Alameda County Operational Area
2019 California State Wide Medical & Health Exercise

Major Flooding Event Scenario, October 1, 2019

Sponsored by Alameda County Public Health Systems Preparedness & Response Program and Alameda County EMS through HPP and PHEP Grants
Welcome & Introductions
Overview of Participants
Overview of Exercise
Administrative Items
Participants

- OES
- HCSA (EMS, PH, EH, BHCS)
- HOSPITALS
- LTCFS/SNFS
- CLINICS
- DIALYSIS
- SURGERY CENTERS
- TRANSPORT ALS/BLS/CCT
<table>
<thead>
<tr>
<th>Time</th>
<th>Session Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:30 - 9:00am</td>
<td>Registration &amp; Networking</td>
</tr>
<tr>
<td>9:00 - 9:20am</td>
<td>Welcome, Opening Remarks, Introductions &amp; Administrative Items</td>
</tr>
</tbody>
</table>
| 9:20 – 10:20am| **Module 1:** Alameda County Situation & Planning Activities Briefing  
Brief Pause for Reflection and Panning Considerations |
| 10:20 – 11:00am| **Module 2:** Situational Update & Coordination Efforts Briefing |
| 11:00 – 11:10am| Brief Group Breakout Discussions               |
| 11:10 – 11:20am| Break & Video                                  |
| 11:20 – 12:20pm| **Module 3:** Medical Surge, Patient Movement, Continuity of Patient Care Situation Update |
| 12:20 – 12:50pm| Group Report Outs                              |
| 12:50 – 1:20pm| Pick Up Lunch, Participant Feedback & Hotwash    |
| 1:20 – 1:40pm| 11/21/19 Functional Exercise Preparation        |
| 1:40 – 1:45pm| Closing Remarks                                |
| 1:45 - 2:00pm| Facilitator Debriefing, Planning Group Check-In |
Exercise Purpose

Operationally address and coordinate response functions of the Disaster Preparedness Health Coalition and its partners to a severe flooding event that involves coordinated medical care and transportation across the County Operational Area.
Goals

• Maintain healthcare system situational awareness in coordination with the MHOAC Program and Health Care Coalition Partners.

• Coordinate messaging disseminated by the County via the JIC to healthcare coalition partners, to include those with access and functional needs (AFN).

• Coordinated interfacility patient transportation.

• Coordinate health care system patient care during a flood event.
Objectives

1. Discuss pre-event incident action planning, EOC activations and coordination activities between various OA agencies and partners related to significant weather event across Alameda County.

2. Discuss health care partner communications and situational awareness to and from the Medical Health Branch/MHOAC Program partners.

3. Discuss Operational Area MHOAC Program Coordination of resources and deployed staff.

4. Discuss pediatric and adult patient movement decisions related to priority transport, critical care expansion; and allocation of scarce resources.

5. Discuss patient tracking with pediatric and adult surge options.

6. Discuss the utilization of communications systems (ReddiNet, Med1, DPHC listserv) to share and disseminate actionable information.

7. Discuss EOC JIC Messaging to healthcare and other county partners.

Capabilities Addressed

- Health Care and Medical Response Coordination (HPP/HCPRC)
- Emergency Operations Coordination (PHEP)
- Medical Surge (PHEP/HPP/HCPRC)
- Continuity of Health Care Service Delivery (HPP/HCPRC)
- Information Sharing (PHEP)
ADMINISTRATION

- Exercise Materials
- Breakout Discussion Groups
- Mobile Phone Use & Breaks
- Emergency Exits & Evacuation Procedure
- In a real Emergency “Stop Exercise”
Exercise Guidelines

• Open, low-stress, no-fault environment
• Varying viewpoints are expected
• Use current plans/capabilities
• Consider different and innovative approaches
• Issue identification is not as valuable as recommended actions and improvements
During the exercise today, the following apply:

- Assume the scenario is real and will impact the jurisdiction significantly.
- Events are plausible and occur as they are presented.
- Do not fight the scenario.
- There is no hidden agenda and there are no trick questions.
- All players receive information at the same time.

**Assumptions and artificialities are necessary to complete the play in the time allotted.**
Exercise Ground Rules

1. Participate in a Collegial Manner
2. Share Policies and Practices that May Benefit Others
3. Turn off any Electronic Equipment and Participate Fully in Your Representative Role
Exercise Evaluation

- Participant Feedback Forms
- Exercise Evaluation Guides
- Hot Wash Notes
- Notes from today’s exercise may be used to design and implement the Functional Exercise/Full Scale
Module 1
Scenario Module 1

A large weather front has been stalled over the region providing significant amounts of rain creating localized flooding in low lying areas of the county and small stream warnings along creeks and watershed drainages. Additionally, the storm has brought high winds to the area causing utility failures from downed trees with restorations being delayed due to the extensive damage. Several roads throughout the county are either closed or limited due to the extensive flooding and some mudslides. If the current weather conditions continue, the flooding may cause some areas within the county to be evacuated or cut-off from access to services.
Alameda County Situation & Planning Activities

- **Paul Hess**; Emergency Services Coordinator, Alameda County Sheriff’s Office, Office of Emergency Services

- **Jeff Tang**; Associate Civil Engineer, Flood Protection Engineering Zone 7 Water Agency

- **Ron Seitz**, CEMS; Disaster Preparedness Health Coalition Long Term Care Liaison, Public Health Systems Preparedness and Response Program Specialist

- **Delia McGrath**, PE; Senior Engineer Specialist, Risk Management and Emergency Actions Plans Branch, Dam Safety Services, California State Department of Water Resources
Here is a typical atmospheric river, where strong upper level winds between high and low pressure systems concentrate and steer moist tropical air into California.
Alameda County Storms Damage

City of Oakland Damages
Alameda County OES EOC

- OES Staff - Incident Monitor Mode
- Level I – Small Incident - Partial Activation
- Level II – Large Incident - Mid to Full Activation
- Level III – Catastrophic Incident - Full Activation
Op Area Coordinating Partners:

- Our 14 Cities
- Special Districts (Utilities, Schools, Others)
- External Agencies (CHP, Caltrans, DWR, Cal OES, Red Cross)
- Private Sector
- Others as Needed
- NWS Flood & Storm Warnings
- Flood Preparedness Messaging
- Areas to Avoid/Roads Closed
  - Protective Actions
- Incident Conclusion
- NWS Flood & Storm Warnings
- Flood Preparedness Messaging
- Areas to Avoid/Roads Closed
  - Protective Actions
- Incident Conclusion
Transportation & Evacuations
Flood Planning for Alameda County

Jeff Tang, Associate Civil Engineer / Flood Protection Engineering
ALAMEDA COUNTY –
WESTERN (396 sq.mi) / EASTERN (425 sq.mi)
ALAMEDA COUNTY – WESTERN WATERSHED (343 sq.mi)
ALAMEDA COUNTY – EASTERN WATERSHED (630 sq.mi)
WEST – INFLUENCED BY TIDAL FLOODING
EAST – INFLUENCED BY FRINGE AREAS
50-100 Year Flooding East County

[Map Image]

https://stormcentral.waterlog.com/public/Zone7

---

1 Rain Gauges
- ALT_C_BD - Altamont Creek at Bluebell Dr (Zone 7)
- AMNL - Arroyo Mocha near Livermore (Zone 7)
- AMP - Arroyo Mocho near Pleasanton (Zone 7)
- CM_NC - Rain Gauge at 100 North Canyons Parkway (Zone 7)
- CM_SGE - Rain Gauge at Sunol Glen Elementary School (Zone 7)
- LG1_DB - Line G-1 at Dublin Blvd (Zone 7)
- LJ1_BDB - Line J-1 below Dublin Blvd (Zone 7)
- TC_B1580 - Tassajara Creek below 1-580 (Zone 7)

2 Stream Gauges
- Zone 7
Alameda County Public Health Mapping
Ron Seitz / Matt Byers

- DPHC Hub Locations with Top Critical Facilities
- Flood Threats to Locations
- PG & E – Electricity Dependent Medicare Beneficiaries
100-Year Flood Plain

Source: CAPE, with data from ACPHD Emergency Preparedness.
Del Valle Dam – Vicinity Map
Del Valle Dam - CDEC Station: DLV
cdec.water.ca.gov
Del Valle Dam - CDEC Station: ALN

Figure 25 – Niles Gaging Station west of Sunol, CDEC Station ID: ALN
Del Valle Dam - Emergency Action Plan

**Purpose** - to safeguard the public, DWR employees, and minimize the property damage during a dam emergency.

Provides guidance for:
- Classifying emergency conditions
  - **High Flow Operations** - Indicates that flooding is occurring on the downstream river system, but there is no apparent threat to the integrity of Del Valle Dam.
  - **Non-Failure Emergency**
  - **Potential Failure**
  - **Emergency Failure**
- Prioritizing emergency response actions
- Notifying Emergency Management Agencies
DAM EAP Responsibilities During High Flow Operations

- **California DWR**
  - Notification of the EAP activation.
  - Providing EMAs and law enforcement agencies with timely and accurate information regarding releases from the dam, and changes in emergency level, including termination of the declared emergency at the facility.
  - **DWR makes notifications following the EAP Notification Flowcharts and will NOT notify the general public.**

- **Alameda County Sheriff** and **California Highway Patrol** - implementing evacuation orders if determined necessary by local agencies.

- **National Weather Service** - issuing Flood Advisories, Flood Watches, Flood Warnings, Flash Flood Warnings to the public through local radio, television, internet, and other media.
Important: All automated voice messages should be repeated twice to ensure receipt of the entire message.

B. Notification Dialogue for High Flow Operations Emergency Level

The California Department of Water Resources has activated the Emergency Action Plan for Del Valle Dam.

The Emergency Action Plan has been activated to notify local emergency management agencies and entities immediately downstream of Del Valle Dam, of significant changes in releases from Lake Del Valle. The Emergency Level now falls under High Flow Operations. The dam is NOT in danger of failing.

The current release from Lake Del Valle is __________ cfs and will increase to __________ cfs by ______ (time) ______ (date). Please note that flows downstream may exceed this value due to other natural and artificial inflows.

Lake Del Valle release information can be found by searching for station DLV (Del Valle Dam) at [http://cdec.water.ca.gov/cdecstation2/](http://cdec.water.ca.gov/cdecstation2/)

If you serve in an emergency management role and require additional information, please contact the DWR Division of Flood Management’s Flood Operations Center at (800) 952-5530.

**Date Issued:** __________

**Time Issued:** __________

**Issued by:** __________
Module 1

Brief Pause to Reflect on Questions

Healthcare Facilities

1. Based on the information you are hearing from the county and the weather situation, what plans are you thinking of activating?
2. At what point would your Command Center activate? When would you begin incident action planning?
3. What messaging are you preparing for staff, clients, family, the community?
4. How are you coordinating with your PIO and the county?

County/Emergency Management

1. Based on the information you are hearing from the county and the weather situation, what plans are you thinking of activating?
2. What HCSA messaging would we be considering? How do we best coordinate multiple messages from the EOC JIC and the OA Medical Health Branch MHOAC Program (EMS, PH, EH, BH, HCH, Lab)?
3. What transportation issues are we thinking about that may affect the health care delivery system?
Module 2
Scenario Module 2

• After 3 days of continuous heavy rain, several low-lying areas in county are experiencing moderate levels of flooding.
• These flood prone areas are beginning to receive from one to three feet of water.
• The flooding alone may impact upwards of 45,000 people to varying degrees and be cause for some areas to evacuate.
• Power outages in flood areas alone will affect nearly 15,000 residences
• and 1000’s of commercial buildings.

• The effects from storm damage such as downed trees and mudslides are creating transportation problems and adding to the effect of the power outages and utility damage.
Situation Update Module 2
Operational Area Conditions Worsening

• Cites are considering opening shelters to prepare for evacuees, and issue shelter in place notifications for non flood prone areas.

• Media is advising people not to travel due to the road conditions and if possible, to stay at home.

• There are numerous incidents being handled by local first responders.

• The County Op Area EOC along with several local city EOCs have been activated and are providing operational coordination.
Additional Concerns

• There are increasing concerns for behavioral health issues, unsheltered/homeless populations, environmental health concerns regarding toxic runoff due to the flooding of illegal dumping sites, household chemicals and businesses that are experiencing flooding.

• Public Health is providing health advisories regarding possible drinking water issues in some areas and to avoid contact with flood waters due to their potential toxicity.
Module 2 – Situational Update
Preparing for Medical Surge

• **Cynthia Frankel, RN, MN;** Alameda County EMS Agency, HPP LEMSA & ReddiNet Coordinator

• **William McClurg;** EMS Deputy Director, Alameda County Emergency Medical Services, OA Medical Health Branch, Emergency Medical Services, MHOAC Program Coordination

• **Erica Pan, MD, MPH, FAAP;** Director, Division of Communicable Disease Control and Prevention, Alameda County Public Health Department, Interim County Health Officer

• **Zerlyn Ladua, RN, FNP, MSN;** Public Health Systems Preparedness and Response Director, Division of Communicable Disease Control, Alameda County Public Health Department

• **David Modersbach;** Grants Manager/Special Projects, Alameda County Health Care for the Homeless program
Taking a step back:

Incident Escalation for HCSA

Duty Officer Programs

DOC Activation

Med/Health Branch @ EOC
Duty Officer Programs

- Environmental Health, Public Health and EMS have Duty Officer Programs providing 24/7 monitoring and surveillance of their areas of responsibility
- The Duty Officers keep their fingers on the pulse of the County and are likely to be the initial contact point for evolving incidents
- Duty Officers report escalating or expanding incidents to their agency leadership which may lead, depending on the incident type, to activation of a DOC
DOC Activation

• A Department Operations Center (DOC) Activation creates an incident specific management structure within an agency utilizing ICS.

• DOC Activation can be virtual, where roles and functions are assigned and operational, but not convened in a single location.

• For HCSA, individual agencies can open their DOCs and/or HCSA can open an over-arching DOC with representation from multiple or all agencies within HCSA depending on the incident.
• The Medical / Health Branch is typically staffed by the EMS Agency

• The Medical Health Operational Area Coordinator (MHOAC) facilitates bi-directional communication with the HCSA DOC(s), EOC command staff, and the region through the RDMHC and RDMHS who also communicate with the state.
  - Sit-Stat Updates
  - Flash Reports
  - Resource Requests

• Activities are guided by the 17 functions of the Medical Health Operational Area Coordination Program.
<table>
<thead>
<tr>
<th></th>
<th>Function</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Assessment of immediate medical need</td>
</tr>
<tr>
<td>2</td>
<td>Coordination of disaster health and medical resources</td>
</tr>
<tr>
<td>3</td>
<td>Coordination of patient distribution and medical evaluations</td>
</tr>
<tr>
<td>4</td>
<td>Coordination of inpatient and emergency care providers</td>
</tr>
<tr>
<td>5</td>
<td>Coordination of out of hospital medical care providers</td>
</tr>
<tr>
<td>6</td>
<td>Coordination and integration with fire agencies’ personnel, resources, and emergency fire pre-hospital medical services</td>
</tr>
<tr>
<td>7</td>
<td>Coordination of providers of non-fire-based pre-hospital emergency medical services</td>
</tr>
<tr>
<td>8</td>
<td>Coordination of the establishment of temporary field treatment sites</td>
</tr>
<tr>
<td>9</td>
<td>Health surveillance and epidemiological analysis of community health status</td>
</tr>
<tr>
<td>10</td>
<td>Assurance of Food Safety</td>
</tr>
<tr>
<td>11</td>
<td>Management of exposure to hazardous materials</td>
</tr>
<tr>
<td>12</td>
<td>Provision or coordination of behavioral health services</td>
</tr>
<tr>
<td>13</td>
<td>Provision of medical and health public information and protective action recommendations</td>
</tr>
<tr>
<td>14</td>
<td>Provision or coordination of vector control services</td>
</tr>
<tr>
<td>15</td>
<td>Assurance of drinking water safety</td>
</tr>
<tr>
<td>16</td>
<td>Assurance of the safe management of liquid, solid and hazardous waste</td>
</tr>
<tr>
<td>17</td>
<td>Investigation and control of infectious diseases</td>
</tr>
</tbody>
</table>
The 17 functions are completed through the collaborative efforts of all HCSA agencies and the HCSA DOC.

Status updates are funneled to the Medical Health Branch and the MHOAC for shared communication at the EOC and to the RDMHC/S.
EMS Impact
Considerations

- Increased 911 System Demand
  - Simultaneous events
  - Evacuations and Rescues
- Potential Compromise of Hospitals and Health Care Facilities
  - Potential Damage/Flooding
  - Surge in Patient Volume
- Availability of Response and Transport Resources
  - Damage to Resources
  - Infrastructure Concerns
  - Scope of Disaster
EMS Plan Activations and Communications

• Potential Plan Activations
  • ALCO EOP
  • EOM – EMS MHOAC Program
  • EMS Surge Plan
  • MCI Policy
  • ReddiNet Policy
  • Pediatric Surge Plan

• Available Communication Pathways
  • EBRCS Radios
  • ReddiNet
  • FirstWatch
  • Med1 Email
  • AC Alert
  • CAHAN
  • Conference Calls
EMS Priority Actions

- **Assess 9-1-1 System Status**
  - Dispatch Center Functionality
  - Resource Supply vs System Demand

- **Communications**
  - Establish Bi-Directional Communication with System Partners
  - Gather intel in order to prepare and disseminate flash/sit-stat reports.

- **Assess Health Care Facility Status**
  - Functional?
  - Evacuating?
  - Resource Needs?

- **Track and Triage**
  - Patients
  - Resources
  - Requests/Needs

- **Staff Med/Health Branch** and coordinate efforts with EOC, HCSA DOC, MHOAC and RDMHS/C
Leverage MCI Plan

- Utilization of MCI plan by EMS field crews to effectively and efficiently manage scenes with mass casualties.
  - START & JUMP START Triage
  - Establishing Casualty Collection Points
  - Facility Notifications
  - Activation of supplemental transport resources to include additional ambulances, air ambulances, or buses if appropriate.
  - Deployment of Disaster Medical Supply Unit (DMSU)
  - Initiate First Round Destination Procedure for Receiving Hospitals

**First Round Destination Procedure**

- **Non-Trauma patients** to each Alameda County receiving hospital (for a total of 6):
  - Two (2) "Immediate"
  - Four (4) "Delayed" and/or "Minor"
  **e.g.: Medical incident, HazMat**

- **Trauma patients** to each Alameda County Trauma Center (for a total of 7):
  - Three "Immediate"
  - Four (4) "Delayed" and/or "Minor"
EMS Surge Plan

- Mitigation of increased system demand and deficient resources.
- Utilization of Non-Emergency Ambulances to Supplement 911 System
  - Mechanism to immediately poll and integrate transport resources
- Reduce Ambulance Offload Delays at Hospitals
  - Encourage activation of hospitals’ internal surge plans
  - Earlier activation of ambulance crew initiated patient offload
EMS Intervention

Critical Care Expansion Model

1. Hospitals increase pediatric beds by 5% above total licensed beds
2. Hospitals with ICU & PICU double numbers of staffed beds
3. Hospitals take 5 additional patients in their ICU & PICU
4. Hospitals increase bed capacity by 10% above licensed beds
EMS Intervention

Pediatric Surge Bed Preservation Model

Joint CoCo-ALCO Emergency Medical Services
Recommended Pediatric Surge Bed Preservation Model
EMS Communications

Hospital ReddiNet Messaging

- **Hospitals** – Expedite ambulance off load time
  - Receiving facilities may receive 9-1-1 patients from additional providers outside of Falck & transporting fire departments. Please assist in getting units back into system quickly

- Complete **SIT STAT REPORT** no later than 0900 to Med1 Email Address

- If you need resources, use **RESOURCE REQUEST FORM** & email to Med1 Email Address (Ensure Name of organization on subject line) [http://ems.acgov.org/Documents/Documents.page](http://ems.acgov.org/Documents/Documents.page)

- Participate on **700/800 RADIO CHECK** with EMS–TAC 14 Radio Check at 0930

- Complete **HAVBED & CUSTOMIZED POLL** by 0930

- **CONFERENCE CALL**: Today at 1100 - 1-888-204-5984; Participant code 886530 #

- EMS at Operational Alameda County EOC Medical/Health Branch & EMS Branch DOC

- **EMAIL**: Med1 Email Address
EMS Communications

ReddiNet Facility Polling

Sample Questioning

- Are you fully functional? Partially functional?
- Are you evacuating?
- Clinics can you stay open longer?
- Do you need generator fuel?
- Hospitals
  - Do you have capacity to take more PICU patients?
  - Do you have capacity to take more ICU patients?
  - # of “flood” patients at hospital? (Adults/Children/Total)
  - # of patients waiting in ED to be admitted?
  - Are you expanding your capacity to take additional patients?
ALAMEDA COUNTY EMS
FLASH REPORT
“FLOOD” EVENT –
THIS IS NOT A REAL EVENT

Region II
Operational Area: Alameda County
Reporting person & jurisdiction: Jim Morrissey, ALCO EMS MHOAC
Type of Incident: Flood – Alameda County
Event Name: 2019 Tabletop Exercise
Date: 01 Oct. 2019 Time: 0800

Notification type:
CRITICAL ISSUES/PRIORITIES (SPECIFICALLY THE IMPACT TO MEDICAL HEALTH SYSTEM)
- Immediate Urgent Action desired and necessary
- Alert – quickly developing flood. Medical Health Situation Report on-going
- Situational Awareness
- Mutual Aid Request anticipated for potential EMS events

Situation:
OCTOBER 1, 2019
- After 3 days of continuous heavy rain, several low-lying areas in OA experiencing moderate levels of flooding.
- These flood prone areas are beginning to receive fr om one to three feet of water.
- Flooding may impact upwards of 45,000 people and evacuation may occur.
- Power outages in flood areas will affect nearly 15,000 residences and 1000’s of commercial buildings.
- Cities are considering opening shelters to prepare for evacuees. Shelter in place notifications for non-flood areas.
- Media is advising people not to travel due to the road conditions and if possible, to stay at home.
- There are numerous incidents being handled by local first responders.
- Cities are considering opening shelters to prepare for evacuees. Shelter in place notifications for non-flood areas.

EOCs / MCCs
- Alameda County EOC is fully activated including the Medical Health Branch and the EMS DOC are activated
- The Alameda County MHOAC and RDMHS are activated at the OA EOC.
- City and Operational Area Emergency Operations Centers (EOCs) have been activated throughout OA.
- Hospital MCCs activated
- Coordinating with FCC, Dispatch Centers, and Non-911 Permitted Ambulance Providers (BLS),
- RescNet and 700/800 Megahertz Radios communications utilized
Alameda County Medical/Health Status Report Form

1. Event/Incident Title:
2. Facility Name:
3. Originator Name:
4. Title:
5. Department:
6. Phone:
7. Email:
8. Hospital [ ] Clinic [ ] Other [ ]
9. EOC/HCC Phone #:
10. Is your EOC/HCC activated? [ ] Not Activated [ ] Partially Activated [ ] Fully Activated

11. Check the most appropriate level of functionality of your facility:
   - Not Functional
   - Partially Functional
   - Fully Functional

12. Provide facility infrastructure status (damage, electricity, water, internet, phones, etc.):

13. Can your facility provide essential Patient Care? [ ] No [ ] Yes
14. Estimated Casualties - How many patients do you have as a result of this event? (Based on START Trauma)
   - Immediate (Red) [ ]
   - Delayed (Yellow) [ ]
   - Minor/Green [ ]
   - Deceased (Black) [ ]

15. Can your facility take more patients? [ ] No [ ] Yes. 16. Explain any limitations:
   - MED/SURG [ ] No [ ] Yes # of Beds
   - ICU [ ] No [ ] Yes # of Beds
   - PICU [ ] No [ ] Yes # of Beds
   - NICU [ ] No [ ] Yes # of Beds
   - TRAUMA [ ] No [ ] Yes # of Beds
   - BURN [ ] No [ ] Yes # of Beds
   - PSYCH [ ] No [ ] Yes # of Beds
   - PEDS [ ] No [ ] Yes # of Beds

16. Can your Urgent Care/Emergency Department take more patients? [ ] No [ ] Yes
17. If yes, number of patients:

18. Identify critical issues and resource needs that cannot be addressed by your facility:
19. If you have any resource needs, you MUST submit a Medical/Health Request Form.

This form is to be sent from your Facility to the Operational Area (County EOC)
For EMS Use Only: Processed by:
Submit by Email Print Form Reset Form
# EMS Communications

## Resource Request Form

### ALAMEDA COUNTY EMS - Medical/Health Request Form

Please make sure that you view each page before submitting the form. When you have completed the form, go back to this page to submit the form via email (PREFERRED). If you are unable to email the form, print it out and fax to (510) 652-2720.

**Instructions:** This form should be used by facilities that are requesting resources that are "medical" in nature. This includes medical supplies, pharmaceuticals (medications, vaccines, antidotes, etc.), personal protective equipment (PPE), decontamination supplies, surge supplies, etc. This form is to be filled out completely and with enough detail that a non-medical logistics person would know exactly what and how much is needed. This should be as specific as possible. Indicate if a generic or similar product might suffice. This also assumes that there is an immediate need (not projected) and all avenues to procure material have been fully exhausted.

<table>
<thead>
<tr>
<th>Facility Name &amp; Contact Info</th>
<th>Date</th>
<th>Time</th>
<th>Request Originated By</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Delivery Location (Include Address and specific location e.g. - Loading dock in back of building)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street Address</td>
</tr>
<tr>
<td>----------------</td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

**Pre-Request Instructions:**

1. Do you have an immediate and significant need?
2. Have you exhausted your supply, or is exhaustion imminent?
3. Have you checked with your internal corporate supply chain, and/or local jurisdictional partners?
4. Have you checked for availability of supplies with your normal external vendors, and "new" vendors to procure material?

### REQUEST DETAIL

<table>
<thead>
<tr>
<th>Quantity</th>
<th>Unit of Measure</th>
<th>Item Description (be very specific. Give description, specification, size, etc.)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Alameda County Health Care Service Agency
Public Health Department
Health Officer Emergency Powers

Erica Pan, MD, MPH, FAAP
Director, Division of Communicable Disease Control and Prevention (DCDCP)
Interim Health Officer; Clinical Professor, Pediatric Infectious Diseases, University of California, San Francisco
California Laws to Respond to Emergencies

• The **Emergency Services Act** allows for the proclamation of a *local emergency* by the local governing body (or designee) or a proclamation of a *state of emergency* by the Governor.

• The **California Health and Safety Code** includes any “imminent and proximate threat of the introduction of any contagious, infectious, or communicable disease, chemical agent, noncommunicable biologic agent, toxin, or radioactive agent.”

• The Health and Safety Code also authorizes the Director of CDPH to proclaim a health emergency.
During a proclaimed local emergency, the governing body or designated officials may promulgate orders and regulations, in writing and with widespread publicity and notice, that are necessary to provide for the protection of life and property, including orders or regulations imposing a curfew within designated boundaries where necessary to preserve the public order and safety.
Emergency Proclamation

- Makes response and recovery funding available
- To invoke powers specific to the type of emergency proclaimed
- To expand the available immunities from liability for response-related activities
- May trigger state and federal proclamations/declarations
- Activate Disaster Service Workers
- Immunities for medical personnel
- Waivers of laws and regulations
<table>
<thead>
<tr>
<th>Topic</th>
</tr>
</thead>
<tbody>
<tr>
<td>Measures to Prevent Spread of Diseases</td>
</tr>
<tr>
<td>Environmental Health and Safety</td>
</tr>
<tr>
<td>Boil Water Notices</td>
</tr>
<tr>
<td>Infectious Diseases</td>
</tr>
<tr>
<td>Medical Waste</td>
</tr>
<tr>
<td>Hazardous Waste</td>
</tr>
<tr>
<td>Isolation and Quarantine</td>
</tr>
</tbody>
</table>
Alameda County Health Care Service Agency
Public Health Department
MHOAC Program Coordination Activities

Zerlyn Ladua, RN, FNP, MSN
Director Public Health Systems Preparedness and Response
Division of Communicable Disease Control
Medical Health Operational Area Coordination (MHOAC) Program

- Emergency Medical Services
- Public Health
- Environmental Health
- Behavioral Health Care Services
HCSA DOC Coordination

- Information sharing
- Water Quality
- Health Care for the Homeless
- County Deployments → Shelter
- Skilled Nursing Facilities Hospitals, Clinics
- Alameda County Resource Request
Resources Coordination with a Health Lens
Situation Status Report

Date: December 4, 2018
From: Alameda County Public Health Department

Situation: Operation Camp Fire 2018

Report No.: 010418-01

Summary: Current Alameda County Health Care Services Agency Response

The Camp Fire in Butte County caused widespread evacuations, damage, and a massive presence from throughout the state. The HBCD OCM was partially activated on 11/9 to support Camp Fire response needs and local poor bay area air quality. Butte County sustained medical/health operations utilizing local, regional, state and federal resources and is currently still active to manage shelter operations for displaced populations and recovery operations.

The Bay Area experienced smoke from the Camp Fire in Butte County for several weeks, but air quality is now normal throughout the region. Support to Butte County was provided for medical operations by Public Health Nurses and Medical Reserve Corps volunteers, and other non-medical HCSA staff provided DOH support.

The Regional Disaster Medical Health Coordination (RDMMC) Program coordinated all medical health resource requests with the Medical Health Operational Area Coordinators (MHAOCs) in each county to mobilize transport resources, medical personnel to support shelters and DOH Incident Management Teams (IMTs).

- As of 12/4, the Camp Fire is 100% contained with 155,356 acres burned, 85 fatalities, 11 missing persons and over 18,000 structures destroyed including over 13,000 single residences.
- Up to eight shelters were operational at a time, with all but one shelter closed by 12/7 and evacuations from the closing shelters being consolidated to the Silver Dollar Fairgrounds.
- Schools in Butte County reopened 12/3 for all students, using temporary facilities and alternative modes of instruction to accomplish this task.

Air Quality:
- Local Air Quality Conditions were unhealthy from 11/9 – 11/19 and back to good levels (between 0-10) on 11/7. 11/16/18 was the worst day with very unhealthy Air Quality Index (AQI) levels up to 245. Daily updated air quality information is available at: https://www.aaron.cc/env/airquality/aqi and https://www.airnow.gov/index.cfm?action=aqibutton.local&siteId=5315 and https://www.aaron.cc/env/airquality/aqi
- The Alameda County Wildlife Resource page was updated with current information available for a "A" at: https://www.aaron.cc/env/airquality/aqi
- Air Quality Health Advisory was distributed regarding Camp Fire Status Update, Public Health Advisory & Guidance for Unhealthy Air Quality Health Advisory sent to public on 11/8
- Camp Fire Air Quality Advisory in Bay Area sent to healthcare partners by Interim Health Officer on 11/9
- Email message sent by and Information to District Divisions to School Districts on 11/14
- Camp Fire Health Advisory message regarding Unhealthy Air Quality sent by Interim Health Officer 11/14
- Health Update: Improving Air Quality email sent by Interim Health Officer 11/21

Health Care for the Homeless
- On 11/9, Health Care for the Homeless make filter masks available for unsheltered populations, citizens, community groups, outreach providers and city and county providers for unsheltered populations. For more information and for a list of facilities providing daytime shelter, go to: https://www.acdh.org/air-quality-emergency-resources.html
- Health Care for the Homeless worked with partners to update a countywide list of indoor shelters to direct unsheltered persons to during poor air quality.

Butte County Deployments
- Between 11/13 and 11/17 a total of 3 Medical Reserve Corps and 2 PHMs were deployed to support medical care at shelters. 2 EMS Staff and 2 PH Staff assisted at the Butte County DOH
- Skilled Nursing Facilities were polled by EMS on 11/15 with 100 available beds reported among 20 facilities.
- On 11/7/18, EMS requested Alameda County Long Term Care Facilities, including Skilled Nursing Facilities (SNFs), Residential Care Facilities for the Elderly (RCFs), Assisted Living Facilities and other senior living homes that may have taken in those displaced by the Camp Fire to go to safeandwell.org website to list anyone that they have admitted as "safely" for the Butte County Sheriff's Office to check the site against their names of missing.
- Hospitals/Clinics are requested to complete a brief Air Quality Impact Survey to determine whether facilities experienced an increase in ED visits and respiratory disorders.

Alameda County Resource Requests
- AC HCSA received a variety of resource requests and is continuing to monitor and coordinate procured and mobilized resources to the affected areas via the MHAOC and RDMMC.
- Logistics Section is compiling data from requests received.

California Department of Public Health and Emergency Medical Services Authority Activation
- Medical teams from the National Medical System (NEMS) were deployed to staff medical operations at shelters in support of the Camp Fire response. The federal teams coordinated with the California Emergency Medical Services Authority and the California National Guard to provide 24/7 medical support to evacuees. Federal medical teams began deployment on 11/7/18.
- Federal Declaration/State and Local Proclamation:
  - Governor’s proclamation for Butte County: 11/8
  - Presidential Declaration: 11/10
  - U.S. Department of Health and Human Services, Public Health Emergency Declaration: 11/13

Medical Health Coordination (MHCAC) and State Operations Center (SOC) staff continue to monitor public health and public health impacts from the wildfires.
- Emergency Medical Services Authority (EMSA) coordinated medical care and support to Butte County using the Medical Reserve Corps volunteers from the Disaster Healthcare Volunteers Program. EMSA obtained federal medical support teams and California National Guard medical teams to assist the EHS MAL in the shelters.
- Functional Assessment Service Team (FAST) and Volunteer Emergency Service Team (VET) staff were also deployed.

Alameda County Operational Area Medical Health Coordination with Region
- The Alameda MHAOC coordinated with the Regional Disaster Medical Health Specialist/Program on various resource requests from Butte County:
  - Health Officer and Director of Nursing
  - Critical Incident Stress Management Team
  - Medical transport resources
  - Medical personnel to support shelters and DOH IMTs
  - DOH Incident Management Teams (IMTs) to include IC, Planning, Logistics, Operations, runners, Phone Reception

Media Inquiries
- From 11/9-21, PIO received media requests from KQED Radio, KPFA/UpFront, Unikon/Channel 14, KTUU/Channel 2, California Report/KQED, KRON/Channel 4 - all around air quality and/or masking guidance. Inquiries were for background information or interview requests.
- Interim Health Officer conducted interviews with KQED on 11/16 & KPFA Up Front on 11/20
- PIO fielded calls from Berkeley Unified, Alameda County Office of Education, Oakland Unified regarding air quality and school closures. Several preschools and childcare (public and private) called for school closure guidance around health and air quality.

Information & Guidance
- CAHAN Alerts from CDPH
  - Wildlife Fact Sheets
  - Alameda County Health Alerts, Updates
  - Health Alert: Unhealthy Air Quality Due to Wildfires
Beyond the Emergency of Homelessness

Roles of Alameda County Health Care for the Homeless and Homeless Services Providers in Responding Strategically to Disasters and Emergencies that Disproportionately Affect People Experiencing Homelessness

David Modersbach
Alameda County Health Care for the Homeless Program
David.Modersbach@acgov.org
510-891-8916
Regional Disasters

Hurricane Sandy

Loma Prieta Earthquake 1989

Santa Rosa Wildfire

Houston Flooding Hurricane Maria
**Extreme Weather**

**Hot Weather and Homelessness**

**Cooling Centers Locations**

*Be careful in the Summer Heat!*
Extremely hot weather can be very harmful to homeless people – it can be deadly.

*Be Careful!* Heat and sun are threats to aging folks, babies and children, disabled folks, those with medical conditions or who take medication, and folks who drink or do drugs. Some folks who are already in a bad state.

*Be Aware!* If you see someone passed out or in bad shape, don’t think they are just drunk. They might be suffering or dying from heat and sun. Call 911 and get them help.

*Water!* People on the streets don’t have ready access to water. It is both dangerous and important. Give bottled water to people, in addition to sunscreen, hats and other things you can contribute.

*Cooling Center!* A cooling center is a facility, such as a senior center, community center, library or pool, where people may go to get out of life-threatening heat during a heat wave. It is not just for the elderly or for everyone, especially those at risk of getting a heat-related illness.

Please call the cooling center nearest you for hours of operation during hot days.

---

**California Today: Rain Brings Health Hazards to the Homeless**

---

**Santa Clara County Coroner: Four Homeless Die from Exposure**

By ACCB News Staff  •  Dec 6, 2013

By Dan Brekke and Alex Esmalie

---

**Video: San Jose residents worry homeless are setting up fires near gas meters during cold snap**

By: Vince Condiffe  •  Upated: Feb 20, 2013 05:03 PM PST

---

**Burned feet, parched throats: Arizona homeless desperate to escape heatwave**
Displacement, floods

Homeless Displaced By Long Island Bridge Closure Remain In Flux

Gas Leak Forces 400 Out of Polk Homeless Shelter

Residents poured out of the building on Polk and Geary streets before responders transported 14 people to the hospital.
Disease Outbreaks


Rare infectious diseases are rising at an ‘alarming’ rate in Seattle’s homeless population, concerning health officials.

In addition to strep A, public health officials issued a advisory in February about outbreaks of shigella, a highly contagious diarrheal illness, and Bartonella quintana, an infection known as “trench fever” when it spread among World War I soldiers. It is spread by body lice and can result in fevers and rashes or more serious infections of the heart or blood vessels.

San Francisco DPH

SF Shigella increase sickens homeless and non-homeless population. Sanitation hand-washing key to prevent spread of gastrointestinal illness
Fires: Encampments, buildings, wildfires

Uroja House Fire 2017

Oakland Hills Fire 1991
Air quality

Refinery Explosion 2011, Richmond CA
Shelter In Place Order for those indoors

Santa Rosa
Wildfires
10/2018

Volunteers distribute respiratory masks to the homeless in Oakland
Forced displacement

Orange County Courthouse Plaza 4/2018
HOMELESS EMERGENCY PLANNING:

PREPARE

Planning with County/City Emergency Response Providers
  • Include Homeless and other vulnerable populations in planning
  • Identify Vulnerable Populations: How to reach them? Who will reach them?

Know the Community you Serve
  • ACHCH Program coordinates 5+ geographical Street Health Teams
    • W. Oakland, Downtown Oakland, E. Oakland, Mid-County, S. County
    • Adding San Leandro/Alameda, Unincorporated, Tri-Valley Street Health Teams
  • Collaboration with County, City planners/responders
  • Collaboration/Coordination with community (Advocates, Faith, nonprofits)
  • Responding to Daily Disasters (weather, health, fire, etc.)

Know your Stuff: Strengths, Tools, Plans
  • Trauma-Informed Care
  • Training tools include Emergency Responses
  • Convene/Maintain Relationships/Trust

Know your Staff
  • Prioritize Staff Safety (planning, preparedness, response, recovery)
  • Ensure that staff understand roles and responsibilities – especially management
  • Expectations of Contractors during emergency?
Roles of ACHCH During Emergency

COMMUNICATION

- Coordinate with EOC, JIC, PHD, HCSA
- Email Communication/Updates to 2,000 homeless services providers

RESPOND

- Coordinate Direct Outreach Efforts (Street Health/Shelter Health Teams)
- Participate in Emergency Operations (Roles of Street Health Teams)
- Evacuation Issues (where to)
- Mass Shelter Issues (General Population vs. Homeless) Housing Placement
- Medical and Pharmacy Needs (outside supplies ex: DirectRelief)
- Patient Data (EHR, Mental Health, HMIS)

RECOVERY

- Coordinate shelter, housing, health work between program, other providers and Emergency Responders in the Long-Term.
- Disaster of Unsheltered Homelessness doesn’t end after an emergency.
Daily Disaster Example:
Extreme Weather Resources and Information

Heat Emergency Resources 2019

www.acgov.org/emergencysite/documents/Cooling-Centers.pdf
Cooling Center List for Alameda County

Be careful in the summer heat!

Extremely hot weather can be very harmful to homeless people – it can be just as bad or worse than the cold.

Visit the National Weather Service for updated heat-related weather information. You can also find updated Alameda County related information at the Alameda County Public Health webpage, and the Alameda County Office of Emergency Services.

Are you feeling the heat? Click here for a flyer with information and learn cooling strategies, symptoms of heat-related illness, emergency resources.

Symptoms of Heat-Related Illness:
Extremely high body temperature (103°F+), difficulty breathing, red hot dry skin (no sweating), dizziness, fatigue, rapid pulse, restlessness, confusion, faintness, headaches, muscle cramps, unconsciousness. If you experience these symptoms seek medical attention.

Be Careful! Heat and sun are threats to the aging population, babies and children, disabled persons, people with medical conditions, and those with reduced mobility.

Winter Emergency Resources 2017-2018

The Winter Shelter and Warming Stations for Alameda County are closed for the season, with the exception of St. Vincent de Paul in Oakland which closes June 11, 2018. Normally Winter Shelters open in November.

Following is information for Winter Shelters (open every night during the winter months), and Warming Stations (shelters open only in rainy or cold weather) in Alameda County.

For additional information about accessing shelters, transitional housing, and other emergency housing in Alameda County, call 211 (Eden Information and Referral). More information is also available on our Get Help page.

Download the printable version of the Winter shelter listing here.

Alameda County - Winter Emergency Housing Resources

Winter 2017-2018

For information on accessing shelters, transitional housing and other emergency housing in Alameda County, please call 211 (Eden Information and Referral).

<table>
<thead>
<tr>
<th>Program Name</th>
<th>Location</th>
<th>Dates Open</th>
<th>Capacity</th>
<th>Availability Notification</th>
<th>Referral Process</th>
<th>Eligibility</th>
<th>Requirements</th>
<th>Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seasonal Shelter</td>
<td>Open every night during winter months</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Daily Disaster Example: Hepatitis A Campaign

HEPATITIS A OUTBREAK among homeless people in California.

Spread by coming into contact with an infected person’s poop

Causes EXTREME sickness, liver damage, death.

Wash your hands with soap and water to keep Hepatitis A from spreading.

Get a FREE VACCINATION to protect yourself

Ask an outreach worker or a friend.

Health Care for the Homeless Mobile Clinic and Hepatitis A Immunization Sites:

Free vaccines available to people experiencing homelessness on the HCH mobile clinic, street outreach, and at Hepatitis A Immunization Sites provided by the County of Alameda and the City of Berkeley, according to the below Schedule:

HCH IMMUNIZATION CALENDAR

Thursday, November 16, 2017
10:30 am MOBILE: Castro St/8th St Oakland (Corner of 6th/Castro) Open to All

Thursday, November 16, 2017
9:30 am MOBILE: Multi-cultural Institute--Hearst and 4th St., Berkeley-Open to all

Friday, November 17, 2017
9:30 am MOBILE: St. Mary’s Senior Center 925 Brockhurst St/San Pablo Ave Oakland, Open to All
9:30 am St. Mary’s Senior Center 925 Brockhurst St/San Pablo Ave Oakland

Monday, November 20, 2017
9:30 am MOBILE: City Team 722 Washington St/7th St Downtown Oakland; Open to All

Tuesday, November 21, 2017
9:30 am MOBILE: East Oakland Community Project--7515 International Blvd. Oakland--Open to all

Wednesday, November 22, 2017
9:30 am MOBILE: San Leandro Community Church 1365 Bancroft Ave., San Leandro--Open to all
9:30 am MAX-Castro-Max-Howard (Residents Only)
Discussion Questions

- How well are we prepared for “conventional” disasters and their effect on people experiencing homelessness? What will happen to unhoused/precariously housed residents?
- What are particular vulnerable populations within the most likely type of disaster our area faces?
- How do we partner with those who serve vulnerable populations on the local level for emergency planning?
- What are some of the “daily disasters” that vulnerable populations have experienced or may experience?
- How do emergency responders respond to “daily disasters?”
- Who do you partner with around “daily disasters?”
Module 2
Brief Pause to Reflect & Discuss Questions
Module 2 Questions

County/Emergency Management
• What messaging is coming from the County: AC Alert, MHB Flash Report?
• How does the county provide coordinated messaging about what’s going on in the medial health community, e.g. evacuation and shelter information?
• How is the MHB managing, summarizing and sharing healthcare partner information?
  • What MHOAC Program (EMS, PH, BH, EH) messaging is being provided and how is it coordinated, e.g. What messages are going to what entities? Who/what positions are sending these out?

Transportation
• What are the priorities of 911 and non-911 transport providers?
• How is the county coordinating with the transportation sector and public works to support healthcare facility evacuations and general populations evacuations?
Module 2 Questions

Vulnerable Populations

• How is the county planning to identify and respond to unsheltered populations living in flood prone areas?
• How do we meet needs of larger vulnerable populations (who may become homeless due to events) before/during/after Emergency/Disaster events?
• How do we support vulnerable or unsheltered populations with messaging about public health concerns in a flood situation where they may be even more displaced?

Healthcare Facilities

• Are you developing any situation reports? What would your report if your facility is in an affected area?
  • To whom are your reports going? MHOAC, HO, Home Office?
  • Who/what position at your facility will send a Resource Request to the County?
  • Who/what position at your facility will send the required Situation Status to the County?
• How do you request resources from your city, e.g. generator, propane, sandbags, security?
• What are triggers for you to prepare your facility for evacuation?
• Who/what position will communicate and coordinate mitigation information for storm and flood related safety and risk communication to staff, patients, family members and the community.
• Based on your HVA and information presented in the scenario, would your facility consider sheltering in place with your clients and staff? For how long?
• What is your facility doing with the staff shortages due to school closures and extremely hazardous weather conditions?
Module 3
Module 3 Scenario
Medical Surge, Patient Movement, Healthcare Facility Impacts

• After 3 days of constant rain, conditions continue to worsen.

• One Long Term Care Facility needs to evacuate 76 residents due to structural and utility damage from a falling tree.

• 6 residents have been transported to a local hospital, 2 of which are in serious condition.

• Several healthcare providers are reporting staffing shortages with staff having to remain at home due to school closures, poor road and travel conditions, public transit issues and having to deal with flooding or potential flooding at their residences.
Module 3 Scenario
Medical Surge, Patient Movement, Healthcare Facility Impacts

• The county has experienced two large medical surge incidents involving several injuries. Many injuries involve pediatric patients.

• One is a Hazardous Material leak at a local school. Approximately 35 students ranging from 6 to 12 years of age and several adults are experiencing symptoms of respiratory distress - shortness of breath, coughing, respiratory irritation, irritation of eyes and nausea.
Module 3 Scenario
Medical Surge, Patient Movement, Healthcare Facility Impacts

• A second incident - a landslide that struck an elementary school. Several adults and over 40 school aged children (ages 5-12 years old) are suffering from moderate to major injuries.

• The injuries range from - broken bones, strains, head injuries, with many of the victims requiring decontamination before treatment.
Module 3 Scenario
Medical Surge, Patient Movement, Healthcare Facility Impacts

• It is expected that flooding will become more wide-spread and several more Long-Term Care Facilities will need to re-locate patients to facilities in high ground.

• Utility restoration continues to be a problem as utility crews are dealing with a back log of service requests.

• Several areas of the county are still without power with no estimated time for full restoration.

• Flooding and extended power outages are forcing residents to seek public sheltering or trying to stay with family and friends to weather the storm.

• Additionally, the Health Officer and local water districts have issued “Boil Water” orders for many areas impacted by the flooding and notices to residences on well water systems.
Module 3 Discussion Questions
Breakout Assignments

- **Front Left Corner – City, County, State, Regional**
  Facilitator/Evaluator (Erica Pan, William McClurg)

- **Side Room – Berkeley Hub**
  Facilitator/Evaluator (Rachel Rodriguez)

- **Rear Left Corner – Oakland Hub**
  Facilitator/Evaluator (Cynthia Frankel)

- **Outside – Southern Hub**
  Facilitator/Evaluator (Ron Seitz)

- **Sign in Area – Central Hub**
  Facilitator/Evaluator (Preston Lam)

- **Right Middle of Room – Eastern Hub**
  Facilitator/Evaluator (Donata Nilsen)
Report Out

Time: 60 minutes

Report Back: 30 minutes (5 minutes each group)

Select a Spokesperson for Your Group

Please Use Report Out Template
Lunch Pick Up
Reconvene for Hotwash
Hotwash

What were the primary strengths observed during today’s exercise?

What were the key gaps or recognized areas for improvement?

Please complete the Participant Feedback Form to capture your candid feedback and ideas for the functional exercise.
This year’s exercise may entail a variety of communication activities in the weeks leading up the week of November 11th.

Main Exercise Date: November 21, 2019
Functional Exercise Preparation

- DPHC Listserv
- AC Alert
- ReddiNet HTML - New
  - Ensure Training & Update HCC Contact Information
  - Complete HAvBED & Customized Poll
- Disaster Forms (New EMS Website Link - http://ems.acgov.org)
  - SitStat Reporting
  - Resource Requests
- Disaster Email: Med1 Email Address
  - If you need resources, use Resource Request Form
    - Email to Med1 Email Address
    - Ensure name of organization on subject line
REDDINET PRE-EXERCISE PLANNING

➢ ALL 11/21/19 ORGANIZATION “PLAYERS” EXPECTED TO BE REDDINET USERS.
➢ PREPARE TO MONITOR MESSAGING; TRACK PATIENTS FOR MCIs,
➢ PLAN TO UPDATE CENSUS.HAVBED; & RESPOND TO ASSESSMENT POLLS

CURRENT USERS

• CUSTOMIZE PROFILES ON REDDINET – Forward User Messages to email & or SMS Test
• ENSURE COMMAND CENTER CONTACT INFORMATION UPDATED – PHONE / EMAIL

NEW USERS

• COMPLETE CONTACT FORM & AGREEMENT
• CONTACT CYNTHIA.FRANKEL@ACGOV.ORG

TRAINING

• REVIEW REDDINET USER MANUALS
• PARTICIPATE IN REDDINET MONTHLY WEBINARS
• CONTACT CYNTHIA FRANKEL, REDDINET COORDINATOR FOR OTHER TRAINING
Thank You!

Questions?
Planning Team Check-In