Northeast Central Ohio Region 5
REGIONAL WORKGROUP MEETINGS
February 9, 2010

PUBLIC INFORMATION OFFICER WORKGROUP

Present: Kristi Kato, Marlene Martin, Steve Bosso, Colleen Rice, Leslee Dennis, Dr. James Hubert, Reed Richmond, Jon Jenny, Jessie Wingert, Dane Idelburger,

I. Welcome

- The group was welcomed.

II. Status Reports (All)

- H1N1 vaccination and response has slowed down in Medina County. Overall they had 25 requests for interviews from different markets. They have established a Twitter account which Colleen tweets to once a week. So far they have had no negative responses. Every tweet pushes the user back to the Medina County Health website. Everyone agreed that it is a great way to dispel rumors. Twinsburg dispatch has it and Steve is looking at trying to get all of Twinsburg on board. Richland County sent out alert to cell phones via text messages. At the beginning the messages were going out to over 400 individuals. They found it to be an excellent way to provide up-to-date information.
- The question was poised to the group, how is the best way to reach physicians? Dr. Hubert stated that blast fax has worked well for those offices that do not have email capabilities. However those offices need to become accustom to receiving the alerts. He also stated that CDC wants to reinitiate through social media H5N1 education.
- Colleen emailed a situation update about Medina County's special clinics at Job and Family Services and at our county mental health providers. Unfortunately, we did not process many people at these clinics.

III. Lessons Learned

- The group talked about how the messaging in the beginning aimed at the older adults should have been different because it now seems like they do not need the vaccine.

IV. Public Information Incident Management Documents

- Please provide all comments to kkato@schd.org by February 23, 2010. The document is attached.

V. Adjournment

The next meeting is scheduled April 13th at 9:00 via Go-To-Meeting. The meeting was adjourned.

Incident Management Document:
NECO-5 Public Information

I. INTRODUCTION:

A. Objective:

- Ensure that sufficient region-level assets are deployed during disasters, emergencies or statewide incidents of national significance to provide accurate, coordinated, and timely information to affected populations, governments, legislators and the media.

B. Key Definitions:

- **Emergency Public Information.** Information that is disseminated primarily in anticipation of an emergency or during an emergency. In addition to providing situational information to the public, it also frequently provides directive actions required to be taken by the general public.

- **Joint Information Center (JIC).** A facility established to coordinate all incident-related public information activities. It is the central point of contact for all news media at the scene of the incident. Public information officials from all participating agencies should collocate at the JIC.

- **Joint Information System (JIS).** Integrates incident information and public affairs into a cohesive organization designed to provide consistent, coordinated, timely information during a crisis or incident operations. The mission of the JIS is to provide a structure and system for developing and delivering coordinated interagency messages; developing, recommending, and executing public information plans and strategies on behalf of the IC; advising the IC concerning public affairs issues that could affect a response effort; and controlling rumors and inaccurate information that could undermine public confidence in the emergency response effort.

- **Joint Operations Center (JOC).** The JOC is the focal point for all Federal investigative law enforcement activities during a terrorist or potential terrorist incident or any other significant criminal incident, and is managed by the SFLEO. The JOC becomes a component of the JFO when the NRP is activated.

- **Public Information Officer (PIO).** A member of the Command Staff responsible for interfacing with the public and media or with other agencies with incident-related information requirements.

- **Virtual Joint Information Center (VJIC).** A VJIC is an electronic substitute when a physical co-location is not possible for a joint information center; the VJIC may include secure (password-protected) Web sites, e-mail, telephone conference calls, or two-way radio communication.

II. ENABLING POLICIES AND LEGISLATION:

- Planning for external communications functions recognizes county government responsibilities for providing timely public information. If county governments are unable to provide timely public information to those affected by emergencies, disasters or incidents of national significance, the State and Federal Government may be called upon to provide vital health and safety information to the affected population.

- External communications efforts shall be coordinated to support the dissemination of a unified message.

III. SITUATIONS & ASSUMPTIONS:

A. Situation:

- NECO Region 5 has the potential to experience a major emergency or disaster.
- The public needs information regarding actions to be taken to minimize the loss of life and property.
- Health Departments/District in NECO have continuing programs, which use various channels of communication, including the mass media, to provide needed and desired information about local government activities and services to the general public.
- The media would provide a means of disseminating emergency information to the public.
- Government officials will provide accurate and complete information and cooperate with the media to the extent possible.
- Natural and man-made disasters or epidemics may occur which would necessitate warning the public and informing them of actions that they must take.
- The principal means by which the public would be informed of potential threats to their health and safety would be disseminated by electronic and print media, social network outlets, social media outlets, vehicle-mounted public address systems and door-to-door notification.
- NECO Region 5 is composed of thirteen counties and twenty-eight individual health departments and/or health districts that maintain jurisdictional authority and autonomy regarding coordination and implementation of Incident Management Plans and strategies within their respective jurisdiction.
- NECO Region 5 Health Department's and/or Health District's maintain legal authority and jurisdictional autonomy regarding the coordination and implementation of Public Health prevention, preparedness, response, and recovery operations within their jurisdiction.
- County Emergency Management Agencies in NECO Region 5 maintain county emergency operations plans and procedural documents that outline the incident management capabilities, responsibilities, and resources the EMA may utilize to support coordination and communication between local, regional, and state partners.
- Public Health emergencies may last extended periods of time.
- NECO Region 5 Health Department's and/or Health District's will rely on the Ohio Department of Health (ODH) and the Centers for Disease Control (CDC) to provide guidance regarding public information releases.

B. Assumptions:

- During emergency situations and disasters, the general public will demand information about the emergency situation and instruction on proper response actions.

- Demand for information will be overwhelming if sufficient staff is not provided and if staff is not trained and operating from a pre-established set of procedures.
- During an emergency the public will want information on proper response actions to take.
- The media will demand information about the situation.
- The number of media personnel responding to the emergency will depend on the magnitude.
- The local media will usually cooperate with officials in disseminating information to the public.
- The general public will turn to local and area media as sources of information and guidance.
- There may be times when disaster strikes without warning and the Public Information System cannot react rapidly enough.
- Rumors can be expected during any emergency.
- Each county has a high level of preparedness, although public awareness campaigns cannot be 100% effective.
- Incidents requiring regional coordination will be managed through utilization of the ICS structure; whereby, each jurisdiction will implement the Incident Command System, and when possible, utilize Unified Command with local hospital(s) and other response partners to effectively address the incident.
- Health Department's and/or Health District's in NECO Region 5 maintain emergency plans and procedural documents that address at a minimum what must be done and how local jurisdictions will implement Risk Communication strategies.
- Implementation of Risk Communication/Public Information strategies will occur at a local level.
- Local Emergency Operations Center's (EOC's) will act as the Multi Agency Coordination Center (MACS) of each jurisdiction; whereby, they provide operational support by providing a common operation picture to the local jurisdiction through communication with regional and State partners.

IV. Concept of Operations (CONOPS):

A. General

- **Level 1 Response:** One jurisdiction is affected and the response can be handled without regional assistance or resources. The event is thought to be small in scope and is not expected to escalate.
    - <u>Recommend Actions</u>:
        1. Implement ICS and activate appropriate positions as applicable to local plans
        2. Implement Risk Communication/Public Information plans

3. Review MOU's with local and regional health departments and implement as necessary
4. Enhance media monitoring and surveillance
5. Provide education to media and public about event
6. Provide general notification of incident to various local, regional, and/or state partners
7. Conduct a situation assessment
8. Establish contacts with local health care providers and local and regional public health
9. Disseminate regular situational updates to local, regional, and/or state partners.

- **Level 2 Response:** One jurisdiction is affected; the response may require regional assistance or resources. The event is localized to one jurisdiction but with multiple occurrences and is anticipated to escalate.
  - Recommend Actions:
    1. Review Level 1 Response recommended actions.
    2. Collaborate with local EMA to determine appropriate CAS level activation
    3. Access the need for a Joint Information System or Joint Information Center
    4. Assess available resources to implement risk communication
    5. Assess implementation status of MOU's and revise as necessary
    6. Review local risk communication/public information plan
    7. Provide education to media and public about event
    8. Provide general notification of incident to various local, regional, and/or state partners
    9. Utilize VJIC, see appendix A Consider utilization of a NECO VJIC to disseminate regular situational updates to local, regional, and/or state partners, appendix A
    10. Conduct a situation assessment
    11. Establish contacts with local health care providers and local and regional public health
    12. Disseminate regular situational updates to local, regional, and/or state partners

- **Level 3 Response:** More than one jurisdiction is affected within the region and requires regional assistance and resources. The event is widespread and expected to escalate. A Emergency may be declared for the incident. Affected jurisdictions will coordinate implementation and recommendation of community containment strategies regionally by maintaining ongoing communications through Multi Agency Coordination Systems

(MACS) that are currently in place, established, and maintained by each county emergency management agency. ODH and/or the CDC may be involved in initiating response and updates for this level.

- Recommend Actions:

  1. Review Level 1 and 2 response recommended actions
  2. Assess implementation status of MOU's and revise as necessary
  3. Conduct assessment of available resources
  4. Coordinate allocation of resource through local EMA
  5. Access the need for a Joint Information System or Joint Information Center
  6. Establish liaison for communications with ODH and OEMA
  7. Consider utilization of a NECO VJIC to disseminate regular situational updates to local, regional, and/or state partners, appendix A
  8. Maintain ongoing communications through Multi Agency Coordination Systems (MACS) that are currently in place, established, and maintained by each county emergency management agency
  9. Consider conducting a media conference
  10. Communicate recommendations from subject matter experts
  11. Conduct a situation assessment
  12. Establish contacts with local health care providers and local and regional public health
  13. Consult local EMA in regards to a local emergency declaration

- **Level 4 Response:** More than one region in the state or multiple states are affected. A Emergency will be declared by some level of government. Response will be coordinated regionally through local EOC's acting as the Multi Agency Coordination Center of each jurisdiction; whereby providing operational support through establishment of a common operational picture to the local jurisdiction through communication with regional and State partners. The response may be directed by ODH and/or the CDC; however, local and regional coordination of efforts will occur through the MACS.

  - Recommend Actions:

    1. Review Level 1, 2 and 3 response recommended actions

2. Assess status of MOU implementation and revise as necessary

3. Conduct assessment of available resources

4. Coordinate allocation of resource through local EMA

5. Establish liaison for communications with ODH representative at OEMA

6. Coordinate with local, regional, and/or state partners to disseminate regular situational updates to create a common operating picture

7. Maintain ongoing communications through Multi Agency Coordination Systems (MACS) that are currently in place, established, and maintained by each county emergency management agency.

8. Assess and refine recommendations regarding appropriate PPE as needed.

9. Maintain ongoing communications with local health care providers and local and regional public health

10. Assess and refine local emergency declaration for a public health incident

Recovery Actions to be Considered and Discussed:

- Cost Recovery
  - Tally your total time and cost
  - Submit your numbers to the local EMA and State Department of Health
- Rescind Orders Issued as applicable
- As the responsive dissemination of public information plays an integral role in the recovery process, regular communication about recovery efforts reassure the public that government agencies are working together to resolve the situation and bring assistance, even though response efforts may not be over.
- Update Following Information (as applicable to event):
  - Actions the public should take
  - Summary of the incident
  - Impact of the incident
  - Actions response agencies are taking
  - Actions the public, businesses and industries may take to gain access to recovery programs and information on how these programs work
  - Information on how to repair or restore damaged property
  - Debris removal information
  - Overall steps to be taken by the government and citizens to return to normal

- Any other crisis specific recovery information

PIOs should:

- Emphasize as soon as appropriate, when the danger has passed or the situation has transitioned from response to recovery
- Be prepared to direct questions concerning volunteers and financial contribution to the appropriate organizations
- Inform local businesses about special programs designed to assist them throughout the news media, appropriate business channels and community outreach efforts.
- Communicate information on service animals, pets, and livestock
- Coordinate with their PIO counterparts at appropriate agencies concerning environmental, ecological, and agricultural impacts.

RECOVERY EVALUATION

To help determine the effectiveness of recovery communication during an incident or planned event, PIOs should closely monitor media reports and assess public inquiries to determine if information is received and understood by its intended audiences.
Following an incident or planned event, PIOs should create a comprehensive report of media coverage, media inquiries, and public inquiries to determine the effectiveness of the recovery communications efforts. This report, or conclusions of the report, can be forwarded to the ICS planning section for inclusion in the After Action Report (AAR). The PIO should also participate in AAR reviews.

Typically, AARs contain the following components:

- Executive Summary
- Incident Overview;
- Analysis of Capabilities
- Major Strengths
- Areas of Improvement
- Lessons Learned.

2.

Note: Refer to local jurisdictions recovery plans

V. DOCUMENT MAINTENANCE:

- This Incident Management Document (IMD) will be revised annually by a workgroup established under the NECO Region 5 Regional Public Health Coordinator. In addition, this IMD may be revised based upon findings from exercises, or the implementation of new or updated laws, policies, and/or regulations.