Mississippi Emergency Support Function #8- Public Health and Medical Services Annex

**ESF #8 Coordinator**

Mississippi State Department of Health

**Primary Agencies**

Mississippi State Department of Health
University of Mississippi Medical Center

**Support Agencies**

Mississippi Board of Animal Health
Mississippi Board of Pharmacy
Mississippi Board of Trustees of State Institutions of Higher Learning
Mississippi Department of Agriculture and Commerce - Bureau of Plant Industry, Agricultural Theft and Consumer Protection
Mississippi Department of Education
Mississippi Department of Environmental Quality
Mississippi Department of Human Services
Mississippi Department of Mental Health
Mississippi Department of Public Safety
Mississippi Department of Rehabilitation Services
Mississippi Department of Transportation
Mississippi Division of Medicaid
Mississippi Emergency Management Agency
Mississippi National Guard

**Private Sector Support Agencies**

Network 8 Incorporated
The Salvation Army

**Federal ESF 8 Coordinator**

U.S. Department of Health and Human Services

**Federal ESF 8 Primary Agency**

U.S. Department of Health and Human Services

**Federal ESF 8 Support Agencies**

U.S. Department of Veterans Affairs
DoD – Keesler Medical Center AFB

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**Introduction**

**Purpose**

The purpose of Emergency Support Function 8 is to provide state assistance and coordinate local resources in response to public health and disaster medical care needs. State agencies and health organizations will provide and coordinate services and resources including, but not limited to, emergency medical treatment and prevention, inspection of food, potable water, and on-site wastewater disposal, emergency mortuary service and mass fatality management, patient rehabilitation, vector and disease control, disease surveillance, and the restoration of health and medical infrastructure.

**Scope**

This section of the plan is to be used to respond to incidents where threatened or actual damage or needs exceeds local response capabilities. It is also used when Mississippi’s capabilities are exceeded, and federal government response is requested.

ESF #8-1
Rev. 01/2020
Relationship to the Whole Community

This section describes how Emergency Support Function (ESF) 8 (Public Health and Medical Services) relates to other elements of the public.

Local, State, and Tribal Governments

- While local, and tribal officials retain primary responsibility for meeting public health and medical needs, ESF 8 can deploy public health and medical assets to assist as needed.

- In a major public health or medical emergency, demand for public health and medical resources may exceed local, state, tribal capability. State, and tribal jurisdictions may request assistance through the Emergency Management Assistance Compact or may request Federal assistance, which may be executed with or without a Stafford Act declaration. When possible, a recognized spokesperson from the affected public health and medical community (local, state, and tribal) delivers relevant health messages.

Private Sector/Nongovernmental Organizations

- Most public health and medical activities and services are provided by the private healthcare sector. ESF 8 augments the support provided by the private healthcare sector when requested by local, and tribal governments.

- ESF 8 organizations works closely with the private sector (e.g., regulated industries, academic institutions, trade organizations, and advocacy groups), volunteer organizations (e.g., faith-based and neighborhood partnerships), and local and state agencies to coordinate ESF 8 response resources. ESF 8 organizations recognize that leveraging resources from these organizations and individuals with shared interests allows ESF 8 to accomplish its mission in ways that are the least burdensome and most beneficial to the American public and that enhance the resilience of healthcare systems to deliver coordinated and effective care during public health emergencies and mass casualty events.

- Nongovernmental organizations, including community-based organizations, are an important partner in recruiting and supporting health professional volunteers and providing medical and counseling services to victims and their families.

Core Capabilities and Actions

ESF Roles Aligned to Core Capabilities

The following table lists the Response core capabilities that ESF 8 most directly supports along with the related ESF 8 actions. Though not listed in the table, all ESFs, including ESF 8, support the core capabilities of Planning and Operational Coordination.
| Public Information and Warning | • Coordinates the Federal public health and medical messaging with jurisdictional officials.  
• Continuously acquires and assesses information on the incident. Sources of information may include state incident response authorities; officials of the responsible jurisdiction in charge of the disaster scene; and Emergency Support Function (ESF) 8 (Public Health and Medical Services) support departments, agencies, and organizations.  
• Provides public health, behavioral health, disease, and injury prevention information that can be transmitted to the public and responders who are located in or near affected areas in languages and formats that are understandable to individuals with limited English proficiency and individuals with disabilities and other with access and functional needs.  
• Supports a Joint Information Center in the release of general medical and public health response information to the public. |
| Critical Transportation Patient Movement | • Transports seriously ill or injured patients and medical needs populations from casualty collection points in the impacted area to designated reception facilities.  
• Coordinates the Federal response in support of emergency triage and pre-hospital treatment, patient tracking, distribution, and patient return. This effort is coordinated with Federal and local, state; and tribal emergency medical services officials.  
• Provides support for evacuating seriously ill or injured patients through the National Disaster Medical System (NDMS), an interagency partnership between the Department of Health and Human Services (HHS), the Department of Homeland Security, the Department of Defense (DOD), and the Federal Emergency Management Agency, via the National Ambulance Contract. Support may include providing transportation assets, operating and staffing NDMS patient collection points (e.g., aerial ports of embarkation), and the Department of Veterans Affairs establishing Federal Coordinating Centers that conduct patient reception at ports of debarkation (e.g., aerial ports of debarkation). Federal support may also include processing and tracking patient movement from collection points to reception facilities.  
(Note: DOD is responsible for regulating and tracking patients transported on DOD assets to appropriate treatment facilities (e.g., NDMS hospitals).) |
| Environmental Response/Health and Safety | • Supports the Worker Safety and Health Support Annex, provides technical assistance, and conducts exposure assessments and risk management to control hazards for response workers and the public. |
| Fatality Management Services | • Assists jurisdictional medico-legal authorities and law enforcement agencies in the tracking and documenting of human remains and associated personal effects; reducing the hazard presented by |
chemically, biologically, or radiologically contaminated human remains (when indicated and possible); establishing temporary morgue facilities determining the cause and manner of death; collecting ante mortem data in a compassionate and culturally competent fashion from authorized individuals; performing postmortem data collection and documentation; identifying human remains using scientific means (e.g., dental, pathology, anthropology, fingerprints, and, as indicated, DNA samples); and preparing, processing, and returning human remains and personal effects to the authorized person(s) when possible; and providing technical assistance and consultation on fatality management and mortuary affairs. In the event that caskets are displaced, Emergency Support Function (ESF) 8 (Public Health and Medical Services) assists in identifying the human remains, recasketing, and reburial in public cemeteries.

- May provide support to families of victims during the victim identification mortuary process.

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<thead>
<tr>
<th>Mass Care Services</th>
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<tr>
<td>• Provides technical expertise and guidance on the public health issues of the medical need’s population.</td>
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<td>• Assists with applications for Federal benefits sponsored by Department of Health and Human Services (HHS) and ensures continuity of assistance services in affected states and in states hosting relocated populations.</td>
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<td>• Provides support for the provision of case management and advocacy services.</td>
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<td>• Provides support for human and/or veterinary mass care sheltering as resources are available.</td>
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<th>Public and Private Services and Resources</th>
<th>Blood and Tissues</th>
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<td>• Monitors and ensures the safety, availability, and logistical requirements of blood and tissues. This includes the ability of the existing supply chain resources to meet the manufacturing, testing, storage, and distribution of these products.</td>
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<th>Food Safety, Security, and Defense</th>
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<td>• In coordination with ESF 11 (Animals and Agriculture) may task HHS components and request assistance from other ESF 8 partner organizations to ensure the safety, security, and defense of federally regulated foods.</td>
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<th>Agriculture Safety and Security</th>
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<td>• In coordination with ESF 11(Animals and Agriculture), may task ESF 8 (Public Health and Medical Services) components to ensure the health, safety, and security of food-producing animals, animal feed, and therapeutics. ESF 8 may also provide federal veterinary assistance to ESF 11. Support will include addressing zoonotic diseases and caring for research animals. As needed and able to do so.</td>
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<th>Public Health and Medical Services</th>
<th>Health, Medical, and Veterinary Equipment and Supplies</th>
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<td>• Arranges for the procurement and transportation of equipment, supplies, diagnostic supplies, radiation detecting devices, and countermeasures,</td>
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including assets from the Strategic National Stockpile, in support of immediate public health, medical and veterinary response operations.

**Health Surveillance**
- Use existing all-hazards surveillance systems to monitor the health of the general and medical needs population, as well as that of response workers, and identify emerging trends related to the disaster; carries out field studies and investigations; monitors injury and disease patterns and potential disease outbreaks, behavioral health concerns, and blood and tissue supply levels; and provides technical assistance and consultations on disease and injury prevention and precautions. Provides support to laboratory diagnostics.

**Medical Surge**
- Provides support for triage, patient treatment, and patient movement.
- Provides clinical public health and medical care specialists from the National Disaster Medical System, U.S. Public Health Service, Veterans Affairs, and Department of Defense to fill local, state, and tribal health professional needs.
- Engages civilian volunteers, through the Emergency System for Advance Registration of Volunteer Health Professionals, volunteer Federal employees and the Medical Reserve Corps to fill local, state, and tribal health professional needs.

**Patient Care**
- Provides resources to support pre-hospital triage and treatment, inpatient hospital care, outpatient services, behavioral healthcare, medical-needs sheltering, pharmacy services, and dental care to victims or those who suffer from chronic illnesses.
- Assists with isolation and quarantine measures and with point of distribution operations (mass prophylaxis and vaccination).
- Ensures appropriate patient confidentiality is maintained, including Health Insurance Portability and Accountability Act privacy and security standards, where applicable.

**Assessment of Public Health/Medical Needs**
- Supports national or regional teams to assess public health and medical needs. This function includes the assessment of the healthcare system/facility infrastructure.

**Safety and Security of Drugs, Biologics, and Medical Device**
- During response, provides advice to private industry regarding the safety and efficacy of drugs, biologics (including blood, tissues and vaccines), medical devices (including radiation emitting and screening devices), and other products that may have been compromised during an incident and are Department of Health and Human Services regulated products.
### All-Hazard Public Health and Medical Consultation, Technical Assistance, and Support
- Assesses public health and medical effects resulting from all hazards. Such tasks may include assessing exposures on the general population and on children and those with disabilities and others with access and functional needs; conducting field investigations, including collection and analysis of relevant samples; providing advice on protective actions related to direct human and animal exposures and on indirect exposure through contaminated food, drugs, water supply, and other media; and providing technical assistance and consultation on medical treatment, screening, and decontamination of injured or contaminated individuals.
- Provides for disaster related health and behavior health needs through direct services and/or referrals as necessary.

### Vector Control
- Assesses the threat of vector-borne diseases.
- Conducts field investigations, including the collection and laboratory analysis of relevant samples; provides vector control equipment and supplies.
- Provides technical assistance and consultation on protective actions regarding vector-borne diseases.
- Provides technical assistance and consultation on medical treatment of victims of vector-borne diseases.

### Public Health Aspects of Potable Water/Wastewater and Solid Waste
- Assists in assessing potable water, wastewater, solid waste disposal, and other environmental health issues related to public health in establishments holding, preparing, and/or serving food, drugs, or medical devices at retail and medical facilities, as well as examining and responding to public health effects from contaminated water; conducting field investigations, including collection and laboratory analysis of relevant samples; providing equipment and supplies as needed; and providing technical assistance and consultation.

### Other (Veterinary Medical Support)
- Provides veterinary public health technical support through Department of Health and Human Services National Veterinary Response Teams, veterinary officers of the Commissioned Corps of the U.S. Public Health Service. The National Veterinary Response Teams are the primary Federal resource for treatment of ill or injured pets, service animals, working animals, laboratory animals, and livestock. Under its own statutory authority, Department of Health and Human Services can manage and conduct animal response to zoonotic diseases to protect human health.
- For livestock or poultry diseases exotic to the United States that are either not or only mildly zoonotic, supports the MBAH and United States Department of Agriculture and its authority to manage a foreign animal disease response.
Policies

- The Mississippi State Department of Health (MSDH) coordinates the state Emergency Support Function (ESF) 8 (Public Health and Medical Services) preparedness, response, and recovery actions in accordance with the MSDH Concept of Operations and the Mississippi Health Response Team plans. These actions do not alter or impede the existing authorities of any department or agency supporting ESF 8.

- The MSDH will establish the Public Health Command/Coordination Center (PHCC) as needed to support State Emergency Operations Center operations and/or forward support cells.

- The PHCC facilitates the overall Mississippi ESF 8 response. As necessary during activations, the PHCC will liaise with other agencies.

- All local and state organizations and other ESFs participating in response operations report public health and medical requirements to their functional counterpart in ESF 8.

- General medical and public health response information will be released to the public through ESF 15 (External Affairs) after consultation with the MSDH Public Information Officer at the PHCC. When possible, a recognized spokesperson from the public health and medical community will deliver relevant community messages.

- To ensure necessary patient confidentiality, the release of medical information by Emergency Support Function (ESF) 8 (Public Health and Medical Services) will be made in accordance with applicable laws. Inquiries about patients are managed by the Mississippi State Department of Health (MSDH) in coordination with the Joint Information Center when established. (See the ESF 15 - External Affairs Annex for more details.)

- Individuals in all counties of the state can receive mental health services (i.e. crisis counseling) through the Regional Mental Health Center system. In the event of a disaster, the center serving the region where the disaster occurred will have the primary role in providing services (See Appendix 2 for map of Regional Community Mental Health Centers).

- In the event of a zoonotic or animal disease outbreak in coordination with ESF 11 (Animals and Agriculture) public information may be released after consultation with the Mississippi Department of Agriculture and Commerce, the Mississippi Board of Animal Health, and the Mississippi State Department of Health.

- As the coordinating agency for ESF 8, the MSDH determines the appropriateness of all requests for public health, medical, and death information.

- All state licensing boards will verify official credentials of out-of-state practitioners. The Public Health Command/Coordination Center (PHCC) will oversee this activity through the Mississippi Responder Management System.

- The MSDH, as the coordinating agency for ESF 8, is responsible for consulting with and organizing state public health and medical subject-matter experts, as needed.
▪ All MSDH deployed field personnel or units are subordinate to the PHCC and will maintain contact with the PHCC.

▪ The MSDH will coordinate and manage the deployment of State Medical Response System assets as directed by mission tasks.

▪ Responsible parties at all healthcare facilities must keep the PHCC advised of unmet needs and the PHCC will advise the State Emergency Operations Center through its liaison.

Mutual Aid Agreements

▪ Statewide Mutual Aid Compact (SMAC): If an emergency incapacitates local emergency medical and/or health and medical services, or if the magnitude of the emergency exceeds local medical resources, requests can be made to other participants for resources.

▪ Emergency Management Assistance Compact (EMAC): Requests for emergency medical and/or health and medical service resources obtained from either EMAC or SMAC will be directed to the State Coordinating Officer for execution. The EMAC states that persons holding licenses, certificates, or other permits issued by a party state for professional, mechanical, or other skills, shall be deemed licensed, certified, or permitted by the requesting state to render aid involving such skills.

▪ In accordance with Section 33-15-14(2)(a)(viii), MS Code of 1972, annotated, all agencies with Emergency Support Function 8 responsibilities will ensure that they have standard operating procedures in place to enable them to perform appropriate levels of health and medical mitigation, preparedness, response, and recovery.

*Healthcare coalition districts will develop agreements between hospitals to have resources available to share in the event of a disaster or emergency.*

Concept of Operations

Assumptions

▪ Medical resources and services may be overwhelmed or unavailable during the disaster or emergency.

▪ Some disasters may generate casualty loads beyond the treatment capabilities of local emergency medical services and healthcare systems.

▪ Damage to chemical and industrial plants, sewer lines, and water systems, combined with secondary hazards such as fires, will result in toxic environmental and public health hazards to the surviving population and response personnel.

▪ Disruption of sanitation services and facilities, loss of power, and the massing of people in shelters may increase the potential for disease and injuries.

▪ The damage and destruction of a catastrophic event will produce urgent needs for mental health crisis counseling for disaster victims and response personnel.
In a catastrophic event, the need for emergency mortuary services and victim identification will be paramount.

Communication systems post-event will most likely be limited or inoperable.

Decisions to evacuate and whom to evacuate are local/state decisions.

Transportation routes will be severely and negatively impacted.

All patient movements on the ground will be coordinated with general population evacuation processes.

During a catastrophic event, healthcare facilities may lose significant operational capacity. The facilities may be at or above capacity prior to the event.

Hospitals and other healthcare facilities may receive a surge in citizens with medical needs, long-term care patient transfers, and citizens with other medical concerns prior to an event (if there is pre-event notice).

Hospitals and other healthcare facilities may receive a surge in citizens who have medical injuries, who are experiencing exacerbation of medical conditions, or who have other medical concerns post-event.

During events that provide no-notice, all pre-event actions (i.e., warnings or evacuations) will begin immediately post-event.

A major disaster could have detrimental effects on the animal population. This in turn could seriously harm the economy and the environment.

General Operations

Emergency Support Function (ESF) 8 (Public Health and Medical Services) is organized similar to the Incident Command System to provide incident assessment, planning, procurement, deployment, and support operations to the Mississippi Incident Management Assistance Team, area coordinators, and local emergency management to assure a timely and appropriate response to an emergency/disaster situation.

Procedural protocols and plans for disaster response activities are developed to govern staff operation at the State Emergency Operations Center (SEOC), Public Health Command/Coordination Center (PHCC), and in the field. Periodic training is also conducted to enhance effectiveness.

In a large event requiring federal or mutual aid assistance, ESF 8 will work with counterparts from other jurisdictions to seek, plan, and direct use of assets.

Throughout the response and recovery periods, ESF 8 will evaluate and analyze information regarding medical, health, and public health assistance requests for response, develop and update assessments of medical and public health status in the impact area, and do contingency planning to meet anticipated demands.
ESF 8 will manage and coordinate state health and medical resources from the PHCC and coordinate their response with the SEOC when activated.

When an event is focused in scope to a specific type or response mode (e.g., hospital evacuation, radiological problem), the position and functions of the PHCC Operations Section Chief will be assumed by an appropriate person with expertise pertinent to the event.

Upon request by local government, ESF 8 will be operational by acquisitioning state health and medical resources in support of local hospitals. In addition, local ESF 8 representatives will make a request to their local Emergency Management Director for state resources, if needed, who will in turn contact the State Emergency Operations Center for assistance.

Members representing ESF 8, primary or support agencies, are expected to have extensive knowledge of the resources and capabilities of their respective organization and have access to the appropriate authority for committing such resources during the activation.

Public health and medical subject matter experts from regional and federal ESF 8 organizations are consulted for risk analysis, evaluation, and support.

In the early stages of an incident, it may not be possible to fully assess the situation and verify the level of assistance required. In such circumstances, the Mississippi State Department of Health may provide assistance under its own statutory authorities. In these cases, every reasonable attempt is made to verify the need before providing assistance.

All agencies with Emergency Support Function (ESF) 8 (Public Health and Medical Services) responsibility will receive administrative support from their respective organization with additional support from Mississippi Emergency Management Agency personnel.

Upon notification, identified Mississippi State Department of Health (MSDH) personnel are alerted to activate ESF 8 assets.

Animal Health

Animals are an important asset to the state and are also an integral part of the ecology of Mississippi. Animals contribute to the economic stability of the state and the health and well-being of its residents. ESF 8 will collaborate with and provide support to ESF 11 (Animals and Agriculture) as requested to ensure the health and well-being of the public. This includes surveillance for zoonotic disease, administration of vaccinations or prophylactic medication for responders and/or the public, and distribution of public information messages.

The Mississippi Board of Animal Health (MBAH) is the primary organization for coordinating veterinary-related services in emergencies. The MBAH acts as a liaison with state agencies, humane societies, and animal control agencies and deploys the Mississippi Animal Response Team. Private veterinarians and humane society personnel participate on a voluntary basis in emergency operations.
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- The MBAH will support the Public Health Command/Coordination Center to coordinate veterinary-related services needed in emergencies. ESF 8 will also offer like support to the ESF11 command support cell.

Organization

State

- ESF 8 is part of the Operations Section, Emergency Services Branch, at the State Emergency Operations Center (SEOC).

- During an activation of the SEOC, ESF 8 primary and support agency staff will participate in the Public Health Command/Coordination Center and SEOC, when activated, to provide support that will allow for an appropriate and timely response.

- During the response phase, ESF 8 will evaluate and analyze information regarding medical and public health assistance requests. Also, ESF 8 will develop and update assessments of medical and public health status in the impact area and do contingency planning to meet anticipated demands.

- The Mississippi State Department of Health develops and maintains emergency operation plans that govern internal response actions related to emergencies.

Field Units

State Medical Response System (SMRS).

- The State Medical Response System (SMRS) is a collaboration between the Mississippi State Department of Health (MSDH) and the University of Mississippi Medical Center (UMMC). The SMRS has tiered components designed to provide and coordinate emergency medical care to patients. These assets include, but are not limited to:
  
  - Field Assessment and Scene Triage (FAST) Teams.
  - Mississippi MED-COM a medical communication and coordination center.
  - Mobile field hospitals transported by tractor trailers.
  - Air and ground ambulances.
  - Roster of pre-vetted and credentialed medical volunteers.
  - Special Care Unit (SCU) for emerging infectious diseases.

- Mississippi Health Response Teams.

  The Mississippi Health Response Team (MHRT) and/or its advance element acts as the State Health Officer’s (SHO) agent on scene at emergency sites under the direction of the Director of Health Protection (DHP). The DHP, on behalf of the SHO, directs and coordinates the department’s efforts to prevent, prepare for, respond to, and recover from the public health and medical consequences of a disaster or emergency. The MHRT will serve as field command for Emergency Support Function (ESF) 8 (Public Health and Medical Services).
Mississippi Mortuary Response Team.

The Mississippi Mortuary Response Team works to manage fatalities during an emergency when local mortuary resources are overwhelmed.

Rapid Needs Assessment Team.

A Rapid Needs Assessment Team is comprised of technical experts from participating agencies. The team functions to support operations providing situation assessments to determine immediate victim needs (food, water, medical, shelter, etc.) and impact to infrastructure (utilities, communications, transportation, etc.). Assessment data are reported, and the assessment data are then used by State and Federal managers in making response decisions. It enables resources to be pro-actively recommended to support response efforts, and to rapidly provide resources to meet identified needs.

Mississippi Incident Management Assistance Team

The mission of an Incident Management Assistance Team (IMAT) is to rapidly deploy an experienced, cohesive team to an incident or potential incident-threatened venue to lead or support a prompt, effective, and coordinated response in support of Tribal, and local officials. The team deployed will be appropriate to the size, scope, and complexity of the situation. The size of the disaster and the stated needs of the local emergency management agency will determine the size of the IMAT deployed to any event.

* ESF 8 may be asked to provide personnel for the Joint Field Office or the District Field Office to work closely with federal counterparts.

Area

The Mississippi State Department of Health (MSDH) has Emergency Response Coordinators (ERC) in each of the public health regions of the state. These coordinators have been trained to carry out responsibilities under Emergency Support Function (ESF) 8 (Public Health and Medical Services) and to function as coordinators, assessors, and operational personnel in support of regional or field activities.

ERCs are involved with ESF 8 by providing technical assistance whenever an event is of such size that a county emergency operations center is not activated. If one or more county emergency operations center are activated, then additional liaisons will be activated and ERCs will assume a more involved role of coordinating regional resources or requests from the Public Health Command/Coordination Center (PHCC).

Direction, Control, and Coordination

As the ESF 8 Coordinator, the MSDH is responsible for coordinating the overall health and medical activities by providing state resources and/or personnel based upon local jurisdictional needs.
The MSDH has three regions throughout the state which are coordinated through the state or central office in Jackson.

The State Health Officer or designated representative will perform the necessary tasks of addressing emergency health needs, whether through delegation or direct involvement with MEMA during the time of a disaster. Per the MSDH Concept of Operations, the defacto designee is the Director of Health Protection unless otherwise delegated.

The MSDH will be responsible for direction and control obligations on health and medical ventures that involve state resources and assistance including mass fatality management and coordination. Coordination of direction and control decisions will be managed by the PHCC and communicated to the State Emergency Operations Center.

Each participating agency will coordinate its support with the PHCC through the ESF 8 Liaison at the State Emergency Operations Center.

If state emergency health and medical resources have either been exhausted or expected to be exhausted prior to meeting the demand, MEMA officials will recommend that assistance be requested from other states through the Emergency Management Assistance Compact or from the Federal Emergency Management Agency (FEMA). Such a request to FEMA for assistance could prompt the implementation of the National Response Framework.

All field units must keep the PHCC advised of unmet needs.

**Administrative and Logistical Support**

Each Emergency Support Function (ESF) 8 (Public Health and Medical Services) agency that has an automated financial management system will utilize the system to capture the incurred costs of all available, acquired, and contracted resources used during the support activities related to emergency or major disaster operations. Those agencies not having access to an automated system will utilize their existing system to capture all related costs for reporting and potential reimbursement.

All ESF 8 agencies understand their financial management system (automated or otherwise) used to capture their incurred costs during an emergency, major disaster, or exercise must comply with applicable agency, state, and federal guidelines, rules, standards, and laws. This understanding is based on the knowledge that any reimbursement of incurred costs is subject to audit.

**Actions**

Actions carried out by ESF 8 are grouped into the four phases of emergency management: preparedness, response, recovery, and mitigation. Each phase requires specific skills and knowledge to accomplish and requires significant cooperation and collaboration between all primary, supporting agencies, Non-Governmental Organizations, and the intended recipient of service. This ESF encompasses a full range of activities from training to the provision of field services. It also functions as a coordinator and, at times, assumes direct operational control of provided services. The following services provide the framework upon which actions will occur:
Agriculture Safety and Security: The PHCC, in coordination with ESF 11 (Animals and Agriculture), may task its components to ensure the safety and security of food-producing animals, animal feed, and therapeutics.

All-Hazard Public Health and Medical Consultation, Technical Assistance, and Support: The Mississippi State Department of Health (MSDH) and ESF 8 may task its components to assist in assessing public health and medical effects resulting from all hazards. Such tasks may include assessing exposures on the general population and on high-risk population groups, coordinating the collection and identification of human remains associated with mass fatalities, conducting field investigations, including collection and analysis of relevant samples, providing advice on protective actions related to direct human and animal exposures, and on indirect exposure through contaminated food, drugs, water supply, and other media, and providing technical assistance and consultation on medical treatment, screening, and decontamination of injured or contaminated individuals.

Assessment of Health and Medical Needs: The MSDH mobilizes and deploys ESF 8 personnel to support the Mississippi Emergency Management Agency to assess public health and medical needs. This function includes the assessment of the public healthcare system/facility infrastructure and morgue capability.

Behavioral Healthcare: The Public Health Command/Coordination Center may task its support agencies (primarily the Department of Mental Health) to assist in assessing mental health and substance abuse needs; provide disaster mental health training materials for workers; provide liaison with assessment, training, and program development activities undertaken by state, local, and tribal mental health and substance abuse officials; and provide additional consultation as needed.

Blood and Blood Products: The Public Health Command/Coordination Center (PHCC) will track Mississippi blood availability through Red Cross, Mississippi Blood Services, Department of Defense, and other related organizations.

Disease Control/Epidemiology: Emergency Support Function (ESF) 8 (Public Health and Medical Services) agencies enhance existing surveillance systems to monitor the health of the general population and high-risk populations, carry out field studies and investigations, monitor injury, disease patterns, and potential disease outbreaks, and provide technical assistance and consultations on disease and injury prevention and precautions.

Emergency Medical Services (pre-hospital): The Mississippi State Department of Health (MSDH) will maintain memoranda of understanding with Mississippi licensed emergency medical services agencies and other medical transport units. Request for medical transportation from a local or county government should be sent through the county emergency management agency to the State Emergency Operations Center. The MSDH will coordinate resource deployments. Mississippi MED-COM operated by the University of Mississippi Medical Center (UMMC) may coordinate resources once deployed. The MSDH may coordinate medical transportation assistance with ESF 1 (Transportation).

Emergency Responder Health and Safety: The MSDH will maintain first responder health and safety plans. Primary and support agencies will provide technical assistance to local government and other responders as requested.
Food Safety and Security: The MSDH, in cooperation with ESF 11 (Animals and Agriculture), may task its components to ensure the safety and security of regulated foods. (Note: The MSDH has statutory authority for all domestic and imported foods.)

Terrorism Threats/Events: The MSDH will respond and provide health and medical activities related to terrorism threats and/or events.

Health/Medical Equipment and Supplies: The PHCC will manage acquired medical supplies and equipment. The UMMC will coordinate donated pharmaceuticals in coordination with the Mississippi Board of Pharmacy.

Healthcare Coalition: The Mississippi ESF 8 Healthcare Coalition (MEHC) will activate upon activation of the PHCC. The MEHC members will be invited, by email, to participate on a conference call during activations at 11:00 a.m. unless noted otherwise. The purpose will be to push/pull information from within the ESF 8 community to gain situational awareness that is timely, accurate, and transparent.

Management, Command, and Control of Assets: The MSDH will operate the PHCC to support ESF 8 and initiate various forms of communication with public health and medical representatives from county, municipal, and tribal governments to discuss the situation and determine the appropriate response actions. ESF 8 will enhance staffing immediately on notification of an actual or potential public health or medical emergency and consult with the appropriate ESF 8 organizations to determine the need for assistance.

Medical Care Personnel: Mississippi’s Emergency Support Function (ESF) 8 (Public Health and Medical Services) has very limited resources to provide medical care. The University of Mississippi Medical Center (UMMC) will provide staffing when available, coordinate staffing from other healthcare facilities, and request staffing from Mississippi Responder Management System through the Public Health Command/Coordination Center (PHCC), Statewide Mutual Aid Compact, Emergency Management Assistance Compact or U.S. Department of Health and Human Services. The UMMC will coordinate medical care personnel staffing augmentation requests.

Patient Care: The PHCC will support in-hospital, nursing home, and other patient care needs and facilitate requests to assist with patient care. The UMMC, as a primary agency, will provide support to the PHCC in coordinating patient care.

Patient Evacuation: The PHCC will coordinate patient evacuation for those patients requiring movement or relocation where local evacuation plans have failed or are inadequate to meet the need. The State Emergency Medical Services Medical Director may provide medical control for emergency medical services when operating outside of their normal response area. Mississippi MED-COM may (based on mission) coordinate patient movement and will provide bed status reporting.

Potable Water, Wastewater, and Solid Waste Disposal: The PHCC will assist ESF 3 (Public Works and Engineering) with the coordination of potable water/onsite individual wastewater and solid waste issues with public health assets. The PHCC will also assist ESF 3 with the coordination of central wastewater systems through the Mississippi Department of Environmental Quality.
Protection of Animal Health: The ESF 11 (Animals and Agriculture) Command Support Cell operates under the direction of the Mississippi Department of Agriculture and Commerce and Mississippi Board of Animal Health (MBAH). Coordinators and support agency representation is based upon the assistance needed for the specific incident. When there is an outbreak of highly contagious or economically devastating animal/zoonotic disease or if small animals, large animals, poultry, and wildlife are affected by natural disasters, the MBAH will provide primary oversight and direction.

Public Health and Medical Information: The PHCC will provide a Public Information Officer (PIO) for the duration of an activation. This PIO, with associated staff, will develop public information messages and implement dissemination in conjunction with the Mississippi Emergency Management Agency’s PIO and/or the state Joint Information Center.

Safety and Security of Human Drugs, Biologics, Medical Devices, and Veterinary Drugs: The MSDH PHCC may advise ESF 13 (Public Safety and Security) on security and all other ESFs on safety measures of regulated/nonregulated human and veterinary drugs, biologics (including blood and vaccines), medical devices (including radiation emitting and screening devices), and other medical products.

Vector Control: The PHCC will assemble the necessary expertise to augment the ESF 8 planning section to address any vector control issues. Federal assistance, if needed, would be requested through the State Emergency Operations Center. The ESF 8 support cell will assist in assessing the threat of vector-borne diseases; conducting field investigations, including the collection and laboratory analysis of relevant samples; providing technical assistance and consultation on protective actions regarding vector-borne diseases; and providing technical assistance and consultation on medical treatment of victims of vector-borne diseases.

Victim Identification/Mortuary Services: Upon the notification of need from the State Emergency Operations Center for mortuary service assistance or victim identification assistance, the Mississippi Mortuary Response Team will augment staff with a mass fatality task force to include but not limited to representatives from the Mississippi Crime Laboratory, Mississippi State Medical Examiner’s Office, Mississippi Bureau of Investigation, Mississippi State Department of Health, and the Mississippi Coroner’s Association. This task force will coordinate resource requests and planning activities and report directly to the Emergency Support Function (ESF) 8 (Public Health and Medical Services) Public Health Command/Coordination Center (PHCC).

Preparedness Actions

- Actions and activities that develop health and medical response capabilities may include planning, training, orientation sessions, and exercises for all ESF 8 personnel and other emergency support functions that will respond with ESF 8.
- Conduct planning with ESF 8 primary and support agencies.
- Develop and refine procedures to be used in the following field surveys: rapid needs assessment, health assessment teams, environmental health assessment survey, and epidemiological surveys.
- Conduct training for rapid needs assessment team members.
Mississippi Emergency Support Function #8- Public Health and Medical Services Annex

- Develop and present training courses for ESF 8 personnel, provide information on critical facilities to Mississippi Emergency Management Agency, and develop protocols for frequently provided services.
- Maintain liaison with health and medical volunteer organizations and mortuary response teams.
- Develop rapid response mechanism for crisis mental health counseling for responders and assist in the development of public health nursing disaster protocols.
- Recruit, train, and exercise ESF 8 personnel to include state medical assistant teams, mortuary response teams, and volunteer healthcare professionals as needed.
- Review and upgrade capabilities as needed.
- Stage assets as needed.

Response Actions

Initial Actions

- Coordinate ESF 8 activities through the PHCC.
- Designate an official to participate in the Joint Field Office, if requested.
- Develop and update assessments of medical and public health status.
- Deploy health response teams as appropriate.
- Establish communications necessary to coordinate state public health and medical assistance effectively.
- Coordinate medical transportation assistance with Emergency Support Function (ESF) 1 (Transportation).
- Activate the Mississippi ESF 8 (Public Health and Medical Services) Healthcare Coalition.

Mississippi State Department of Health

- Ensure essential acute medical care hospitals at or near the disaster location can support disaster response activities (See Appendix 3 for hospitals in Mississippi).
- Coordinate health and medical services to evacuated citizens, affected medical needs populations, and home healthcare patients.

The Public Health Command/Coordination Center
Request the University of Mississippi Medical Center, primary agency, to activate their Concept of Operations Plan.

Request the Executive Director of the Department of Mental Health, or designee, to activate the crisis counseling service when deemed appropriate.

Continue to identify the nature and extent of public health and medical problems and establish appropriate monitoring and public surveillance.

Refer information requests from the media and the public to the Public Information Officer and/or ESF 15 (External Affairs).

Provide team members for the Incident Management Assistance Team (IMAT) field deployment, procure health and medical resources for a forward IMAT deployment, and provide communications for deployed health and medical personnel. In addition, primary and support agencies of ESF 8 may serve the IMAT in other areas such as providing technical assistance, securing resources, and command and response to the incident scene as requested (i.e., impact assessment teams, state medical assistance teams, state mortuary response teams, intrastate and/or interstate mutual aid assistance).

Assist evacuations of medical needs populations as needed.

Conduct field assessments and surveys; provide nursing staff for medical needs shelters, provide staff and services for monitoring public health conditions, conduct rapid assessments for immediate response objectives, and determine needs for health surveillance programs in communities and regions.

Manage all field deployed assets and provide command, communications, and logistical support to field operations and verify actual need for requested health and medical resources.

Arrange for the provision of medical personnel, equipment, and supplies for health and medical facilities, assist with patient evacuation and relocation (post-event), identify hospital and nursing home bed vacancies statewide, and operate the Public Health Command/Coordination Center. Consider credentialing and verifying emergency medical technicians, paramedics, and other health professionals during extended operations.

Assist in hazardous materials response or a weapon of mass destruction event through consultation, toxicological support, and technical support of staff deployment; perform water, food, and drug safety analysis and inspection.

Arrange for a mortuary response team or victim identification services, provide port-o-lets and dumpsters to comfort stations/other locations, provide public health nursing staff at state or regional medical needs shelters, respond to radiological incidents and weapons of mass destruction incidents, including staffing the State Emergency Operations Center.

Recovery Actions

Assist with restoration of essential health and medical components of delivery systems, permanent medical facilities to operational status, restoration of pharmacy services to operational status, monitor
environmental and epidemiological systems, and initiate grants for environmental and epidemiological surveillance.

- Continue provision of mental health crisis services.
- Support emergency services staff and operations until the local system is self-sustaining; maintain provision of long-term emergency environmental activities; identify populations requiring event-driven health, medical, or social services post-event; and provide emergency pharmacy/laboratory services.
- Initiate financial reimbursement process for these activities when support is available.

**Mitigation Actions**

- Increase use of geographical information systems to identify location of vulnerable sites or populations.
- Update county Emergency Support Function 8 (Public Health and Medical Services) and Public Health Hazard Vulnerability Analysis.
- Identify and seek funds to mitigate hazards in critical health facilities.
- Stockpile critical medical supplies in strategic locations throughout the state, develop disaster medical assistance team readiness levels to Category I capability, and identify and seek auxiliary power for critical health and medical facilities.
- Prepare an after-action report. The after-action report identifies key problems, indicates how they will be/were solved, and makes recommendations for improving response operations. Emergency Support Function (ESF) 8 (Public Health and Medical Services) organizations assist in preparation of the after-action report.

**Responsibilities**

**Mississippi State Department of Health**

- Develop a Concept of Operations and an ESF 8 Operational Plan in conjunction with Mississippi Emergency Management Agency, primary, and supporting agencies for ESF 8.
- Designate an individual(s) who will report to the State Emergency Operations Center upon activation and will act as the Emergency Coordinating Officer (ECO) for ESF 8 (ensure alternate ECOs for 24-hour availability).
- Provide leadership in directing, coordinating, and integrating the overall state efforts to provide health, medical, public health, mortuary/victim identification, personnel, supplies, equipment, and some social services assistance to the affected area.
- Direct and coordinate regional and county facilities in providing medical and public health assistance.
- Assure essential acute medical care hospitals at or near the disaster location can support disaster response activities.

- Monitor post-event health hazards by providing food inspection, as well as insect, vector, and vermin control.

- Provide status on bed availability of all hospitals and other healthcare facilities outside of the disaster area.

- Provide personnel as available to assist in shelters, public health clinics, and other facilities (e.g., healthcare providers and auxiliary staff).

- Coordinate emergency mortuary services.

- Coordinate protective actions with licensed medical facilities before, during, and following a disaster and/or an emergency.

- Coordinate the assignment, reallocation, and use of public and private emergency medical vehicles to evacuate non-ambulatory patients in support of county requirements.

- Assist with the return of non-ambulatory patients.

- Assist in the provision of medical oversight for emergency medical services, as appropriate, to the Mississippi State Emergency Medical Services Medical Director.

- Provide medical oversight and technical direction for radiological/nuclear incidents.

- Provide medical oversight and technical direction as the lead state agency for biological incidents.

- On assignment, open and operate regional and state medical needs shelters.

- Provide trained personnel (e.g., emergency response coordinators) as technical assistance for hazardous material incidents within their level of training, and when such personnel are available.

- In conjunction with the University of Mississippi Medical Center, coordinate with the state’s Donations Coordination Team to organize and assign volunteers and donated health resources to disaster areas.

- Issue directives for the acceptance, handling, and quarantine of food donations.

- Coordinate emergency medical, environmental, and sanitation services including water supply and wastewater disposal with appropriate Emergency Support Function (ESF).

- Coordinate the evacuation, care, and sheltering of individuals entering regional and state medical needs shelters with ESF 6 (Mass Care, Emergency Assistance, Housing, and Human Services).

- Facilitate the identification of victims in emergency mortuary services by providing mortuary response teams and mobile facilities to assist local authorities.
Coordinate with ESF 3 (Public Works and Engineering) to obtain trained personnel to evaluate the structural integrity of affected healthcare facilities.

Request for the activation of federal resources prepositioned on the gulf coast through a Mission Assignment to include Veterans Health Administration’s healthcare resources (if available).

**University of Mississippi Medical Center**

- Develop a Concept of Operations in conjunction with the Mississippi State Department of Health.
- Develop applicable standard operating guides for all primary responsibilities assigned.
- Designate an individual(s) who will report to the Public Health Command/Coordination Center upon activation and will act as a primary agency Emergency Coordinating Officer for ESF 8 (ensure an alternate State Emergency Operations Center for 24-hour availability), if needed.
- Provide additional liaison(s) in support of other incident command structures as requested.
- Coordinate response activities that address the short-term, direct effects of an incident and mitigating activities to provide a faster response in emergency situations.
- Coordinate the State Medical Response System (SMRS) in collaboration with MSDH.
- Mississippi MED-COM may coordinate patient movement and interoperable communication of emergency medical response statewide in collaboration with the Mississippi State Department of Health (MSDH).
- Develop applicable plans for SMRS for a tiered response that will include but not be limited to triage, treatment, transportation, shelter, and staging.
- Train and roster FAST teams that can serve to augment staffing needs of healthcare facilities affected in disasters; serve in medical needs shelters, participate in rapid needs assessment teams, provide immediate triage of the sick and injured, staff mobile field hospitals.
- Develop plans, procedures warning and communication systems, training and exercises, and mutual aid agreements and response activities that address the short-term, direct effects of an incident including immediate actions to save lives, protect property, and meet basic human needs.
- Provide air ambulance support and coordinate air operations in coordination with the Mississippi National Guard.
- Provide medical control to out-of-state emergency medical services and other appropriate missions.
- Provide statewide medical control to statewide emergency medical service resources.
- Provide just-in-time and/or advanced training to healthcare providers as assigned.
- Provide toxicological support as requested (based on mission).
Assist with data collection, data reporting, and epidemiological support.

Augment essential acute medical care hospitals at or near the disaster location to ensure support of disaster response activities.

Monitor post-disaster health hazards and report as applicable.

Provide status on bed availability of hospitals and other healthcare facilities during an event requiring medical surge.

Provide personnel, as available, to assist in shelters, public health clinics, and other facilities (e.g., healthcare providers, auxiliary staff).

Coordinate (as appropriate) the assignment, reallocation, and use of public and private emergency medical and response vehicles in collaboration with the MSDH.

Coordinate (as appropriate) the return of non-ambulatory patients.

On assignment, assist in the operation of regional and state medical needs shelters.

Provide technical assistance for hazardous material incidents through the Mississippi Poison Control Center.

Assist with the state’s Donations Coordination Team (See the Mississippi Comprehensive Emergency Management Plan Donations Support Annex) to organize and assign volunteer and donated health resources to disaster areas. The University of Mississippi Medical Center will be primary for donated pharmaceuticals in coordination with the Mississippi Board of Pharmacy.

Assist in coordination of the evacuation, care, and sheltering of individuals entering regional and state medical needs shelters with Emergency Support Function (ESF) 6 (Mass Care, Emergency Assistance, Housing, and Human Services).

All Primary and Support Agencies

Designate a primary and alternate Emergency Coordinating Officer to report to the Public Health Command/Coordination Center.

Ensure adequate communications are established and maintained.

Support the resource pool by providing available resources as needed.

Coordinate the efforts through a liaison to ESF 5 (Emergency Management).

Assist in gathering and providing information to ESF 5 for establishing priorities and provide to ESF 15 (External Affairs) for press releases.
## Support Agencies’ Responsibilities

<table>
<thead>
<tr>
<th>Agency</th>
<th>Functions</th>
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<tbody>
<tr>
<td>Mississippi Board of Animal Health</td>
<td>▪ Coordinate burial and/or disposal of animal carcasses.</td>
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<td>▪ Review and authenticate out-of-state veterinary licenses and certification for in-state use as directed by the state licensing board.</td>
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<td>▪ Organize according to the National Incident Management System to ensure rapid response to animal care needs in the disaster area.</td>
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<td>▪ Coordinate emergency medical care for animals in the affected area.</td>
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<td>▪ Coordinate the development, education, and activation of the Mississippi Animal Response Team.</td>
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<td>▪ Coordinate with Emergency Support Function 8 (Public Health and Medical Services) the identification, prevention, and control of diseases of animals that have public health significance.</td>
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<td>▪ Coordinate support for sheltering of pets for persons within State and Regional Medical Needs Shelters.</td>
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<tr>
<td>Mississippi Board of Pharmacy</td>
<td>▪ Provide credentialing and investigative service for volunteer pharmacists both in and out of state.</td>
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<td>▪ Assist with placement of volunteer pharmacists during an emergency.</td>
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<td>▪ Assist local pharmacies and durable medical equipment suppliers during a disaster.</td>
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<tr>
<td>Mississippi Board of Trustees of State Institutions of Higher Learning</td>
<td>▪ Provide resources in support of medical needs sheltering.</td>
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<td>▪ Provide multilingual translation support.</td>
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<tr>
<td>Agency</td>
<td>Functions</td>
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</table>
| Mississippi Department of Agriculture and Commerce (MDAC) | ▪ Inspect food to minimize the potential for spoilage and disease in stores and meat plants MDAC regulates.  
▪ Provide emergency inspections in stores and meat plants MDAC regulates and assist the Mississippi State Department of Health.  
▪ Provide inspection to mitigate vectors of disease such as insects and vermin in stores and meat plants MDAC regulates. |
| Mississippi Department of Education         | ▪ Provide educational assistance for children with medical needs.          |
| Mississippi Department of Environmental Quality | ▪ Provide technical guidance regarding wastewater treatment plants and collection system operations.  
▪ Provide technical guidance to community and centralized wastewater treatment systems.  
▪ Provide guidance to address waste disposal needs. |
| Mississippi Department of Human Services    | ▪ Assist in the coordination of State and Regional Medical Needs Shelters.  
▪ Support Strategic National Stockpile Point of Dispensing functions. |
| Mississippi Department of Mental Health     | ▪ Provide crisis counseling to disaster victims and first responders.  
▪ Provide 24-hour Emergency Coordinating Officer to the Emergency Support Function 8 (Public Health and Medical Services) support cell to liaise mental health operations.  
▪ Provide crisis counseling services for Family Assistance Center and State and Regional Medical Needs Shelters. |
| Mississippi Department of Public Safety     | ▪ Provide Security for Receipt, Staging, and Storage sites as well as security support for Strategic National Stockpile (SNS) Point of Dispensing (POD) sites.  
▪ Provide security support for Emergency Coordinating Officer to the Emergency Support Function 8 (Public Health and Medical Services) for Chemical, Biological, Radiological, Nuclear, and Explosives events.  
▪ Provide security support for Pandemic Influenza events. |
<table>
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<tr>
<th>Agency</th>
<th>Functions</th>
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<tbody>
<tr>
<td>Mississippi Department of Rehabilitation Services</td>
<td>▪ Assist with coordination of evacuation, care, and sheltering of medical needs populations.</td>
</tr>
<tr>
<td>Mississippi Department of Transportation</td>
<td>▪ Make available equipment and personnel to deliver medical countermeasures to affected public during a disaster as circumstances and emergency events allow.</td>
</tr>
<tr>
<td>Mississippi Division of Medicaid</td>
<td>▪ Promote and disseminate as needed Medicaid customer service and assistance.</td>
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<td></td>
<td>▪ Support SNS POD functions</td>
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<tr>
<td>Mississippi National Guard</td>
<td>▪ Provide logistical support such as transportation, petroleum, water purification, and other items as needed.</td>
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<td>▪ Provide transportation services for victims of disaster.</td>
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<td>▪ Transport civilian medical personnel to disaster sites and/or local or regional medical facilities.</td>
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<tr>
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<td>▪ Support SNS POD functions</td>
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<tr>
<td></td>
<td>▪ Facilities and/or services may be activated to serve as a Mississippi Mortuary Response site in the event of a declared state of emergency or mass casualty incident.</td>
</tr>
<tr>
<td>Mississippi State Board for Community and Junior Colleges</td>
<td>▪ Provide State and Regional Medical Needs Shelters as deemed appropriate by the Emergency Coordinating Officer to the Emergency Support Function (ESF) 8 (Public Health and Medical Services) Public Health Command/Coordination Center (PHCC).</td>
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<td></td>
<td>▪ Open, mobilize, and support the operation of State and Regional Medical Needs Shelters in coordination with the ESF 8 PHCC.</td>
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<td></td>
<td>▪ Provide personnel and necessary logistical support including security, healthcare providers, ancillary service, and transportation as needed for State and Regional Medical Needs Shelters.</td>
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<tr>
<td>Mississippi State Board of Medical Licensure</td>
<td>▪ Provide credentialing and investigative service for volunteer physicians both in and out of state.</td>
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<td>▪ Aid in placement of volunteer physicians during an emergency.</td>
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<td>Agency</td>
<td>Functions</td>
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| Mississippi State Board of Nursing         | ▪ Provide credentialing and investigative service for volunteer nurses both in and out of state.  
▪ Provide guidance in placement of volunteer nurses during an emergency.                                                                                                                                       |
| Mississippi State Medical Examiner’s Office| ▪ Designate at least one Emergency Coordinating Officer to serve on the mass fatality task force when activated.  
▪ Provide and coordinate victim identification and emergency services through ESF 8 mass fatality task force and autopsies.  
▪ Control of fatalities in coordination with the respective county coroners through the mass fatalities task force.  
▪ Arrange for transportation and storage of bodies through the mass fatalities task force.  
▪ Assist in the dissemination of any information to the families of the deceased through the mass fatalities task force. |
| Mississippi State Fire Academy             | ▪ Provide manpower to perform decontamination support for Emergency Support Function 8 (Public Health and Medical Services), i.e., State and Regional Medical Needs Shelters, State Medical Assistance Teams, Community Reception Centers. |
| Mississippi Veterinary Medical Association | ▪ Coordinate veterinary services and animal care with the Mississippi State Department of Health and Mississippi Board of Animal Health.                                                                                                                                 |
| Other State Hospitals                      | ▪ Provide medical needs support.                                                                                                                                                                                                                                           |
| Veterans’ Health Administration            | ▪ Provide Disaster Emergency Medical Personnel System employees, resources and assets when requested and available. Activation can be requested through a local, state or federal emergency declaration to include the Robert T. Stafford Act, a Mission Assignment or Humanitarian Assistance. Support includes:  
▪ Field Medical Clinics  
▪ Disaster Emergency Medical Personnel System (requires Stafford Act)  
▪ Veterans Affairs capabilities  
▪ Federal Coordinating Center or Secondary Support Center support (requires Stafford Act or Economy Act) |

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<tr>
<th>Private Sector</th>
<th>Functions</th>
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<tbody>
<tr>
<td>Network 8</td>
<td>▪ Track and make available to the public the open and closed status of dialysis facilities in affected areas.</td>
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<td>▪ Assist patients in identifying dialysis facilities that can provide end-stage renal disease services.</td>
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<td>▪ At the direction of Centers for Medicare and Medicaid Services, provide information to family members attempting to locate relatives.</td>
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<td>▪ As appropriate, provide other coordinating services in support of patient access to care.</td>
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<tr>
<td>The Salvation Army</td>
<td>▪ Assist through a feeding mission to support first responders at a staging site and/or patients and staff at a field hospital.</td>
</tr>
<tr>
<td></td>
<td>▪ Provide Emotional and Spiritual Care teams to support the mental health of first responders and impacted citizens.</td>
</tr>
</tbody>
</table>

**Review and Maintenance**

At a minimum, the Emergency Support Function 8 Coordinator will coordinate a biennial review of this annex with all support agencies. Additional reviews may be conducted if experience with a significant incident or regulatory change indicate a need. Recommended changes will be submitted through the Emergency Coordinating Officer to the Mississippi Emergency Management Agency for publication and distribution.

**Appendices**

- **Appendix 1** Acronyms
- **Appendix 2** Regional Community Mental Health Centers
- **Appendix 3** Distribution of Mississippi Hospitals by Type of Facility and County
## Appendix 1

### Acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Definition</th>
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<tbody>
<tr>
<td>CONOPS</td>
<td>Concept of Operations</td>
</tr>
<tr>
<td>DHP</td>
<td>Director of Health Protection</td>
</tr>
<tr>
<td>ECO</td>
<td>Emergency Coordinating Officer</td>
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<tr>
<td>EMAC</td>
<td>Emergency Management Assistance Compact</td>
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<tr>
<td>ERC</td>
<td>Emergency Response Coordinator</td>
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<tr>
<td>ESF</td>
<td>Emergency Support Function</td>
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<tr>
<td>FEMA</td>
<td>Federal Emergency Management Agency</td>
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<tr>
<td>MBAH</td>
<td>Mississippi Board of Animal Health</td>
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<tr>
<td>Acronym</td>
<td>Full Name</td>
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<tr>
<td>MEHC</td>
<td>Mississippi ESF 8 Healthcare Coalition</td>
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<td>MEMA</td>
<td>Mississippi Emergency Management Agency</td>
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<tr>
<td>MHRT</td>
<td>Mississippi Health Response Team</td>
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<tr>
<td>MSDH</td>
<td>Mississippi State Department of Health</td>
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<tr>
<td>IMAT</td>
<td>Incident Management Assistance Team</td>
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<tr>
<td>PHCC</td>
<td>Public Health Command/Coordination Center</td>
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<tr>
<td>PIO</td>
<td>Public Information Officer</td>
</tr>
<tr>
<td>POD</td>
<td>Points of Dispensing</td>
</tr>
<tr>
<td>SEOC</td>
<td>State Emergency Operations Center</td>
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<tr>
<td>SHO</td>
<td>State Health Officer</td>
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<tr>
<td>SMAC</td>
<td>Statewide Mutual Aid Compact</td>
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<tr>
<td>SNS</td>
<td>Strategic National Stockpile</td>
</tr>
<tr>
<td>UMMC</td>
<td>University of Mississippi Medical Center</td>
</tr>
</tbody>
</table>
Appendix 2

Regional Community Mental Health Centers

[Map showing the regional community mental health centers in Mississippi]
Appendix 3

Map I
Distribution of Mississippi Hospitals by Type of Facility and County

Note: Type of facility indicated represents the one category selected by the facility as being the best description of the type of service provided to the majority of admissions.

Includes East Mississippi State Hospital, Mississippi State Hospital, Oak Circle Center and Whitfield Medical Surgical Hospital, North Mississippi State Hospital and South Mississippi State Hospital.

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