Rapid Public Health Response:
Performance Support Tools
for On-Call Public Health Preparedness Staff
Introductions

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Director

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Associate Director,
Education & Training
Response & Recovery Role
Saturday in October
No Water!

9:57 AM
Cozzan water went off
toilets in backstake already
Think Quick...
Three Hours

9:41am – 12:56pm

3 emails
26 phone calls
64 text messages
Boston ESF 8

1 Public Health
• ~1,000 employees

24 Community Health Centers

Expansive Long Term Care, Home Health, Specialty Care, Mental Health

1 Municipal Ambulance Service
• Over 350 EMTs & Paramedics
• 16 Stations

20 Licensed Hospitals
• 6 Level 1 Trauma Centers
• 12 Acute Care
Medical Intelligence Center

1. Situational Awareness
2. Resource Coordination
3. Human Services Coordination
Duty Officers

- Ask the right questions
- Rapidly assess situation
- Recommend actions
- Initiate plans & processes
The Challenge

- Different than daily role for most
- Unfamiliar equipment and platforms
- Complex information gathering and decision-making
- Limited time for training & exercises
What SHOULD the business outcomes be?

What SHOULD the staff performance be?

What IS the actual business outcomes?

What IS the actual staff performance?

*Staff performance = accomplishments and behaviors*
Drawing from Other Models

Concepts in Disaster Medicine
A Framework for Training Public Health Practitioners in Crisis Decision-Making
Harvey Kayman, MD, MPH; Tea Logar, PhD

Measuring Crisis Decision Making for Public Health Emergencies
Andrew M. Parker, Christopher Nelson, Staphane E. Shleif, David J. Dawsey, Matthew W. Lewis, Amando Pomany, Krist J. Leachman
Prepared for the Department of Health and Human Services

Public Health Emergency Response Guide for State, Local, and Tribal Public Health Directors
Version 2.0
April 2011

U.S. Department of Health and Human Services
Centers for Disease Control and Prevention
OODA Loop

John Boyd's OODA Loop

- Observe: Implicit Guidance & Control, Unfolding Circumstances, Outside Information, Unfolding Interaction With Environment
- Orient: Genetic Heritage, Cultural Traditions, Analysis & Synthesis, Previous Experiences, New Information, Feedback
- Decide: Implicit Guidance & Control, Decision (Hypothesis)
- Act: Action (Test), Unfolding Interaction With Environment, Feedback
OODA Loop

Observe ➔ Orient ➔ Decide ➔ Act

OODA Loop

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OODA Loop

Observe ➔ Orient ➔ Decide ➔ Act
OBSERVE
Gather & document complete information

ORIENT
Determine potential impact. Classify incident.
Consult w/ response partner or 2nd DO

ACT
Activate plans and systems
Send notification
Activate MIC

DEMOBILIZE
Close out event

DECEIDE
1. Send a notification?
2. Activate plans or systems?
3. Activate the MIC?
Gain required approvals
Job Aid: Observe

### OBSERVE – Questions by Incident Type

<table>
<thead>
<tr>
<th>Date:</th>
<th>Incident Start Time:</th>
<th>Initial Notification Time (to BAPC):</th>
<th>Incident End Time:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Initial notification received by:</th>
<th>Initial Point of Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ PROM</td>
<td>Name:</td>
</tr>
<tr>
<td>☐ Email</td>
<td>Position:</td>
</tr>
<tr>
<td>☐ Email Alert</td>
<td>Phone:</td>
</tr>
<tr>
<td>☐ Pager</td>
<td>Email:</td>
</tr>
<tr>
<td>☐ Other</td>
<td>Incident location:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Incident Type(s):</th>
<th>Cause of event:</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Hazardous Materials</td>
<td>Infrastructure (ESF 1)</td>
</tr>
<tr>
<td>☐ Disease</td>
<td>Infrastructure (Not ESF 1)</td>
</tr>
<tr>
<td>☐ Mass Casualties</td>
<td>Security Threat</td>
</tr>
</tbody>
</table>

#### General REMINDER: Do not disseminate sensitive information

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
<th>Source</th>
<th>Credible / Verified?</th>
</tr>
</thead>
<tbody>
<tr>
<td># of patients (or potential patients)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Severity and types of injuries?</td>
<td></td>
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<tr>
<td>Types, location, water sources, crush injuries, etc.</td>
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<tr>
<td>Anticipated duration of the incident</td>
<td></td>
<td></td>
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<tr>
<td>Other agencies currently responding</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Actions taken to address incident</td>
<td></td>
<td></td>
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<tr>
<td>e.g., triage, evaluation, triage, etc.</td>
<td></td>
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<tr>
<td>What ESF 8 facilities are affected?</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>What special populations are affected?</td>
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<tr>
<td>e.g., language, age, special needs, economic,</td>
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<tr>
<td>Is transportation or travel disrupted? How?</td>
<td></td>
<td></td>
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<tr>
<td>Has this incident received media attention?</td>
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<tr>
<td>How will current and forecasted weather conditions affect the situation?</td>
<td></td>
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<tr>
<td>Have ESF 8 agencies been notified? Who, how?</td>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

#### Hazardous Materials 
**Notify Environmental Health immediately**

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
<th>Source</th>
<th>Credible / Verified?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is the substance known? If yes, what is it?</td>
<td></td>
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<tr>
<td>Are there any contaminated casualties? If so, has patient decontamination been performed?</td>
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<tr>
<td>Has a HAZMAT Response Level been designated by BFD?</td>
<td></td>
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<tr>
<td>What geographical area is affected?</td>
<td></td>
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<tr>
<td>Is any evacuation or shelter in place ordered?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Job Aid: Orient

ORIENT – Assess potential impact and classify

POTENTIAL IMPACTS

<table>
<thead>
<tr>
<th>Healthcare System Impacts</th>
<th>Red – Major Impact</th>
<th>Purple – Potentially Major</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surge of Patients (Boston)</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>Access to Healthcare</td>
<td></td>
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<td></td>
<td></td>
<td></td>
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<tr>
<td>Provision of Health Care Services</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>Public Health Impacts</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>Other Impacts</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Classify Incident

<table>
<thead>
<tr>
<th>Classification</th>
<th># Potential Patients</th>
<th>Potential Disruption to ESF 8</th>
</tr>
</thead>
<tbody>
<tr>
<td>Major</td>
<td>Significant number (MCI Phase 2 w/specialty, or MCI Phase 3 or above)</td>
<td>Major (TBD)</td>
</tr>
<tr>
<td>Moderate/Minor</td>
<td>Minor to moderate number (MCI Phase 2)</td>
<td>Moderate (TBD)</td>
</tr>
<tr>
<td>Informational</td>
<td>Little to none (MCI Phase 1)</td>
<td>Little to none</td>
</tr>
<tr>
<td>Developing/Unknown</td>
<td>Unclear</td>
<td>Unclear</td>
</tr>
</tbody>
</table>
### Job Aid: Decide

**DECIDE** - Based on classification incident type, determine MIC actions

<table>
<thead>
<tr>
<th>Classification</th>
<th>Notifications</th>
<th>MIC Activation</th>
<th>Potential Plans &amp; Systems</th>
</tr>
</thead>
<tbody>
<tr>
<td>Major</td>
<td></td>
<td></td>
<td>System</td>
</tr>
<tr>
<td></td>
<td>Immediate</td>
<td>Level 2: Partial</td>
<td>WebODC</td>
</tr>
<tr>
<td></td>
<td>Page MDPH Duty Officer</td>
<td>Level 3: Full</td>
<td>Create an incident in the City of Boston WebODC</td>
</tr>
<tr>
<td></td>
<td>Exorbridge high-priority alert (email, SMS) to CostH IM Coordinator</td>
<td>Physical</td>
<td>EMTTrack</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>MassMAP</td>
</tr>
<tr>
<td></td>
<td>MIC Alert/Advisory</td>
<td>Virtual</td>
<td>Plans</td>
</tr>
<tr>
<td></td>
<td>Alert or Advisory to MIC Advisory Distribution List via business, email, SMS, text, and business phone confirmation</td>
<td></td>
<td>SACIC CEP</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>Family Reunification Plan</td>
</tr>
<tr>
<td>Moderate/Moderate/Minor</td>
<td>Initial</td>
<td>Level 1: Enhanced</td>
<td>Systems</td>
</tr>
<tr>
<td></td>
<td>Notification</td>
<td>Virtual</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Email via Exorbridge or the MIC email account to all DHMP staff, CostH Emergency Management Coordinator</td>
<td></td>
<td>Create an incident in the City of Boston WebODC</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Virtual</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Hospital impacts: Phone call to the CostH Emergency Management Coordinator</td>
<td></td>
<td>MassMAP</td>
</tr>
<tr>
<td></td>
<td>MIC Advisory (if necessary)</td>
<td>Virtual</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Advisory to MIC Advisory Distribution List via business email only; no confirmation of receipt is needed</td>
<td></td>
<td>SACIC CEP</td>
</tr>
<tr>
<td>Informational</td>
<td>No notification required</td>
<td>Ready State</td>
<td>No action required.</td>
</tr>
<tr>
<td>Developing/Unknown</td>
<td>Initial Notification (if necessary)</td>
<td>Ready State</td>
<td>No action required.</td>
</tr>
<tr>
<td></td>
<td>Email via MIC email to DHMP staff, CostH Emergency Management Coordinator</td>
<td></td>
<td>SACIC CEP</td>
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<td>Hospital impacts: Phone call to the CostH Emergency Management Coordinator</td>
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**Steps to Physical MIC Activation (Level 2 or Level 3)**

- Convene and facilitate a conference call with all available MIC Duty Officers
- Assess DHMP availability to staff the MIC Utilizing Exorbridge Mass Notification
- Develop an initial MIC Operations Plan to be disseminated
- Activate and staff the MIC
- Staff the Boston Emergency Operations Center (EOC), EPB Desk
Saturday in October
Thank You

To download the job aids and key references:

https://delvalle.bphc.org/dutyofficer

For more information, contact delvalle@bphc.org
Key References


