

**ESF Coordinator:**

Department of Health and Human Services

**Primary Agency:**

Department of Health and Human Services

**Support Agencies:**

Department of Agriculture  
Department of Commerce  
Department of Defense  
Department of Energy  
Department of Homeland Security  
Department of the Interior  
Department of Justice  
Department of Labor  
Department of State  
Department of Transportation  
Department of Veterans Affairs  
Environmental Protection Agency  
General Services Administration  
U.S. Agency for International Development  
U.S. Postal Service  
American Red Cross

**INTRODUCTION**

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**Purpose**

Emergency Support Function (ESF) #8 – Public Health and Medical Services provides the mechanism for coordinated Federal assistance to supplement State, tribal, and local resources in response to a public health and medical disaster, potential or actual incidents requiring a coordinated Federal response, and/or during a developing potential health and medical emergency. The phrase “medical needs” is used throughout this annex. Public Health and Medical Services include responding to medical needs associated with mental health, behavioral health, and substance abuse considerations of incident victims and response workers. Services also cover the medical needs of members of the “at risk” or “special needs” population described in the Pandemic and All-Hazards Preparedness Act and in the *National Response Framework (NRF) Glossary*, respectively. It includes a population whose members may have medical and other functional needs before, during, and after an incident.

Public Health and Medical Services includes behavioral health needs consisting of both mental health and substance abuse considerations for incident victims and response workers and, as appropriate, medical needs groups defined in the core document as individuals in need of additional medical response assistance, and veterinary and/or animal health issues.

**Scope**

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ESF #8 provides supplemental assistance to State, tribal, and local governments in the following core functional areas:

- Assessment of public health/medical needs
- Health surveillance
- Medical care personnel
- Health/medical/veterinary equipment and supplies
- Patient evacuation
- Patient care
- Safety and security of drugs, biologics, and medical devices
- Blood and blood products
- Food safety and security

- Agriculture safety and security
- All-hazard public health and medical consultation, technical assistance, and support
- Behavioral health care
- Public health and medical information
- Vector control
- Potable water/wastewater and solid waste disposal
- Mass fatality management, victim identification, and decontaminating remains
- Veterinary medical support

### Policies

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The Secretary of Health and Human Services (HHS) leads all Federal public health and medical response to public health emergencies and incidents covered by the *NRF*. The response addresses medical needs and other functional needs of those in need of medical care, including assistance or support in maintaining independence, communicating, using transportation, and/or requiring supervision.

The Secretary of HHS shall assume operational control of Federal emergency public health and medical response assets, as necessary, in the event of a public health emergency, except for members of the Armed Forces, who remain under the authority and control of the Secretary of Defense.

The Secretary of HHS, through the Office of the Assistant Secretary for Preparedness and Response (ASPR), coordinates national ESF #8 preparedness, response, and recovery actions. These actions do not alter or impede the existing authorities of any department or agency supporting ESF #8.

HHS coordinates all ESF #8 response actions consistent with HHS internal policies and procedures (e.g., HHS Concept of Operations Plan for Public Health and Medical Emergencies, and the National Disaster Medical System (NDMS) Four Partner Memorandum of Agreement).

ESF #8 support agencies are responsible for maintaining administrative control over their respective response resources after receiving coordinating instructions from HHS.

The Emergency Management Group (EMG), operating from the HHS Secretary's Operations Center (SOC), coordinates the overall national ESF #8 response for the ASPR and maintains constant communications with the National Operations Center (NOC).

All headquarters and regional organizations (including those involved in other ESFs) participating in response operations report public health and medical requirements to the appropriate ESF #8 representative operating in the National Response Coordination Center (NRCC), the Regional Response Coordination Center (RRCC), or the Joint Field Office (JFO) when activated.

The Joint Information Center (JIC) will be established to coordinate incident-related public information, and is authorized to release general medical and public health response information to the public. When possible, a recognized spokesperson from the public health and medical community (State, tribal, or local) delivers relevant community messages. After consultation with HHS, the lead Public Affairs Officer from other JICs may also release general medical and public health response information.

In the event of a zoonotic disease outbreak and in coordination with ESF #11 – Agriculture and Natural Resources, public information may be released after consultation with the Department of Agriculture (USDA). In the event of an oil, chemical, biological, or radiological environmental contamination incident, ESF #8 coordinates with ESF #10 – Oil and Hazardous Materials Response on the release of public health information.

As the lead agency for ESF #8, HHS determines the appropriateness of all requests for release of public health and medical information and is responsible for consulting with and organizing Federal public health and medical subject-matter experts, as needed.

## **CONCEPT OF OPERATIONS**

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### **General**

Upon notification, the ASPR alerts identified HHS personnel to represent ESF #8, as required, in or on the:

- Domestic Readiness Group (DRG).
- NOC (Planning Element or Watch).
- NRCC.
- RRCC/JFO.
- National/regional teams.
- JIC.
- Other Federal, State, or tribal operations centers as required by the mission.

HHS notifies and requests all supporting departments and agencies to participate in headquarters coordination activities. The ASPR may request ESF #8 support agencies and organizations to provide liaison personnel to the HHS Headquarters command locations.

HHS Headquarters and ESF #8 staff provide liaison and communications support to regional ESF #8 offices.

Regional ESF #8 staff may be assisted by supporting Federal partners and HHS components.

ESF #8 staff in the RRCC or JFO will conduct a risk analysis, evaluate, and determine the capability required to meet the mission objective and provide required public health and medical support medical assistance to State, tribal, and local medical and public health officials.

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, HHS may provide assistance under its own statutory authorities. In these cases, every reasonable attempt is made to verify the need before providing assistance.

During the response period, HHS has primary responsibility for the analysis of public health and medical assistance, determining the appropriate level of response capability based on the requirement contained in the action request form as well as developing updates and assessments of public health status.

## **ORGANIZATION**

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### **Headquarters**

The Secretary of HHS leads the ESF #8 response. ESF #8, when activated, is coordinated by the ASPR. Once activated, ESF #8 functions are coordinated by the EMG through the SOC.

During the initial activation, HHS coordinates audio and video conference calls with the ESF #8 supporting departments and agencies, and public health and medical representatives from State, tribal, and local officials, to discuss the situation and determine the appropriate initial response actions.

HHS alerts and requests supporting organizations to provide a representative to the EMG to provide liaison support.

Public health and medical subject-matter experts (including partners representing all appropriate populations, such as pediatric populations, populations with disabilities, the aging, and those with temporary or chronic medical conditions) from HHS and ESF #8 organizations are consulted as needed.

### Regional

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HHS coordinates ESF #8 field response activities according to internal policies and procedures.

HHS may designate a Senior Health Official to serve as the senior Federal health official in the JFO.

Regional ESF #8 staff are ready to rapidly deploy, as the Incident Response Coordination Team – Advance (IRCT-A) to provide initial ESF #8 support to the affected location. As the situation matures, the IRCT-A will receive augmentation from HHS and partner agencies transitioning into a full IRCT capable of providing the full range of ESF #8 support to include medical command and control.

The regional ESF #8 staff includes representatives to staff the RRCC and/or JFO, as required, on a 24-hour basis for the duration of the incident.

### ACTIONS: INITIAL ACTIONS

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The HHS EMG increases staffing immediately on notification of an actual or potential public health or medical emergency. When activated by the NRCC, HHS consults with the appropriate ESF #8 supporting organizations to determine the need for assistance according to the functional areas listed below.

#### Assessment of Public Health/Medical Needs

HHS, in collaboration with the Department of Homeland Security (DHS), mobilizes and deploys ESF #8 personnel to support national or regional teams to assess public health and medical needs, including the needs of at-risk population groups, such as language assistance services for limited English-proficient individuals and accommodations and services for individuals with disabilities. This function includes the assessment of the health care system/facility infrastructure.

#### Health Surveillance

HHS, in coordination with supporting departments and agencies, enhances existing surveillance systems to monitor the health of the general and medical needs population; carries out field studies and investigations; monitors injury and disease patterns and potential disease outbreaks, blood and blood product biovigilance, and blood supply levels; and provides technical assistance and consultations on disease and injury prevention and precautions.

### **Medical Care Personnel**

Immediate medical response capabilities are provided by assets internal to HHS (e.g., U.S. Public Health Service Commissioned Corps, NDMS, and Federal Civil Service employees) and from ESF #8 supporting organizations.

- ESF #8 may request Department of Defense (DOD) support for casualty clearing and staging, patient treatment, and support services such as surveillance and laboratory diagnostics.
- ESF #8 may seek individual clinical public health and medical care specialists from the Department of Veterans Affairs (VA) to assist State, tribal, and local public health and medical personnel.
- ESF #8 may engage civilian volunteers, such as Medical Reserve Corps, to assist State, tribal, and local public health and medical personnel.

### **Health/Medical/Veterinary Equipment and Supplies**

In addition to deploying assets from the Strategic National Stockpile (SNS), ESF #8 may request DOD or the VA to provide medical equipment, durable medical equipment, and supplies, including medical, diagnostic, and radiation-detecting devices, pharmaceuticals, and biologic products in support of immediate medical response operations and for restocking health care facilities in an area affected by a major disaster or emergency. When a veterinary response is required, assets may be requested from the National Veterinary Stockpile, which is managed by USDA Animal and Plant Health Inspection Service (APHIS).

### **Patient Evacuation**

ESF #8 is responsible for transporting seriously ill (seriously ill describes persons whose illness or injury is of such severity that there is cause for immediate concern, but there is not imminent danger to life) or injured patients, and medical needs populations from casualty collection points in the impacted area to designated reception facilities. ESF #8 coordinates the Federal response in support of emergency triage and prehospital treatment, patient tracking, and distribution. This effort is coordinated with Federal, State, tribal, territorial, and local emergency medical services officials.

ESF #8 may request DOD, VA, and DHS/Federal Emergency Management Agency (FEMA), via the national ambulance contract, to provide support for evacuating seriously ill or injured patients. Support may include providing transportation assets, operating and staffing NDMS Federal Coordination Centers, and processing and tracking patient movements from collection points to their final destination reception facilities.

DOD is the only recognized Federal partner responsible for regulating and tracking patients transported on DOD assets to appropriate treatment facilities (i.e., NDMS hospitals).

### **Patient Care**

ESF #8 may task HHS components to engage civil service personnel, the Officers from the U.S. Public Health Service Commissioned Corps, the regional offices, and States to engage civilian volunteers and request the VA and DOD to provide available personnel to support prehospital triage and treatment, inpatient hospital care, outpatient services, pharmacy services, and dental care to victims who are seriously ill, injured, or suffer from chronic illnesses who need evacuation assistance, regardless of location.

ESF #8 may assist with isolation and quarantine measures and with point of distribution operations (mass prophylaxis and vaccination). Health care providers and support staff will ensure appropriate patient confidentiality is maintained, including Health Insurance Portability and Accountability Act privacy and security standards, where applicable.

### **Safety and Security of Drugs, Biologics, and Medical Devices**

ESF #8 may task HHS components to ensure the safety and efficacy of and advise industry on security measures for regulating human and veterinary drugs, biologics (including blood and vaccines), medical devices (including radiation emitting and screening devices), and other HHS-regulated products.

### **Blood, Organs, and Blood Tissues**

ESF #8 may task HHS components and request assistance from other ESF #8 partner organizations to monitor and ensure the safety, availability, and logistical requirements of blood, organs, and tissues. This includes the ability of the existing supply chain resources to meet the manufacturing, testing, storage, and distribution of these products.

### **Food Safety and Security**

ESF #8, in cooperation with ESF #11, may task HHS components and request assistance from other ESF #8 partner organizations to ensure the safety and security of federally regulated foods. (Note: HHS, through the Food and Drug Administration (FDA), has statutory authority for all domestic and imported food except meat, poultry, and egg products, which are under the authority of the USDA Food Safety and Inspection Service. The Environmental Protection Agency establishes tolerance levels for pesticide residues.)

### **Agriculture Safety and Security**

ESF #8, in coordination with ESF #11, may task HHS components to ensure the health, safety, and security of food-producing animals, animal feed, and therapeutics. (Note: HHS, through the FDA, has statutory authority for animal feed and for the approval of animal drugs intended for both therapeutic and nontherapeutic use in food animals as well as companion animals.)

### **Worker Safety and Health**

Under agreement with the U.S. Department of Labor (DOL), DOL is the lead Federal agency for worker safety and health. ESF #8/HHS is a supporting agency. Refer to the *NRF Worker Safety and Health Support Annex* for detailed information.

### **All-Hazard Public Health and Medical Consultation, Technical Assistance, and Support**

ESF #8 may task HHS components and regional offices and request assistance from other ESF #8 partner organizations in assessing public health, medical, and veterinary medical effects resulting from all hazards. Such tasks may include assessing exposures on the general population and on high-risk population groups; 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. While State, tribal, and local officials retain primary responsibility for victim screening and decontamination operations, ESF #8 can deploy the National Medical Response Teams to assist with victim decontamination.

### **Behavioral Health Care**

ESF #8 may task HHS components and request assistance from other ESF #8 partner organizations in assessing mental health and substance abuse needs, including emotional, psychological, psychological first aid, behavioral, or cognitive limitations requiring assistance or supervision; providing disaster mental health training materials for workers; providing liaison with assessment, training, and program development activities undertaken by Federal, State, tribal, or local mental health and substance abuse officials; and providing additional consultation as needed.

### **Public Health and Medical Information**

ESF #8 provides public health, disease, and injury prevention information that can be transmitted to members of the general public who are located in or near areas affected in languages and formats that are understandable to individuals with limited English proficiency and individuals with disabilities.

### **Vector Control**

ESF #8 may task HHS components and request assistance from other ESF #8 partner organizations, as appropriate, in assessing the threat of vector-borne diseases; conducting field investigations, including the collection and laboratory analysis of relevant samples; providing vector control equipment and supplies; 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.

### **Public Health Aspects of Potable Water/Wastewater and Solid Waste**

ESF #8 may task HHS components and request assistance from other ESF #8 organizations to assist 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.

### **Mass Fatality Management**

ESF #8, when requested by State, tribal, or local officials, in coordination with its partner organizations, will assist the jurisdictional medico-legal authority 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 antemortem 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, ESF #8 assists in identifying the human remains, recasketing, and reburial in public cemeteries.

ESF #8 may task HHS components and request assistance from other ESF #8 partner organizations, as appropriate, to provide support to families of victims during the victim identification mortuary process.

### **Veterinary Medical Support**

ESF #8 will provide veterinary assistance to ESF #11. Support will include the amelioration of zoonotic disease and caring for research animals where ESF #11 does not have the requisite expertise to render appropriate assistance.

ESF #8 will assist ESF #11 as required to protect the health of livestock and companion and service animals by ensuring the safety of the manufacture and distribution of foods and drugs given to animals used for human food production. ESF #8 supports DHS/FEMA together with ESF #6 – Mass Care, Emergency Assistance, Housing, and Human Services, ESF #9 – Search and Rescue, and ESF #11 to ensure an integrated response to provide for the safety and well-being of household pets and service and companion animals.

### **ESF #8 Support to ESF #6**

ESF #8 supports ESF #6 by providing expertise and guidance on the public health issues of the medical needs populations.

## **ACTIONS: CONTINUING ACTIONS**

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### **Headquarters and Regional Support**

ESF #8 continuously acquires and assesses information on the incident. The EMG, ESF #8 regional staff, and ESF #8 liaison staff in the RRCC/JFO continue to identify the nature and extent of public health and medical problems and establish appropriate monitoring and public surveillance. Other sources of information may include:

- State incident management authorities.
- Officials of the responsible jurisdiction in charge of the disaster scene.
- ESF #8 support agencies and organizations.
- Various Federal officials in the incident area.
- State health, agricultural, or animal health officials.
- State emergency medical services authorities.
- Tribal officials.

Because of the potential complexity of the public health and medical response, conditions may require ESF #8 subject-matter experts to review public health and medical information and advise on specific strategies to manage and respond to a specific situation in the most appropriate manner.

### **Activation of Public Health/Medical Response Teams**

HHS components are deployed directly as part of the ESF #8 response. Public health and medical personnel and teams provided by ESF #8 are deployed under a DHS/FEMA mission assignment.



### **Coordination of Requests for Medical Transportation**

In a major public health or medical emergency, local transportation assets may not be sufficient to meet the demand. State, tribal, and local requests for Federal medical transportation assistance are executed by ESF #8 in coordination with DHS/FEMA. Such assistance may include accessible transportation for medical needs populations

### **Coordination for Obtaining, Assembling, and Delivering Medical Equipment and Supplies to the Incident Area**

ESF #8 will coordinate with DHS/FEMA, VA, DOD, the General Services Administration (GSA), and other Federal partners as required to arrange for the procurement and transportation of medical and durable medical equipment and supplies.

### **Communications**

ESF #8 establishes communications necessary to coordinate Federal public health, medical, and veterinary medical assistance effectively.

### **Public Affairs Information Requests**

Requests for information may be received from various sources, such as the media and the general public, and are referred to ESF #15 – External Affairs for action and response. ESF #8 makes available language-assistance services, such as interpreters for different languages, telecommunications devices for the deaf, and accessible print media, to facilitate communication with all members of the public.

### **After-Action Reports/Lessons Learned**

ESF #8, on completion of the incident, prepares summary after-action and lessons learned reports. These reports identify key problems, indicate how they were solved, and make recommendations for improving response operations. ESF #8 will request input and coordinate the preparation of the after-action and lessons learned reports with all supported and supporting agencies.

## **RESPONSIBILITIES**

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### **Primary Agency: HHS**

- Leads the Federal effort to provide public health and medical assistance to the affected area.
- Coordinates staffing of the HHS EMG to support the response operation.
- Requests appropriate ESF #8 organizations to activate and deploy public health, medical, and veterinary medical personnel, equipment, and supplies in response to requests for Federal public health and medical assistance, as appropriate.
- Uses HHS personnel (U.S. Public Health Service Commissioned Corps, NDMS, Federal Civil Service, and civilian volunteers) to address public health, medical, and veterinary medical needs.
- Assists and supports State, tribal, and local officials in performing monitoring for internal patient contamination and administering pharmaceuticals for internal decontamination.

## Emergency Support Function #8 – Public Health and Medical Services Annex

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- Assists State, tribal, and local officials in establishing a registry of potentially exposed individuals, performing dose reconstruction, and conducting long-term monitoring of this population for potential long-term health effects.
- Confidentially monitors blood and blood product supplies throughout the year using the Blood Availability and Safety Information System as baseline data for ESF #8 activation.
- Liaisons with the AABB Interorganizational Task Force on Domestic Disasters and Acts of Terrorism (i.e., AABB TF) to assist in logistical requirements and to coordinate a national public blood announcement message for the need to donate.
- Monitors blood and blood product shortages and reserves, including the safety and availability of the blood supply.
- Activates NDMS as necessary to support response operations.
- Evaluates requests for deployment or redeployment of the SNS and Federal Medical Stations based upon relevant threat information.
- Coordinates public health and medical support, patient evacuation, and movement requirements with other primary and supporting departments, agencies, and governments throughout the incident.
- Assures the safety and security of food in coordination with other responsible Federal agencies (e.g., USDA). In cooperation with State, tribal, and local officials, assesses whether food manufacturing, food processing, food distribution, food service, and food retail establishments in the affected area are able to provide safe and secure food.
- In cooperation with State, tribal, and local officials as well as the food industry, conducts tracebacks or recalls of adulterated products.
- In cooperation with Federal, State, tribal, and local officials, ensures the proper disposal of contaminated products and the decontamination of affected food facilities in order to protect public health.
- Provides support for public health matters for radiological incidents as a member of the Advisory Team for Environment, Food, and Health.

### SUPPORT AGENCIES

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Agency	Functions
<b>Department of Agriculture</b>	<ul style="list-style-type: none"><li>• If available, provides appropriate personnel, equipment, and supplies, primarily for communications, aircraft, and the establishment of base camps for deployed Federal public health and medical teams. Resources will be assigned commensurate with each unit's level of training and the adequacy and availability of equipment. ESF #4 – Firefighting or the USDA/Forest Service Disaster and Emergency Operations Branch is the contact for this support.</li><li>• Provides support for public health matters for radiological incidents as a member of the Advisory Team for Environment, Food, and Health.</li></ul>

**Emergency Support Function #8 – Public Health and Medical Services Annex**

Agency	Functions
<p><b>Department of Agriculture</b> (Continued)</p>	<p>USDA also supports a multiagency response to a domestic incident through:</p> <ul style="list-style-type: none"> <li>• Provision of nutrition assistance.</li> <li>• Control and eradication of an outbreak of a highly contagious or an economically devastating animal disease.</li> <li>• Assurance of food safety and security, in coordination with other responsible Federal agencies, or any combination of these requirements.</li> <li>• Provision of appropriate personnel, equipment, and supplies coordinated through the APHIS Emergency Management Operations Center. Support is primarily for coordinating disposal issues for animal carcasses resulting from disease, protecting livestock animal health, reducing the potential for livestock to transmit zoonotic diseases, and providing technical support and subject-matter expertise for the safety and well-being of household pets.</li> </ul>
<p><b>Department of Commerce</b></p>	<p><b>National Oceanic and Atmospheric Administration:</b> Provides near real-time transport, dispersion, and predictions of atmospheric releases of radioactive and hazardous materials that may be used by authorities in taking protective actions related to sheltering and evacuation of people.</p>
<p><b>Department of Defense</b></p>	<ul style="list-style-type: none"> <li>• Alerts DOD NDMS Federal Coordinating Centers (FCCs) (Army, Navy, Air Force) and provides specific reporting/regulating instructions to support incident relief efforts.</li> <li>• Alerts DOD NDMS FCCs to activate NDMS patient reception plans in a phased, regional approach, and when appropriate, in a national approach.</li> <li>• At the request of HHS, provides support for the evacuation of patients and medical needs populations to locations where hospital care or outpatient services are available.</li> <li>• Using available DOD transportation resources, in coordination with the NDMS Medical Interagency Coordination Group, evacuates and manages victims/patients from the patient collection point in or near the incident site to NDMS patient reception areas.</li> <li>• Provides available logistical support to public health/medical response operations.</li> <li>• Provides available medical personnel for casualty clearing/staging and other missions as needed including aero-medical evacuation and medical treatment. Mobilizes and deploys available Reserve and National Guard medical units, when authorized and necessary to provide support.</li> <li>• Coordinates patient reception, tracking, and management to nearby NDMS hospitals, VA hospitals, and DOD military treatment facilities that are available and can provide appropriate care.</li> <li>• Provides available military medical personnel to assist ESF #8 in the protection of public health (such as food, water, wastewater, solid waste disposal, vectors, hygiene, and other environmental conditions).</li> <li>• Provides available veterinary military personnel to assist ESF #8 personnel in the medical treatment of animals.</li> <li>• Provides available DOD medical supplies for distribution to mass care centers and medical care locations being operated for incident victims with reimbursement to DOD.</li> <li>• Provides available emergency medical support to assist State, tribal, or local officials within the disaster area and the surrounding vicinity. Such services may include triage, medical treatment, mental health support, and the use of surviving DOD medical facilities within or near the incident area.</li> <li>• Provides assistance, as available, in managing human remains, including victim identification and mortuary affairs and temporary internment of the dead.</li> </ul>

**Emergency Support Function #8 – Public Health and Medical Services Annex**

Agency	Functions
<p><b>Department of Defense</b> (Continued)</p>	<ul style="list-style-type: none"> <li>• Provides evaluation and risk management support through use of Defense Coordinating Officers, Emergency Preparedness Liaison Officers, and Joint Regional Medical Planners.</li> <li>• Provides available blood products in coordination with HHS.</li> <li>• Provides medical surveillance and laboratory diagnostics and confirmatory testing in coordination with HHS.</li> </ul> <p><b>U.S. Army Corps of Engineers:</b> Through ESF #3 – Public Works and Engineering, provides technical assistance, equipment, and supplies as required in support of HHS to accomplish temporary restoration of damaged public utilities affecting public health and medical facilities. In the event of a catastrophic mass fatality incident, assists with the temporary interment of the dead.</p>
<p><b>Department of Energy/National Nuclear Security Administration</b></p>	<ul style="list-style-type: none"> <li>• Coordinates Federal assets for external monitoring and decontamination activities for radiological emergencies pursuant to criteria established by the State(s) in conjunction with HHS.</li> <li>• Provides, in cooperation with other Federal and State agencies, personnel and equipment, including portal monitors, to support initial screening and provides advice and assistance to State, tribal, and local personnel conducting screening/decontamination of persons leaving a contaminated zone.</li> </ul> <p><b>Radiological Assistance Program</b></p> <ul style="list-style-type: none"> <li>• Provides regional resources (personnel, specialized equipment, and supplies) to evaluate, control, and mitigate radiological hazards to workers and the public.</li> <li>• Provides limited assistance in the decontamination of victims.</li> <li>• Assists State, tribal, or local officials in the monitoring and surveillance of the incident area.</li> </ul> <p><b>National Atmospheric Release Advisory Capability:</b> Provides near real-time transport, dispersion, and dose predictions of atmospheric releases of radioactive and hazardous materials that may be used by authorities in taking protective actions related to sheltering and evacuation of people.</p> <p><b>Federal Radiological Monitoring and Assessment Center (FRMAC):</b> Assists public health and medical authorities in determining radiological dose information; assists in providing coordinated gathering of environmental radiological information and data; assists with consolidated data sample analyses, evaluations, assessments, and interpretations; and provides technical information.</p>
<p><b>Department of Homeland Security</b></p>	<ul style="list-style-type: none"> <li>• Provides communications support in coordination with ESF #2 – Communications.</li> <li>• Maintains situational awareness and the Common Operating Picture via the Homeland Security Information Network.</li> <li>• Assists in providing information/liaison with emergency management officials in NDMS FCC areas.</li> <li>• Identifies and arranges for use of DHS/U.S. Coast Guard (USCG) aircraft and other assets in providing urgent airlift and other transportation support.</li> <li>• Directs the Nuclear Incident Response Team (NIRT), when activated, and ensures coordination of NIRT activities with the ESF primary agency and designated coordinating agency under the Nuclear/Radiological Incident Annex.</li> <li>• Through the Interagency Modeling and Atmospheric Assessment Center (IMAAC), provides predictions of hazards associated with atmospheric releases for use in emergency response. The IMAAC provides a single point for the coordination and dissemination of Federal dispersion modeling and hazard prediction products that represent the Federal position during an incident.</li> <li>• Provides enforcement of international quarantines through DHS/USCG, Customs and Border Protection, and Immigration and Customs Enforcement.</li> </ul>

**Emergency Support Function #8 – Public Health and Medical Services Annex**

Agency	Functions
<p><b>Department of Homeland Security</b> (Continued)</p>	<p><b>FEMA</b></p> <ul style="list-style-type: none"> <li>• Provides logistical support for deploying ESF #8 medical elements required and coordinates the use of mobilization centers/staging areas, transportation of resources, use of disaster fuel contracts, emergency meals, potable water, base camp services, supply and equipment resupply, and use of all national contracts and interagency agreements managed by DHS for response operations.</li> <li>• Provides Total Asset Visibility through the use of Global Positioning System (GPS) tracking services to enable visibility of ESF #8 resources through mapping capabilities and reports.</li> <li>• Assists in arranging transportation to support evacuating patients who are too seriously ill or otherwise incapable of being evacuated in general evacuation conveyances.</li> <li>• Provides tactical communications support through Mobile Emergency Response Support, inclusive of all types (i.e., deployable satellite and RF/radio communications).</li> </ul> <p><b>Office of Infrastructure Protection:</b> Provides situational awareness, cross-sector coordination, and prioritized recommendations regarding critical infrastructure and key resources.</p>
<p><b>Department of the Interior</b></p>	<p>If available, provides appropriate personnel, equipment, and supplies, primarily for communications, aircraft, and the establishment of base camps for deployed Federal public health and medical teams. Resources will be assigned commensurate with each unit's level of training and the adequacy and availability of equipment. ESF #4 or the DOI Operations Center is the contact for this support.</p>
<p><b>Department of Justice</b></p>	<ul style="list-style-type: none"> <li>• Assists in victim identification, coordinated through the Federal Bureau of Investigation (FBI).</li> <li>• Provides State, tribal, or local officials with legal advice concerning identification of the dead.</li> <li>• Provides HHS with relevant information of any credible threat or other situation that could potentially threaten public health. This support is coordinated through FBI Headquarters.</li> <li>• Provides security for the SNS, secure movement of needed blood and blood product supply, and quarantine enforcement assistance, if required.</li> <li>• Establishes an adult missing persons call center and assists in the disposition of cases.</li> <li>• Shares missing persons data with ESF #8 and ESF #13 – Public Safety and Security in support of identification of the dead and seriously wounded.</li> <li>• Supports local death scene investigations and evidence recovery.</li> </ul>
<p><b>Department of Labor</b></p>	<ul style="list-style-type: none"> <li>• Coordinates the safety and health assets of cooperating agencies and the private sector to provide technical assistance and conduct worker exposure assessment and responder and worker risk management within the Incident Command System. This assistance may include 24/7 site safety monitoring; worker exposure monitoring; health monitoring; sampling and analysis; development and oversight of the site-specific safety and health plan; and personal protective equipment selection, distribution, training, and respirator fit-testing.</li> <li>• Provides personnel and management support related to worker safety and health in field operations during ESF #8 deployments.</li> </ul>

**Emergency Support Function #8 – Public Health and Medical Services Annex**

Agency	Functions
<p><b>Department of State</b></p>	<ul style="list-style-type: none"> <li>• Coordinates international activities related to chemical, biological, radiological, and nuclear incidents and events that pose transborder threats as well as naturally occurring disease outbreaks with international implications. Contributes to the development of projections of the international consequences of the event (e.g., disease spread, quarantine, isolation, travel restrictions, pharmaceutical supply and distribution, and displaced persons) through coordination with foreign states and other international stakeholders, and assists in communicating real-time actions taken by the United States and U.S. projections of the international consequences of the event.</li> <li>• Assists with coordination with foreign states concerning offers of support, gifts, offerings, donations, or other aid. This includes establishing coordination with partner nations to identify the U.S.-validated immediate support in response to an incident.</li> <li>• Acts as the health and medical services information conduit to U.S. Embassies/Consulates.</li> </ul>
<p><b>Department of Transportation (DOT)</b></p>	<ul style="list-style-type: none"> <li>• In collaboration with DOD, GSA, and other transportation-providing agencies, provides technical assistance in identifying and arranging for all types of transportation, such as air, rail, marine, and motor vehicle and accessible transportation.</li> <li>• Coordinates with the Federal Aviation Administration for air traffic control support for priority missions.</li> <li>• At the request of ESF #8, provides technical support to assist in arranging logistical movement support (e.g., supplies, equipment, blood supply, etc.) from DOT resources, subject to DOT statutory requirements.</li> </ul>
<p><b>Department of Veterans Affairs</b></p>	<p>Subject to the availability of resources and funding, and consistent with the VA mission to provide priority services to veterans, when requested:</p> <ul style="list-style-type: none"> <li>• Coordinates with participating NDMS hospitals to provide incident-related medical care to authorized NDMS beneficiaries affected by a major disaster or emergency.</li> <li>• Furnishes available VA hospital care and medical services to individuals responding to, involved in, or otherwise affected by a major disaster or emergency, including members of the Armed Forces on active duty.</li> <li>• Designates and deploys available medical, surgical, mental health, and other health service support assets.</li> <li>• Provides a Medical Emergency Radiological Response Team for technical consultation on the medical management of injuries and illnesses due to exposure to or contamination by ionizing radiation.</li> <li>• Alerts VA FCCs and provides reporting instructions to support incident relief efforts.</li> <li>• Alerts VA FCCs to activate NDMS patient reception plans in a phased, regional approach, and when appropriate, in a national approach.</li> <li>• Buries and memorializes eligible veterans and advises on methods for interment of the dead during national or homeland security emergencies.</li> </ul>
<p><b>Environmental Protection Agency</b></p>	<ul style="list-style-type: none"> <li>• Provides technical assistance and environmental information for the assessment of the public health/medical aspects of situations involving hazardous materials, including technical and policy assistance in matters involving water and wastewater systems, for critical health care facilities.</li> <li>• Provides support for public health matters for radiological incidents through the FRMAC and the Advisory Team for Environment, Food, and Health.</li> <li>• Assists in identifying alternate water supplies and wastewater collection and treatment for critical health care facilities.</li> <li>• Provides environmental technical assistance (e.g., air monitoring) and information in the event temporary interment is necessary and/or human remains are contaminated.</li> </ul>

**Emergency Support Function #8 – Public Health and Medical Services Annex**

Agency	Functions
<b>General Services Administration</b>	Provides resource support for ESF #8 requirements as requested to meet the needs of the affected population.
<b>U.S. Agency for International Development</b>	<b>Office of Foreign Disaster Assistance:</b> Assists in the tracking and distribution of international support assets.
<b>U.S. Postal Service</b>	Assists in the distribution and transportation of medicine, pharmaceuticals, and medical information to the general public affected by a major disaster or emergency, as needed.
<b>American Red Cross</b>	<ul style="list-style-type: none"> <li>• Provides emergency first aid, consisting of basic first aid and referral to appropriate medical personnel and facilities, supportive counseling, and health care for minor illnesses and injuries to incident victims in mass care shelters, the JFO, selected incident cleanup areas, and other sites deemed necessary by the primary agency.</li> <li>• Assists community health personnel subject to staff availability.</li> <li>• Provides supportive counseling for family members of the dead, for the injured, and for others affected by the incident.</li> <li>• Supports NDMS evacuation through the provision of services for accompanying family members/caregivers in coordination with Federal, State, tribal, and local officials.</li> <li>• Provides available personnel to assist in temporary infirmaries, immunization clinics, morgues, hospitals, and nursing homes. Assistance consists of administrative support, logistical support, or health services support within clearly defined boundaries.</li> <li>• Acquaints families with available health resources and services, and makes appropriate referrals.</li> <li>• At the request of HHS, coordinates with the American Association of Blood Banks Inter-organizational Task Force on Domestic Disasters and Acts of Terrorism to provide blood products and services as needed through regional blood centers.</li> <li>• Supports reunification efforts through its "Safe and Well" website and in coordination with government entities as appropriate.</li> <li>• Refers all concerns regarding animal health care, safety, or welfare to American Veterinary Medical Association contact(s) in the disaster area. These contact people are veterinarians affiliated with national, State, county, or local veterinary associations.</li> </ul>

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