



**ESF 8 (Public Health and Medical Services)
September 2024**

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Acknowledgments

The Des Moines Healthcare Coalition (DSMHCC+) is a collaborative stakeholder group whose central focus is to plan and prepare our local healthcare systems to respond to and recover more resiliently from the next disaster. Our efforts are documented and archived through the Polk County Comprehensive Emergency Plan and Emergency Support Function #8, Public Health & Medical Services.

The early works of the coalition can be traced back to the trusted relationships forged out of necessity, created by the COVID-19 pandemic. As essential resources were scarce in the early days, weeks, and months of the pandemic, the local Des Moines healthcare community recognized the importance of setting aside their natural tendency to be competitive with each other and instead coming together for the good of the entire community. A Medical Coordination Center (MCC) was the beginning nucleus for what is now known as the DSMHCC+.

The MCC group was primarily composed of public health, emergency preparedness staff, hospital preparedness coordinators, EMS, key decision makers, and medical staff at the local hospitals and clinics. The development of this strategic plan is a direct result of their commitment to continuing the work of the early MCC and expanding upon their efforts to include other key stakeholders who are dedicated members of the ESF8 community.

Introduction

This strategic plan is designed to ensure that public health in Polk County is protected before, during, and after all types of hazards and that the response needed for each disaster type is coordinated among all our community partners.

This strategic plan outlines the roadmap for DSMHCC+ over the next five years. It is designed to align our resources, actions, and initiatives with our mission, vision, and purposes, ensuring sustained growth and development. It provides a clear direction for achieving our long-term goals while addressing our environment's dynamic challenges and opportunities.

Scope of the Plan

This strategic plan covers all significant aspects of our organization, including but not limited to:

- Mission and Vision: Defining our purpose and long-term aspirations.
- Purpose: Guiding behaviors that influence our decision-making and behavior.
- Strategic Goals: Key goals we aim to achieve within the planning period.
- Actions: Specific projects and actions required to meet our objectives.
- Resources Allocation: financial, human, and technological resources needed.
- Performance Metrics: Criteria for measuring progress and success.

Context and Background

DSMHCC+ operates in a rapidly changing environment characterized by post-pandemic impacts on the healthcare system and an increased vulnerability to many different types of disasters. Understanding these factors is crucial for our strategic planning process. Over the past five years, we have successfully collaborated in the response to various pandemics, weather related, and cyber security disasters. In each scenario, our commitment to serving the Whole Community has strengthened. Each disaster response is viewed as a way to learn from our challenges and improve our collective disaster preparedness. Building on this foundation, this plan aims to guide people towards a more innovative and resilient future.

Mission Statement:

Enhance the health and well-being of Polk County residents by engaging healthcare agencies through collaboration, coordination, mitigation, prevention, protection, response, and recovery operations relating to public health and medical service events.

Vision Statement:

Establish a resilient, interconnected healthcare system that is accessible to all Polk County residents before, during and after disasters.

Our Purpose:

We are guided by the following behaviors:

- Acknowledge that our local healthcare systems are connected and need full and transparent collaboration to optimize our mission.
- Provide a forum for the local healthcare community to interact with one another and with other response agencies at the local level to promote emergency preparedness.
- Coordinate and improve the delivery of healthcare emergency response services and support EOC operations through ESF 8 representation.
- Focus on capability-building for the healthcare system, which will benefit the whole community's health through standardized practices and integration with other response partners.
- Ensure overall readiness through the coordination of community-wide training and exercise initiatives.
- Leverage resources to enhance DSMHCC+ initiatives.

Strategic Planning Process

The development of this strategic plan involved a comprehensive and collaborative process, including:

- Stakeholder Engagement: Consulting with key stakeholders in the healthcare community to gather insights and feedback.
- Review and Updating of Polk County Hazard Mitigation Plan
- Strategic Workshops: Holding planning sessions with leadership and cross-functional teams to brainstorm and prioritize strategic goals, actions and metrics.
- Drafting and Review: Continual revision of draft plan based on new information and the perspectives of key stakeholders and experts.

Conclusion

This strategic plan represents our commitment to proactive and strategic management. It serves as a living document that will continue to evolve and guide our actions and decisions, ensuring we remain focused on our mission and vision. By following this plan, DSMHCC+ will be well-positioned to navigate challenges, seize opportunities, and achieve sustained success.

Executive Summary

The 2024 - 2029 ESF 8 Strategic Plan is designed to serve as a roadmap that guides how Polk County EMA, Polk County Health, and the many healthcare stakeholders will regularly collaborate with all partners, including behavioral health, environmental health, emergency management, health care providers, and many more entities, to advance public health preparedness and response activities post-COVID-19.

This document is arranged to parallel the Polk County Comprehensive Emergency Plan, ESF 8 Public & Medical Services Annex sections with the addition of a few components that were necessary in order to document and capture all of the areas for improvement that were identified after reflecting on our experiences during the Covid Pandemic.

Within each section of the plan, workgroups came together to identify the basics of what projects lie in each area and developed a gap statement. Goals were identified, serving as the overarching “ideal state” for that annex to achieve over the next five year period. Each goal reflects a desire to increase our overall preparedness and response posture for events that impact the public health and medical community. Clearly identified actions and metrics are also included to help the work groups move forward in an agreed upon manner and measure the progress towards meeting the goals.

The goals and action steps outlined are not quick fixes and will take the collaborative effort of the ESF8 community of stakeholders to address. The commitment of time, funding and cooperation of many will be necessary to develop, validate and implement the necessary corrective actions and long term course corrections that will result in strengthened capabilities for future public health events.

Emergency Support Functions (ESF) at a Glance

Epidemiological Surveillance and Investigation

Goal:

Provide and support routine surveillance and epidemiological investigations of emerging infectious diseases and protect the citizens of the DSMHCC+.

Action:

- Coordinate activities with stakeholders who can provide surveillance data
- Explore opportunities to consolidate data into one system.
- Provide bi-directional surveillance information to assist in quicker identification and support alignment of mitigation strategies.

Metric:

Goal:

Provide, recommend, and implement public health interventions to support the mitigation of an infectious disease, hazard, or event.

Action:

- Ensure intervention information and education provided to the community align among all healthcare and stakeholders
- Educate the Whole Community and healthcare stakeholders about intervention(s) that should be implemented to mitigate the exposure to diseases.
- Develop relationships with community agencies who can help to amplify the message about effective interventions and mitigation efforts.

Metric:

- Monitor the effectiveness of mitigation efforts.
- Communicate and coordinate guidance with all healthcare systems and the community.
- Monitor and assess public health guidance.

Goal:

Develop methods to ensure increased staffing is available to support investigations during surge events.

Action:

- Determine triggers for the request for increased staffing and develop ways to share information across a variety of healthcare providers.
- Provide just in time training for new/additional personnel.
- Crosstrain healthcare personnel to aid in flexibility of staffing during surge events.

Metric:

- Criteria scale that would trigger the need for increased staff
 - Training sessions offered to new personnel.
-

Goal:

Incorporate additional positions into EOC, for example, but not limited to - Lab personnel, Epidemiologist, Legal personnel, Policy Group Personnel, Mental Health Services, Populations Based Coordinator, School district leadership,

Action:

- Engage key people in learning basis EOC - IS courses designed by FEMA
- Develop introductory sessions for key EOC members to initiate them to the space and process used during an emergency or disaster.

Metric:

- Number of FEMA IS courses completed.
- Frequency of EOC introductory sessions offered

Laboratory Testing

Goal:

Expand testing capability and capacity in laboratory response networks.

Action:

- Strengthen partnerships and build new relationships with nontraditional partners.
- Identify a dedicated supply chain for laboratories capable of meeting surge needs.

Metrics:

- Identification and cataloging of nontraditional lab partners and their capabilities.
 - Matrix developed to compare different vendors and determine the most appropriate supply chain distributor to meet our local emergent needs.
-

Goal:

Conduct widespread testing during the early phase of an outbreak and when potential surges occur.

Action:

- Examine the locations of clinical labs and their proximity to patients.
- Strengthen partnerships between public health, industry, clinical labs, and governmental entities.
- Explore consolidation of testing among healthcare systems to provide less staffing, coordinated surveillance, and resource constraints.

Metric:

Responder Health & Safety

Goal:

Develop a mechanism for monitoring current staffing levels within our local healthcare systems and determine thresholds/metrics to assist with implementing the request for additional staffing.

Action:

- Develop methods to monitor real-time staffing rates across various healthcare systems.
- Leverage partnerships with staffing agencies for expedited recruitment.
- Monitor patient flow and adjust staffing dynamically to meet demand.

Metric:

- Percentage increase in staffing levels within specified time frame.
 - Patient-to-nurse ratio improvements
-

Goal:

Educate various healthcare systems on the proper application of different measures to effectively reduce the transmission of infectious diseases.

Action:

- Develop standards for best practices with regard to the effective implementation of a variety of mitigation measures.
- Train/teach healthcare workers on the correct procedures for donning and doffing PPE to avoid contamination.
- Clarify when and where PPE should be used depending on the level of exposure and type of patient care provided.

Metric:

- PPE compliance rates
 - Reduction in healthcare-associated infections.
-

Goal:

Ensure that responders receive timely and appropriate support during and after traumatic events.

Actions:

- Develop and implement a crisis intervention plan for critical incidents.
- Provide debriefing sessions following traumatic events.
- Offer long-term mental health follow-up after crises.

Metrics:

- Response time for crisis intervention services.
- The number of debriefings conducted post-incident.
- Follow-up care utilization rates.

Goal:

Develop computer-aided dispatch systems to provide EMS personnel with timely access to persons needing assistance with infectious diseases.

Action:

- Leverage relationships with PSAP to develop criteria of when to share the potential infectious information with responders.
- Identify the triggers in large scale emergency events that trigger the automatic use of personal protective equipment

Metric:

- Collect data on responder well-being when additional information is shared

Environmental Health

Goal:

Establish systems for early detection and response to environmental health threats.

Actions:

- Set up environmental health surveillance systems.
- Develop rapid response protocols for environmental emergencies (e.g., chemical spills, natural disasters).
- Collaboration with public health agencies to address emerging environmental health risks.

Metric:

- Time taken to detect and respond to environmental health threats.
 - Effectiveness of response protocols in minimizing harm.
 - Collaboration outcomes with public health agencies.
-

Goal:

Ensure continuous coordination, updating and communication between public health institutions and organizations at the local, national and global level.

Action:**Metric:**

Isolation & Quarantine

Goal:

Ensure the public health system is equipped to implement isolation and quarantine effectively and continuously assess the effectiveness of the measures. .

Action:

- Identify current implementation capabilities and gaps
- Encourage voluntary compliance through community outreach and education rather than relying solely on enforcement.
- Adapt strategies as needed based on the effectiveness of the implemented measures.

Metric:

- Develop an updated plan for isolation and quarantine based on capabilities and gaps.
 - Ready made marketing materials for community outreach.
 - Data collected for adaptations to strategies.
-

Goal:

Increase public understanding and compliance with isolation and quarantine measures.

Action:

- Provide clear, accurate, and timely information to the public about the reason for and procedures related to isolation and quarantine.
- Address misconceptions and provide guidelines on what individuals should do if they are subject to these measures.

Metric:

Goal:

Facilitate effective coordination between local, state, and federal agencies during isolation and quarantine efforts.

Action:

- Identify key stakeholders at each level to help facilitate coordination.
- Determine pathways for communication to flow both ways among all 3 levels.

Metric:

Mass Casualty Incident

Goal:

Increase the knowledge, training and implementation proficiency levels of all stakeholders during MCI.

Action:

- Determine method to activate and notify available personnel to serve in liaison positions in a timely fashion once MCI has been declared.
- Develop training modules and job aids for all MCI plan positions.
- Update MCI vest kits for EMS agencies.

Metric:

- Monitor check-in times as hospitals
 - Gather feedback from hospitals and liaisons from After Action Reviews to assist with improving the job responsibilities and aid in improved MCI response.
-

Goal:

Establish clear communication channels between all stakeholders, including hospitals, EMS, public health agencies and government authorities.

Action:

- Implement real-time information-sharing systems to coordinate resources, track patient status and make informed decisions during an MCI.

Metric:

Medical Surge

Goal:

Expand the healthcare infrastructure to accommodate a sudden influx of patients.

Actions:

- Identify and re-designate surge capacity areas within the hospital
- Develop modular or temporary structures that can be rapidly deployed
- Explore cross-leveling patients within Polk County Hospital systems
- Review and update current county-level surge hospital plan
- Review and update current county-level alternate care site
- Discuss and explore crisis standards of care for alignment and differences

Metrics:

- Number of additional beds or treatment areas that can be activated within 24-48 hours.
 - Time required to set up temporary facilities
 - Percentage of facilities with updated surge plans.
-

Goal:

Develop pathways to ensure the effective ease of communicating situational awareness around events requiring surge capacity within the ESF 8 community.

Actions:

- Development of an easy- to- implement dashboard for tracking pre, during and post surge info.
- Establish partnerships with local public health departments, EMS, and community organizations for coordinated response efforts.
- Leverage community and public health resources to support hospitals during a surge.
- Introduce stakeholders to (MCC) command center to coordinate all aspects of the surge response.

Metrics:

- Outcomes of partnerships with public health and community organizations.
- Number of patients diverted to our managed by community resources.
- Number of drills and simulations conducted to test surge capacity.

Goal:

Improve internal and external communication to ensure a coordinated response.

Action:

- Develop clear communication protocols between departments, facilities, and external agencies (e.g., public health department, emergency management)

Metrics:

- Response times for inter-departmental communication during surges.
 - number of drills and simulations conducted to test communication protocols.
 - Accuracy and timeliness of information dissemination during surge events.
-

Goal:

Expand representation in the MCC to include stakeholders from non-acute care agencies as needed for the event. This should include long-term care, clinics, home health, and hospital system leadership.

Action:

- Develop Standard Operating Procedures (SOP) for the implementation of MCC.
- Develop Job action plans for all roles within MCC.

Medical Supplies Management & Distribution

Goal:

Create effective communication systems to coordinate between healthcare facilities, suppliers, and government agencies for real-time updates on supply needs and availability.

Action:

- Develop a realtime burn rate calculator for key supplies
- Develop a system for single point ordering for difficult to obtain supplies.

Metric:

Goal:

Maintain sufficient stockpiles of essential medical supplies, medications, PPE, devices and consumables.

Action:

- Develop and implement an inventory rotation system

Metric:

Mass Prophylaxis

Goal:

Provide stakeholders with coordination of MCM before, during, and after dispensing.

Actions:

- Develop county-specific strategies based on federal and state guidance to provide MCM to at-risk populations.
- Establish a plan to provide dispensing locations at various community sites, such as clinics, retail pharmacies, higher education, closed PODS, and others.

Metric:

Goal:

Provide a call center for people who are unable to seek information or need help getting an appointment

Action:

- Develop a framework to set up a call center rapidly.
- Provide call center location, staffing, and resources
- Develop training for staffing and a staffing schedule

Metric:

Goal:

Identify response roles within the health department, MCC, and PCC, and train and exercise them.

Action:

- Develop processes within the MCC and PCC to ensure all stakeholders are at the table
- Explore that all stakeholders are present, such as long-term health, and others.
- Provide health department staff in EOC roles training and exercises.

Metric:

Goal:

Explore data software for MCM inventory and distribution

Action:

- Research potential technology to provide accurate, timely, secure inventory management

Metric:

Fatality Management

Goal:

Establish comprehensive plans and protocols for managing mass fatalities in advance of any event.

Actions:

- Develop a mass fatality management plan that includes identification, recovery, storage, and final disposition of remains.
- Coordinate with local, state, and federal agencies to incur an integrated response.
- Regularly update and test the plan through drills and simulations.

Metrics:

- Completion and regular review of a mass fatality management plan.
 - Frequency and outcomes of drills and simulations.
 - Inter-agency coordination effectiveness during exercises.
-

Goal:

Secure the necessary resources and infrastructure to handle large numbers of fatalities.

Actions:

- Identify and maintain facilities for temporary storage of remains (e.g., refrigerated trucks or temporary morgues.)
- Stockpile essential supplies, including body bags, identification tags, and personal protective equipment (PPE)
- Establish agreements with local funeral homes, crematories, and cemeteries to expand capacity as needed.

Metrics:

- Availability and readiness of temporary morgue facilities.
- Inventory levels of essential supplies and PPE
- Number of partnerships with funeral homes, crematories, and cemeteries.

Disaster Mental Health

Goal:

Increase awareness and understanding of mental health issues that arise due to disasters.

Actions:

- Adopt a crisis mental health support protocol and train people who can respond during a disaster.
- Promote mental health support programs.
- Develop educational materials tailored to the unique stressors faced by survivors of disasters.

Metrics:

- Number of training sessions conducted annually.
 - Number of promotional materials developed
 - Increased sharing of educational materials
-

Goal:

Incorporate mental health support positions within the EOC during response to disaster.

Actions:

- Identify key lead in EOC to coordinate mental health supports during and after disaster
- Provide training to key lead - FEMA course(s)

Metrics:

- Evaluation of newly incorporated positions and adjustments for implementation for future use through After Action Reviews.
-

Goal:

Ensure that disaster survivors receive timely and appropriate support during and after traumatic events.

Actions:

- Develop a catalog of updated contacts for mental health providers and resources available in the area.
- Develop and implement a crisis intervention plan for critical incidents.
- Provide debriefing sessions following traumatic events.
- Offer long-term mental health follow-up after crises.

Metrics:

- Response time for crisis intervention services.
- Number of debriefings conducted post-incident.
- Follow-up care utilization rates.

