Emergency Management and Public Health

How Are Emergencies Handled in the Commonwealth of Massachusetts?

The Massachusetts Emergency Management Agency (MEMA) coordinates federal, state, local, and private resources throughout the Commonwealth during times of disaster and other types of emergencies. With headquarters in Framingham and four regional offices, MEMA helps develop response plans for all types of hazards, trains emergency personnel, and assists communities in responding to and recovering from emergencies. MEMA maintains and operates the State Emergency Operations Center (SEOC) which monitors for emergencies statewide 24 hours a day, 7 days a week.

The SEOC serves as the multi-agency coordination center for the Commonwealth during an emergency. Fully activated, the SEOC is staffed according to 16 Emergency Support Functions (ESF). The many federal, state, local, volunteer, public and private organizations that comprise the ESFs are part of the ESF Team which is coordinated through MEMA. The Department of Public Health is part of the ESF Team.

Activation of the SEOC 1) enhances the Commonwealth’s communication capacity between and among its various agencies, 2) facilitates communication with other states, the federal government, and local public and private entities across the Commonwealth, and 3) enables the capacity to deploy assets, support operations to ESFs, and ensure timely and appropriate response to the emergency. The 16 ESFs represented in a full activation include:

- ESF 1 Transportation
- ESF 2 Communications
- ESF 3 Public Works and Engineering
- ESF 4 Firefighting
- ESF 5 Business and Industry
- ESF 6 Mass Care
- ESF 7 Volunteers and Donations
- **ESF 8 Public Health and Medical**
- ESF 9 Search and Rescue
- ESF 10 Hazardous Materials & Environmental Protection
- ESF 11 Agriculture, Animals, Natural Resources
- ESF 12 Energy
- ESF 13 Public Safety & Security
- ESF 14 Recovery
- ESF 15 Public Information & External Affairs
- ESF 16 Military Support

The Massachusetts Department of Public Health (DPH) is part of the ESF 8 Health and Medical Services SOP and generally staffs the ESF 8 desk at the SEOC. DPH monitors events or emergencies that may affect the public’s health, relying on a team of Duty Officers who are available 24 hours a day, seven days a week. The Department also maintains and operates an Operations Center (DOC) that is staffed by senior management and preparedness personnel when activated for emergencies or planned events such as the Boston Marathon. ESF 8 staff are responsible for working with partner agencies (such as the Department of Mental Health and the Office of the Chief Medical Examiner, as well as Federal agencies as needed) to coordinate the provision of field services including:

- Assessment of health and medical needs
- Provision of emergency medical services
- Environmental and communicable disease control/epidemiology
- Toxicological assessment
- Provision of health care/medical personnel, equipment, and supplies
- Patient evacuation
- Hospital care coordination
- Food and drug safety
- Radiological, chemical, and biological hazards
- Mental health and crisis counseling
- Public health information
- Victim identification and mortuary services

The regional office of the U.S. Department of Health and Human Services located in Boston, may also be represented at the SEOC and/or the DOC should federal resources be required. The ESF 8 desk fields health and medical-related calls during the SEOC activation, and also maintains emergency call lists. Personnel at the DOC support the ESF 8 desk as needed.

**How are Incidents Managed On-Scene?**

Most emergency incidents – whether a chemical spill, explosion, house fire, or utility outage, or disasters such as tornadoes, earthquakes, or terrorist events – require a response from a variety of agencies. Regardless of the size of the incident or the number of agencies involved in the response, all incidents require a coordinated effort to ensure an effective response and the efficient use of resources.

The management structure used most often in on-scene emergency response is the **Incident Command System** (ICS). The ICS is an organized approach to managing emergency situations that was first developed in the 1970s in response to a series of major wildfires in Southern California. Over the years, its principles have been applied to many situations including HazMat incidents, planned events (such as parades, concerts, official visits, etc.), mass casualty incidents, air, rail, water, and ground transportation incidents, and search and rescue missions. Today, federal law requires the use of ICS for response to HazMat incidents; most fire service, law enforcement and EMS officials are trained in the use of ICS.

The five major components of the ICS are: incident command, planning, operations, logistics, and finance/administration. All incidents have a designated incident commander who is in charge at the scene.

![Incident Command Diagram](image)

The **Incident Commander** is usually the highest-ranking first responder (e.g., police, fire, etc.). His/her major responsibilities are to establish the command, protect life and property, control personnel and equipment resources, maintain accountability for responder and public safety, and act as a liaison to outside agencies. As incidents develop, the incident commander may delegate some of these functions to other command staff positions such as an information officer, safety officer, or liaison officer. In a health or medical event, the Incident Commander could be the local health department director or the state Commissioner of Public Health.
The **Planning Section** is responsible for documenting the status of resources and developing the Incident Action Plan (which defines response activities and resource utilization). The **Operations Section** is responsible for carrying out the response activities defined in the Incident Action Plan. The **Logistics Section** provides the facilities, services, materials, and personnel needed to operate equipment. The **Finance/Administration Section** is responsible for tracking incident costs and reimbursement accounting.

No single agency or department can handle an emergency situation alone. Response agencies commonly utilized in an emergency are fire services, law enforcement, emergency management, public health (including EMS, healthcare, and behavioral/mental health), public works, and relief organizations such as the American Red Cross. All personnel and resources involved in a response effort are assigned to one of the five functions (Planning, Operations, Logistics, or Finance/Administration).

**How Does Public Health Fit into the Incident Command System?**

Various sectors of the public health community, in particular EMS, historically have played a role in the ICS. Local health departments, hospitals, and other healthcare facilities need have a working knowledge of ICS and UC for the following reasons.

- Increasingly, first responders are asking hospitals and health departments to provide on-scene technical assistance; in a chemical or bioterrorism threat situation, health and medical professionals will be expected to play a major role in first response.

- In a health and medical emergency such as an influenza pandemic or emerging infectious disease, public health has its own ESF 8 authority in an incident command structure; public health personnel and resources may be assigned to planning, logistics, operations, or administrative functions, and become part of a Unified Command.

- Certain public health functions are key components of an ICS; EMS may play a role in the Operations Section, while hospitals that are helping to provide patient beds may be a component of the Logistics Section.

- To be accredited under the standards of the Joint Commission a hospital must establish an all-hazard incident command structure that may be activated in response to an internal or external event affecting the hospital.

- Whether on-scene or not, health officials should be aware of the ICS management structure because it is way that public health and health care issues will be coordinated and managed during an emergency incident.