannot be relocated to general population community shelters;
 - c) arranging for staff from its network of providers to conduct SUD assessments of disaster victims as needed and provide referrals to treatment services as indicated;
 - d) arranging for staff from its network of SUD prevention programs to provide SUD prevention services to disaster victims residing in shelters, camps, mobile home parks, and other temporary locations;
 - e) coordinating counseling to both disaster victims and emergency workers through its local network of treatment providers; and
 - f) coordinating access to SUD medications as needed.
2. Assist with evacuation of mental and behavioral health treatment facilities in the impacted areas.
 3. Assist with relocation or shelter-in-place of any impacted mental or behavioral health treatment facility.
 4. Arrange for staff from network providers to conduct mental health assessments of affected individuals and provide referrals to treatment services, as indicated.
 5. Provide functional needs support services (FNSS) to affected populations.
 6. Provide support with counseling to both affected populations and emergency workers.
 7. Assist with emergency pharmaceutical distribution and quality assurance.
 8. Provide personnel and equipment support to assist with the distribution of SNS, to include the repackaging of bulk pharmaceuticals.
 9. Provide secondary support personnel and equipment to assist with the distribution of SNS as necessary, to include inventory management and oversight of emergency medical supplies.
- I. Illinois Department of Transportation (IDOT)

1. Provide or coordinate transportation of key health care and emergency workers, medical equipment, medications and medical supplies.
 2. Coordinate specialized transportation of blood, blood products and tissue in support of emergency operations.
 3. Provide personnel and transportation support to assist with SNS distribution.
- J. Illinois Department of Veterans Affairs (IDVA)
1. Assist in the coordination of assistance to veterans.
 2. Provide information on status and needs of veterans and veteran support agencies in the affected area.
- K. Illinois Department on Aging (IDoA)
1. Coordinate and support implementation of state and federal disaster assistance programs to meet the needs of elderly populations.
 2. Assist with providing FNSS to adult populations.
 3. Coordinate and manage contact with elderly populations and their caregivers in the community.
 4. Provide information on status and needs of elderly populations and their caregivers in the community.
- L. Illinois Emergency Management Agency (IEMA)
1. Coordinate collection, receipt, compilation and development of situational reports on damage impacts to services, facilities, sites and programs at the federal, state and local levels.
 2. Collect, analyze, de-conflict and disseminate damage assessment information.
 3. Collaborate with IDPH on requests for medical resources.
 4. Activate medical mobile support teams in collaboration with IDPH.
 5. Provide laboratory services to ensure the safety of food, dairy products and drinking water supplies where radiological contamination may have occurred.
 6. Request waivers of professional medical licensure from IDPH, IDFPR or other agencies as appropriate.
- M. Illinois Environmental Protection Agency (IEPA)

1. Provide technical advice and sample analysis for public water supply systems.
 2. Provide air monitoring and wipe sampling for selected hazardous materials inside buildings or structures when monitoring resources are not committed to other hazardous materials missions.
 3. Provide toxicological expertise and risk communication expertise in support of health risk communication about chemicals or other health risks.
 4. Provide technical advice to medical care providers on chemical decontamination of emergency responders or other exposed persons and the disposal of contaminated wastes.
 5. Process expedited permits for waste disposal and open burning of debris in aid of vector control.
 6. Provide technical expertise on sanitation control for emergency bulk drinking water distribution.
 7. Provide sample collection for Bio-Watch program and coordinate response requirements as appropriate.
 8. Provide technical expertise on disposal of bio-medical waste.
- N. Illinois National Guard (ILNG)
1. Provide air monitoring for contaminants, as requested.
 2. Provide personnel, equipment, security and transportation support to assist with the distribution of SNS, to include warehouse operations.
 3. Provide secondary support personnel and equipment to assist with the distribution of SNS as necessary, to include the following:
 - a) Security at RSS facilities.
 - b) Transportation and security for distribution of the Illinois Pharmaceutical Stockpile
 4. Provide basic medical triage and transport.
- O. Illinois State Police (ISP)
1. Provide vehicle escorts to expedite transportation of medical teams to and from disaster site and provide vehicle escorts for emergency medical assets.
 2. Provide assistance to local coroners in the identification of fatalities.

3. Provide security, traffic and crowd control and other functions of local and state law enforcement.
4. Provide personnel, equipment, security and transportation support to assist with the distribution of SNS, to include the following:
 - a) Transportation and security for distribution of the Illinois Pharmaceutical Stockpile.
 - b) Security at RSS facilities.
5. Provide secondary support personnel and equipment to assist with the distribution of SNS as necessary, to include the following:
 - a) Warehouse operators at the RSS facilities.
 - b) Storage and transportation for emergency medications and medical supplies.

IV. Authorities and References

A. Authorities

1. Illinois Compiled Statutes, 210 ILCS 45, Nursing Home Care Act, as amended.
2. Illinois Compiled Statutes, 210 ILCS 50, Emergency Medical Services (EMS) Systems Act, as amended.
3. Illinois Compiled Statutes, 210 ILCS 85, Hospital Licensing Act, as amended.
4. Illinois Compiled Statutes, 225 ILCS 225, Private Sewage Disposal Licensing Act, as amended.
5. Illinois Compiled Statutes, 225 ILCS 235, Structural Pest Control Act, as amended.
6. Illinois Compiled Statutes, 410 ILCS 95, Vector Control Act, as amended.
7. Illinois Compiled Statutes, 410 ILCS 625, Food Handling Regulation Enforcement Act, as amended.
8. Illinois Compiled Statutes, 410 ILCS 635, Grade A Pasteurized Milk and Milk Products Act, as amended.
9. Illinois Compiled Statutes, 410 ILCS 650, Sanitary Food Preparation Act, as amended.
10. Illinois Compiled Statutes, 410 ILCS 655, Safe Bottled Water Act, as amended.

11. Illinois Compiled Statutes, 415 ILCS 30, Illinois Water Well Construction Code, as amended.
12. Illinois Compiled Statutes, 415 ILCS 55, Illinois Groundwater Protection Act, as amended.
13. Illinois Compiled Statutes, 415 ILCS 75, Environmental Toxicology Act, as amended.
14. Illinois Administrative Code, 77 Ill. Admin. Code 750, Food Service Sanitation Code, as amended.
15. Illinois Administrative Code, 77 Ill. Admin. Code 925, Illinois Water Well Pump Installation Code, as amended.
16. United States Code, 36 U.S.C. §§300101-300111, re-codified 2007, Congressional Charter of the American National Red Cross.

B. References

1. IDPH Emergency Support Function (ESF) 8 Plan, as amended
2. The Illinois Plan for Radiological Accidents (IPRA), Vol. 1, Concept of Operations
3. Illinois Strategic National Stockpile Plan, as amended
4. IDPH SOPs, as amended
5. IDPH ChemPack Plan, as amended
6. State of Illinois Bio-Watch Program
7. Department of Professional Regulation Law (20 ILCS 2105/2105-400).