

STATEWIDE HEALTH AND SUPPORT

BUREAU OF PREPAREDNESS AND RESPONSE

SERVICE:

PUBLIC HEALTH AND HEALTHCARE PREPAREDNESS AND RESPONSE

DESCRIPTION OF SERVICE:

Florida faces many threats with the potential for negative health consequences; including disease outbreaks, natural disasters, and terrorist attacks. The Bureau of Preparedness and Response (BPR) recognizes that preparing for and responding to these threats requires the commitment of and cooperation among all segments of the healthcare system and the public. BPR's role is to:

- **Facilitate** a culture of preparedness in the Department of Health through developing policy, ensuring a competent and trained public health workforce, and maintaining a viable DOH Emergency Operations Plan.
- **Guide** the state's public health and healthcare preparedness efforts through collaborative strategic planning and engaging and maintaining key partnerships.
- **Coordinate** the development of capabilities that build community resilience and ensure sustainable public health, healthcare, and emergency management systems. This coordination is accomplished through allocating federal funding; engaging partners; building sustainable planning, equipping, training, and exercise processes; and the sharing of best practices.
- **Support** local and regional communities when an incident or event overwhelms their health and medical infrastructure. The support includes maintaining situational awareness, providing leadership and staff to the State Emergency Response Team (SERT) Emergency Support Function (ESF) 8, conducting incident planning, and mobilizing medical logistics.

SPECIFIC SERVICES OR ACTIVITIES PROVIDED:

BPR's services are delivered through the following key programs and systems:

- **Emergency Support Function (ESF) 8** provides support to local incident management through maintaining situational awareness, conducting incident planning and coordinating mobilization of state, regional, and federal resources based on the needs of the local jurisdictions. The ESF-8 System is a component of the State Emergency Response Team and is responsible to the State Coordination Officer. ESF-8 also works closely with the Planning Program to develop the Florida Comprehensive Emergency Management Plan, Emergency Support Annex 8 and participates in state-wide trainings, exercises, and national events that require a preparedness and response presence like the Super Bowl (2009 and 2010) and the Republican National Conference (2012).
- **Community Resiliency** enhances community readiness including support to vulnerable populations most at risk for poor outcomes due to a disaster or incident. Resources support county health departments and partners in their whole community approach to understanding and meeting needs; and engaging and empowering all parts of community. With adequate information, resources, and tools, communities are better prepared to prevent, protect against, mitigate, respond, rebound, recover, and adapt to threats and all-hazards.
- **Planning** creates and sustains a viable Department of Health Emergency Operations Plan (EOP) and support Annexes, as well as assist planners at the county and regional levels. The Planning program also works closely with the Information Sharing program to provide threat assessments and vulnerability analyses, and leads a Public Health and Healthcare Preparedness multi-agency partnership to promote plan development, evaluation tools, and resources.

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- **Medical Surge** enhances the health care system's ability to provide a surge capability in medical care service delivery as a response to natural or man-made events. Medical surge preparedness is supported through dissemination of tools, planning resources, training, supplies, and equipment that support readiness. A key element of medical surge is supporting the development and sustainment of healthcare coalitions.
- **Training and Exercise** develops a competent, trained and credentialed public health and medical workforce by implementing a Multi-Year Training and Exercise Plan, which educates and tests individual and organizational competencies necessary to implement response plans.
- **Medical Logistics** ensures equipment, supplies and personnel assets are available to support local response needs. The system includes sustainable processes to assess needs, and to purchase, store, maintain, mobilize and recover assets.
- **Information Sharing** supports the gathering, analysis, and sharing of information critical to sustaining and building capabilities and responding to emergencies. Information Sharing is supported through the maintenance of interoperable communications systems and processes that provide alerts and notifications, situational awareness on threats, hazards and incidents, and health care resource availability status.
- **Strategic Program Management** is supported by strategic planning, program and process management, performance measurement, and quality improvement capability and capacity assessments, and other assessments/analyses to establish priorities and evaluate effectiveness of preparedness initiatives. Strategic Program Management works closely with the Information Sharing program to ensure communication and coordination with key stakeholders and systems. In order to achieve federal funded capabilities, the program coordinates and communicates with key stakeholders, including the Florida Domestic Security Oversight Council, the State Working Group on Preparedness, the Regional Domestic Security Task Forces, county health departments, hospitals, emergency medical services providers, interstate and federal preparedness partners, and other public and private partners engaged in preparedness and response.
- **Grants Management and Administration** receives and manages federal funding which supports sustaining and building capabilities, supporting personnel resources, and monitoring administrative activities to ensure compliance with department, state, and federal requirements.

CLIENT ELIGIBILITY CRITERIA:

There are no delimiting client eligibility criteria. All citizens and visitors to the state are eligible for services/support in the event of a natural, biological, or man-made disaster.

NUMBER OF CUSTOMERS/PROJECTS:

BPR achieves federally-defined preparedness capabilities using a program management infrastructure. Fifteen (15) federal preparedness capabilities and six (6) Florida-specific capabilities are implemented by way of twenty-one (21) programs and 125 deliverables for the 2013-14 fiscal year. The number of customers served during a disaster or event is defined by the size and scope of the disaster or event.

SERVICE PROVISION:

The number of preparedness funded FTEs include: 158 in county health departments, 73 in BPR and 39 in other headquarter offices/bureaus.

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IMPACT:

Minimize loss of life, injury, and illness from natural and man-made disasters through coordinated and effective planning and response at the local, state, and federal levels.

From 2007 to 2013, Florida responded successfully to many events, including tropical storms Fay, Alberto, Beryl, and Debby, and hurricanes Gustav, Ike, Isaac, and Sandy. Florida provided responders via the Emergency Management Assistance Compact (EMAC) and, in coordination with the Region IV Unified Planning Coalition, to the Kentucky Ice Storms in January 2009. In addition, the department took the lead in responding to the Chinese Drywall event (2009), the fungal meningitis outbreak (2012), and tuberculosis among the homeless in Duval County (2012). Other unique and unusual challenges during this time included:

- Coordinating Florida's statewide response to the year-long H1N1 influenza pandemic (2009-10), resulting in an estimated 3.7 million Floridians' immunized; shipped 839,409 adult and 344,400 pediatric surgical masks, 878,534 N-95 respirators and 389,000 gloves; distributed over 425,000 regimens of antiviral medication and dispensed nearly 36,000; and handled 54,000 calls to the Flu Information Line, plus more than 156,000 visitors to the information website.
- After a catastrophic earthquake in Haiti (2010), State Emergency Support Function (ESF) -8 coordinated the movement of 717 critically injured patients into Florida hospitals, including burn patients, crush injuries, and spinal cord injuries. The most important impact of this response was that medical evacuees received a high level of expert care that did not reduce Florida's ability to support its own citizens. It is highly likely that many, if not most, of these patients would have died, had they remained in Haiti. While these critically injured patients were the main focus, the state ESF-8 also provided support to the repatriation process that brought over 26,000 U.S. citizens through Florida.
- The Deepwater Horizon oil spill (2010) (designated a "Spill of National Significance") impacted Florida and several other Gulf states. Florida provided responders to the Unified Command in Mobile, Alabama, and to the State Emergency Operations Center. In Florida, active monitoring of syndromic surveillance systems (for the detection of adverse health effects due to exposure to crude oil, crude oil by-products, pollutants, distillates, and dispersal agents) was conducted in Escambia, Santa Rosa, Okaloosa, Walton, Bay and Gulf counties.

BPR utilizes its enterprise strategic planning model to assess and manage risks and ensure return on investment through achieving robust public health and healthcare preparedness capabilities. As such, it facilitated the request, allocation and monitoring of over \$ 466 million in federal preparedness funding between 2007 and 2013. These efforts have improved Florida's preparedness and response posture through many initiatives, a few of which include:

- Forty-six county health departments have met national standards of readiness through Project Public Health Ready competency-based training and recognition program.
- Since 2002, more than \$130 million has been distributed to Florida hospitals for planning, training and exercise, and equipment purchases to support increased medical surge capacity. In 2012, federal preparedness funding efforts were refocused towards a "whole community" approach to disaster planning, response, and recovery. A top priority of this new approach is the development and sustainment of healthcare coalitions. These healthcare coalitions include hospitals, emergency medical services, public health, behavior/mental health, emergency management, long term care and other essential partners working together to identify and mitigate risks to the local healthcare delivery system.
- The ESF-8 Medical Logistics capability now encompasses more than \$12 million in inventory distributed among nine warehouse locations across the state, with caches of ventilators,

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personal protective equipment, IT equipment, and alternate medical treatment site equipment to support local needs during an event.

- Florida's Medical Reserve Corps (MRC) Network local units cover 55 of Florida's 67 counties, with a total of 18,600 MRC volunteers statewide. During 2009-2012, volunteers provided over 65,000 hours of assistance representing over \$2.3 million in health and medical services.
- Provided support, training, and supplies for 127 special needs shelters with a total capacity of 29,833. Also worked with community based organizations to assist 5,154 persons with disabilities to develop personal, comprehensive, emergency preparedness plans.
- Established Regional Disaster Behavioral Health Assessment Teams with more than 120 disaster behavioral health assessment team members ready to deploy.
- More than 30 statewide exercises were conducted and evaluated, including multiple Governor's Hurricane Exercises, the Tempests Guard (medical surge) Full Scale Exercise, Leading Edge (public health and medical response strike teams) Exercise, the Formidable Footprint (pandemic influenza) Exercise, the Turbulent Tide Exercise for public health and medical response strike teams, the Disaster Behavioral Health Exercise, Alternate Medical Treatment Site exercises, Laboratory exercises, Continuity of Operations exercises, Strategic National Stockpile, Turkey Point, Crystal River, and St. Lucie Nuclear Power Plant exercises (multiple), Mass Fatality exercises, and the Reducing the FEE Exercise (bioterrorism attack). Numerous regional, local, and entity-specific exercises were also conducted and evaluated.

MAJOR PROGRAM CHANGES:

- FY 2012 –13 Department of Health and Human Services (HHS) combines the funding opportunity announcements for the ASPR Hospital Preparedness Program and the Centers for Disease Control and Prevention (CDC) Public Health Emergency Preparedness Program.
In July of 2012, BPR's division's title became the Division of Emergency Preparedness and Community Support.
- FY 2011-12 Bureau receives approval of reorganization.
Assistant Secretary for Preparedness and Response (ASPR) released Healthcare Preparedness Capabilities: National Guidance for Healthcare System Preparedness.
- FY 2010-11 Centers for Disease Control and Prevention released Public Health Preparedness Capabilities: National Standards for State and Local Planning
- FY 2010-11 Published 2011-2013 Public Health and Healthcare Preparedness Strategic Plan
- FY 2009-10 Consolidation of Office of Public Health Preparedness and Office of Emergency Operations into the Bureau of Preparedness and Response
National Health Security Strategy
- FY 2008-09 Implemented enterprise strategic planning model; PHMP Strategic Plan updated August 2009
Approval of the Department of Health Emergency Operations Plan
- FY 2006-07 Florida Public Health and Medical Preparedness (PHMP) Strategic Plan 2007-2010
Pandemic and All-Hazards Preparedness Act 2006
- FY 2005-06 National Strategy for Pandemic Influenza
Implementation Plan for the National Strategy for Pandemic Influenza
Revised/Enhanced Health & Medical (ESF8) Emergency Management Written Protocols Based on 2004-2006 Emergency Experiences
- FY 2004-05 National Incident Management System (NIMS)/Incident Command System (ICS)
National Target Capabilities List

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Reorganized within the newly created Division of Emergency Medical Operations

FY 2003-04 National Response Plan
Continuity of Operations Plan (COOP)

FY 1999-03 Federal Terrorism Grant Implementation

FY 1993-94 Florida Department of Health Mass Immigration Response Plan
Hurricane Andrew Study FY 1995-99
Presidential Decision Directive #39
Presidential Decision Directive #62
Presidential Decision Directive #63
Presidential Decision Directive #67

STATUTORY AUTHORITY:

Chapter 252.31 – 252.61, Florida Statutes
Chapter 381.0011(6), 381.00315(1)(b), Florida Statutes
Chapter 943.0313(1)(a)(5), 943.0313(1)(a)(11), Florida Statutes
The Pandemic and All-Hazards Preparedness Act 2006
Public Law No. 109-417
Public Health Service Act, 42 U.S.C.
The Homeland Security Act of 2002
Public Law No. 107-296
The Robert T. Stafford Disaster Relief and Emergency Assistance Act
Public Law No. 93-288

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