

Roles and Responsibilities of the Missouri Department of Health and Senior Services

The checklists below reflect broad categories of action and roles and responsibilities that may be needed during a pandemic, dependent on the severity. In a mild pandemic, many of these actions will never be needed. They serve as a reminder of possible activities and of roles and responsibilities for those engaged in the response but do not replace specific job action sheets that may be needed nor dictate the response, which will be managed as outlined in the “Concept of Operations” section of this plan. If the Health and Medical Emergency Operations Center Department Situation Room [DSR]) or the State Emergency Operations Center (SEOC) is activated, these activities will be managed from within the ICS structure, with the listed subdivisions responsible for filling needed positions with persons of appropriate expertise.

Director’s Office – Department of Health and Senior Services

Throughout the Pandemic Period:

- Will be notified by the Director of the Division of Community and Public Health (DCPH) of the emergence of a novel influenza virus and receive regular briefings (in person or through written situational reports) of significant changes in the status and spread thereof thereafter.
- After briefing will:
 - Consult with key staff and direct appropriate actions (as necessary, directly or through delegation):
 - Notify Governor’s Office to provide awareness of the situation.
 - Notify LPHAs to:
 - Implement their pandemic flu plans.
 - Communicate updates.
 - Communicate status and key recommendations to DHSS staff.
 - Determine need and consider activating the DSR in conjunction with key staff and the Center for Emergency Response and Terrorism (CERT) Director.
 - Communicate with the Directors of other state agencies.
 - Communicate with the Region VII Federal Official in Charge, the Association of State and Territorial Health Officials, the CDC and other key federal partners.
 - Declare a public health emergency, if situation warrants.
 - Request Division Directors to identify staff not working on pandemic flu, reassign staff and develop work schedule, if needed.
 - Have Division Directors reduce programmatic functions to maintenance operations and designate available staff to assist in data entry, surveillance, vaccinations, medication distribution, etc., if situation warrants.
 - Implement the DHSS Pandemic Continuity of Operations/Continuity of Government (COOP/COG) plan, when needed.
 - Request assistance through SEOC, when needed.
 - Request the Governor to provide waivers or declare a state of emergency, when needed.

DHSS will direct response per the Concept of Operations. These checklists serve as reminders of broad categories of roles and responsibilities for pandemic influenza response.

Office of General Counsel

Other Resources:

HHS Pandemic Influenza Plan – Legal Authorities

HHS Pandemic Influenza Plan – Part 2. Public Health Guidance on Pandemic Influenza for State and Local Partners

Throughout the Pandemic Period:

- Will be notified by the Director of DCPH of the emergence of a novel influenza virus and receive regular briefings (in person or through written situational reports) of significant changes in the status and spread thereof thereafter.
- After briefing will:
 - Provide legal counsel.
 - Assist in updating documents as needed.
 - Serve as a liaison to other agencies legal staff.
 - Provide guidance and direction as needed.

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Office of Public Information

Other Resources:

Public Information Annex

Summary of Public Health Roles and Responsibilities in Public Health Communications

Throughout the Pandemic Period:

- Will be notified by the Director of DCPH of the emergence of a novel influenza virus and receive regular briefings (in person or through written situational reports) of significant changes in the status and spread thereof thereafter.
- After briefing will:
 - Coordinate and manage public information.
 - Develop key messages for media and general public.
 - Key message development and release should be coordinated with the local regional public health information officers.
 - Develop new messages in accordance with changes in the outbreak.
 - Coordinate messages with the Office of the Governor.
 - Coordinate messages with the SEMA and be prepared for the activation of a JIC, if needed.
 - Reexamine prepared media releases.
 - Update media releases if necessary.
 - Review and be prepared to use Public Information Emergency Communications Plan.
 - Check for availability of key spokespeople.
 - Brief key spokespeople as necessary.
 - Finalize communications strategy with key response staff.
 - Consult with DHSS subject matter experts if necessary.
 - Prepare for media and public inquiries.
 - Participate in/arrange media release and press briefings.
 - Schedule media informational workshops in several locations throughout the state.
 - Ensure web site information is updated routinely.
 - Be prepared to expand hotline to ten lines and add DHSS call handlers.

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Division of Community and Public Health

Other Resource:

Special Needs and At-Risk Populations Annex

Throughout the Pandemic Period:

- Will be notified by State Epidemiologist of the emergence of a novel influenza virus and receive regular briefings (in person or through written situational reports) of significant changes in the status and spread thereof thereafter.
- After briefing, Director of DCPH will:
 - Direct DCPH staff to assess situation and prepare response.
 - Notify key response staff that includes: Director and Deputy Director of DHSS, CERT, MSPHL, Division of Regulation and Licensure (DRL), Division of Senior and Disability Services (DSDS), Center for Local Public Health Services (CLPHS), Section for Disease Prevention (DP), Section for Environmental Public Health (EPH), Office of Public Information (OPI), Bureau of Immunization Assessment and Assurance (BIAA), Bureau of Communicable Disease Control and Prevention (CDCP), Office of General Counsel, Medical Advisors, State Pandemic Influenza Coordinator, State Epidemiologist and other experts and advisors as may be needed, both within the department and with other agencies.
 - Lead briefing discussions, as needed, to provide situational updates to key response staff. (*Briefing will be set up by DSR staff.*) Provide overview of ongoing DHSS activities with key response staff.
 - Project effects of the novel influenza outbreak.
 - Discuss major elements of enhanced surveillance.
 - Discuss vaccine/antiviral plan.
 - Recommend priority vaccination and antiviral distribution.
 - Discuss communication strategies for LPHAs, hospitals and public.
 - Discuss situational reports and provide recommendations for response strategies and actions to support local response and maintain critical infrastructure.

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Center for Emergency Response and Terrorism

Throughout the Pandemic Period:

- Will be notified by State Epidemiologist of the emergence of a novel influenza virus and receive regular briefings (in person or through written situational reports) of significant changes in the status and spread thereof thereafter.
- After briefing will:
 - Set-up briefing of key staff, as needed, for Director of DCPH.
 - Communicate with external organizations by issuing a Health Alert.
 - Maintain communications with the Missouri State Emergency Management Agency (SEMA) and other external public safety and emergency response agencies, as needed.
 - Stand-up DSR, when directed by the Director of the DHSS.
 - Review and prepare the DHSS COOP plan for implementation, if requested by the DHSS Director or Chief Operating Officer.

Pandemic Influenza Coordinator

- Review and update Pandemic Influenza Response Plan as needed.
- Participate in briefings.
- Provide interpretation and guidance concerning plan details to key response staff.
- Coordinate with other state agencies on their plan implementation.
- Prepare briefing papers and analysis as needed.
- Provide suggestions for course of action following situational updates.
- Review Mass Fatality Plan and prepare resource requests as needed.
- Provide updates to the Director of CERT.

Health Care Systems Sustainment Coordinator

- Provide consultation to the DSR Medical Surge and Volunteer Coordination Stations.
- Facilitate collaboration with MHA, Mid America Regional Council (MARC), St. Louis Area Regional Response System, MPCA, MO 1-DMAT and Missouri Department of Mental Health.
- Participate in briefings.
- Participate on the DHSS team to evaluate requests for PPE and other supplies.
- Discuss situational awareness reports and provide recommendations for response strategies, as appropriate.

SNS Manager

- Coordinate inventory management of SNS assets held in receiving, staging and storage (RSS) site.
- Develop and coordinate pro-rata allocation of SNS assets to LPHAs, hospitals, other health care partners and state agencies.
- Develop and train local community partners on how to order SNS assets.
- Facilitate the ordering; picking and delivery of assets to local communities.
- Develop tracking mechanisms to quickly identify shortage areas and respond with needed assets. Use maps, prioritized algorithms and criteria for ILI cases in decision-making.

- Use evidence-based decision making for requests for additional SNS assets. Assure intelligence data is available and current when reviewing/sending supporting documentation to CDC for additional asset requests.
- Assure other state agencies have access to needed SNS supplies from the RSS.
- Monitor case infection rates, shortage areas and pro-actively remain in contact with community members to meet needs.
- Activate SNS Team Members as needed to receive, store and pick up orders and ship SNS assets from RSS site.
- Inform Missouri Board of Pharmacy of situational awareness of SNS drugs.
- Assure latest Federal Drug Administration/CDC guidance on emergency use authorization (EUA) and patient fact sheets is available for SNS asset disposition.
- Maintain LPHA secure website with latest guidance documents, tools and references.
- Assure DHSS leadership receives information in timely manner regarding receipt and disposition of SNS assets.

DSR Coordinator

- If DSR is activated, notify team members via the Emergency Notification System (ENS) and request their availability status.
- Notify LPHA's via the ENS as requested.
- Ensure DSR is staffed adequately.
- Make certain that all equipment and redundant communication systems are in working order at all times.
- Ensure that all team members reporting to the DSR are signed into the timeline for all communications.
- Assist the DSR Commander in monitoring fatigue of the Duty Officers and team members.
- Confirm that all Emergency Response Teams and DSR staff have necessary resources. This will include working with Finance/Administration to ensure that meals are provided for team members who will not be able to go off site when activated.
- Coordinate activation of Hotline Extension if required. Notify the Central Registry Unit Hotline (CRU – Elderly Abuse/Neglect Hotline) that the DSR is being activated and guidelines will be sent as soon as possible for potential worried well calls from clients/providers.
- Forward approved Health Alerts, Advisories and Updates to external organizations as requested.
- Assist the DSR Commander in determining if staffing in the DSR should be scaled up or down dependent upon the current needs of the event.
- Follow-up with the Finance/Administration team upon deactivation to determine cost of activation and potential for federal reimbursement.

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Section of Epidemiology for Public Health Practice

Other Resource:

Summary of Public Health Roles and Responsibilities for Clinical Guidelines

Throughout the Pandemic Period:

- Will be notified by the CDC of the emergence of a novel influenza virus.
- Notify the Director of DCPH and other key response staff of the emergence of the novel influenza virus and provide updates (in person or through written situational reports) of significant changes in the status and spread thereof thereafter.
- Participate in briefings.
- Provide analysis and recommendations for the management of the pandemic related to the situational updates.
- Carry out normal duties as they apply to outbreaks.
- Monitor bulletins and events related to influenza and engage in vigorous proactive communications with CDC related to the novel influenza virus.
- Monitor bulletins from CDC regarding virologic, epidemiologic and clinical findings associated with new variants isolated within and outside of the United States.
- Use statewide surveillance system to assure data can be analyzed in conjunction with CDCP.
- Work with CDCP to assure coordinated effort among regional staff and with the LPHAs in monitoring, tracking and studying the disease
- Conduct special epidemiological investigations or studies as needed or when requested by the CDC, of any special outbreaks, cases or fatalities from the novel virus to determine information that may be needed to best manage the disease.
- Maintain communications and coordinate tracking and management of the virus with other states.

Bureau of Vital Records

- Will coordinate the management of death certificates related to pandemic influenza with the LPHAs and local coroners, medical examiners and funeral directors.
- Will provide information and updates as needed to LPHAs, local coroners, medical examiners and funeral directors on pandemic influenza mortality information.
- Will track mortalities related to pandemic influenza and publish such results as needed.
- Will coordinate on the management of mass fatalities, if needed, with the State Pandemic Influenza Coordinator, SEMA, the Missouri Funeral Directors Association Rapid Response Team (MFDADRT) and local authorities.

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Section for Disease Prevention

Throughout the Pandemic Period:

- After receiving instructions from the Director of DCPH will:
 - Instruct the CDCP to:
 - Coordinate with the Office of Epidemiology (OOE) and CERT.
 - Analyze regional and state data from statewide surveillance systems in conjunction with OOE and CERT.
 - Provide a situational awareness report, as needed, to the Director of DCPH of ongoing trends and impacts of the disease across the state, capturing such information as school closures, outbreaks, percentages of visits to emergency rooms for influenza like illnesses (ILI), percentage of hospitalizations for ILI, trends of over the counter drug utilization and other information and data as is available to assist the key response staff in making informed decisions on response actions and resource allocations, utilizing all available surveillance tools.
 - Evaluate resources and prioritize staffing for pandemic response.
 - Work with CERT in the preparation of Health Alerts.
 - Coordinate with MSPHL on testing.
 - Coordinate with BIAA.
- Brief the regional senior epidemiologists with instructions to:
 - Participate in briefings.
 - Carry out normal duties as they apply to outbreaks.
 - Monitor bulletins and events related to influenza.
 - Work with regional and county staff in assigned area to implement vaccine distribution and administration plans.
 - Work with CERT to assure coordinated effort among regional staff.
 - Coordinate with state emergency response planners to evaluate resources available to vaccinate and manage the outbreak within assigned area.
 - Instruct the local epidemiologists to:
 - Review local plans– surveillance and vaccination/drug plans.
 - Meet with other regional staff to assure consistency in message and plan.
 - Initiate heightened surveillance, to include both active and passive surveillance.
 - Assure that all newly diagnosed cases are entered into the appropriate data surveillance system in a timely manner to provide current data for analysis.
 - Assist assigned counties as needed.

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Section for Healthy Families and Youth

Throughout the Pandemic Period:

- After receiving instructions from the Director of DCPH will:
 - Evaluate resources available to sustain operations during the pandemic.
 - Instruct BIAA to:
 - Coordinate with the SNS Manager to:
 - Review vaccination plan.
 - Finalize establishment of priority groups in each community statewide.
 - Coordinate with LPHAs, hospitals, and CDCP on vaccination sites.
 - Provide vaccination guidance and technical assistance to LPHAs.
 - Coordinate with HHS on vaccine implementation strategies.
 - Monitor staffing/workload gaps.
 - Work with CERT in the preparation of Health Alerts.

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Missouri State Public Health Laboratory

Other Resources:

Laboratory Preparedness Annex

Summary of Roles and Responsibilities for Public Health and Clinical Laboratories in Laboratory Diagnostics

Throughout the Pandemic Period (or until the virus is substantially characterized):

- Will be notified by Director of DCPH of the emergence of a novel influenza virus and receive regular briefings (in person or through written situational reports) of significant changes in the status and spread thereof thereafter.
- After briefing will:
 - Enhance surveillance for the novel virus throughout the state by supplying such information on sample submission and protocols as necessary to Laboratory Response Network (LRN) laboratories, using Health Alerts created in cooperation with DCEE and CERT and by other communication means if necessary.
 - Increase communications with CDC to ensure the best information regarding strain typing, reagent specifics, and other such information related to the novel virus is available to MSPHL and associated network of partners.
 - Redirect laboratory staffing, inspect equipment, monitor supplies, and other such steps as needed in preparation for testing the novel virus.
 - Communicate expeditiously to DCPH, any confirmation of the novel virus within the state.
 - Coordinate, with LPHAs, in providing technical consultation, necessary sampling kits, and other assistance as may be needed for surveillance of the novel virus.
 - Update, in conjunction with DCEE and CERT, Health Alerts modifying (by prioritization of regions, details of sample submission, etc.) the enhanced surveillance effort for the novel virus.
 - Communicate expeditiously to DCPH, trends and movement of the novel virus within the state.

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Center for Local Public Health Services

Other Resources:

HHS Pandemic Influenza Plan Part 2. Public Health Guidance on Pandemic Influenza for State and Local Partners

Throughout the Pandemic Period:

- Will be notified by Director of DCPH of the emergence of a novel influenza virus and receive regular briefings (in person or through written situational reports) of significant changes in the status and spread thereof thereafter.
- After briefing will:
 - Maintain communication with the Administrator of DCEE.
 - Maintain communication with the DSR (once activated).
 - Maintain communication with LPHA Administrators.
 - Coordinate with the Chief, BIAA and SNS Manager on vaccine and antiviral information.
 - Interpret DHSS guidance for LPHAs, provide advice, maintain relationships, answer questions and make referrals.
 - Assist in the assessment of capacities and capabilities of LPHAs.
 - Serve as a conduit for information between DHSS and LPHAs.
 - Redirect staff and resources within CLPHS as necessary.
 - Maintain knowledge of the deployment level of the LPHA workforce.
 - Recommend LPHA representatives to provide local input.
 - Work with Director of DCPH to consider easing routine contract work of LPHAs to free staff for the pandemic effort.

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Division of Senior and Disability Services

Other Resources:

Special Needs and At-Risk Populations Annex

Throughout the Pandemic period:

- Will be notified by Director of DCPH of the emergence of a novel influenza virus and receive regular briefings (in person or through written situational reports) of significant changes in the status and spread thereof thereafter.
- After briefing will:
 - Advise management staff of the situation, including all updates.
 - Facilitate ongoing communication with regional division staff.
 - Maintain ongoing communication with all partners, including Area Agencies on Aging, Home and Community Based Services (HCBS) providers, Centers for Independent Living, home care industry and other entities.
 - Handle issues/problems encountered by HCBS providers/vendors implementing service plans for priority clients during periods of high or extended absenteeism.
 - Track incident impact to clients of the DSIDS via the Central Registry Unit.
 - Redirect staff and resources as necessary to support DSIDS and DHSS operations.
- Will coordinate response activities through the DSR when activated.

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Division of Regulation and Licensure

Other Resources:

Special Needs and At-Risk Populations Annex

Within the DRL, the Director's Office oversees the Section for Health Standards and Licensure (HSL), Section for Long Term Care (SLTC), Section for Child Care Regulation (SCCR), Certificate of Need, Family Care Safety Registry, the staff liaison for the Board of Nursing Home Administrators and Financial Support staff.

Throughout the Pandemic Period

- Will be notified by Director of DCPH of the emergence of a novel influenza virus and receive regular briefings (in person or through written situational reports) of significant changes in the status and spread thereof thereafter.
- After briefing, the Director of DRL (or designee) will:
 - Communicate status of phase shifts and other updates/briefings with key Division staff, including Section Administrators.
 - Consult with key DHSS staff including DRL staff and direct appropriate actions.
 - Monitor staffing/workload and continuously assess gaps, resources and prioritize staffing for pandemic response.
 - Establish joint communication with the DHSS Director's office to:
 - Provide updated information to the DHSS Director's Office about status of licensees and division's current regulatory function capabilities.
 - Evaluate situational reports and provide recommendations for response strategies and actions to support local response and maintain essential functions.
 - Identify staff available who are not working on pandemic related activities to support other DRL or DHSS functions and redirect as necessary.
 - Report status of reassigned DRL personnel.
 - Provide situational awareness information about licensees/registrants.
 - Continue to refine the Division's Pandemic COOP/COG plan based on emerging information and best practices.
 - Work with OPI to create and direct the release of communications and/or educational material with key messaging for both internal and external stakeholders.
 - Ensure public Web site information related to DRL functions is routinely updated.
 - Ensure each program has a method so consultation and/or technical assistance for licensees is readily available.
 - Review and direct the implementation of the DHSS COOP/COG plan.
 - Direct staff about the receipt of priority prophylaxis based on DHSS guidance.
 - Issue directive that regulated entities be polled for assessment and capability.
 - Ensure mental health-specific services can be accessed for deployed DRL staff.
 - Maintain a pre-designated telephone line providing updated resources for DRL staff.
 - Maintain updated online resources for staff through dedicated SharePoint site for DRL staff.
 - Provide guidance to DRL staff for communicating with the media.
 - Ensure DRL staff implements a method to capture information necessary to update desk reference handbooks that describe how to carry out DRL's essential functions.
- Will coordinate response activities through the DSR when activated.

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Section for Health Standards and Licensure

Other Resources:

Health Care Systems Readiness Annex

Summary of Roles and Responsibilities for Healthcare and Public Health Partners

Within the DRL, HSL oversees the following Bureaus:

- *Health Standards Regulation (BHSR)*
- *Home Care and Rehabilitative Standards (BHCRS)*
- *Narcotics and Dangerous Drugs (BNDD)*
- *Emergency Medical Services (BEMS)*

Throughout the Pandemic Period

- Will be notified by Director of DRL or designee of the emergence of a novel influenza virus and receive regular briefings (in person or through written situational reports) of significant changes in the status and spread thereof thereafter.
- After briefing, HSL Section Administrator or designee will:
 - Provide direction to subordinate staff to carry out assigned duties unique to the situation based on Division priorities (ex. provide consultation, disseminate educational materials, conduct investigations, media inquiries).
 - Approve the release of communication media to internal and external stakeholders.
 - Monitor staffing/workload and continuously assess gaps, resources and prioritize staffing for pandemic response within HSL.
 - Establish two-way communication with the DRL Director at regular intervals to:
 - Provide information about staffing and status of HSL's regulatory and licensure functions.
 - Provide situational awareness information about facilities including availability of critical equipment, space and medicines.
 - Recommend redirection of available specialized staff, such as nursing or clinical laboratory staff, to support patient care activities, including mass prophylaxis or other essential functions for the DHSS.
 - Provide suggestions for updates of HSL's web information.
 - Direct staff to capture information to use for updating desk reference handbooks post-pandemic.
 - Issue a directive to activate local response plans.
 - Brief new employees assigned to work in HSL during pandemic.
 - Provide reassigned staff with a desk reference manual for any position required to handle an essential function.
 - Assure communications with key stakeholders (including points of dispensing [POD] sites) and staff occur regularly with the most up to date information available.
 - Poll licensees to update availability of critical equipment, space and medicines.
 - Implement phases of reduced programmatic functions and designate staff to participate in maintenance of essential functions, including adequate staffing levels for the medical surge desk.

- Encourage deployed staff in affected regions to take advantage of mental health services.
- Handle triaged complaints based on available staff.
- Implement altered standards.
- Provide specialized pandemic related consultation and technical assistance licensees/registrants.

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Section for Long Term Care

Within the DRL, SLTC oversees the following Units:

- *Planning and Development*
- *Registry and Review*
- *Quality Assurance*
- *Survey and Compliance*
- *Licensure and Certification*
- *Operations*
- *Regions 1–7*

Throughout the Pandemic Period:

- Will be notified by Director of DRL or designee of the emergence of a novel influenza virus and receive regular briefings (in person or through written situational reports) of significant changes in the status and spread thereof thereafter.
- After briefing, SLTC Section Administrator or designee will:
 - Provide direction to subordinate staff to carry out assigned duties unique to the situation based on Division priorities (ex. provide consultation, disseminate educational materials, conduct investigations, media inquiries).
 - Approve the release of communication media to internal and external stakeholders.
 - Monitor staffing/workload and continuously assess gaps, resources and prioritize staffing for pandemic response within SLTC.
 - Establish two-way communication with the DRL Director at regular intervals to:
 - Provide information about staffing and status of SLTC's regulatory and licensure functions.
 - Provide situational awareness information about facilities including location and number of high-risk residents and locations for ancillary medical treatment.
 - Recommend redirection of available specialized staff, such as nurses to support patient care activities, including mass prophylaxis or other essential functions for the DHSS.
 - Provide suggestions for updates of SLTC's web information.
 - Direct staff to capture information to use for updating desk reference handbooks post-pandemic.
 - Issue a directive to activate local response plans.
 - Brief new employees assigned to work in SLTC during pandemic.
 - Provide reassigned staff with a desk reference manual for any position required to handle an essential function.
 - Assure communications with key stakeholders and staff occur regularly with the most up to date information available.
 - Poll licensees to update availability of critical equipment, space and medicines.
 - Implement phases of reduced programmatic functions and designate staff to participate in maintenance of essential functions, including adequate staffing levels for hotlines.
 - Encourage deployed staff in affected regions to take advantage of mental health services.

- Handle triaged complaints based on available staff.
- Implement altered standards.
- Provide specialized pandemic related consultation and technical assistance to licensees/registrants.

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Section for Child Care Regulation

Within the DRL, SCCR oversees the staff in six districts.

Throughout the Pandemic period:

- Will be notified by Director of DRL or designee of the emergence of a novel influenza virus and receive regular briefings (in person or through written situational reports) of significant changes in the status and spread thereof thereafter.
- After briefing, SCCR Section Administrator or designee will:
 - Provide direction to subordinate staff to carry out assigned duties unique to the situation based on Division priorities (ex. provide consultation, disseminate educational materials, conduct investigations, media inquiries).
 - Approve the release of communication media to internal and external stakeholders.
 - Monitor staffing/workload and continuously assess gaps, resources and prioritize staffing for pandemic response within SCCR.
 - Establish two-way communication with the DRL Director at regular intervals to:
 - Provide information about staffing and status of SCCR's regulatory and licensure functions.
 - Provide situational awareness information about facilities including location, limitations and capacity.
 - Recommend redirection of available staff to support other essential functions for the DHSS.
 - Provide suggestions for updates of SCCR's web information.
 - Direct staff to capture information to use for updating desk reference handbooks post-pandemic.
 - Brief new employees assigned to work in SCCR during pandemic.
 - Provide reassigned staff with a desk reference manual for any position required to handle an essential function.
 - Assure communications with key stakeholders and staff occur regularly with the most up to date information available.
 - Poll licensees to update availability of space and limitations.
 - Implement phases of reduced programmatic functions and designate staff to participate in maintenance of essential functions.
 - Encourage deployed staff in affected regions to take advantage of mental health services.
 - Handle triaged complaints based on available staff.
 - Implement altered standards.
 - Provide specialized pandemic related consultation and technical assistance to licensees.

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DHSS Mental Health Coordinator

Other Resources:

Mental Health Annex

Summary of Public Health Roles and Responsibilities in Workforce Support

Throughout the Pandemic Period:

- Upon emergence of the novel virus and notification by CERT will:
 - Evaluate mental health assets and anticipated resources required to meet the threat at hand.
 - Notify mental health experts and other partners to be ready for possible activation in response to a public health emergency.
 - Provide *ad hoc* training and orientation for those mental health professionals who may be deployed to support emergency-related public health response efforts (mass prophylaxis sites, local hospitals, alternate care facilities, etc.).
 - Provide consultation to local mental health providers in adapting their response for special populations (hospital and health care workers, children, older adults and ethnic communities, first responders, homebound, etc.).
 - Provide consultation and training for frontline public health workers, such as state and LPHA staff, physicians, nurses, medical technicians and others in anticipating and responding to epidemic-related mental health behaviors such as stress reactions, misattribution of normal arousal symptoms and panic.
 - Disseminate psycho-educational materials to various populations addressing the mental health impact of the pandemic event, as well as strategies for coping with fear and anxiety and access to mental health services.
 - Conduct mental health-specific needs assessments and rapid identification of vulnerable populations and gaps in mental health services that may exacerbate the psychosocial response to the event.
- Upon sustained transmission of the novel virus in the state and as needed will:
 - Be notified of the change in status by CERT.
 - Continue with the above. In addition will:
 - Utilize existing relationships with Voluntary Organizations Active in Disasters and faith-based organizations in coordinating and unifying mental health messages and strategies.
 - Work with Public Information Officers to craft public service mental health messages in support of the overall emergency public health response.
 - Increase recruitment of qualified outreach workers to provide community-based crisis counseling and psycho-education in rural and otherwise difficult to reach communities.
 - Update and modify online mental health/pandemic-related websites.
 - Deploy counselors to deliver multi-lingual, multi-cultural mental health support services directed at all critical outbreak-related functional areas (SNS Receiving, Storage and Staging sites, POD Sites, public health headquarters, emergency medical service bases of operation, etc.).
 - Provide stress management services and training for those public health personnel working in high-demand settings.

- Deploy staff (life safety issues notwithstanding), to high-emotion locations (morgues, funeral homes, hospitals, pediatric units, pharmacies, etc.) to work to reduce agitation among individuals who are upset.
- Coordinate with other crisis counseling programs (American Red Cross, county prosecutor's victims advocates, etc.) to ensure the interoperability of counseling services at all points within the community.
- Deliver (life safety issues notwithstanding) support services to schools and other institutions to assist staff, students/residents, etc., with grief and bereavement issues and the cumulative stresses related to a protracted health emergency.
- Offer ongoing stress management activities for crisis counselors and other mental health workers engaged in any outbreak-related efforts.
- Offer ongoing stress management services to personnel within the incident command and control structure of the emergency management system.
- Deliver specialized mental health support services to medical professionals, first responders and public health workers to address stress management concerns to reduce the potential for adverse psychological reactions within their workforces.
- Between pandemic waves and after the end of the pandemic as needed will:
 - Continue with the above. In addition will:
 - Provide ongoing support for clergy, morticians and funeral workers.
 - Promote the development of grass roots, community self-help groups to address the long-term emotional consequences of the pandemic.
 - Promote and offer technical assistance and other peer-support programs to first responders to address the potential long-term emotional impact of the event.
 - Deliver debriefing and other post-event psychological services for first responders, public health and other professionals involved in the event.
 - Work with community mental health provider agencies, academic institutions and other specialists to develop treatment models to address the lingering or long-term emotional consequences of the pandemic event.
 - Maintain a telephone help-line providing tele-counseling, updated resources and facilitated referrals for behavioral health services, as well as online resources.
 - Maintain online psycho-educational and resource/referral web sites developed during earlier phases.

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