SEDGWICK COUNTY

EMERGENCY OPERATIONS PLAN

2025-2030

ESF 8 – Public Health and Medical Services

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ESF 8 - Public Health and Medical Services

Coordinating Agency:
Sedgwick County Health Department

Primary Agencies:
American Red Cross of South Central and Southeast Kansas
Ascension Via Christi St. Francis Hospital/Medical Center
Ascension Via Christi St. Joseph Hospital/Medical Center
Ascension Via Christi St. Teresa Hospital/Medical Center
City of Wichita Fire Department
City of Wichita Public Works and Utilities Environmental Health
Robert J. Dole Department of Veterans Affairs Medical and Regional Office Center
Rock Regional Hospital
Sedgwick County Animal Control
Sedgwick County COMCARE
Sedgwick County Strategic Communications
Sedgwick County Department of Aging and Disabilities/ Central Plains Area Agency on Aging
Sedgwick County Developmental Disability Organization
Sedgwick County Emergency Management [coordinates Sedgwick County Animal Response Team (SCART) and Radio Amateur Civil Emergency Services (RACES)]
Sedgwick County Emergency Medical Service
Sedgwick County Fire District #1
Sedgwick County Medical Reserve Corps
Sedgwick County Regional Forensic Science Center (Coroner)
South Central Area Command Salvation Army
Wesley Children's Hospital
Wesley Derby ER
Wesley Medical Center
Wesley West ER and Diagnostic Center

Support Agencies:
Ascension Via Christi Rehabilitation
Camber Children's Mental Health
City of Wichita Police Department
Emergency Medical Services in the City of Mulvane
Fire Department in the City of Sedgwick
Global Medical Response
Humane Society of the United States (HSUS)
Kansas Department for Aging and Disability Services
Kansas Department of Agriculture
Kansas Department of Health and Environment
Kansas Funeral Directors Association
Kansas State Animal Response Team (KSART)
Mental Health of America of South Central Kansas

Police Departments in the Cities of Andale, Bel Aire, Bentley, Cheney, Clearwater, Colwich, Derby, Eastborough, Garden Plan, Goddard, Haysville, Kechi, Maize, Mount Hope, Mulvane, Park City, Sedgwick and Valley Center
Sedgwick County Environmental Services
Sedgwick County Sheriff's Office
Kansas Veterinary Medical Association
Hospital Wesley Rehabilitation Center
Other support agencies such as adult care homes, home health agencies, medical clinics, pharmacies and schools are listed in the Sedgwick County Health Department Incident Command System Plan

I. Purpose and Scope

Purpose

The purpose of the Emergency Support Function 8 Annex (ESF 8) is to provide health and medical coordination in support of emergency events in Sedgwick County. ESF 8 can provide the mechanism for personnel and resources to support prevention, preparedness, protection, response, recovery and mitigation in support of the primary emergency management objectives.

Note on terminology – throughout this annex, "ESF 8" will be used to denote both the annex document itself and the group of agencies and partners using this document as a guide during an emergency response.

Scope

ESF 8 is a functional annex to the Sedgwick County EOP, and this Annex describes the actions required to coordinate public health and medical services during a disaster. ESF 8 addresses:

1. Local Health Department notification, coordination and response
2. Emergency Medical Services (EMS) activities
3. Coordination among community hospital partners
4. Mass fatality partnerships in planning
5. Community planning with other health care providers
6. Behavioral health (mental health) activities

Most of the agencies involved in public health and medical services activities have existing emergency plans and procedures. ESF 8 is not designed to take the place of these plans rather it is designed to complement, support, and reference existing plans and procedures.

ESF 8 supports health and medical response during a biological incident and all other emergencies.

For this document, public health and medical services include the items below associated with activities outlined in other portions of the Sedgwick County EOP:

1. Medical needs associated with behavioral health needs of victims and responders.

2. Assistance for individuals with access and functional needs. This is any individual, with or without disabilities, who may need additional assistance because of any condition (temporary or permanent) that may limit their ability to act in an emergency. Individuals with access or functional need do not require any kind of diagnosis or specific evaluation. Access and Functional Needs Toolkit: Integrating a Community Partner Network to Inform Rist Communication Strategies

II. Policies, References and Authorities

State

Governor

- K.S.A. 48-924, Declare state of disaster emergency

Chair of the Board of County Commissioners

- K.S.A. 48-932, Local disaster emergency
- K.S.A. 48-932, Other commission members
- K.S.A. 48-932, Activates the response and recovery

The Board of County Commissioners (Local Board of Health)

- K.S.A. 65-119, Maintain supervision over cases of infectious or contagious disease
- K.S.A. 65-119, Communicate to the secretary of health and environment
- K.S.A. 65-119, Prohibit public gatherings

General Public

- K.S.A. 48-933, Duty to act and manage their affairs during disaster
- K.S.A. 48-933, Providing personal service and use/restriction of property
- K.S.A. 48-915, Addressing liability to volunteers, except in cases of willful misconduct, gross negligent or bad faith

Secretary of the Department of Health and Environment

- K.S.A. 65-101, Exercises general supervision over the health of residents of the state
- K.S.A. 65-101, Shall investigate outbreaks and epidemics of disease
- K.S.A. 65-126, May quarantine any area whenever the local health officer neglects to properly isolate and quarantine persons afflicted with or exposed to infectious or contagious diseases
- K.S.A. 65-129b, Has the authority to issue orders requiring persons to seek appropriate and necessary evaluation and treatment, or to be quarantined or isolated
- K.S.A. 65-129b, May order any law enforcement officer to assist the secretary in enforcing these orders

Local Health Officer

- K.S.A 45-221 (12), Safeguard sensitive information that could compromise public safety if disclosed

- K.S.A. 65-118 Reporting and Investigation of infectious, contagious or communicable disease
- K.S.A. 65-202, Prevents the spread of the disease
- K.S.A 12-16, 117, Rendering of aid to local municipalities
- K.S.A 12-2901, Interlocal agreement mechanism

Confidentiality of Documentation

- K.S.A. 45-221 (12), Protects emergency information or procedures of public agencies State of Kansas
- K.S.A. 48-9a01 Interstate Emergency Management Assistance Compact
- K.S.A. 48-904 et seq. K.S.A. 48-924 – 945 Emergency Preparedness for Disasters
- K.S.A. 48-948 – K.S.A. 48-958 – Kansas Intrastate Emergency Mutual Aid Act
- K.S.A. 65-Articles 1 and 2 Public Health System
- K.S.A. 65-101 et seq. the Secretary of health and environment shall exercise general supervision of the health of the people of the state
- K.S.A 65-119a - Provides the duties and powers of local health officers
- K.S.A. 65-201: defines "local board of health" and "local health officer"
- K.S.A. 65-5701 – 5731 EPCRA.

State of Kansas

- K.S.A. 48-9a01 Interstate Emergency Management Assistance Compact
- K.S.A. 48-904 et seq. K.S.A. 48-924 – 945 Emergency Preparedness for Disasters
- K.S.A. 48-948 – K.S.A. 48-958 – Kansas Intrastate Emergency Mutual Aid Act
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- K.S.A. 65-201: defines "local board of health" and "local health officer"
- K.S.A. 65-5701 – 5731 Emergency Planning and Community Right-to-Know Act (EPCRA)

Federal

- Public Law 106-390, 114 Stat. 1552-1578 (1974) The Robert T. Stafford Disaster
- Relief and Emergency Assistance Act, as amended
- Public Law 107-188, 116 Stat. 294 (2002) The Public Health Security and Bioterrorism Preparedness and Response Act of 2002
- Public Law 107-296, 116 Stat. 2135 (2002) The Homeland Security Act of 2002
- 10 U.S.C. 382 (2002) Emergencies Involving Chemical or Biological Weapons
- 42 U.S.C. 201 et seq., The Public Health Service Act
- 50 U.S.C. 1601-1651 (2003) The National Emergencies Act
- The Health Information Portability and Accountability Act (HIPAA) includes provisions allowing the local health department to receive disease reports or laboratory test results from physicians and laboratory directors in an appropriate

and timely manner. The Kansas disease reporting regulations were amended in 2000 to include the reporting of potential bioterrorism agents and suspected bioterrorism events.

- The Aviation Disaster Family Assistance Act of 1996, the National Transportation Safety Board has designated to the ARC the Coordinating responsibility for coordinating the emotional care and support of the families of passengers involved in an aviation accident.

AUTHORITIES

- 44 CFR Part 13 - 44 CFR Part 13 (The Common Rule) - Uniform Administrative Requirements for Grants and Cooperative Agreements. Declared October 1, 2011.
- 44 CFR Part 206 - 44 CFR Part 206 - Federal Disaster Assistance for Disasters Declared after October 1, 2011.

III. Concept of Operations

General

Operational Overview

ESF 8 is organized to be consistent with the Sedgwick County Emergency Operations Center

(EOC), the requirements of the National Response Framework, the National Incident Management System (NIMS), and the Incident Command System (ICS). This structure and system support incident assessment, planning, procurement, deployment, and coordination and support operations to Sedgwick County through the Sedgwick County Incident Response Framework, Area Operations and Incident Support Teams (ISTs) to provide a timely and appropriate response to an emergency or situation.

Procedures, protocols and plans for disaster response activities are developed to govern staff operations at the EOC and in the field. These are in the form of Emergency Operations Plans (i.e., Base Plan) and corresponding appendices, annexes, and standard operating guidelines, which describe ESF 8 capabilities. Periodic training and exercises are also conducted to enhance effectiveness.

In a large event requiring local or State mutual aid assistance, ESF 8 will work with its support agency counterparts to seek and procure, plan, coordinate and direct the use of required assets. As the ESF 8 Coordinating Agency, the Sedgwick County Health Department (SCHD) and other pertinent partnering agencies will or can be utilized to serve as liaisons with local, regional or state public health and medical service officials as dictated by the incident.

In the event of an EOC activation, ESF 8 partners will receive notification from Sedgwick County Emergency Management (SCEM) through text message, phone call, email, and/or alternate means as the incident dictates. EOC activation is further detailed in the Base Plan. ESF 8 partners may already be responding or deployed into the incident prior to EOC activation. The ESF 8 representative will begin coordinating efforts with those agencies and the EOC.

In cases in which health and medical information needs to be disseminated to individuals with access or functional needs, the SCHD will coordinate with partners to ensure accuracy and delivery of information in diverse formats to provide equitable access to information.

When an event is focused in scope to a specific type or response mode (i.e., hospital evacuation, biological threat, hazardous materials release, pandemic disease or radiological event), technical and subject matter expertise may be provided by an appropriate person(s) from a supporting agency with skills pertinent to the type of event. The person(s) will advise and/or direct operations within the context of the ICS structure.

Throughout the response and recovery periods, ESF 8 will evaluate and analyze information regarding medical, health, and public health assistance requests for response, develop and update assessments of medical and public health status in the impact area and do contingency planning to meet anticipated demands.

If additional support is necessary, ESF 8 will contact the supporting agencies and other ESFs to request applicable support activities.

Continuity of Operations

Continuity of operations establishes policies and guidance to ensure the essential business functions of the healthcare system in the community are continued if a manmade, natural or technological emergency disrupts or threatens to disrupt normal business operations. The community's hospitals, SCHD, and other ESF 8 agencies have established Continuity of Operations Plans (COOP).

Reconstitution is the process by which surviving and/or replacement health and medical personnel resume normal operations at the original or replacement facility. There are three tasks associated with reconstitution: transitioning, coordinating and planning, and outlining the procedures. The decision to reconstitute will be made by the Incident Commander as outlined in internal plans. Operations may be resumed in phases with the essential functions as first priority followed by other functions as resources and personnel allow.

Medical Surge

In the event of a disaster, it is necessary to use surge capacity to provide emergency care and appropriate definitive management of patients. Bed counts alone do not determine surge capacity or the ability to care for patients. The hospitals have internal policies, plans, and procedures for patient surge within their facilities, including requesting medical material and pharmaceuticals and coordinating mass fatality.

ESF 8 will monitor the EMSystem application in the EOC to maintain awareness of the availability of beds at hospitals within their jurisdiction and surrounding counties. Hospitals in Sedgwick County will be requested to update their bed availability at the time of a disaster or large-scale emergency through a HAvBED alert initiated at the regional or state level. The hospitals will update the HAvBED alert as requested to assist with planning of patient transfers.

If sheltering is needed during or after a response, ESF 8 will assist American Red Cross and ESF 6 partners as needed. In the event of a public health incident requiring isolation or quarantine of

individuals, the SCHD will coordinate with ESF 6 partner United Way of the Plains to provide temporary shelter for people experiencing homelessness. United Way of the Plains will provide assistance, resources, and technical assistance when conventional and nonconventional congregate care systems and shelter-in-place activities require additional resources, as determined by ESF 8 partners. Congregate and non-congregate care facilities will be made accessible to individuals with access and functional needs whenever possible. Noncongregate sheltering may include hotels, motels, and other single-room facilities.

In the event individuals need additional transportation to health and medical facilities, ESF 8 will coordinate with ESF 1 coordinators through the EOC or SCEM.

Pertinent ESF 8 partners such as hospitals, fire departments and EMS have individual decontamination plans and access to necessary equipment. The health and medical community has trained individuals who can assist and perform decontamination activities for patients arriving from the scene of emergencies and disasters. In the event of an oil, chemical, biological, or radiological environmental contamination incident, ESF 8 will coordinate with ESF 10 on the release of public health information.

Health and medical entities have processes and policies for medical surge capabilities; these internal plans provide details with internal patient tracking procedures. Patients seen because of an emergency will be tracked using these procedures. The number of patients seen, disposition, and status of these patients will be coordinated by ESF 8. Hospitals will follow Centers for Medicare and Medicaid Services (CMS) and Health Insurance Portability and Accountability Act (HIPAA) regulations when reporting patient information. All participating health and medical organizations will assist in determining the health and medical impact of the emergency on the community.

Health and medical entities protect the privacy of individually identifiable health information. ESF 8 follows standards to protect information and will utilize agency-specific internal policies for reunification of patients with family. ESF 8 will coordinate efforts, when possible, to gather missing persons information from participating health and medical partners and response organizations to cross reference with data received from ESF 6. If ESF 8 recognizes a patient identified as missing, ESF 8 will verify to the extent possible the validity of their reunification needs and, if acceptable, provide the current location of the patient to the requesting family member.

During a large-scale emergency, emergency room departments, treatment centers, and other medical clinics across Sedgwick County may see an influx in patients. An Alternate Care Site (ACS) is a community-based location that may provide additional treatment area(s) with a minimum specific level of care for patients. An ACS may be established at sites where no medical care is usually provided or at medical facilities where the usual scope of medical services does not normally include large-scale urgent care or traditional inpatient services. If an ACS is needed to manage a disaster that creates a surge of patients beyond community capabilities, the health and medical entities within Sedgwick County will consider options for ACS sites to care for ill patients who would otherwise seek care at hospitals and community health centers.

Through preparedness planning, the community has developed regional relationships within the health and medical sector including the South Central Healthcare Coalition (SC HCC). This

provides additional access to medical surge supply trailers, field hospital trailers, health and medical supplies, and specialized equipment which may be necessary for response. The ESF 8 coordinator will follow standard procedures for requests in the event these assets are needed to support operations and improve health delivery during an emergency.

Epidemiology and Surveillance

The SCHD is responsible for conducting disease investigations within Sedgwick County and among Sedgwick County residents in accordance with State regulations and guidance within the SCHD Epidemiology Handbook. The electronic disease tracking and surveillance system EpiTrax, utilized by SCHD, is maintained by the Kansas Department of Health and Environment. To report diseases and outbreaks, call the Disease Report Hotline at 316-660-5555.

The SCHD conducts disease surveillance and investigation activities in partnership with local hospitals, physician's offices, clinics, schools, pharmacies, long-term care facilities and other places where people are infected and can expose others. Disease surveillance monitors the spread of disease and the effect of mitigation efforts. Health and medical partners report diseases to the SCHD to identify and contain disease outbreaks. The SCHD uses neighboring counties and state assistance in disease surveillance and investigation as part of a statewide public health system.

A Community Reception Center (CRC) is a location where response partners conduct population monitoring following a radiation emergency. CRCs are typically set up after a radiological or nuclear incident. They are located outside of the affected area to service the people living in that community and the displaced population arriving there. In coordination with SCEM and following agency-specific protocols, ESF 8 partners may assist with screening people for radioactive contamination, assisting people with sheltering, washing or

decontamination, registering people for long-term follow-up, assisting with population monitoring after the incident, and prioritizing people for further care. At the CRC, residents will be asked to provide information regarding their location and possible exposure to the radiological emergency. This will assist ESF 8 partners, including the SCHD, Kansas Department of Health and Environment and the Centers for Disease Control and Prevention, in providing appropriate surveillance and follow up after this type of emergency.

Fatality Management

For ESF 8, fatality management is the coordinated process of handling deceased individuals following a mass fatality event. This process involves a range of activities, including body recovery, temporary storage, identification, transportation, and final disposition.

A Mass Fatality Event (MFE) is a catastrophic incident that results in a large number of fatalities that overwhelm the capacity of local authorities to handle the deceased. Such events may be caused by natural disasters (e.g., hurricanes, earthquakes, wildfires), human-caused accidents (e.g., plane crashes, building collapses), or intentional acts of violence (e.g., terrorist attacks).

SCEM and ESF 8 partners will coordinate with the county coroner, funeral directors, mortuary services, and other partners during the early stages of an emergency to ensure required resources are available, assessment activities are ongoing, and the responsible agencies implement

appropriate plans. ESF 8 partners have agency-specific protocols to ensure a coordinated and effective response. These protocols align with the Regional Forensic Science Center (RFSC) Mass Fatality Plan.

If the MFE is caused or suspected to be related to a microbial, chemical, or radiologic agent resulting from an infectious disease outbreak or bioterrorism event, SCHD and Kansas Department of Health and Environment, along with any necessary partners, will coordinate and provide guidance on communicable disease investigation to the indicated medico-legal authority as outlined in the SCHD's Health Emergency Infectious Disease Plan.

ESF 8 partners will provide counseling and support services to families of victims, first responders, last responders and volunteers. This is further described under the Behavioral Health section of this Annex.

Pre-Hospital Care

Sedgwick County promotes local and regional coordination and cooperation in emergency prehospital care for all events where hospitals or medical clinics have reached their capacity for standard care. This includes events that involve individuals with access or functional needs. During an emergency, pre-hospital care may involve more than one jurisdiction, so the ICS will be used to help standardize organizational structure and common terminology. This will ensure a useful and flexible management system that is practical for incidents involving multijurisdictional and multi-agency response, especially for those in the field.

Pre-arrival assessments will be conducted by Emergency Medical Services and notification procedures to dispatch, hospitals, and other mutual aid partners will be activated.

Triage procedures, ambulance diversion guidelines, EMSystem protocol and policies, pediatric guidelines, and other community and internal agency plans have been developed and may be implemented when needed.

Medical mutual aid may be necessary and implemented during a mass casualty or large-scale emergency.

Medical Countermeasure Dispensing

The primary goal of Sedgwick County's mass dispensing program is to provide lifesaving medical countermeasures to residents and visitors of Sedgwick County in a timely manner in response to a health and medical emergency. This program is led by the SCHD and includes many of the county's other departments, health and medical partner organizations and private companies. The SCHD's Mass Dispensing Standard Operating Guide (SOG) will be used during an emergency as a guide for providing vaccines and pharmaceuticals at open Point of Dispensing (POD) sites for the public and closed sites for specific groups such as first responders.

Medical Material Distribution

During a time of disaster, state and federal medical material and pharmaceuticals may be available to Sedgwick County. To access these assets, a coordinated resource management and requesting process is in place for participating agencies. This process promotes the full utilization of local medical equipment and supplies and exhaustion of services available locally. With the

exhaustion or imminent exhaustion of these local supplies and services, SCHD can make a request through SCEM to the State of Kansas Emergency Operations Center for fulfillment. Procedures for requesting medical materials can be found in the SCHD Mass Dispensing Standard Operating Guide and Hospital Emergency Operations Plan.

The SCHD and other ESF agencies have processes in place for requesting medical countermeasures, as the incident warrants, including but not limited to the Strategic National Stockpile (SNS), CHEMPACK (nerve agent and organophosphate antidotes), and Chemical Event Shipping Supply Location (CESSL) program.

Non-Pharmaceutical Interventions

The Kansas Isolation and Quarantine statute K.S.A. 65-129 provides the template for control efforts in the case of large-scale outbreaks of naturally occurring diseases, like pandemic influenza, SARS or artificially introduced biological agents in connection with bioterrorism. The Sedgwick County Board of Health and Sedgwick County Health Officer may also issue advisories or recommendations for the closure of public buildings, events and activities. The SCHD serves as a resource to businesses, including schools, to aid the facility in deciding how best to mitigate the spread of disease.

When necessary, ESF 8 will coordinate with ESF 13 to ensure the safety of public and community members related to isolation and quarantine.

The hospitals maintain an appropriate HVAC system which is an essential tool for the control of infection. The hospitals have negative pressure rooms and procedures to keep contaminants and pathogens from reaching surrounding areas within the hospital. These procedures are included in internal hospital policies and will be activated as outlined in these policies to prevent cross-contamination between rooms.

In coordination with ESF 15 and as it applies to the incident, ESF 8 may promote disease prevention measures and hygiene such as handwashing and social distancing.

Responder Health and Safety

Health and medical officials may be requested to provide information related to agents or diseases and appropriate measures to take to protect the health, medical, and emergency services sector responders. Officials may be asked to serve as subject matter experts and information resources to make health and safety recommendations to incident management staff and safety officers. ESF 8 will ensure appropriate training in Psychological First Aid is available to responders and offer Critical Incident Stress Management (CISM) as warranted to address the psychological impact of incidents, including mass fatality incidents.

Hazard vulnerability assessments (HVA) for the Sedgwick County area are the KDHE MultiJurisdictional Risk Assessment and HVA, SCEM Hazard Mitigation Plan, and South Central Kansas Health Care Coalition (SCHCC) Hazard Vulnerability Assessment. HVAs identify any anticipated hazards, including infectious disease, hazardous materials, and environmental factors.

Sedgwick County Emergency Medical Services will coordinate and provide appropriate personal protective equipment (PPE) to responders, including those working at the scene of a mass fatality incident.

ESF 8 will coordinate with COMCARE and SCEM (whether or not the EOC is activated) along with State Agencies and other mental health partners, as warranted, to provide counseling services available throughout the community for those victims and responders with behavioral health needs. This is further described under the Behavioral Health section of this Annex.

Volunteer Management

SCHD Medical Reserve Corps is made up of medical and non-medical volunteers. The electronic volunteer database provides ease of contacting volunteers and documenting their hours worked. The onboarding process includes a background check and credential check as documented in the Sedgwick County Medical Reserve Corps Handbook.

Medical volunteers should have their credentials verified. Through the SCHD and Kansas

Department of Health and Environment, ESF 8 has access to the System for Emergency Response Volunteers in Kansas (SERV-KS) system, which can be utilized as a volunteer database at the local and state levels. If volunteers are needed to help during an incident response, SERV-KS offers an opportunity for volunteer requests and receipts through a standard operating procedure.

ESF 8 Agencies may have their own volunteer databases with internal policies and procedures for verifying and credentialing.

Environmental Health

Vector control is handled individually by cities within Sedgwick County. The SCHD provides mosquito dunks for County staff and City of Wichita Public Works staff to place on public property with standing water when mosquito traps show an increase. The SCHD will work with partners such as the City of Wichita Public Works Department to mitigate vector issues.

The Sedgwick County Public Works Noxious Weeds Department controls and eradicates noxious weeds on property within Sedgwick County as required by state law (KSA 2-1318), primarily on county property and right of ways.

Habitability building inspections are performed by inspectors per jurisdictional ordinance. For the City of Wichita and unincorporated Sedgwick County, contact The Metropolitan Area Building and Construction Department. For other cities within Sedgwick County, contact local building inspectors.

SCHD's Animal Control Program is responsible for enforcing all Sedgwick County codes concerning the housing and care of animals in unincorporated areas of Sedgwick County and some 2nd and 3rd class cities. Officers ensure that animals do not pose a health or safety hazard to county residents and that each animal is appropriately vaccinated and licensed as required by law per county statute. Some Sedgwick County cities, such as the City of Wichita, have their own Animal Control Departments.

The Kansas Department of Health and Environment – Bureau of Air monitors ambient air for criteria pollutants (carbon monoxide, ozone, sulfur dioxide, nitrogen dioxide, lead, and particulate matter) in accordance with regulations set forth in the federal Clean Air Act.

Environmental health inspections and activities for water and wastewater within Sedgwick County are performed via jurisdictional ordinance. Both the City of Wichita and Sedgwick County work alongside the Metropolitan Area Building and Construction Department (MABCD) to ensure compliance with local codes and protect the health, safety, and welfare of the residents of Sedgwick County. Other, smaller municipalities permit and inspect water and wastewater themselves. All monitoring agencies use assessment tools to document the effects of mitigation efforts during and after an incident.

The City of Wichita Public Works and Utilities provides the following within the Wichita city limits: permits, inspections and tests of water wells; processes and permits of private sewage facility applications for on-site water disposal systems; and inspections of all regulated (public and semi-public) swimming pools, spa pools, wading pools, and recreational water features.

Sedgwick County Public Works (with the MABCD) provides the following for unincorporated areas of Sedgwick County and those municipalities it maintains agreements with: (1) permits, inspections and tests of water wells; (2) processes and permits of private sewage facility applications for on-site water disposal systems and initial testing.

All permitting processes related to mitigation efforts start with the individual city. The city will outline their process for each request, whether it is the City of Wichita, Sedgwick County, MABCD, or a smaller municipality that covers the permitting, inspection, and testing of the water within a particular area of the County.

Behavioral Health

Behavioral Health services during an emergency response include those needs consisting of both mental health and substance abuse considerations for incident victims, their families, and response workers. It also includes, as appropriate, individuals in need of additional medical assistance and veterinary and animal health issues. An incident can require behavioral health services in both the response and recovery stages of the incident. The provision of behavioral health services will be based on current evidence informed/best practices and widely accepted national guidelines.

ESF 8 partners will coordinate with the American Red Cross, COMCARE, SCEM and Strategic Communications, the State ESF 8 Coordinator and other State Agencies, and other behavioral health professional partners, as needed, to provide counseling and support services to the families of victims, first responders, last responders, volunteers, and the general community.

These services can be initiated with or without EOC activations and do not require an official ICS structure in place if the circumstances do not warrant one.

Working ESF 8 partners will shape the ongoing incident response, demobilization and recovery efforts related to behavioral health. The Point of Contact for receiving and requesting care will be identified by partners at the onset of each incident response. During the incident, the ESF 8

partners will determine all impacted populations, especially those with access and functional needs, and mobilize appropriate behavioral health services for their use.

Demobilization and Recovery

When the Incident Commander has ordered demobilization, the ESF 8 Coordinator will notify health and medical response entities. Each agency should consider their property and business impact for returning to normal facility operations.

As the needs for personnel decrease, personnel should report to debriefing area or standard area of operations as directed by supervisor. Positions will deactivate in a phased manner as outlined by internal plans and policies.

All equipment and supplies shall be returned or disposed of in compliance with recommendations from internal and/or external authorities and coordinated by the supply unit leader and finance/administration section. Health and medical supplies and equipment should be repaired, repacked, and replaced as needed.

Any plans to salvage, restore, and recover an impacted facility will initiate upon approval from applicable local, State, and Federal law enforcement and emergency service authorities.

Direction and Control

During a state of emergency, the SCHD will coordinate with the EOC and will serve as a liaison for ESF 8 related response partners. Sedgwick County health and medical response activities may be coordinated through the EOC.

The Sedgwick County Emergency Manager or designee provides direction and coordination efforts for ESF 8 to include mission assignments, mutual aid, contracts for goods and services, and recovery and mitigation activities.

During emergency activations, the ESF 8 Coordinator will have the authority granted to them as the SCHD representative to make management decisions as they have knowledge of the subject as it relates to the EOC's objectives and responsibilities.

The ESF 8 Coordinator will serve as a spokesperson for non-present ESF 8 partners, after collecting information from the partners.

A staffing directory and the ESF 8 Emergency Operations Plan, its accompanying appendices, annexes and standard operating guidelines are maintained by the SCHD. The SCHD is responsible for ensuring contact information is accurate and ready for response.

When a request for assistance is received by ESF 8, it is assigned to the agency or agencies that have the most appropriate resources and expertise to accomplish the task.

SCEM will assist in the coordination of state response efforts under the provisions of a Governor's Disaster Declaration.

Organization/Information Sharing

County

During an actual or potential emergency or disaster, the SCHD will assign a liaison to the EOC to fill the role of ESF 8 Coordinator. During an activation of the EOC, support agency staff will work with the coordinating agency to provide support that will allow for an appropriate, coordinated and timely response. If additional support is required, the SCHD and primary agencies may comanage ESF 8 activities.

ESF 8 Coordinator will report to the Sedgwick County Emergency Manager or designee. During the response phase, the ESF 8 Coordinator will evaluate and analyze information regarding medical and public health assistance requests.

ESF 8 Coordinator will develop and update assessments of medical and public health status in the impact area and do contingency planning to meet anticipated demands.

ESF 8 Coordinator will partner with ESF 6 to support all individuals and organizations regarding mass care services, including sheltering, that may be required to support disaster response and recovery operations in Sedgwick County.

State of Kansas

The Kansas Department of Health and Environment is the lead ESF 8 Coordinating agency for the State of Kansas. The State ESF 8 provides supplemental assistance to local governments in identifying and meeting the public health and medical needs of victims of disasters and emergencies. The State ESF 8 concept of operations is outlined in the Kansas Response Plan (KRP).

Alerts and Notifications

Through automated electronic notifications or other means, SCEM will notify the SCHD when an area of Sedgwick County is threatened or has been impacted by an emergency or disaster event.

The primary agency notified will report to the EOC, if so advised or requested by SCEM.

The ESF 8 Coordinator and/or SCEM will provide notification to support agencies as outlined in internal call-down procedures. The ESF 8 Coordinator will continue to update those agencies as the situation progresses and upon demobilization and recovery.