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#### I. INTRODUCTION

#### A. PURPOSE

The purpose of this appendix is to coordinate assistance to supplement local resources in response to public health needs following a disaster. Resources will be furnished when local resources are not adequate and local governments request public health assistance.

#### B. SCOPE

Public health involves identifying and meeting the health and environmental needs of a major emergency or disaster. The NC Department of Health and Human Services (NCDHHS) directs the provision of public health assistance through all resources within NCDHHS and supporting departments and agencies available to accomplish assigned missions. Public health activities include assessment of public health needs, human health surveillance, food and drug device safety, public health information, vector control, biological hazards, victim identification, and mortuary service.

#### II. SITUATION AND ASSUMPTIONS

#### A. SITUATION

A significant natural disaster or man-made incident that overwhelms the affected counties would call for state public health assistance. A significant disaster could result in public health threats such as problems related to indoor environment, food, vectors, and general health conditions. Disasters directly caused by infectious agents such as influenza, anthrax, and other biological and chemical terrorist agents will require state resources to support the local public health system.

#### B. ASSUMPTIONS

- 1. Damage to infrastructure could result in environmental and public health hazards.
- 2. Assistance will be required to maintain the continuity of public health services.
- 3. Disruption of sanitation services and facilities, loss of power, and massing of people in shelters may increase the potential for disease.

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#### III. ORGANIZATION AND ASSIGNMENT OF RESPONSIBILITIES

- A. LEAD STATE AGENCY
  - 1. NC DEPARTMENT OF PUBLIC SAFETY (NCDPS)

#### NORTH CAROLINA EMERGENCY MANAGEMENT (NCEM)

- a. Provide assistance as needed through field services personnel.
- b. Coordinate requests for resources from all state agencies.

#### B. LEAD TECHNICAL AGENCY

#### 1. NC DEPARTMENT OF HEALTH AND HUMAN SERVICES (NCDHHS)

- a. Provide leadership in directing and coordinating state efforts to provide public health assistance to the affected area.
- b. Direct and coordinate the activation and deployment of personnel, supplies, and equipment in response to requests for state assistance.
- c. Establish and maintain monitoring systems for the protection of public health.
- d. Provide guidance and assistance to local public health departments, health care entities and the general public.
- e. Develop and distribute infection prevention and chemical exposure guidance and tools.
- f. Provide guidance for sheltering models and staffing with Public Health Nurses and coordinate with OEMS for alternate healthcare staffing options.

#### **DIVISION OF PUBLIC HEALTH (DPH)**

- a. Provide for the epidemiological investigation of a known or suspected threat caused by nuclear, biological, or chemical agents.
- b. Provide for the procurement and allocation of immunizing AND PROPHYLACTIC agents.
- c. Provide for the distribution of the Strategic National Stockpile.

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- d. Coordinate appropriate conditions for quarantine and isolation in order to prevent further transmission of disease.
- e. Issue guidelines for prophylaxis and treatment of exposed and affected persons.
- f. Provide medical and non-medical administrative assistance as available and necessary to immunization clinics.
- g. Provide North Carolina State Laboratory of Public Health (NCSLPH) support or facilitate laboratory testing of specimens derived from persons that may have been exposed to a nuclear, biological, or chemical agent, when appropriate.
- h. Provide NCSLPH testing services for private well water supplies.

#### OFFICE OF THE CHIEF MEDICAL EXAMINER

- a. Oversee and advise on human remains collection and identification in coordination with local, state, and federal agencies.
- b. Perform a death scene investigation in coordination with local, state and federal agencies.
- c. Coordinate the identification of evidence to be collected.
- d. Determine and certify cause and manner of death after completing an examination of human remains.
- e. Coordinate the identification of temporary storage facilities and other resources necessary for the storage of human remains
- f. Coordinate the transportation of the human remains to the storage facility.
- g. Assist local medical examiners in mass fatality death investigations.
- h. Advise local government of necessity for temporary morgue and body storage (refrigerator trucks) if local facilities are inadequate.
- i. Complete a Death Certificate, a report of investigation, and other reports, including autopsy, as required.

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- j. Coordinate the release of remains to next of kin with assistance of the NC Funeral Director Association.
- k. Request assistance from the Disaster Mortuary Response Team (DMORT) if state resources become overwhelmed.

#### DIVISION OF AGING AND ADULT SERVICES (DAAS)

- a. Serve as a primary advisor for the older adult population (age 60 and above), and in collaboration with disability specific divisions, on concerns relating to those 18 years old and above with disabilities.
- b. Provide data on locations of isolated or vulnerable older citizens.

# DIVISION OF SERVICES FOR THE DEAF AND HARD OF HEARING (DSDHH)

#### DIVISION OF SERVICES FOR THE BLIND (DSB)

- a. Facilitate communication to communities of deaf, deafblind, hard of hearing, or blind individuals.
- b. Serve as the primary advisor on communicating access concerns and advise on appropriate communication access accommodations for communities of deaf, deafblind, hard of hearing, or blind individuals.
- c. Provide sign language interpreter for press conferences.
- d. Provide data on locations of citizens with disabilities.

#### DIVISION OF MENTAL HEALTH, DEVELOPMENTAL DISABILITIES, AND SUBSTANCE USE SERVICES (MHDDSUS)

- a. Provide recommendations to the SERT Leader on mental health, developmental disabilities, and substance abuse issues.
- b. Distribute educational materials on the effects of psychiatric medicines, stress reduction techniques, local behavioral developmental disabilities and substance use to impacted communities and responders. Ensure these materials are accessible to people with sensory and cognitive disabilities through local public service systems.
- c. Coordinate all related activities with staff of the NC Division of State Operated Healthcare Facilities.

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#### DIVISION OF HEALTH SERVICE REGULATION (DHSR)

#### OFFICE OF EMERGENCY MEDICAL SERVICES (OEMS)

- a. Coordinate and direct the activation and deployment of state resources of medical personnel, supplies, equipment, and pharmaceuticals with the Division of Public Health as needed.
- b. Assist in the development of local capabilities for the on-site coordination of all Emergency Medical Services needed.
- c. Establish and maintain the cooperation of the various state medical and related professional organizations in coordinating the shifting of Emergency Medical Services resources from unaffected areas to areas of need.

#### DIVISION OF SOCIAL SERVICES (DSS)

- a. Coordinate with mass care support agencies to support local operations.
- b. Obtain personnel rosters, sheltering listings, and number of shelter managers from county departments of social services responding in affected jurisdictions.
- c. Provide technical assistance, when requested, to county departments of social services in organizing resources to provide food and water requirements for affected population.
- d. Provide technical assistance, when requested, to county departments of social services in organizing transportation of food and water from identified warehouses to mass care feeding sites.
- e. Track and report the status of local support operations.
- f. Coordinate with partners to answer questions from county departments of social services about accessibility.
- g. Coordinate all requests for spoken-language and American Sign Language interpreters.

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#### C. SUPPORTING STATE AGENCIES

## 1. NC DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES (NCDA&CS)

- a. Monitor disaster related health threats relating to animal disease, food or drug contamination, or hazardous exposure to pesticides or fertilizer.
- b. Provide recommendations to the SERT Leader and lead technical agency on phased public health response and food safety.
- c. Implement animal disease control procedures.
- d. Ensure proper animal carcass disposal.
- e. Provide response personnel as needed.
- f. Provide technical support on veterinary issues as the situation warrants.
- g. Assist with inspection of NCDA&CS regulated facilities and sites.

#### 2. NC DEPARTMENT OF ENVIRONMENTAL QUALITY (NCDEQ)

- a. Serve as primary advisor on environmental concerns.
- b. Support NCDHHS as required.

#### 3. NC FUNERAL DIRECTORS ASSOCIATION (NCFDA)

- a. Assist in the notification of next of kin.
- b. Facilitate the coordination, preparation, and transportation of the remains of victims to appropriate destinations.

#### 4. NC DEPARTMENT OF LABOR (NCDOL)

- a. Provide expertise in labor regulations for responders, including sending hazard alert letters or other publications ensuring compliance with applicable regulations.
- b. Provide advice on labor regulation to the SERT Leader.

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#### IV. CONCEPT OF OPERATIONS

#### A. GENERAL

The NCDHHS Division of Public Health will be responsible for the coordination of services, equipment, supplies, and personnel to meet the public health needs resulting from disasters. Staff and material resources currently existing within the primary and support agencies, private industry, and community volunteer organizations will be employed to meet the public health needs.

#### B. NOTIFICATION

When a disaster occurs, or when the potential for disaster exists, the lead and supporting agencies will be notified by State EOC staff by most efficient means available. Agencies will be asked to report to the State EOC or to be on standby as the situation dictates.

Each Public Health agency is responsible for insuring that sufficient and qualified program staff are available to support the Public Health Emergency Support Function and to carry out the activities tasked to their agency on a continuous basis. Individuals representing agencies that are part of the staffing of the State EOC will have extensive knowledge of the resources and capabilities of their respective agencies and have access to the appropriate authority for committing such resources during the activation.

#### C. RESPONSE ACTIONS

#### 1. INITIAL

- a. Assess public health needs and provide guidance as necessary.
- b. Review and prioritize requests for assistance relating to surveillance, infectious disease outbreak management, medical countermeasures and vector control.
- c. Determine personnel and resource needs.

#### 2. CONTINUING

- a. Continue to verify the nature and extent of public health threats and provide guidance as necessary.
- b. Establish appropriate monitoring and surveillance procedures.

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- c. Activate resources.
- d. Move supplies, equipment and support personnel to staging areas.
- e. Establish communications.
- f. Initiate a public information program.
- g. Public Health agencies will continue to assess long-term issues and will assist local governments in developing plans of action.

#### V. DIRECTION, CONTROL AND COORDINATION

#### A. LOCAL

The management of public health is primarily the responsibility of local government. When a disaster occurs which overwhelms the resources of local government, additional public health assistance may be requested from the state. In accordance with NIMS, the county EOC will serve as the conduit for requests up to the state and as the coordinator for resources delivered down to the local level.

Local public health agencies are organized to address four broad areas of concern:

- Health Intelligence local health departments will be alerted to healththreatening disasters and will report public health threats to NCDHHS DPH, regardless of whether assistance is required.
- General Health and Sanitation health departments will provide general guidance and direction on public health matters.
- Epidemiology health departments will take appropriate measures to investigate and control disease outbreaks in order to prevent widespread epidemics.
- Vector Control health departments will take measures to control animals and/or insects carrying disease-causing agents.

#### B. STATE

The Division of Public Health will coordinate all public health activities from the State EOC. Support agencies will provide staff in the State EOC for the duration of the incident. Where necessary, DPH will serve to assist local

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agencies in obtaining services from appropriate state agencies in order to fill their missions. At the state level, this activity is led by DEQ and DPH will assist as needed in coordinating those requests to DEQ.

SERT Public Health activities will be implemented upon a request from a county for assistance following the occurrence of an emergency or disaster (natural or man-made) and determination has been made that a state response is warranted.

#### C. FEDERAL

The US Department of Health and Human Services will serve as the lead agency for federal ESF-8, Health and Medical Services. A federal Regional ESF-8 representative will be located in the State EOC and will maintain coordination to monitor current public health assistance requests. There will be close coordination between DPH and OEMS on any request for federal assistance. Federal assistance must be requested by and be subordinate to state public health activities.