



Health and Medical Services

ESF 8



Emergency Support Function Approval and Implementation

Wisconsin Emergency Management has coordinated an update of this emergency support function (ESF). This ESF will be reviewed periodically in accordance with the timeline outlined in the state's Integrated Preparedness Plan.

DocuSigned by:

Greg Engle

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Greg Engle, Administrator
Wisconsin Emergency Management

Date: 7/31/2024 | 3:00 PM CDT

This emergency support function is hereby adopted as written and supersedes all previous versions.

Signed by:

Brig Gen David May

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DAVID W. MAY, Brigadier General
Interim Adjutant General of Wisconsin

Date: 8/6/2024 | 3:03 PM CDT



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Wisconsin Emergency Response Plan
Health & Medical Services

ESF 8

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Table 1-1: Coordinating and Support Agencies

Lead Coordinating Agency	Department of Health Services (WI DHS)
Wisconsin Governmental Support Agencies	Department of Agriculture, Trade and Consumer Protection (DATCP) Department of Natural Resources (DNR) Department of Military Affairs/Wisconsin Emergency Management (DMA/WEM) Department of Military Affairs/Wisconsin National Guard (DMA/WING) Department of Transportation/Wisconsin State Patrol (WisDOT/WSP) Wisconsin State Laboratory of Hygiene (WSLH)
Non-Governmental Support Organizations	American Red Cross Medical Reserve Corps (MRC)
Federal ESF Coordinating Agencies	Center for Disease Control & Prevention (CDC) Environmental Protection Agency (EPA) U.S. Department of Health & Human Services (HHS)

1. Introduction

1.1. Purpose

To provide for coordinated state public health and medical assistance to local, county, and tribal governments (including veterinary and animal health issues as they affect public health) during a potential or developing public health disaster or any emergency with a public health component.

1.2. Scope

1.2.1. ESF 8 describes how state agencies respond to public health aspects of emergencies including:

1.2.1.1 Incidents with the potential to result in adverse public health consequences.

- (1) Natural disasters
- (2) Accidents (radiological or chemical)
- (3) Terrorism or intentional acts of violence

1.2.1.2 Disease outbreaks

1.2.1.3 Exposures to unknown substances directly linked to implicit or explicit threats

1.2.2. This plan describes the coordination of state support with local, county, and tribal governments in the provision of:

- 1.2.2.1 Communication
- 1.2.2.2 Material assistance
- 1.2.2.3 Technical assistance and guidance
 - (1) Surveillance



- (A) Epidemiological investigation and laboratory services
- (B) Public health laboratory testing
- (2) Public health measures
 - (A) Quarantine and home care measures
 - (B) Mass prophylaxis and treatment
 - (i) Strategic National Stockpile (SNS)
 - (C) Medical supplies management and distribution
 - (D) Medical support to mass care
 - (i) Wisconsin Healthcare Emergency Preparedness Program - WHEPP Stockpile includes primarily Personal Protective Equipment (PPE) Ventilators, etc.
 - (ii) Generate lists of appropriate, credentialed volunteer healthcare providers from relevant registries, as needed
- (3) Medical systems
 - (A) Isolation and quarantine/environmental health/vector control
 - (B) Triage and hospital pre-treatment
 - (i) Specific patient resources or severity level as identified by first responders
 - (C) References specifics outlined by triage designations
 - (i) START – stands for Simple, Triage and Rapid Treatment or Transport
 - (ii) SALT – stands for Sort, Assess, Lifesaving Interventions, and Treatment and/or Transport
 - (D) Medical surge
- (4) Mass fatality management
- (5) Evaluating the human health implications of hazardous substances or conditions

1.3. Policies

- 1.3.1. Wisconsin Department of Health Services has the authority to plan for and respond to disasters involving health and medical services under:
 - 1.3.1.1 Emergency Management, Chapter 323 of the Wisconsin Statutes
 - 1.3.1.2 Emergency Volunteer Health Care Practitioners, Chapter 257 of the Wisconsin Statutes



- 1.3.1.3 Health Administration and Supervision, Chapter 250 of the Wisconsin Statutes
- 1.3.1.4 Public Health Emergency Plan
- 1.3.1.5 Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. §§ 5121 *et seq.*)
- 1.3.2. Deaths will be investigated and processed under the requirements listed in Chapters 59, 69, and 979 of the Wisconsin Statutes.
- 1.3.3. For health and medical-related emergencies, WI Department of Health Services coordinates directly with local, tribal, other state agencies, and federal responders and provides for implementation of state response plans, as appropriate.

2. Concept of Operations

2.1. General

- 2.1.1. The Wisconsin Department of Health Services, Division of Public Health (DPH) staffs ESF 8 during an elevation of the state emergency operations center (SEOC) to Level 3 or higher and coordinates the resources of WI Department of Health Services and other appropriate state and private organization resources with the SEOC.
 - 2.1.1.1 During a level 4 (Enhanced Monitoring Operations) elevation of the SEOC, the Division of Public Health (DPH) may virtually coordinate resources and staff the SEOC, if needed.
- 2.1.2. Local, county, and tribal public health authorities retain operational authority of ESF 8-related response in coordination with the local, county, and tribal emergency plan and the emergency operations center/incident command system.
 - 2.1.2.1 Division of Public Health will assist local, county, and tribal public health authorities when requested.
 - 2.1.2.2 Division of Public Health will coordinate ESF 8-related response during statewide events.
- 2.1.3. ESF 8 promotes the use of trained volunteers through the Wisconsin Emergency Assistance Volunteer Registry (WEAVR) and the local Medical Reserve Corps (MRC) units.

2.2. Notification of an Incident to WI Department of Health Services

- 2.2.1. Depending on the scope of the disaster, initial notification to WI Department of Health Services will typically come from:
 - 2.2.1.1 Local public health departments (LPHD)
 - 2.2.1.2 Tribal health centers



- 2.2.1.3 911 dispatch centers
- 2.2.1.4 Health care providers
- 2.2.1.5 State or county emergency management
- 2.2.1.6 Media
- 2.2.1.7 State or regional agencies
- 2.2.1.8 Laboratories
- 2.2.1.9 US Center for Disease Control and Prevention (CDC)
- 2.2.1.10 Federal and border (or other) state health departments
- 2.2.2. The incoming call is routed to the staff person or the 24-hour on-call staff which covers the appropriate major area and then communicated to appropriate health and hospital partners:
 - 2.2.2.1 Natural disaster or chemical spill
 - 2.2.2.2 Communicable disease
 - 2.2.2.3 Nuclear/radiological incident
 - 2.2.2.4 Human services

2.3. Alerting

2.3.1. Fast breaking incident

In the event WI Department of Health Services is alerted in advance of an incident or is one of the first agencies to be notified:

- 2.3.1.1 WI Department of Health Services may utilize the Public Health Alerting System and other communications systems to alert:
 - (1) Local Public Health Departments and Tribal Health Centers
 - (2) Wisconsin State Laboratory of Hygiene
 - (3) Hospital emergency departments
 - (4) Wisconsin Emergency Management
- 2.3.1.2 Based on WI Department of Health Services and Wisconsin Emergency Management consultations with Local Public Health Departments and county emergency management:
 - (1) WI Department of Health Services
 - (A) May advise the activation of local public health emergency plans (PHEP), hospital, or emergency management plans that may initiate the activation of appropriate emergency operating centers (EOCs)



- (B) May activate the state Public Health Emergency Plans (PHEP)
 - (C) May notify the US Center for Disease Control and Prevention (CDC)
 - (D) May notify the FEMA Region Five, Assistant Secretary for Preparedness and Response (ASPR), Regional Emergency Coordinator.
- (2) Wisconsin Emergency Management
- (A) May elevate the State EOC to Level 4 or higher
 - (B) Can activate the Department of Justice TIME (Transaction Information for Management of Enforcement) system, which is linked to all dispatch centers in the state
 - (C) May alert the FEMA Region V Watch Office or Regional Response Coordination Center (RRCC)

2.3.2. Slow developing incident

In a slow developing incident where the precipitating incident is unknown until the appearance of syndromes or disease cases, the LPHD(s), along with the hospital(s) and clinic(s) and the WI Department of Health Services will monitor the situation largely through the Wisconsin Electronic Disease Surveillance System (WEDSS). The alerting process for fast breaking incidents can be applied in whole or in part for a slower developing biological incident.

- 2.3.2.1 Once health care facilities or laboratories identify any of the CDC Category A, B, or C diseases, indicative of a biological agent or outbreak of other infectious diseases, they will notify WI Department of Health Services, LPHDs, and health care facilities immediately according to the protocols outlined in Section 2.4: Active Surveillance.
- 2.3.2.2 The Division of Public Health, in collaboration with the LPHD, labs, hospitals, and clinics, confirm their findings.
- 2.3.2.3 The state may notify and consult with CDC.
- 2.3.2.4 The state and LPHDs consult with WEM on the need to elevate the SEOC and provide recommendations to activate local EOCs.
- 2.3.2.5 After state and local EOCs open,, state and local response agencies and hospitals are notified via alert systems by WI Department of Health Services.
- 2.3.2.6 The SEOC informs the FEMA Region 5 Watch Office or RRCC of incidents taking place in Wisconsin.



2.4. Active Surveillance

- 2.4.1. WI Department of Health Services Division of Public Health, Bureau of Communicable Disease (BCD) routinely conducts a variety of active surveillance activities including:
- 2.4.1.1 Analyze and monitor syndromic surveillance data as well as laboratory and case reports for possible outbreaks or epidemics, and provide timely reports back to the local health departments and the health care provider community.
 - 2.4.1.2 Consult with federal and other state agencies in order to coordinate disease investigations with regional or federal investigations.
 - 2.4.1.3 Provide to clinicians (human and animal) and health departments:
 - (1) Current statewide epidemiological information on any disease outbreak
 - (2) Case definitions and supplemental documentation
 - (3) Consultation
 - (4) Coordination of surveillance activities if multiple local jurisdictions or state agencies are involved
 - 2.4.1.4 Make appropriate staff available through the Division of Public Health regional offices to assist LPHDs as needed in emergency situations.

2.5. Environmental Monitoring and Sampling

- 2.5.1. Environmental health teams evaluate environmental health risks and provide technical guidance for protecting the public, to include the need for conducting environmental monitoring and the collection of environmental samples.
- 2.5.1.1 Teams include specialists from Division of Public Health, Department of Natural Resources (DNR), Department of Agriculture, Trade, and Consumer Protection (DATCP), and WSLH.
 - 2.5.1.2 When appropriate, members consult with first responders, hazmat units of local fire departments, and work with LPHD and tribal health centers to evaluate the situation.
 - 2.5.1.3 Together these agencies assess the need for control measures and identify environmental health risks during and after the incident.
- 2.5.2. If environmental assessment exceeds the capability or capacity of state resources, the WI Department of Health Services or other appropriate agency(s) request assistance from the following agencies for support in conducting environmental investigations, determining the need for mitigation and management, and recommending the appropriateness of reentry:
- 2.5.2.1 WING



- 2.5.2.2 EPA
- 2.5.2.3 Agency for Toxic Substances and Disease Registry (ATSDR)
- 2.5.2.4 Occupational Safety and Health Administration (OSHA)
- 2.5.3. In the event of suspected terrorism:
 - 2.5.3.1 The Federal Bureau of Investigation (FBI), Department of Agriculture, Trade, and Consumer Protection (DATCP), Division of Public Health, Department of Natural Resources (DNR), 54th CST, 54th WI CERFP or local hazmat unit may collect environmental samples.
 - 2.5.3.2 The FBI may request assistance from state or federal staff with expertise in specific biohazards or chemicals.
 - 2.5.3.3 As appropriate, sample collection and packing will be discussed with the WSLH or other laboratories.
 - 2.5.3.4 Collection, packaging, and transportation of environmental specimens are conducted in accordance with existing procedures that ensure safety and chain of custody, as well as integrity of the samples.
- 2.5.4. Samples are forwarded for analytical or confirmatory work to the closest regional laboratory certified to perform the necessary testing.
 - 2.5.4.1 Samples may be sent to WSLH, Department of Agriculture, Trade, and Consumer Protection (DATCP) Bureau of Laboratory Services (BLS), crime labs, Wisconsin Veterinary Diagnostic Laboratory, the CDC, or other federal laboratory.
 - 2.5.4.2 State labs coordinate and communicate with one another to determine which lab should receive the sample.
 - 2.5.4.3 Capacity of local and regional laboratories to evaluate both clinical and environmental specimens is surveyed annually.

2.6. Response Procedures

WI Department of Health Services response systems are prescribed in the supporting plans identified in Agency-Specific Supporting Plans and Procedures. The task of ESF 8 personnel during a mobilization will be to activate those plans, coordinate response actions with those of the supporting agencies, secure outside support and resources as necessary, and provide ongoing situational awareness to the SEOC.

3. Agency Responsibilities

The WERP Basic Plan defines standardized tasks that constitute response responsibilities of any agency that serves a role in emergency management. The following defines those



responsibilities that are unique to ESF 8 and is intended to be used in conjunction with the common tasks outlined in the Basic Plan.

3.1. Lead Coordinating Agency – Wisconsin Department of Health Services

Table 3-1: Lead Coordinating Agency Functions

Agency	Functions
Department of Health Services	<p>Agency as a whole</p> <ul style="list-style-type: none"> • Coordinate with incident command, local EOCs that are activated, the SEOC, and ESF 15 personnel to issue public information regarding health-related alerts and protective actions. <p>Surveillance</p> <ul style="list-style-type: none"> • Epidemiological investigation and laboratory services • Public health laboratory testing <ul style="list-style-type: none"> ○ Access event-specific information on specimen collecting, packing, transport, and testing specific from the WSLH. ○ Notify WSLH of the event and related response planning activities (e.g., teleconferences, videoconferences). ○ Provide guidance to local public health and the WSLH on criteria for patient and specimen selection. ○ Disseminate reports to local public health; disseminate CDC results to WSLH and LPHDs. ○ Inform WSLH when event has concluded or passed the acute stage. • Participate in laboratory response debriefing. <p>Public Health</p> <ul style="list-style-type: none"> • Quarantine and home care measures <ul style="list-style-type: none"> ○ Provide guidelines for health care and public health personnel. ○ Assist LPHDs in clinical assessment of cases and need for isolation. ○ Provide current epidemiological information on the disease outbreak so LPHDs can accurately determine quarantine needs. ○ Provide consultation and coordinate activities if multiple local jurisdictions or state agencies are involved. • Mass prophylaxis and treatment <ul style="list-style-type: none"> ○ Establish medical order to provide treatment or prophylaxis. ○ Establish procedures for receipt, inventory control, and distribution of Strategic National Stockpile (SNS) materials. ○ Request additional supplies for mass clinics. ○ Provide technical support and assistance to LPHDs operating mass clinics. ○ Provide LPHDs with communication templates and public information staff, as necessary. • Medical supplies management and distribution <ul style="list-style-type: none"> ○ Maintain a primary and secondary Receipt, Storage, and Staging (RSS) warehouse space. ○ Staff and operate a RSS warehouse. ○ Coordinate, track, and maintain medical material inventory and recommend additional material.



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	<ul style="list-style-type: none"> ○ Transport SNS assets to mass clinics LPHDs and treatment facilities in accordance with LPHD plans. ○ Coordinate public health public information activities related to the SNS. <p>Medical Systems</p> <ul style="list-style-type: none"> ● Isolation and quarantine, environmental health, and vector control ● Triage and hospital pre-treatment <ul style="list-style-type: none"> ○ Monitor numbers and case statewide using the Wisconsin Electronic Disease Surveillance System. ○ Provide to clinicians and health departments: <ul style="list-style-type: none"> ▪ Statewide current epidemiological information on any infectious disease outbreak or incident ▪ Case definitions and supplemental documentation ▪ Consultation ▪ Coordination of activities if multiple local jurisdictions or state agencies are involved ○ Report to federal and to other state agencies, as necessary. ○ Provide assistance and support to LPHDs in public health emergencies where local transportation resources are not sufficient to meet identified needs. ○ Work with state agencies, including WEM, to identify a resource list of such services that may be used in support of local public health emergencies. <p>Mass Fatality Management</p> <ul style="list-style-type: none"> ● Provide assistance to funeral directors and local vital records registrars through the Division of Public Health Office of Health Informatics, Vital Records, if requested. ● Provide information on best practices for safe handling of confirmed or suspected contaminated human remains and personal effects (specific to the type of contamination). ● Provide information on how to detect the possibility of a bioterrorism or other infectious disease outbreak. ● In a mass fatality event so large that decomposition of human remains becomes a public health risk, advise if the Communicable Disease Chief Medical Officer has determined that the Wisconsin Public Health Emergency Plan statutory 48-hour waiting period for cremation can be waived to prevent the spread of communicable disease or other biohazard under provisions of Wis. Statute § 979.10. ● Request federal resources from the U.S. Department of Health and Human Services and the U.S. Department of Homeland Security. Requests should be coordinated through the Assistant Secretary for Preparedness and Response' Regional Emergency Coordinators in Chicago IL. <p>Wisconsin Emergency Assistance Volunteer Registry (WEAVR)</p> <ul style="list-style-type: none"> ● Administer, maintain, and promote the database of health care and behavioral health professionals. ● Deploy volunteers, in coordination with ESF 7, as needed in support of ESF 8 activities.



3.2. Wisconsin Governmental Support Agencies

Table 3-2: State Government Support Agencies Functions

Agency	Functions
<p>Department of Agriculture, Trade and Consumer Protection</p>	<ul style="list-style-type: none"> • Provide food safety experts to monitor and assure safe food sources. Collect and analyze samples, establish holds and embargoes, and recall agricultural products. • Provide surveillance for disease in livestock and zoonotic (i.e., communicable between animals and humans) diseases in household pets, livestock, and wild animals. • Provide veterinary expertise as appropriate to local communities. • Quarantine and order destruction of animals affected with, or exposed to, communicable disease, as appropriate. • Address agricultural chemical spills by collecting and testing samples. • Assist with coordinating household pet and livestock staging areas (e.g., transportation, identification, triage, veterinary care, animal sheltering). • Work with Department of Natural Resources (DNR) on animal carcass disposal and waste management issues (e.g., animals, animal waste, agriculture chemicals). • Assist with coordinating the deployment of federal and state resources (e.g., Veterinary Medical Assistance Teams, Wisconsin Animal Response Corps) to care for and treat animals. • Assist Department of Natural Resources (DNR) with evaluating environmental impact. • Work with the WI Department of Health Services to ensure a safe food and water supply. Inspect, sample, test, and evaluate local food and water sources to ensure product safety or proper disposal. • Obtain and verify information regarding the impact of the disaster on the health of animals and provide needed services to the community. • Provide food safety, agriculture resource management, and animal health advice. Assist with providing animal care to farmers and household pet owners. • Assist with monitoring the long-term effects of an agriculture emergency on the environment.
<p>Department of Natural Resources</p>	<ul style="list-style-type: none"> • Provide technical advice and assistance regarding environmental issues at the request of local government and state agencies or if there is an immediate threat to safety (e.g., issues arising from natural disasters, chemical, or biologic threats). • Provide personnel and specialized equipment (e.g., air monitoring, water quality monitoring, water sampling kits; heavy equipment for firefighting, pumps, engineers, and hydrologists). • Provide an after-hours Duty Officer (DO) system and share a 24-hour emergency hotline number with WEM. • Work with public agency and private response personnel to address any environmental threats. • Provide technical information and assistance on domestic and wild animal health issues. • Provide technical assistance with obtaining the appropriate permits needed to remove and dispose of disaster debris (e.g., animal carcasses).



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Agency	Functions
<p>Department of Military Affairs/Wisconsin Emergency Management</p>	<ul style="list-style-type: none"> • Assist with monitoring the long-term effects of a disaster on the environment. • Coordinate with state and local agencies to identify and implement appropriate protective actions. • Through ESF 15, coordinate with WI Department of Health Services to issue public information regarding health-related alerts and protective actions. • Coordinate with federal and private (e.g., forensic dentists, Wisconsin Funeral Directors' Association, State Coroners Association) organizations to support local health, medical, and mortuary needs. • Provide an after-hours DO system and share a 24-hour emergency hotline number with Department of Natural Resources (DNR).
<p>Department of Military Affairs/Wisconsin National Guard</p>	<ul style="list-style-type: none"> • Support SNS response activities, as requested. • Civil Support Team (CST) <ul style="list-style-type: none"> ○ Operates under control of the Governor ○ Certified as operational by the SECDEF ○ Operate only in Continental United States and its territories ○ Personnel are full-time, Title 32 AGR Guardsmen ○ All personnel are certified as a Hazardous Materials Technician ○ 80% commercial off-the-shelf equipment ○ Interoperable with first responders ○ Identify: <ul style="list-style-type: none"> ▪ Detection/Identification of BWAs ▪ Detection/Identification of nucleic acid biomarkers ▪ Detection/identification of unknown chemicals/CWAs/TICs/TIMs ▪ Biological analysis/white powder analysis ▪ Radiological data analysis and interpretation ▪ Basic wet chemistry capability ▪ Reach back to state and federal laboratories ▪ Secure and nonsecure interface to the Unified Command suite for the transmission of digital sample information ▪ Environmental confirmation of sample ○ Determine Contaminate Area <ul style="list-style-type: none"> ▪ Conduct initial assessment of the affected area ▪ Locates source of CBRN or other hazards ▪ Develop plume model ▪ Collects CBRN samples for confirmatory analysis ▪ Provides continual monitoring through the use of detection equipment ○ 54th CST provides expert advice to public health and EMS health providers for incidents involving chemical, biological, and radiological hazards. ○ 54th CST can provide BioWatch phase I-II and other environmental sampling. • CBRN Enhanced Response Force Package (CERFP) <ul style="list-style-type: none"> ○ Designed to operate at the local, state, regional, and national level ○ 80% commercial off-the-shelf (COTS) equipment ○ HAZMAT Awareness and Operations level certified ○ All members trained in ICS 100b, 200b, 700a and 800b ○ Communications - reach back and incident area interoperable systems ○ Each component (capability) can be deployed on an individual basis or as needed basis ○ Command Cell



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Agency	Functions
	<ul style="list-style-type: none"> ▪ Conduct planning and coordination ▪ Develop Incident Action Plans (IAP) ▪ Oversee IAP execution ▪ Conduct sustainment operations ▪ Conduct deployment operations ▪ Conduct redeployment operations ▪ Manages the lifesaving capabilities of the CERFP ▪ Interfaces with both the IC and the military chain of command ▪ Provides operational tracking of casualties, personnel, equipment, and mission accomplishment ○ Search and Extraction <ul style="list-style-type: none"> ▪ Conduct search operations ▪ Conduct rope rescue operations ▪ Conduct lifting/loading operations ▪ Conduct confined space operations ▪ Conduct S&E tasks below IDLH levels in NFPA Class 2 PPE with PAPR ○ Decontamination <ul style="list-style-type: none"> ▪ Establish DECON site ▪ Conduct ambulatory/non-ambulatory clothing removal, decontamination, monitoring, and redress operations ▪ Establish equipment and personnel property decontamination stations ▪ Establish and maintain a hazardous waste site ▪ Conduct technical decontamination ▪ Ability to conduct deliberate DECON with a through-put of 75 non-ambulatory and 225 ambulatory per hour as an operational goal dependent on number of injuries and hazard of the incident site ▪ Under the C2 of the CBRN-TF or CERFP commander, the DECON Element will establish the mass casualty decontamination corridors and identify the Hot, Warm, and Cold Zones ▪ The DECON trailer has a through-put of 234 ambulatory per hour with a 2-minute wash and 2-minute rinse cycle ○ Medical <ul style="list-style-type: none"> ▪ Perform mass casualty triage ▪ Provide lifesaving medical stabilization ▪ Coordinate transportation to higher levels of care ○ Fatality Search and Recovery Team <ul style="list-style-type: none"> ▪ Collect, catalog, and hold human remains until appropriate medical examiner /coroner takes custody ▪ Management of contaminated remains waste ▪ Conduct search and recovery operations for human remains in a contaminated area • Coordinates the removal of contaminated remains only within the CERFP area of operations
<p>Wisconsin State Laboratory of Hygiene</p>	<ul style="list-style-type: none"> • Maintain a plan for collaborative emergency response with: <ul style="list-style-type: none"> ○ LPDH laboratories ○ Wisconsin Veterinary Diagnostic Laboratory ○ Department of Agriculture, Trade & Consumer Protection Bureau of Laboratory Services



Agency	Functions
	<ul style="list-style-type: none"> ○ State Crime Laboratory ● Perform testing of emergency-related specimens; in cases where the WSLH does not have the required testing capability, locate laboratories with the testing capability and facilitate specimen transport and testing at those laboratories. ● Provide ongoing information and guidance to sentinel laboratories regarding their roles and responsibilities, specimen collection, testing and transport, and laboratory safety. ● Provide written instructions on specimen collection and proper packing and transport of specimens for testing to state and local public health agencies and other response partners. ● Coordinate the use of statewide repositories and alternative courier systems and the utilization of local public health laboratory field representatives; maintain the inventories of repositories. ● Provide telephone, written results, or both including Wisconsin Clinical Laboratory Network (WCLN) and CDC results, to state and local public health agencies and specimen submitters; provide written results, including WCLN and CDC results, to local public health agencies, in addition to submitters, for terrorism related specimens. ● Conduct a laboratory response debriefing to evaluate the laboratory response and identify improvements within one month after the emergency has passed.
<p>Wisconsin Department of Transportation: Wisconsin State Patrol</p>	<ul style="list-style-type: none"> ▪ Support SNS response activities, as requested. ▪ Specimen transport from hospitals to WSLH.

3.3. Non-Governmental Support Organizations

Table 3-3: Non-Governmental Support Organizations Functions

Agency	Functions
<p>American Red Cross</p>	<ul style="list-style-type: none"> ● Provide emergency first aid, supportive counseling, and health care for minor illnesses and injuries to incident survivors in mass care shelters and other sites. ● Assist community health personnel as available. ● Provide supportive counseling. ● Provide available personnel to assist in temporary infirmaries, immunization clinics, hospitals, and nursing homes. ● Acquaint families with available health resources and services and make appropriate referrals. ● At the request of WI Department of Health Services, provide blood products and services as needed through regional blood centers. ● Support reunification efforts through the Safe and Well program.
<p>Medical Reserve Corps (MRC)</p>	<ul style="list-style-type: none"> ● Provide volunteers to support ESF 8 activities.



4. Supporting Documents

4.1. Agency-Specific Plans and Procedures

4.1.1. Public Health Emergency Plan

4.1.1.1 Describes systems for response to:

- (1) Bioterrorism, other infectious disease outbreaks and other public health threats and emergencies (BOIDDOOPHTE)
- (2) Chemical, biological, radiological, nuclear, and explosive (CBRNE) incidents

4.1.1.2 Identifies the necessary structure to allow the participants to call upon outside resources

4.1.1.3 Provides for the protection of health care providers, emergency responders, and residents in the incidence of a natural or unnatural outbreak of an infectious disease

4.1.1.4 Provides authority and powers for local public health departments to request interstate mutual aid through Wis. Stat. § 66.0312

4.1.2. Wisconsin Pandemic Influenza Operational Plan

4.1.2.1 Ensures public health continuity of operations during each phase of a pandemic

4.1.2.2 Ensures surveillance and laboratory capability during each phase of a pandemic

4.1.2.3 Implements community mitigation interventions

4.1.2.4 Acquires and distributes medical countermeasures

4.1.2.5 Ensures mass vaccination capability during each phase of a pandemic

4.1.2.6 Ensures communication capability during each phase of a pandemic

4.1.3. Wisconsin Mass Fatality Management Plan

4.1.3.1 Provides for the capability to effectively perform scene documentation, including:

- (1) Transportation, storage, documentation, and recovery of forensic and physical evidence
- (2) The complete collection and recovery of the dead, victims' personal effects, and items of evidence
- (3) Determination of the nature and extent of injury
- (4) Identification of the fatalities using scientific means
- (5) Certification of the cause and manner of death



- 4.1.3.2 Addresses decontamination of remains and personal effects (if required)
- 4.1.3.3 Provides for the development and maintenance of collaborative agreements state-wide to provide these services in mass casualty incidents

4.1.4. Strategic National Stockpile Plan (SNS)

Provides for the redistribution of federal assets of the SNS to LPHDs, tribal health centers, and medical treatment facilities in response to bioterrorism or other public health emergencies.

4.2. National Response Framework ESF 8



Table 4-1: Record of Change

#	Date	Agency/Individual	Change
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