ANNEX J

EVACUATION

I. PURPOSE

The movement of people and property from areas "at risk" to a safer place is a concept as old as mankind. This annex will give Joplin and Jasper County guidelines under which they can accomplish such an evacuation. This function must be applicable to small, localized situations as well as for a whole-scale countywide movement should the need arise.

II. SITUATION AND ASSUMPTIONS

A. Situation

1. Joplin and Jasper County are subject to many hazards (see Basic Plan, Situation and Assumption) that could threaten the lives and property of its citizens and require evacuation operations. Such hazards could be flooding and hazardous materials incidents.

2. Joplin and Jasper County have a good transportation network that will facilitate any evacuation of the general population.

3. There are several special facilities (hospitals, nursing homes, schools, etc.) that will require special consideration in this annex.

B. Assumptions

1. In almost every emergency situation requiring evacuation, a number of people will evacuate on their own volition. Approximately 4,000 will require public transportation.

2. It can be anticipated that the majority of persons will receive and follow the evacuation instructions. However, a certain portion of the population 1) will not get the information, and 2) will not understand it, or 3) will purposely not follow directions.

3. In all cases, an adequate number of city and/or county emergency personnel will be available to accomplish the tasks necessary to complete the evacuation.

4. Panic by evacuees will not be a problem as long as the government furnishes adequate information.

5. Evacuation will be primarily by family groups using privately owned vehicles with transportation being provided for those persons without automobiles.

6. Looting of evacuated areas is possible, but will be contained by local law enforcement.

7. Assistance in planning for and in conducting actual evacuations will be provided by higher levels of government.

III. CONCEPT OF OPERATIONS

A. General

1. The ultimate responsibility for ordering an evacuation rests with the local government; hence, it should only be implemented by the chief elected official or a designated successor.

2. During any evacuation, close coordination will be required with the following functions:

   a. Reception & Care -- The evacuees must have some place to go even if it's in another county.

   b. Law Enforcement -- Traffic control along movement routes and security for evacuated areas are an absolute necessity.

   c. Resource & Supply -- Transportation for persons without automobiles, food, clothing, and fuel will be required.

   d. Other support agencies -- Constant interface will be required with the state and federal government and private agencies such as the Red Cross.

3. The duration of the evacuation will be determined by the chief elected official present based on technical information furnished by federal, state, and local agencies.

4. Certain day-to-day governmental activities will be curtailed during evacuations. The degree to which this is necessary will, of course, depend upon the commitment of local resources that are required.

5. Transportation will be provided for patients of nursing homes, hospitals, and other institutions requiring special care or attention. Patients in residential care to be included as needed. Appendix 2 to this Annex lists these facilities.

6. During the evacuation, staging areas and pick-up points will be identified to provide transportation for those people without private automobiles or other means (see Appendix 3 to this Annex).

B. Tasks to be Accomplished by Operating Time Frame

1. Mitigation

a. Identify potential evacuation areas in accordance with the results of the hazard identification process.

b. Identify population groups or facilities requiring special assistance in an evacuation (hospitals, nursing homes, senior citizens, persons who are visually or mobility impaired or medically dependent, etc.).

c. Identify private organizations that can facilitate evacuation (i.e., service stations, garages, fuel distributors, bus companies, etc.). This should be done in conjunction with the head of the Resource & Supply Section (Annex G).

d. Develop contingency plans for alternate evacuation routes, reception areas, transportation services, etc.

e. Coordinate all evacuation plans with the State Emergency Management Agency.

2. Preparedness

a. Analyze all developing emergencies for potential evacuation situations to include number of evacuees.

b. Alert reception and care of possible evacuation and obtain location of available reception centers.

c. Identify necessary evacuation routes and check the status and condition of each one (coordinate with Law Enforcement).

d. If appropriate, contact road service groups (wreckers, service stations, etc.).

e. Locate transportation for all persons in threatened area.

f. Through the Direction and Control Section (EOC), alert all other emergency sections that an evacuation may be required.

g. Inform the public of the potential evacuation to include the nature of the problem, the movement route to use, and the reception area to go to.

h. If necessary, make plans to evacuate government and critical workers.

3. Response

a. Order evacuations, when necessary.

b. Notify all appropriate agencies to include state and federal. Coordinate with PIO, EOC, Law Enforcement and Reception & Care Coordinator on evacuation routes.

c. Monitor the following actions to insure the evacuation functions smoothly:

1) traffic flow
2) reception areas, and
3) security for evacuated area

d. Broadcast public information continuously during the evacuation to minimize confusion.

e. Coordinate with and furnish information on the situation to the other emergency services.

f. Assist in the transfer of necessary supplies and personnel to reception areas, especially if these areas are outside the affected jurisdiction.

g. As the evacuation winds down, begin planning for the return.

h. Designate rest areas along movement routes where evacuees can obtain fuel, water, medical aid, vehicle maintenance, information, and comfort facilities.

i. Provide for security and parking in the reception area.

j. Provide for transportation for essential workers who might have to work in or near the hazardous areas.

k. Make provisions for the evacuation of handicapped, elderly, and institutionalized persons.

4. Recovery

a. Initiate return when conditions will allow this to be done safely.

b. Monitor all return activities until the return is completed.

c. Maintain increased readiness until living conditions return to normal.

d. Prepare after action reports to evaluate operations.

IV. ORGANIZATION AND ASSIGNMENT OF RESPONSIBILITIES

A. Organization

The organizational chart for the evacuation function is shown in Appendix 1 to this Annex.

B. Assignment of Responsibilities

1. In most cases, all major decisions pertaining to evacuation will be made by either the County Commission or the Mayor of the affected municipality as is provided for in state statute.

2. In some instances, when time is of the utmost importance, the chief law enforcement or fire official at the scene can initiate an evacuation. (An example here is a hazardous materials incident.)

3. The Joplin-Jasper County Emergency Management Director will coordinate the activities of all agencies participating in the evacuation. The Director will keep the chief elected officials advised at all times on the actions taken.

4. Traffic control and site security will be the responsibility of the Law Enforcement Section. The County Sheriff will control these activities for Jasper County and the municipal police chiefs will control these activities in their jurisdictions (see Annex E).

5. Public transportation will be the responsibility of the Resource & Supply Section (Annex G).

6. Transportation routes and their capacity. (Appendix 4 Annex H) Traffic control points will be determined by law enforcement at time of evacuation.

7. The dissemination of information and instructions to inform and motivate residents to comply with evacuation plans will be the responsibility of the Emergency Public Information Section (Annex C).

8. Other sections will provide support as necessary to meet the needs of the emergency.

V. DIRECTION & CONTROL

A. All evacuation operations will be coordinated and controlled through the EOC of the affected jurisdiction(s).

B. Should the order come to evacuate the entire county, operations will be controlled from a nearby safe location.

VI. CONTINUITY OF GOVERNMENT

A. The line of succession for the Evacuation Section will be from the Mayor, Presiding Commissioner, or their designee. Lines of succession for the supporting sections are provided in the corresponding annexes of this plan.

B. If populations are evacuated to a neighboring jurisdiction, a local official from the evacuated area will be designated as liaison between the hazard and reception area. The evacuees will be subject to the laws of the reception area for the duration of their stay.

C. Preservation of records will be a major priority during an evacuation. Resources will be allocated to move vital government records as necessary.

VII. ADMINISTRATION & LOGISTICS

A. Each jurisdiction is responsible for procurement of its own essential supplies needed for evacuation operations, through normal procurement channels.

B. Requisition of privately owned property will be in accordance with the provisions of Chapter 44, RSMo.

C. All city owned and county owned transportation will be utilized as required and formal arrangements for outside resources should be made.

VIII. ANNEX DEVELOPMENT & MAINTENANCE

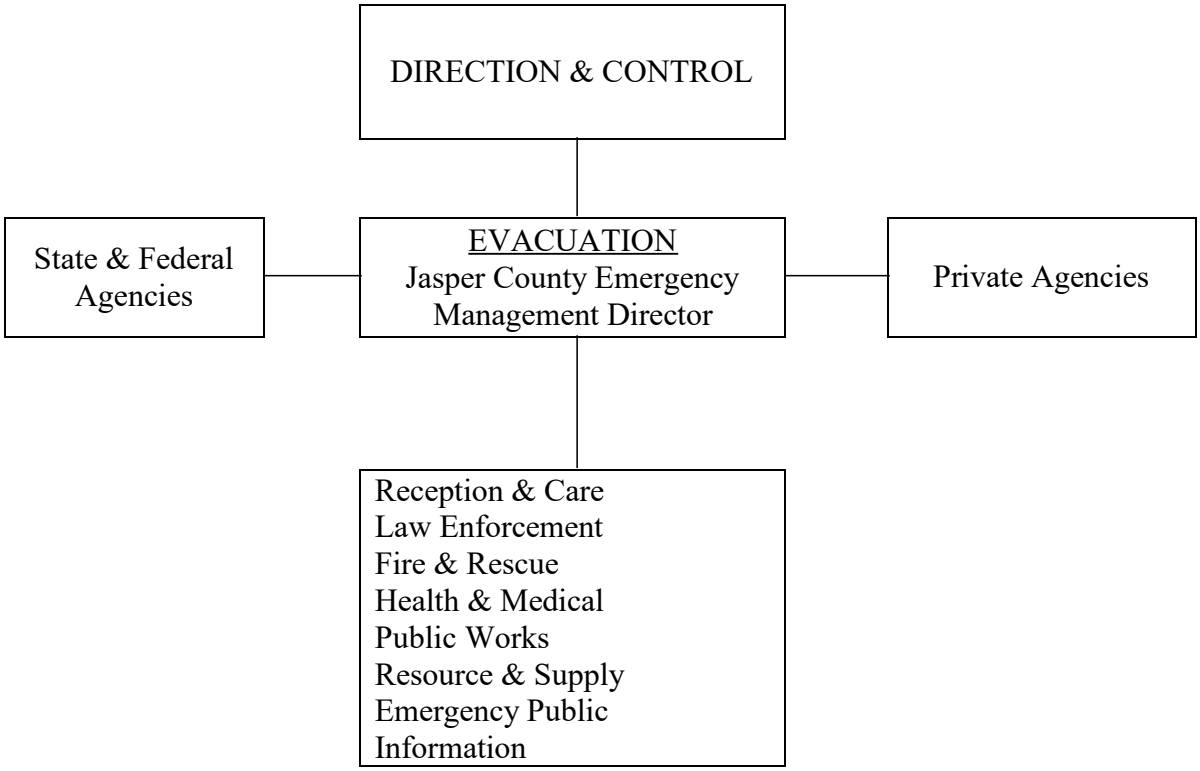
It is the responsibility of the Joplin-Jasper County Emergency Management Director to maintain and update this Annex at least yearly.

APPENDICES

1. Evacuation Organizational Chart
2. Special Facilities
3. Staging Areas
4. Hazardous Materials Evacuation
5. Flood Evacuation
6. Record of Evacuation (form)

Appendix 1 to Annex J

EVACUATION ORGANIZATIONAL CHART



*Support from private agencies such as the Red Cross and also the public schools will enhance evacuation operations (i.e., assisting with sheltering, providing transportation, etc.).

Appendix 2 to Annex J

SPECIAL FACILITIES

If evacuation becomes necessary, the hospitals and nursing facilities must either release the patients where possible or relocate them to other facilities as necessary. Staff personnel and nurses may be required to make the trip with the patients along with any necessary medication or special equipment.

Transportation must be provided to those facilities which have none. Depending upon the situation, some facilities may remain operational with reduced staffs to care for those patients who cannot evacuate and also provide services to essential workers in the area. Area Nursing Homes and Day Care Centers are on file in the Office of the EOC.

	HOSPITALS	Licensed Beds
1.	Freeman Health Systems 1102 West 32nd, Joplin 932 East 34th, Joplin	322
2.	Mercy Medical Center 627 West Centennial, Carthage	57
3.	Mercy Medical Center 2727 McClelland Blvd., Joplin	367

Appendix 3 to Annex J

STAGING AREAS

There are a number sites that are suitable for collection points for: 1) people who need transportation or 2) assembling equipment and supplies, or 3) the use of particular buildings for reception and care. Which sites to be used would be determined by the situation and prior agreement between the school districts and Red Cross. Red Cross has agreements with schools to use as shelters and reception areas. These sites are on file in office of Emergency Management.

Appendix 4 to Annex J

HAZARDOUS MATERIALS EVACUATION

A. Purpose

To provide for the orderly and coordinated evacuation of those people in Joplin and Jasper County who are exposed to hazardous materials accidents and those people who may be endangered by on site hazardous materials.

B. Situation and Assumptions

1. Situation

Joplin and Jasper County are exposed daily to hazardous materials being transported across its highways, railroads, pipelines, and also from the storage of these materials in containment areas. (Annex H)

2. Assumptions

a. One out of ten motor vehicles is engaged in the transport of hazardous materials.

b. Hazardous materials incidents may occur without any other emergencies being involved such as a structural failure in a container or a leaking valve.

c. Such incidents could pose a significant threat to the health and safety of response personnel as well as others in the immediate area.

C. Evacuation Response Procedure

1. If no evacuation is required:

a. Secure the area. Since law enforcement personnel are able to respond quickly, they would cordon off the affected area.

b. Dispatch the Fire Department. Normally this will be fire department personnel with the appropriate level of hazardous material training to do on-scene assessment.

c. Alert other departments. Other governmental units such as emergency preparedness, fire, water, sewer, and street departments

should be informed of the situation. Also, notify the Department of Natural Resources and the State Emergency Management Agency as required and CHEMTREC if necessary. (See Appendix 3 to Annex H)

2. If evacuation is required and an order is made to evacuate:

   a. Designate the area to be evacuated. This information should be as clear and concise as possible in order to aid those who are assisting in the evacuation and for those who are being evacuated.

   b. Establish a perimeter security. The purpose is to limit or prohibit entry into the affected area.

   c. Activate an emergency shelter plan if necessary. Many evacuees will stay with friends or neighbors for short periods of time; if duration is longer, the affected community would locate and make ready areas for long term occupancy. (See local reception and care plan, Annex L.)

   d. Notify affected persons. All persons within affected area must be contacted. This is best accomplished on a door-to-door basis, loud speakers, or government-manned telephones depending upon the situation. Records should be kept of location of visits, times and dates, and results of attempted visits. (See Appendix 6 to this Annex.)

   e. Return of affected persons. Once the area is declared safe, a public information program should so inform the evacuees when to return, what to expect upon return (i.e., how to turn utilities back on, etc.) and how to request additional information. Also, local government would warn of other related hazards so persons would be alert to changes in their environment.

Appendix 5 to Annex J

FLOOD EVACUATION

A. Purpose

To provide for the orderly and coordinated evacuation of people from those areas of Joplin and Jasper County, which are vulnerable to flash flooding, slow developing flooding, and levee failure.

B. Situation and Assumptions

1. Situation

a. Joplin and Jasper County are vulnerable to a wide range of atmospheric conditions that produce weather that is variable and subject to rapid change.

b. Joplin and Jasper County are composed of several water systems. The most prominent of these are the Spring River and Turkey Creek.

c. Due to the flat, alluvial nature of parts of this area, flooding has historically posed problems on an annual or higher frequency along many of the streams which drain it.

2. Assumptions

a. Joplin and Jasper County are vulnerable to damage and loss of life resulting from flash floods, slow-developing floods along its rivers and their tributaries, and dam or levee failure.

b. Floods are generally caused by rainstorms lasting several days and moving northeastward across the area and occur frequently from January to May.

c. Floods may occur as two distinct types of flooding or may occur singly or in combination. The types are commonly referred to as backwater and headwater flooding.

d. Local authorities will take immediate steps to warn and evacuate citizens, alleviate suffering, protect life and property and commit available resources before requesting assistance from the next higher level of government.

C. National Flood Insurance Program

1. Flood maps are available for thirteen of the twenty-four areas. These detailed maps delineate the flood areas and thus show where evacuation would be likely should unfavorable weather conditions persist. Streets are also shown in the flood hazard areas.

2. Jasper County and the City of Joplin participate in the NFIP. Copies of the flood maps for the City of Joplin are kept on file at the Joplin Public Works Department, Zoning & Planning. Copies of the Jasper County flood maps are available in the Jasper County Courthouse in Carthage.

D. Initial Evacuation Response

1. Receive Warning

The National Weather Service, through a monitoring and warning system, is able to give advanced notice of gradual flooding hours and even days before it results in serious loss of life and property.

a. The National Weather Service may issue a Flash Flood Watch which means:

Heavy rains may result in flash flooding in a specified area. Residents should be alert and prepared for the possibility of a flood emergency which may require immediate action.

b. The National Weather Service may issue a Flash Flood Warning which means:

Flash flooding is occurring or is imminent in a specified area. Residents should move to safe ground immediately.

2. Notify Public

It is the joint responsibility of the National Weather Service and/or the local government entity to issue a warning via radio, television, etc. Early warning, if possible, would enable those in flood hazard areas to move or safeguard their property, thus simplifying evacuation should it become eminent.

E. Evacuation

1. Designate the flood hazard area to be evacuated.

2. Establish a perimeter security.

   The purpose is to limit access to looters and sightseers, but to allow egress by victims.

3. Establish shelter areas/relief services for victims.

   It must be decided when to open such facilities and where they should be located. Location of shelter areas and assistance in the form of food and clothing could be supplied by the local Red Cross.

4. Notify affected persons.

   If early warning is not effective, all remaining persons within the designated flood
   area must be contacted. This is best accomplished on a door-to-door basis, loud speakers on patrol cars, or government-manned telephones. A method to record location of visits, times, dates, and results of attempted visits should be devised (see Appendix 6 to this Annex).

5. Return of flood victims.

   Once the flood waters recede, a public information program should so inform the evacuees when to return, what to expect upon return (i.e., how to turn the utilities back on, how to purify water, etc.), and of services being offered by local government, such as pumping basements and debris removal. Also, local government would warn of other related hazards so persons would be alert to changes in their environment.

Appendix 6 to Annex J

RECORD OF EVACUATION

Date _____ Notification Personnel

_____

Area _____Time Stared/Ended

_____/_____

Appendix 7 to Annex J

DAM FAILURE

I. DEFINITION

Dam Failure – downstream flooding due to the partial or complete collapse of any impoundment.

II. SITUATION

A. Dam failure is associated with intense rainfall and prolonged flood conditions. However, dam breaks may also occur during dry periods as a result of progressive erosion of an embankment caused by seepage leaks. An earthquake may also cause Dam failure.

B. The greatest threat from dam breaks is to areas immediately downstream. The most seriously affected population would be those persons located in the potential downstream inundation area as identified by the Corps of Engineers or State agencies.

ANNEX K

IN-PLACE SHELTER

I. PURPOSE

This Annex will give Joplin and Jasper County the guidelines under which they can accomplish in-place sheltering for residents at risk due to a hazardous materials spill or other type of hazard either technological or natural.

II. SITUATION AND ASSUMPTIONS

A. Situation

1. In the event of a natural or technological disaster, in-place protective shelter will provide essential shelter to the public in an area near their residence.

2. Potential disasters that could cause in-place sheltering in Joplin and Jasper County include:

   a. Hazardous material incidents: People will be advised to stay indoors and reduce the air flow into the structure (home, public facility, etc.).

   b. Tornado: Private homes can offer protection in basements or other protected areas of the house. Public buildings, schools, nursing homes, etc., have designated shelter locations.

B. Assumptions

1. Joplin and Jasper County Officials will determine the best option for ensuring the safety of the public and will take action to implement that strategy.

2. City and County Officials will advise the public on what protective actions to take.

III. CONCEPT OF OPERATIONS

A. General

1. The two options for protecting the population are evacuation and shelter. Joplin and Jasper County officials will implement one or the other or possibly both options, depending on the best available estimate of the disaster situation.

   a. Evacuation will be considered based on the conditions at the selected destination and any risk of exposure to the disaster agent while enroute. Evacuation operations are discussed in Annex J.

   b. Sheltering in-place will depend on the relative protection from potential disaster agents provided by the available residential, commercial, and recreational structures in the community.

2. If people are displaced from their homes by the disaster situation, temporary housing and mass care must be provided. Reception and care operations are discussed in Annex L.

3. Special facility populations must be identified. In-place shelter may be the only available option for these facilities. Appendix 2 Annex J.

B. Actions to be taken by operating time frame.

1. Mitigation

   a. Review Reception and Care Surveys to identify shelter facilities suitable to shelter people from assumed risk conditions.

   b. Work with local officials to develop in-place protective shelter plans.

   c. Assist in the development of special plans and procedures (i.e., shelter stocking, shelter marking, traffic control, etc.).

   d. Provide training for shelter managers and staff (American Red Cross).

   e. Participate in tests, exercises and drills.

f. Conduct public awareness programs.

2. Preparedness

a. Brief key governmental officials and department heads. Direction and Control, Annex A.

b. Check the Reception and Care Surveys.

c. Publish and distribute information on:

1) Shelter location
2) Shelter upgrading measures
3) Shelter stocking
4) Warning signals
5) Expedient shelter measures

d. Report the requirements and deficiencies to Direction and Control.

3. Response

a. Order evacuations, when necessary. Direction and Control, Annex A.

b. Request shelters be opened as needed by the local American Red Cross.

c. Coordinate with the PIO the release of in-place shelter instructions (Refer to C-3)

d. Furnish emergency public information for broadcast. Broadcast public information continuously during the evacuation to minimize confusion.

e. Assist in the transmission and receiving of damage assessment information.

f. Report all problems to direction and control.

g. Coordinate with and furnish information on the situation to other emergency services.

h. Assist in the transfer of necessary supplies and personnel to reception areas, especially if these areas are outside the affected jurisdiction.

i. Notification to all appropriate agencies to include State and Federal.

j. Monitor: traffic flow, reception areas, and security for evacuated areas.

4. Recovery

a. Initiate return to affected areas when conditions will allow this to be done safely.

b. Monitor the release of sheltered.

c. Prepare after-action reports.

d. Conduct any other actions necessary to assist in returning the situation to normal.

IV. ORGANIZATION AND ASSIGNMENT OF RESPONSIBILITIES

A. Organization

The organizational chart for in-place sheltering function is shown in Appendix 1 to this Annex.

B. Assignment of Responsibilities

1. In most cases, all major decisions pertaining to evacuation and in-place sheltering will be made by either the county commissioner or the mayor, or their designees, of the affected municipality as is provided for in State Statute.

2. In some instances, when time is of the utmost importance, the chief law enforcement or chief fire official at the scene can initiate an evacuation. (i.e., hazardous materials incident)

3. The emergency management director will coordinate the activities of all agencies participating in the evacuation. The director will keep the Chief Elected Officials advised at all times on actions taken.

4. Traffic control and site security will be the responsibility of law enforcement. The county sheriff will control these activities for Jasper County and the municipal police chiefs will control these activities in their jurisdictions.

5. The public information officer will assist with the notification of the public through the news media. Will coordinate all activities through EOC/Chief elected official or designee.

6. The reception and care coordinator (Director of Red Cross) will assist with shelter and feeding operations.

7 The senior officer with the fire department will assist and advise the emergency management director concerning hazardous materials incidents.

V. DIRECTION AND CONTROL

A. A disaster or potential disaster that generates a requirement for protecting people from a harmful environment will activate the EOC of the affected jurisdiction.

B. Situation analysis, planning, policy making, coordination, direction, and control for in-place shelter will be carried out from the EOC of the affected jurisdiction.

VI. CONTINUITY OF GOVERNMENT

A. The line of succession for the evacuation and in-place sheltering section will be from the Mayor, Presiding Commissioner or their designee. Lines of succession for the supporting sections are provided in the corresponding Annexes of this plan.

B. If populations are evacuated to a neighboring jurisdiction, a local official from the evacuated area will be designated as liaison between the hazard and reception area. The evacuees will be subject to the laws of the reception area for the duration of their stay.

C. Preservation of records will be a major priority during an evacuation. Resources will be allocated to move vital government records as necessary.

VII. ADMINISTRATION AND LOGISTICS

A. Each jurisdiction is responsible for procurement of its own essential supplies needed for evacuation operations, through normal channels.

B. Requisition of privately-owned property will be in accordance with the provisions of Chapter 44, RSMo.

VIII. ANNEX DEVELOPMENT AND MAINTENANCE

It is the responsibility of the Joplin and Jasper County Emergency Management Director to maintain and update this Annex.

APPENDICES

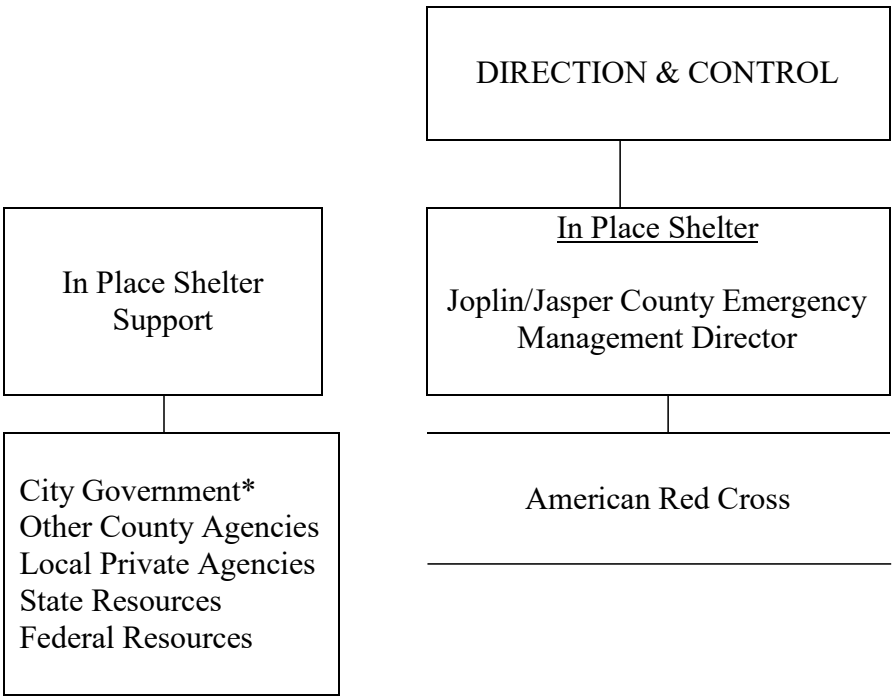
1. In-Place Shelter Organization Chart

2. All Hazard In-Place Protective Shelter Planning

3 List of ARC Shelters

Appendix 1 to Annex K

IN-PLACE SHELTER ORGANIZATIONAL CHART



* The governments of the various municipalities must perform the basic tasks of shelter lodging, traffic control, shelter stocking, etc. as are described in this annex. Because this is a "National Emergency" all actions of this nature must be coordinated at a central point which in the case of Missouri is at the county level. The county will provide technical assistance, material support, and contact with the NEXT UP authority. This is the procedure as is outlined in the State of Missouri Emergency Operations Plan.

Appendix 2 to Annex K

ALL HAZARD IN-PLACE PROTECTIVE SHELTER PLANNING

I. HAZARDOUS MATERIALS INCIDENT

A. In a chemical emergency where air safety is affected, in-place protection keeps people inside a building, and out of danger. People should either stay within the building they are already in or seek shelter in the nearest building. In some cases, in-place protection is the safest defense.

B. At the time of an emergency involving a chemical release, the local authorities will be in command of the situation. It will be their responsibility to order either in-place protection or evacuation.

C. Local officials (i.e., police, fire, emergency management) will keep the public advised of the situation. Information will be broadcast over radio or television. Full instructions will be given including information on reducing air flow into the structure, as well as when it is safe to go back outside.

II. TORNADO

A. The National Weather Service monitors atmospheric conditions and issues weather forecasts. When threatening conditions are detected, the Weather Service will issue either a tornado watch to indicate when conditions are favorable for tornadoes to develop, or a tornado warning when a tornado is indicated by radar.

B. The burden of heeding warnings and taking proper action rests with individual communities and citizens. Local emergency management agencies have developed effective community warning systems, outdoor warning sirens, tone alert monitors, cable service override, and utilization of the news media.

C. Although there is no guaranteed safe place during a tornado, some locations are better than others. The safest place in the home is the interior part of the basement, preferably under something sturdy, like a table. If a basement is not available, an inside room on the lowest floor, like a closet or bathroom with no windows, should be used. Public buildings, schools, nursing homes, etc., have designated shelter locations.

Information on in-place sheltering for Jasper County is on file with the Joplin-Jasper County Emergency Management Director.

Appendix 3 to Annex K
America Red Cross Shelters

Shelter Name	Physical Street Address 1	Physical City	Physical State	Physical County/Parish	Physical Zip
Carl Junction High School	813 W. WALNUT	CARL JUNCTION	MO	JASPER	6483
PEACH LUTHERAN CHURCH ELCA	2002 S. WISCONSIN	JOPLIN	MO	JASPER	6480
PLEASANT VALLEY ELEMENTARY	8236 COUNTY RD # 180	CARTHAGE	MO	JASPER	6483
WEBB CITY MIDDLE SCHOOL	608 W. AYLOR	WEBB CITY	MO	JASPER	6487
CARTHAGE HIGH SCHOOL	1545 River St	CARTHAGE	MO	JASPER	6483
Carl Junction Intermediate School	302 S Broadway Ave	CARL JUNCTION	MO	JASPER	6483
CARTHAGE JR. HIGH SCHOOL	306 Keeney Dr	CARTHAGE	MO	JASPER	6483
CARTHAGE VOCATIONAL CENTER	609 S. RIVER ST.	CARTERVILLE	MO	JASPER	6483
Carterville Elementary	210 E. HALL ST.	CARTERVILLE	MO	JASPER	6483
CHRIST CHURCH OF ORONOGO	22145 KAFIR RD.	ORONOGO	MO	JASPER	6485
COLUMBIA ELEMENTARY	1015 W. MACON	CARTHAGE	MO	JASPER	6483
FAIRVIEW ELEMENTARY	1210 E. FAIRVIEW AVE.	CARTHAGE	MO	JASPER	6483
FIRST BAPTIST CHURCH	102 S. 17TH	SARCOXIE	MO	JASPER	6486
FIRST CHURCH OF NAZARENE	2000 GRAND ST.	CARTHAGE	MO	JASPER	6483
FIRST COMMUNITY CHURCH	2007 E. 15TH ST	JOPLIN	MO	JASPER	6480
FIRST BAPTIST CHURCH	102 N. ROANE	WEBB CITY	MO	JASPER	6487
HARRY S. TRUMAN SCHOOL	96 & D HWY	WEBB CITY	MO	JASPER	6487
MARK TWAIN ELEMENTARY	1435 S. MAIN ST	CARTHAGE	MO	JASPER	6483
MARK TWAIN SCHOOL	1427 W. TAYLOR ST	WEBB CITY	MO	JASPER	6487
OZARK CHRISTIAN COLLEGE	1111 N. MAIN ST	JOPLIN	MO	JASPER	6480
SARCOXIE MIDDLE & HIGH SCHOOL	101 S. 17TH ST	SARCOXIE	MO	JASPER	6486
SOUTH JOPLIN CHRISTIAN CHURCH	1901 PEARL AVE	JOPLIN	MO	JASPER	6480
STEADLEY ELEMENTARY	1814 W. FIR RD.	CARTHAGE	MO	JASPER	6483
Thom Station Community Church	27345 FIR RD	CARL JUNCTION	MO	JASPER	6483
WEBB CITY HIGH SCHOOL	621 N. MADISON	WEBB CITY	MO	JASPER	6487
Webb City Jr High School	807 W. 1ST ST	WEBB CITY	MO	JASPER	6487
WILDWOOD ELEMENTARY	214 S. 11TH ST	SARCOXIE	MO	JASPER	6486
EUGENE FIELD SCHOOL	510 ORONOGO	WEBB CITY	MO	JASPER	6487
Salvation Army	125 East Fairview	CARTHAGE	MO	JASPER	6483
First United Methodist Church	501 W. 4th Street	JOPLIN	MO	JASPER	6480
St. Pauls United Methodist	2423 W. 26th	JOPLIN	MO	JASPER	6480
Harmony Baptist	2025 Indiana	JOPLIN	MO	JASPER	6480
Fairview Christian Chruch	2210 Grand Ave	CARTHAGE	MO	JASPER	6483
Freeman E. Hospital	932 E. 34th St	JOPLIN	MO	JASPER	6480
Fellowship Hall	112 Webb St.	DUENWEG	MO	JASPER	6484
Old City Hall	6th & Main	JOPLIN	MO	JASPER	6480
Christian Chruch	103 Hodge	CARL JUNCTION	MO	JASPER	6483
Memorial Hall Joplin	212 W 8th	JOPLIN	MO	JASPER	6480
Forest Park Baptist Church	725 S. Highview	JOPLIN	MO	JASPER	6480
Missouri Southern State University	3950 Newman Road	JOPLIN	MO	JASPER	6480
College Heights Christian Church	4311 East Newman Road	JOPLIN	MO	JASPER	6480
Ignite Church	710 S. Maiden Lane	JOPLIN	MO	JASPER	6480
Mt. Hope Church of Christ	2830 Mount Hope Road	JOPLIN	MO	JASPER	6480
McAuley Catholic High Scool	930 South Pearl Ave	JOPLIN	MO	JASPER	6480
Souls Harbor	915 South Main	JOPLIN	MO	JASPER	6480

Attachment A
Appendix 4 to Annex L

ORGANIZATIONS THAT HAVE AGREED TO ASSIST IN RECEPTION AND CARE OPERATIONS

A. Webb City Schools, Webb City

Supt. of Schools (verbal agreement)	673-3014
Central Office, 411 Madison	673-1942
Eugene Field School, 510 South Oronogo	673-3751
Franklin School, 404 East Tracy	673-3922
High School, 621 North Madison	673-1946
Junior High School, 807 West 1st	673-1921
Mark Twain School, 1427 West Aylor	673-3754
Vocational Building, 920 West Crow	673-3073

B. Carl Junction Schools, Carl Junction

Supt. of Schools (verbal agreement)	B-	649-7026
Rt. #l, Carl Junction (home address)	H-	649-7177
Asst. Supt. of Schools, West Allen, Carl Junction		649-7251
High School, West Allen, Carl Junction		649-7011

All school buildings located on same ground and any or all could be used as needed.

C. Joplin R-VIII Schools

Supt. of Schools -- (verbal agreement with understanding that there would not be school in session and food workers employed by the school would be used.)

Board of Education, 1717 East 15th	624-3900
Joplin Junior High, 310 East 8th	781-3500
Joplin High School, 2102 Indiana	624-7500
Royal heights School, 2100 Rolla	624-3980
Stapleton School, 42nd & Main	624-3983
North Middle School, 2nd & Gray	624-3913
Duenweg School, 802 Irwin, Duenweg	624-3969
East Jr. Gymnasium, 6th & South Forest	782-3589
Duquesne School, 13th & Duquesne	624-5321

D. First Community Church, 15th & Murphy Blvd., Joplin 781-1800

E. Byers Avenue Methodist, 1730 Byers, Joplin 624-3647

F.	First Methodist, 4th & Byers, Joplin	623-2796
G.	First Presbyterian Church, 509 Pearl, Joplin	624-2433
H.	First Presbyterian Church, Broadway & Ball, Webb City	673-2729
I.	First Christian, Sheridan & Hodges, Carl Junction	649-7200

ARC West-East Missouri Regions Chapters 10-21-14.pdf - Adobe Reader

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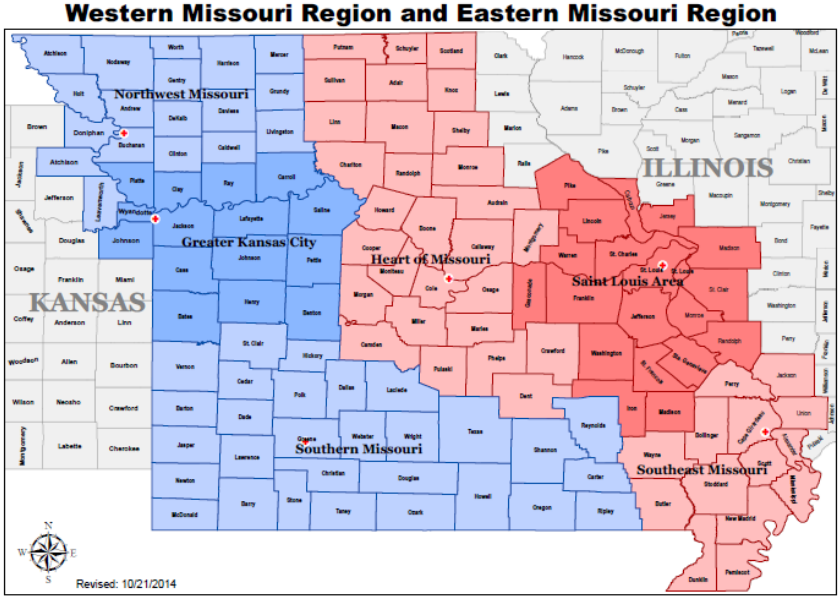
American Red Cross

Western Missouri Region and Eastern Missouri Region



Appendix 5 to Annex L

VETERINARIANS / BOARDING FACILITIES

Care Animal Hospital — James W. Hall, DVM
West Highway 66 — 624-9051
Joplin, MO

Animal Clinic — Steve Walstad, DVM
7th & New Hampshire — 623-6433
Joplin, MO

Companion Animal Hospital — Kent Arnold, DVM
34th & Main — 623-2032
Joplin, MO

Carthage Animal Hospital
2213 Fairlawn Drive — 358-4919
Carthage, MO

Cornerstone Animal Hospital — Rebecca Conrad, DVM
32nd & Rangeline — Donald Loden, DVM
Joplin, MO — 623-3080

Academy Animal Hospital — Mark Storey, DVM
15th & Virginia — Robert Zwiesler, DVM
Joplin, MO — 780-8681

Joplin Veterinary Hospital — Linda Shilling Scorse, DVM
3636 East 7th — 623-5288
Joplin, MO

Madison Animal Clinic — V. J. Capron, DVM
1631 Madison — Dan Houser, DVM

Webb City, MO 673-2455

Main Street Pet Care
21st & Main
Joplin, MO
Ben Leavens, DVM
782-7387

Parkview Animal Hospital
2508 Maiden Lane
Joplin, MO
Jim Christman, DVM
Stephanie Watson, DVM
Kristy Vanaken, DVM
781-0906

ANNEX L

RECEPTION AND CARE
ESF-6

I. PURPOSE

This annex will establish an organization and procedures to provide for the temporary reception and care of people, including those with access and functional needs, with or without disabilities, who become displaced or evacuated from their residence because of an emergency or disaster situation. The Reception and Care Function is also commonly known as "Mass Care."

II. SITUATION AND ASSUMPTIONS

A. Situation

1. Localized temporary evacuation within Joplin-Jasper County is possible because of the various hazards that could confront the general population, thus requiring the implementation of Reception and Care operations and the use of public shelters. These hazards include flooding, tornadoes, hazardous materials incidents, etc.

2 Facilities are available in Joplin-Jasper County and its municipalities to temporarily shelter and feed those persons evacuated or displaced by an emergency or disaster. (See Appendix 2 to this Annex).

3. Outside assistance is available from both private and governmental sources.

4. Individuals living in a variety of situations in the community will require care, most will be able to evacuate and exist in a general population shelter, but some may require access and functional need support services. Individuals within a community may have access and/or functional needs. Many individuals will be able to evacuate and seek assistance in a general population shelter. Some individuals may require functional needs support services to maintain a reasonable level of independence within a general population shelter or other emergency support venue.

5. Pre-Event planning should include representation of the populations within Joplin-Jasper County**,** including but not limited to the following populations: children; blind/low vision; deaf or

hard of hearing; seniors; individuals with sensory, intellectual, or developmental disabilities; individuals with limited or low English proficiency; individuals using bariatric equipment; individuals who use mobility aids; individuals representing a low socio-economic status; visitors; individuals with chronic medical conditions; individuals with behavioral or mental health concerns; individuals with cultural differences; individuals who are assisted by service animals and/or Personal Assistance Services (PAS), etc.

6. Reception and care (or mass care) includes sheltering, feeding and distribution of relief supplies (refer to Annex U - Donations and Volunteer Management). These services must be available to the whole community including those with access and functional needs.

B. Assumptions

1. Affected persons will respond as directed by local government officials.

2. Generally, a percentage of the evacuees will stay with friends or relatives.

3. All persons or groups who control or own potential shelters that were pre-identified by mass care partners will cooperate and make their facilities available through coordination with mass care officials.

4. Assistance by relief agencies along with assistance from outside the county will be available if required and/or requested.

5. While not all evacuees will require support services, it is assumed that one in six evacuees will need assistance. This number may increase due to changes and challenges to the health of the evacuee during the course of the evacuation and/or sheltering.

6. All medical facilities (hospitals, long term care facilities, etc.) are encouraged to have an emergency plan and means to transport and care for persons in their facilities during an evacuation event.

7. Following an event, anxiety and confusion are expected and normal reactions to an abnormal event. Some individuals suffering acute reactions or exacerbated chronic conditions may require medical and/or psychological intervention; most will apply

existing coping skills. Natural and pre-existing support systems will continue to support those individuals.

8. It is assumed that people will take responsibility for themselves to the extent they are able in the event of an emergency.

III. CONCEPT OF OPERATIONS

A. General

1. Local government has the responsibility for providing reception and care services.

2. Reception and Care operations will be directed and controlled by the Joplin-Jasper County Emergency Healthcare Coalition (J/JC-EHC. Operations will be directed and coordinated from the primary Emergency Operation Center (EOC) or a facility designated at the time reception and care becomes necessary through coordination with identified Non-Governmental Organizations.

3. Support to Reception and Care operations will be provided by other county and/or city departments/agencies as required and private or non-profit relief organizations as available. Such support would include law enforcement, public information, communication between shelters and the EOC, mass feeding, temporary housing, handlers for pets/service animals, etc.

4. The role of local government will be to:

   a. Monitor Reception and Care operations and provide coordination.

   b. Assist in locating and opening accessible general population shelter(s).

   c. Assist in locating animal shelters – preferably in close proximity to general population shelter(s).

   d. Identify staff, supplies and other resources that will support functional needs support services in the general population shelter(s).

   e. Provide resource assistance.

5. The Emergency Management Coordinator will assist the Reception and Care Coordinator (also known as the Local Mass Care Coordinator or LOMACC) in coordinating:

    a. Emergency mass feeding operations.

    b. Assigning and managing reception and care center/shelter teams.

6. Reception and Care Coordinator will:

    a. Seek expertise in public health related aspects of shelter management.

    b. Work with voluntary organizations to supply general shelter management expertise and assist in registration and tracking of shelter occupants.

    c. Provide appropriate food services accommodations, entertainment opportunities, and other general shelter management activities in an integrated and inclusive setting.

    d. Provide appropriate information for disaster survivors using a variety of communication methods in the general population shelter(s) and other reception and care operations.

    e. Ensure appropriate accommodations for individuals who use support services provided by a service animal.

    f. Develop resource lists to include a variety of menu items to meet the needs of individuals with dietary restrictions, such as allergies, and infant supplies.

7. Shelters are refuges of last resort to maintain the current health, safety and well-being of the population. It is important to co-locate individuals with their caregivers or family members and provide appropriate care for companion pets and service animals.

8. Populations who may evacuate and/or seek assistance at a general population shelter may include:

    a. Persons who require functional need support services or Personal Assistance Services (PAS).

b. People who require transportation assistance for evacuation.

c. Children under 18 years of age, without adult supervision.

d. Persons with physical, sensory, psychiatric, intellectual or developmental disabilities.

e. Persons requiring assistance with medical care administration, persons dependent on equipment (including dialysis, oxygen, etc.), persons who need assistance with medication(s), and/or persons who have behavioral or mental health disorders.

f. Persons residing outside of a medical or long-term care setting who require extensive medical oversight (i.e., intravenous chemotherapy, ventilator, life sustaining medical equipment, etc.)

9. Care for persons in institutional settings such as hospitals, long-term care facilities, assisted living facilities and state schools, should be provided by the institution. Aforementioned facilities should:

a. Pre-identify and secure transfer agreements with appropriate alternate facilities.

b. Obtain adequate and appropriate transportation resources for transporting patients/residents to alternate facilities.

c. Maintain a roster of patients/clients requiring support services and/or medical assistance. The roster should include detailed transportation requirements as well.

d. Prepared to continue serving clients, patients and residences in the general population shelter(s) by providing appropriate staff and resources to the facility where clients are being sheltered.

e. Communicate with patients/clients the plan for continuation of care in general population shelter(s) and necessary transportation assistance.

10. Transportation to aid in evacuation to the shelter may include mass transit (accessible buses/vans, trains, airplanes), personal automobiles, ground or air ambulance. Any transportation resource should be accessible for individuals with access or functional needs.

11. Response to an event will require active collaboration between health care providers, law enforcement, emergency management, mass care providers, and other community partners.

12. Available local and regional resources will be used to the extent possible to meet the needs of the population in the shelter, including those with access and functional needs. Accurate and detailed records and supporting documentation will be maintained to document resource expenditures.

13. Activities of Reception and Care operations will be documented and reported in the after-action report for evaluations.

B. Actions to be Taken by Operating Time Frames

1. Mitigation

a. Identify suitable shelters to protect people from risk conditions assumed and accessible to all individuals seeking shelter. Maintain current records on facility locations, capacity, feeding capabilities, ownership, and contact person, etc. (see Appendix 2 to this Annex).

b. Work with supporting county/city departments and private relief agencies to develop Reception and Care Standard Operating Guides (SOG) that establish registration procedures, develop necessary registration forms, etc.

c. Identify facilities appropriate for mass feeding.

d. Identify populations potentially requiring functional needs support services and begin preparedness activities that address such needs.

e. Recruit and enlist other organized groups (religious, civic, fraternal, etc.) to assist in Reception and Care operations.

f. Provide necessary training for Reception and Care personnel.

g. Maintain a list of potential sources of supplies such as cots, blankets, food, eating utensils, etc.

h. Develop procedures to allocate people to lodging and feeding facilities.

i. Develop methods for managing reception and care activities (registration, staffing, lodging, feeding, pertinent evacuee information, etc.).

2. Preparedness

a. Analyze pending emergencies and alert appropriate Reception and Care personnel and/or groups and organizations.

b. Establish contact with shelter facility owners/operators to determine the availability of pre-identified shelters.

c. Develop, review, and update resource inventories on an annual basis.

d. Assist in identifying resource and capability shortfalls and initiate corrective action.

e. Ensure forms are ready for registration.

f. Report the situation status of Reception and Care operations.

g. Participate in tests, exercises, and drills.

h. Identify facilities within commuting distance of the hazardous area for essential workers and their families if appropriate.

i. Identify facilities appropriate for sheltering pets and agencies capable of providing assistance.

j. Identify functional needs support services and animal care functions that may be necessary at mass care facilities.

k. Perform pre-disaster outreach to the public.

l. Partner with community organizations to identify the needs of the entire population, who may assist with any needs that may arise during an evacuation, feeding, or sheltering operation.

m. Perform pre-disaster outreach of all transportation resources in the area including accessible vehicles, public buses, and faith based owned vehicles, and include any commitments of those resources that may already exist.

n. Establish proper registration processes for shelter residents to ensure those with access and functional needs are identified for proper support in shelter, or appropriate medical referral is made.

o. Develop or update risk communications plans to include methods of communication for all populations. Determine how persons within Joplin-Jasper County will be notified of an emergency and how they can reach mass care services. Ensure communication is available in a variety of formats; including but not limited to, appropriate communication for individuals who are deaf and/or hard of hearing, individuals who are blind or have low vision, individuals with limited English proficiency, etc.

p. Provide resources to train workforce in local community.

q. Ensure appropriate worker protection.

r. Conduct briefings and/or workshops for responders to ensure they understand assignments and responsibilities.

3. Response

a. Open shelters and activate personnel to staff them as required by the situation. Upgrade shelters if necessary and where appropriate.

b. Contact appropriate support partners in accordance with established guidelines.

c. Provide listing of shelters that have been activated to Direction and Control and the Public Information Officer (PIO) for release to the news media and a variety of other communication outlets to ensure the entire community population, including individuals with access and functional needs, with or without disabilities, has access to the message.

d. Register evacuees, assign shelters, and maintain listing of shelter population.

e. Urge residents to share homes with evacuees (if applicable).

f. Conduct or assist private or non-profit agencies with feeding operations.

g. Provide for rescue, care, shelter and essential needs of household pets/service animals owned by disaster survivors. Provide these services in preparation of a notice event, and during and following all disaster events.

h. Provide functional need support services in the general population shelter, at feeding sites, and during the evacuation process.

i. Monitor sheltering operations to ensure an even distribution of survivors to all shelters.

j. Provide an information service for survivors needing additional services (i.e., locating and reuniting them with their families/relatives).

k. Compile records for use in Damage Assessment and recovery (i.e., statements of charges for supplies, damage to shelter, problems encountered with survivors, etc.).

l. Maintain contact and coordination with the EOC.

m. Track and report resources committed and expenditures of administrative and fiscal assets.

4. Recovery

a. Maintain level of Reception and Care operations as required by the situation.

b. Continue to assist in locating and reuniting survivors and their relatives.

c. Assist as required in the administering of federal and state disaster assistance.

d. Provide community resources to assist in the provisions of disaster assistance to disaster survivors. This may be done through a Multi-Agency Resource Center and/or the work of a Community Organizations Active in Disaster, Long Term Recovery Committee or Unmet Needs Committee established by local organizations.

IV. ORGANIZATION AND ASSIGNMENT OF RESPONSIBILITIES

A. Organization

The organizational chart for the reception and care function is shown in Appendix 1 to this annex.

B. Assignment of Responsibilities

1. Overall responsibility for reception and care operations rests with local government. The J/JC-EHC has been assigned joint responsibility for Reception and Care operations in Joplin-Jasper County.

2. The Reception and Care coordinator is responsible for ensuring necessary plans and procedures are developed to enable capabilities for Reception and Care operations which will include shelter operations, feeding operations, and bulk distribution operations. All Reception and Care operations, including but not limited to shelter and feeding, will meet the needs of the community's population, including individuals with access and functional needs, with or without disabilities, in an inclusive and integrated setting.

3. Supplies and other resources will be the responsibility of the Resource and Supply section. An effort should be made to pre-identify the type of supplies that will be needed and potential vendors for procurement of the supplies. Types of vendors may

include: restaurants, grocery stores, consumable medical supply providers and durable medical equipment providers.

4. Medical care and public health measures in the shelters will be provided in coordination with the Health and Medical section. Support services being provided in a general population shelter, fixed or mobile feeding site, or during an evacuation process, should be provided in an inclusive manner and include multiple ways of access to the services to ensure all individuals receive equal care.

5. Communications will be provided by the Joplin-Jasper County Sheriff's Department and the various police departments in the county. Accessible communication will be made available in multiple formats, such as Braille, symbols, alternate languages, etc.

6. Clerical support for compiling data will be provided by the Joplin-Jasper County Emergency Management Office.

7. Missouri Voluntary Organizations Active in Disaster (MOVOAD organizations, including but not limited to, the Humane Society of Missouri and the Missouri Veterinary Medical Association will assist with providing for animal needs outlined in this Annex.

   a. The Humane Society of Missouri will coordinate rescue, care and shelter for household pets and service animals owned by disaster survivors.

   b. The Missouri Veterinary Medical Association will assist with communication and coordination of private sector veterinarians.

8. The local Center for Independent Living and Community Organizations Active in Disasters (COAD) will assist with providing functional needs support services.

V. DIRECTION AND CONTROL

A. Direction and control of Reception and Care operations will vary according to the extent of the disaster or emergency situation. In a large-scale disaster, operations will be coordinated from the primary EOC.

B. A Local Mass Care Coordinator/Reception and Care Coordinator is appointed and works in coordination with emergency management, the American Red Cross and other state and community partners.

C. In a limited disaster or emergency situation, Reception and Care operations will be controlled from normal day-to-day office locations if possible, or at a site designated at that time.

D. All requests for outside assistance will be made by the EOC.

VI. CONTINUITY OF GOVERNMENT

A. The line of succession for each operating reception and care organization/agency will be as explained in the standard operating guidelines established by each organization/agency.

B. Records of actions taken, and resources expended will be maintained in the EOC and will be transferred with the EOC should it be moved.

VII. ADMINSTRATION AND LOGISTICS

A. Administration

1. Reception and Care personnel will be proficient and utilize the National Shelter System through cooperation with the American Red Cross and WebEOC. Necessary forms will compile essential information to include:

   a. A record of shelters used (including name of owner/operator).

   b. Number of people sheltered.

   c. Number of meals served.

   d. Public information releases.

   e. Supplies ordered and receipts for all goods procured or donated.

   f. Any damage to shelters.

   g. Shelter registration forms (see sample in Appendix 3 to this Annex.)

2. Procedures should be developed for using all computer applications, forms, compiling information, and providing data to the EOC.

3. Shelter management training should be coordinated with the American Red Cross and other mass care provider organizations in order to train a small cadre of managers.

B. Logistics

1. If possible, procurement of necessary supplies will be accomplished through normal acquisition channels. These channels include the American Red Cross, other mass care partners and local government (i.e., local jurisdiction EOC).

2. During unusual or life-threatening situations, normal purchasing procedures may be set aside, and emergency procedures as set forth in local jurisdictions orders and/or City ordinances will be implemented.

3. Local firms will be given preference when contracting for resources to cope with an emergency situation.

VIII. ANNEX DEVELOPMENT AND MAINTENANCE

A. Completed annually by the Reception and Care Coordinators or Local Mass Care Coordinator) in cooperation with the Joplin-Jasper County Emergency Management Coordinator.

Appendices

1. Reception and Care Organizational Chart

2. Reception and Care Facilities & Resources

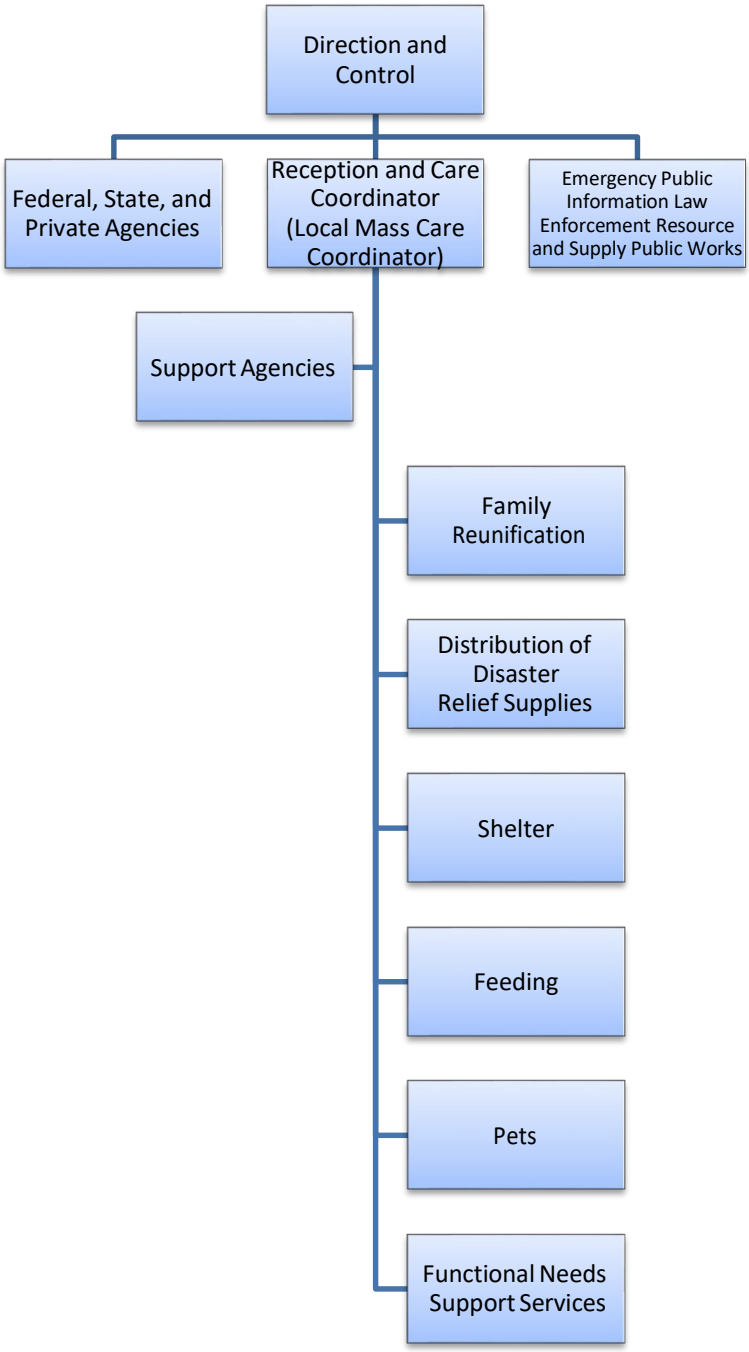
3. Sample Shelter Registration Form

4. Pets in Disaster Standard Operating Guide

Appendix 1 to Annex L

RECEPTION AND CARE ORGANIZATIONAL CHART

Reception and care operations will depend largely upon the cooperation of shelter facility owners, faith-based organizations, civic, and voluntary organizations.



Appendix 2 to Annex L

RECEPTION AND CARE FACILITIES & RESOURCES

In an emergency, which results in a limited amount of people being evacuated, the American Red Cross and Salvation Army have identified the following ADA compliant facilities as potential general population shelters and mass feeding sites in Joplin-Jasper County.

FACILITIES:

1. Per American Red Cross Registration List

2.

3.

4.

5.

6.

RESOURCES:

American Red Cross
http://www.redcross.org

Convoy of Hope
http://www.convoyofhope.org

Humane Society of Missouri
http://www.hsm.org

Governor's Faith-Based and Community Service Partnership for Disaster Recovery
http://www.sema.dps.mo.gov/thepartnership

Missouri Voluntary Organizations Active in Disasters (MOVOAD)
http://movoad.org

Salvation Army
http://www.salvationarmy.usa.org

Missouri Embalmers and Funeral Directors
embalm@pr.mo.gov
http://pr.mo.gov/embalmers.asp

Missouri Southern Baptist Convention
http://mobaptist.org/dr

Missouri Statewide Independent Living Council
http://www.mosilc.org

Missouri Veterinary Medical Association
http://www.mvma.us

United Methodist
http://www.umcor.org

University of Missouri Extension
http://outreach.missouri.edu

(ADD MORE FOR YOUR JURISDICTION – AS APPLICABLE)

Appendix 3 to Annex L

SAMPLE
SHELTER REGISTRATION FORM

FAMILY NAME _____

HOME ADDRESS _____

FIRST NAMES	AGE	SEX	OCCUPATION	OTHER SKILLS	ADDITIONAL INFORMATION
1. Head of family					
2.Others					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

ASSIGNED SHELTER _____

Appendix 4 to Annex L

PETS IN DISASTER
STANDARD OPERATING GUIDE
THE HUMANE SOCIETY OF MISSOURI

1. Coordinate shelter facilities using available facilities, confinement areas or develop temporary shelter areas in cooperation with local jurisdictions based on Humane Society of Missouri (HSM) standard operating guideline.

2. Coordinate the animal medical service needed for animal shelter and confinement areas based on HSM's standard operating guideline.

3. Coordinate disposition of unclaimed animals and shelter overflow based on HSM standard operating guideline.

4. Coordinate efforts to rescue and capture animals including relocation before the disaster.

5. Coordinate with local agencies to establish a system to register identification data in an effort to reunite animals with their owners based on HSM's standard operating guideline.

6. Track animal rescue and capture activities based on HSM's tracking system and information provided by local jurisdictions.

7. Track activities of animal shelter and confinement facilities based on HSM's tracking system and information provided by local jurisdictions.

8. Coordinate volunteer services for animal rescue, shelter and health care based on HSM's standard operating guideline.

9. Coordinate storage and distribution of animal food, water and medical supplies with the EOC.

10. Coordinate the consolidation or closing of animal shelters or confinement areas, personnel and supplies as the need diminishes.

11. Coordinate with Donations/Volunteer Management to provide water, food, shelter and other physical needs to animals; and store and distribute animal food and medical supplies to the requesting jurisdiction.

ANNEX – M / ESF-8
Health and Medical Services

I. LEAD [PRIMARY] AGENCIES

a.) Jasper County Health Department
b.) City of Joplin Health Department
c.) Jasper County Coroner's Office
d.) Freeman Health Systems
e.) Mercy Hospital (Joplin and Carthage)
f.) Jasper County Emergency Management

II. SUPPORT AGENCIES

a.) Jasper County Sheriff's Department
b.) Joplin Police Department
c.) Joplin Fire Department
d.) Jasper County Fire Departments
e.) Metro Emergency Transportation Services (METS)
f.) Carthage Ambulance Service
g.) Newton County Ambulance District
h.) Med-Flight Air Ambulance Medical Services
i.) Mercy Lifeline Air Ambulance
j.) Jasper County Communications Agencies
k.) Jasper County Public Information Agencies
l.) Jasper County Public Works Agencies
m.) American Red Cross, Southwest Missouri Chapter (Springfield)

III. INTRODUCTION

1. Purpose

a.) Public Health Emergency Support Function #8 (ESF-8) – *Health and Medical Services* provides coordinated local assistance to supplement jurisdictional resources in response to public health and medical care needs following a minor/major disaster or emergency, or during a developing potential medical emergency.

The Jasper County Health Department/City of Joplin Health Department will coordinate the management of ESF-8 functions in Jasper County (initially),

depending on the size of the event, at their respective Health Department Operations Centers (DOC's). As the event escalates, and gets larger, senior staff personnel will move to the County Emergency Operations Center (EOC) in Joplin, and each health department will maintain personnel at their respective DOC's to continue running their own field operations.

b.) ESF-8 *Public Health and Medical Services* will partner with the ESF-6 *Mass Care* team(s) to support all individuals and organizations regarding mass care services (including sheltering), that may be required to support disaster response and recovery operations in the Jasper County area.

c.) Another purpose of ESF-8 is to establish a program that ensures that the care and sheltering needs of domestic pets is met following a disaster (or animal health emergency). (Refer to the Animal Services Plan Appendix to the Local Emergency Operations Plan (LEOP) Annex-M [ESF#8], for more information). [Other surrounding areas and communities may have their own animal control plans, as well as animal sheltering facilities for dealing with domestic animals during emergencies].

d.) Refer to the Mortuary Services Guide (Apx-4), for more information about the operations of mortuary services and mass fatality issues, as well as the Jasper County Coroners Plan. [Refer to Local Public Health Emergency Plan (LPHEP) Annex-J, ("Mass Fatality Management")]

2. Scope

a.) ESF-8 involves supplemental assistance to jurisdictional governments in identifying and meeting the health and medical needs of victims of a minor/major disaster, emergency, or terrorist-related attack. This support is categorized in the following functional areas:

1.) Assessment of health / medical needs.
2.) Organizational and intra / inter-jurisdictional relationships.
3.) Health surveillance and epidemiological investigation.
4.) Prevention and control practices / Vector Control.
5.) Communications / notifications.
6.) Mass Prophylaxis / Vaccinations (as required).
7.) Public health information (mass health communications).
8.) Limitation on movement.

9.) Assisting in controlling patient loads at local hospitals.

10.) Importing medicines, medical professionals, or supplies into the affected area.

11.) Establishing temporary morgues.

12.) Performing forensic examinations and completing victim identification.

13.) Coordinating mortuary services and the disposition of remains.

14.) Worker Health and Safety.

15.) Veterinary Services / Animal Control Services.

16.) Offering crisis counseling and organizing disaster assistance teams.

3. Policies

a.) ESF-8 will be implemented following the occurrence of a major disaster or emergency, and after the County Commission and/or the Joplin City Council has determined that a response is warranted.

b.) The Jasper County Health Department / City of Joplin Health Department are responsible for activating and coordinating the activities of ESF-8 within their jurisdictional area(s) and activating and coordinating the National Incident Management System (NIMS) / Incident Command System (ICS) operations, upon the declaration of a regional public health emergency (PHE). Together, they will work with other local health departments in Southwest Missouri under existing Mutual Aid Agreements and Memorandums of Understanding.

c.) The Public Information Officer (PIO) can be the primary source of public health response/information for city/county officials involved with the response operation. The Jasper County and the City of Joplin Public Health Departments will (initially) coordinate medical response/information through each Health Departments Operations Center (DOC), until the Public Information Joint Information Center (JIC) is activated.

d.) Any requests for recurring reports of specific types of public health and medical information will be submitted to the PIO. The Health Department Director or Administrator), will release approved general medical and public health response information to the PIO at the direction of the Incident Commander (IC), at the Emergency Operations Center (EOC).

e.) All county and local organizations participating in response operations should report the need for any public health and medical requirements to their counterparts at the Regional, State, or Federal level.

f.) To ensure patient confidentiality protection and to conform to Health Improvement Portability and Accountability Act (HIPAA), there will be no release of medical information on individual patients to the public.

IV. SITUATION

a.) According to the 2020 census, the population of Jasper County is roughly 122,750. The highest concentration of residents live/work in and around the city of Joplin.

b.) Disasters occurring in Jasper County typically impact community health standards and require a medical response, wastewater, solid waste, potable water, and health services are commonly affected. This necessitates health advisories and interventions, including disease control management.

c.) A significant natural disaster or man-made event that overwhelms the affected jurisdiction would necessitate both a public health response and medical care assistance. Hospitals, nursing homes, ambulatory care centers, pharmacies, and other facilities for medical/health care and special needs populations may be severely structurally damaged or rendered unusable or only partially usable because of a lack of utilities (power, water, or sewer), or because staff are unable to report for duty because of personnel injuries and/or damage/disruption of communications and transportation systems.

d.) Uninjured persons who require daily or frequent medications or treatments may have difficulty in obtaining these resources because of damage/destruction of normal supply locations and general shortages within the disaster area. Appropriate information about patients will be shared with the ESF-6 team *("Mass Care, Housing and Human Services")* for inclusion in the American Red Cross "Safe and Well" web site, which is the primary tool used as the Disaster Welfare Inquiry System.

e.) Medicines and supplies will be provided from existing, State-Managed Inventories whenever possible. Procurement will be conducted in accordance with Federal and State laws and regulations, including provisions for emergency procurement and no-bid contracting.

f.) In certain other disasters, there could be a noticeable emphasis on relocation, shelters, vector control, as well as restoring water, wastewater, and solid waste facilities to operation.

g.) A major medical and environmental emergency resulting from a Chemical, Biological, Radiological, Nuclear or Explosion (CBRNE) event, could produce a large concentration of specialized injuries and problems that could overwhelm the public health and medical care system.

h.) The Jasper County and the City of Joplin Public Health Departments provide a county-wide coordination for public health-related issues during emergencies. If resource capabilities are exceeded during emergencies they may request mutual aid from other jurisdictions within the region. If capabilities remain exceeded, state support from ESF-8 (through the Jasper County EOC) would be requested.

i.) The hospitals provide county-wide coordination for emergency medical issues in Jasper County and will coordinate requests for medical assistance from various localities around the county during emergencies. As emergencies grow and get more complex, these coordination efforts will be handled through the Jasper County Operations Center (EOC)

j.) Local Jurisdictions in Jasper County have primary responsibility for delivering emergency medical and mass casualty services during an emergency. Local EMS units are primarily located in local fire departments. EMS units may also be privately or publicly owned. (See *ESF #4 Firefighting/Emergency Medical Services* for further details).

V. ASSUMPTIONS

1.) Local Hospitals and the Jasper County and the City of Joplin Public Health Departments, will coordinate the status of communicable disease emergencies, and the need for assistance for public health issues.

2.) Disasters and public health emergencies may overwhelm the local health departments, the medical community, and county emergency resource capabilities. Regional, state, or federal resources may be requested if they are available.

3.) Although a primary event may not initiate a public health emergency, secondary events stemming from the initial event, may do so.

4.) Agencies tasked in this document are aware of their emergency responsibilities and will fulfill these responsibilities in an emergency.

5.) Disruption of utility services and facilities, loss of power, and massing of people in

shelters may increase the potential for disease and/or injury.

6.) Catastrophic events may require the establishment of temporary medical facilities.

7.) Local emergency operations plans and resource manuals detail specific resources in their jurisdictions.

8.) All agencies involved in the response are operating under the NIMS/ICS system.

VI. CONCEPT OF OPERATIONS

A. Overview

1.) When directed, the Jasper County Emergency Management Coordinator (EMC) will activate ESF-8 (as needed), for operations in the Jasper County Emergency Operations Center (EOC).

2.) The EMD and/or the Health Department Director/Administrator will coordinate with the on-scene Incident Commander (IC) to assess the situation, including the number of ill/injured, number of fatalities, estimated damage, and resource needs, (health/medical-related information), etc.

3.) The EMD will submit requests for county, state and/or federal emergency assistance to the Missouri (State) EOC where it is being coordinated with ESF-8 representatives.

4.) Hospitals and other medical care facilities requiring county, state and/or federal assistance will coordinate their requests through ESF-8 in the (EOC).

5.) The Jasper County Coroner has jurisdiction over the deceased and is responsible for setting up temporary morgues and coordinating with the Missouri Funeral Directors Association (MFDA), when necessary. If regional capabilities have been exhausted, the (EMD) will request additional resources from the Missouri State Emergency Management Agency (SEMA), including the Missouri Mortuary Operational Response Team (MO-MORT-1) or the local Disaster Mortuary Operations Response Team (DMORT), that may be operational.

6.) The Jasper County and the City of Joplin Public Health may request activation of the Strategic National Stockpile (SNS) from Missouri SEMA for the distribution of pharmaceutical supplies and equipment, through the Jasper County Emergency Operations Center (EOC).

7.) National Disaster Medical System (NDMS) resources can be requested in the event regional capabilities have been exceeded. (Requests are processed through ESF-8 through the Jasper County EOC and then to SEMA).

8.) When activated, NDMS will mobilize medical teams, equipment, and supplies. They will coordinate patient movement from a disaster site to unaffected areas around the region and provide definitive medical care at participating hospitals in those unaffected areas.

A. Relationships Between Levels of Government

1. Federal

(a.) Coordination with Federal ESF-8 may occur in the Jasper County EOC, Missouri (State) EOC, at the site of the emergency and/or in the Disaster Field Office (DFO).

(b.) Federal ESF-8 will support state assessment, response and recovery activities and will accept emergency requests and missions from the state ESF-8.

(c.) National assets, for example, are NDMS response teams: DMAT, National Veterinary Response Team (NVRT), and DMORT.

2. State

(a.) ESF-8 organizations maintain a working relationship throughout emergency response and recovery operations to ensure that emergency health needs are, identified, assessed, prioritized and addressed.

(b.) ESF-8 organizations will coordinate with ESF-8 organizations from adjacent States, when necessary, during emergencies.

(c.) State resources, for example, are: MO-DMAT-1, MO-DMORT-1 and Missouri Department of Agriculture response teams.

3. County / Local

(a.) Local-level emergency requests for public health or medical resources and services are communicated to the Jasper County EOC and will be directed to ESF-8 personnel for action.

(b.) Requests for assistance made by local officials to ESF-8 personnel at the site of the emergency will be coordinated with and approved by ESF-8 personnel in the Jasper County EOC before action is taken.

VII. ORGANIZATION AND ASSIGNMENT OF RESPONSIBILITIES

All ESF-8 organizations are responsible for the development of internal Standard Operating Guidelines (SOG's) or plans that support ESF-8, and EOC operations.

a.) ESF-8 organizations will be activated by the Jasper County EOC for assessment, response, and recovery operations based on the needs of the emergency.

b.) Primary and Support Agencies for the county health and/or medical functions will coordinate with each other in the Jasper County EOC and/or through the Joplin and Jasper County Departmental Operations Centers (DOC's), to ensure the most effective use of personnel and equipment, to avoid redundant activities, and to cooperate on emergency health and medical missions.

c.) The coordination of public health activities of ESF-8 for Jasper County is the responsibility of the Jasper County Health Department. The Joplin Health Department is responsible for such (ESF-8) activities in the City of Joplin. They deal with such problems as communicable disease, environmental sanitation problems, contamination of food and water, and other health-related matters.

d.) The Health Departments are the lead agencies for the medical activities of ESF-8. They will have liaisons available to staff the Jasper County EOC and work with ESF-8 support organizations in the EOC to answer the needs of affected areas throughout the various Jasper County communities, as available, during the emergency.

d.) If the local health departments become overtaxed or rendered inoperable, resources will be requested from adjacent counties and/or the state, to help alleviate the situation.

f.) <u>Assignment of Responsibility</u>:

1.) <u>Joplin Health Department /Jasper County Health Department, will</u>:

(a.) Conduct and coordinate public health assessments of conditions in the communities affected by the emergency and, where possible, determine where health problems could likely occur.

(b.) Maintain ongoing public health surveillance of affected communities/areas to rapidly identify and address public health-related problems.

(c.) Conduct and coordinate food service sanitation programs, (as needed).

(d.) Provide guidance and necessary consultation to potable and bulk water hauling contractors concerning temporary water systems and other questions and/or concerns they may have.

(e.) Provide and coordinate consultation for household sewage disposal, disaster debris disposal, housing sanitation, vector control, and public health nuisances.

(f.) Coordinate city-county response to public health problems at the Jasper County EOC throughout the assessment and response.

(g.) Assess and coordinate public health concerns regarding mass fatality efforts in affected communities.

(h.) Be available to assist with coordinating the acquisition and distribution of medical supplies and equipment (e.g., SNS, CHEMPACK, etc.).

(i.) Provide and coordinate prophylaxis, including antibiotics, antivirals, vaccines, immunizations, and testing (as needed) during the emergency. Activities will be coordinated with local fire/law enforcement agencies, as needed.

(j.) Coordinate the isolation and/or quarantine of individuals, if warranted, during any emergency medical situations, as necessary.

(k.) Working with the City of Joplin PIO, the Joplin and/or Jasper County Health Dept. PIO will coordinate public health and medical advisories with the Jasper County EOC and the Joint Information Center (JIC), if activated.

1. <u>The Southwest Healthcare Coalition (SWHCC), will</u>:

(a.) Assist in the identification and delivery of medical supplies and services during emergencies.

(b.) Assist with the coordination of local hospital resources, when requested.

(c.) Coordinate the assessment of medical needs of the affected communities.

(d.) Provide medical-related information releases to the Joint Information Center (JIC), if activated, for dissemination.

(e.) Provide research and consultation on emergency medical-related problems, as needed.

(f.) Coordinate with State and Federal ESF-8 when federal medical assistance is activated for the Jasper County area.

(g.) May assist in the activation of the National Disaster Medical System (NDMS) when activated in Jasper County.

(h.) Provide briefing information in the Jasper County EOC on countywide medical activities during emergencies.

(i.) May assist in the activation request of Alternative Care Centers and Emergency Health Centers (such as at the North Park Mall), when activated.

(j.) The Healthcare Coalition and the Hospitals have responsibility for medical surge with the county. (A mutual aid agreement exists between all the hospitals for the sharing of resources during such an event).

(k.) The hospitals can supplement internal staffing needs using the mutual aid agreement, as well as with volunteers from any (Regional) Medical Reserve Corps (MRC), that might be activated.

(l.) The region has acquired medical surge supplies in a cache that are available to supplement healthcare needs during a disaster. Sharing of lab resources exists in the Regional Mutual Aid Agreement.

2. <u>American Red Cross (ARC) Greater Ozarks Chapter, will</u>:

(a.) Provide sheltering for those families that are displaced due to the disaster, for if necessary, as well as food, medical care, clothing, etc.

(b.) Assist with finding them temporary living facilities once they can move out of the shelter.

(c.) Receive health and welfare inquiries from the public, and assist in reuniting

families through health and welfare checks, etc.

(d.) Assist in working with access and functional needs individuals in finding proper (accessible) housing for them, as well as transportation needs, as available.

(e.) Assist with stress counseling for victims and emergency workers (Critical Incident Stress Management).

(f.) Coordinate with city-county agencies for health-related and mental health-related issues in established shelters.

3. Disaster Medical Assistance Team (MO-DMAT-1) if activated, will:

MO-DMAT-1 focuses on mobile hospitals and is activated by a request of the Governor after a Federal Declaration of a Disaster is declared.

(a.) Provide medical care at a fixed or temporary medical care site.

(b.) Triage patients, as required.

(c.) Prepare patients for evacuation.

(d.) Provide primary health care, if needed.

4. Disaster Mortuary Operational Response Team (DMORT), if activated, under the direction of the Jasper County Coroner's Office, will:

(a.) Establish temporary morgue facilities or deploy Disaster Portable Morgue Units.

(b.) Assist in identification of victims.

(c.) Conduct forensic dental pathology.

(d.) Process and prepare victims for disposition.

(e.) Assist in disposition of remains.

5. Jasper County (Mental Health Services) Board, will:

(a.) Work with the Department of Mental Health Administrative Agent, the Missouri Department of Mental Health, through its Division of Behavioral Health Contacts with Community Mental Health Centers, called Administrative Agents.

(b.) The Administrative Agent for Joplin/Jasper County is:

- The Ozark Center P.O. Box 2526, Joplin, Mo. 64803
- Mr. Del Camp (417) 347-7600 or 347-7720 // Fax: (417) 347-7608
- Ms. Vicky Mieseler (417) 347-0213

(c.) Provide representatives to assist the local Mental Health Services Board and Community Mental Health Centers in giving support services and treatment to disaster victims, as requested. The Secretary for the Board works full time at the Ozark Center and part-time for the Board; her contact information is (417) 347-7600.

6. Jasper County Coroner's Office, will:

(a.) Coordinate, and within capabilities, supply personnel and materials to support mass fatality response and expanded mortuary services in affected jurisdictions.

(b.) Be responsible for the identification of remains.

(c.) Coordinate, process and prepare remains for proper disposition.

(c.) Coordinate with the Jasper County EOC, the Jasper County and City of Joplin Health Departments, and the Missouri DNR, should the decision be made for mass burial/mass internment.

7. Jasper County Developmental Disabilities Services, will:

(a.) Provide personnel, training, and services to assist local organizations in providing for the emergency needs of persons with mental disabilities and/or developmentally disabled emergency victims.

8. Jasper County Sheriff and Jurisdictional Law Enforcement Agencies, will:

   (a.) Assist in the coordination of security at hospitals and all Point of Dispensing (POD) locations, (if activated), as necessary.

   (b.) Provide traffic and crowd control at all dispensing sites and POD locations.

   (c.) Preserve evidence and investigate criminal activity.

   (d.) Work with the Jasper County and Joplin City Health Departments to enforce isolation and/or quarantine of individuals, if established.

9. Local Fire/EMS Departments, will:

   (a.) Provide EMS units that are in local fire departments and have the primary responsibility for delivering emergency medical services and mass casualty services to include triage, treatment, and transport.

   (b.) Coordinate with EMS units that may be privately or publicly owned, operated by law enforcement or military organizations.

   (c.) Maintain authority within its own jurisdiction and relay reports pertaining to casualties, illnesses, injuries, observations, evacuation status and potential resource needs to the Jasper County EOC.

   (d.) Establish staging areas, as needed, following ICS guidelines.

10. Local Hospitals, will:

   (a.) Provide medical services.

   (d.) Maintain ongoing medical surveillance of affected communities to rapidly identify and address emergency medical-related problems, in coordination with the Jasper County and Joplin City Health Departments.

   (c.) Notify the Jasper County and Joplin City Health Departments of the status of local health emergencies and the need for assistance.

   (d.) Activate (hospital) surge plans, as needed.

11. The Humane Society of Southwest Missouri; The Joplin Chapter of the American Society for the Prevention of Cruelty to Animals (ASPCA), Missouri Veterinary Medical Association (VMA), [Southern Region]; will:

    (a.) Assess medical needs of animals.

    (b.) Conduct medical treatment and stabilization of animals.

    (c.) Report any animal diseases to a zoonotic disease surveillance program.

    (d.) Provide disease surveillance and public health assessments, as requested.

12. National Veterinary Response Team (NVRT) will, under the guidance of state and/local authorities:

    (a.) Assess the veterinary medical needs of the community.

    (b.) Veterinary medical support to working animals (including horses) which might include search and rescue dogs and animals used by law enforcement, etc.

    (c.) Treatment of injured and ill (large and small animals), post disaster.

    (d.) Provide veterinary medical support for sheltered animals.

    (e.) Provide veterinary public health support including environmental and zoonotic disease assessment.

    (f.) Provide support for an outbreak in livestock and poultry (USDA led).

13. Missouri Department of Health and Senior Services (MoDHSS), will:

    (a.) Provide epidemiologic and other public health assistance, including laboratory assistance for microbiologic and chemical analysis, as requested.

    (b.) Be the lead agency for Strategic National Stockpile (SNS) management.

(c.) Provides transportation of SNS medications and supplies to Receiving, Staging & Storage (RSS) Sites for pick-up by the Jasper County and Joplin City Health Departments, for transportation to Jasper County.

14. Missouri Mortuary Operational Response Team (MO-MORT) can provide the following capabilities, (after the Jasper County EOC requests assistance from Missouri SEMA):

(a.) Search and Rescue (SAR).

(b.) Mobile Morgue Operations.

(c.) Victim Identification Center (VIC).

15. MO-DNR and the U.S. Environmental Protection Agency (U.S. EPA) will:

(a.) Coordinate drinking water, waste disposal and environmental safety information with local, county and state health departments.

(b.) Provide a listing of laboratories offering microbiological, organic, and inorganic analysis of environmental samples.

(c.) Collect multiple samples (air, soil, and water) to assess environmental impacts on the community, as needed.

(d.) U.S. EPA to provide chemical and radiological screening and air monitoring.

(e.) U.S. EPA to conduct decontamination of facilities or areas contaminated with radiation, chemical or biological agents.

16. Veterinary Medical Assistance Team (VMAT), if activated by the State, will:

(a.) Assess the medical needs of animals.

(b.) Conduct medical treatment and stabilization of animals.

(c.) Conduct animal disease surveillance.

(d.) Provide zoonotic disease surveillance and public health assessments.

(e.) Provide technical assistance to ensure food and water quality.

(f.) Conduct animal decontamination.

RESOURCE REQUIREMENTS FOR ESF - 8 "HEALTH and MEDICAL"

ESF-8 organizations will be responsible for the maintenance of their own agreements, SOPs, SOGs, MOUs and Resource Listings that document the equipment, supplies, and services available to them during emergencies. Additional support needs during an emergency may be requested through the Jasper County EOC to *ESF #7 — Resource Support*.

REFERENCE PAGE

1.	Emergency Support Function	ESF
2.	Incident Commander	IC
	(Jasper County) Emergency Management Coordinator	EMC
3.	(Jasper County) Emergency Operations Center	EOC
4.	Jasper/Newton County Emergency Healthcare Coalition	J/NC-EHC
5.	National Incident Management System/ Incident Command System	NIMS-ICS
6.	Public Information Officer	PIO
7.	Departmental Operations Center	DOC
8.	Receiving, Staging & Storage (Sites)	RSS
9.	Disaster Field Office	DFO
10.	(Public Information) - Joint Information Center	JIC
11.	Health Improvement Portability and Accountability Act	HIPAA
12.	Public Health Emergency	PHE
13.	Southwest Healthcare Coalition	SWHCC
14.	(Missouri) State Emergency Management Agency	SEMA
15.	Missouri Mortuary Operational Response Team	MO-MORT-1
16.	Missouri Funeral Directors and Embalmers Association	MFDEA
17.	Disaster Medical Assistance Team	MO-DMAT-1
18.	Disaster Mortuary Operations Response Team	DMORT
19.	National Disaster Medical System	NDMS
20.	Critical Incident Stress Management	CISM
21.	Medical Reserve Corps - (Regional and/or Local)	MRC
22.	Veterinary Medical Association	VMA
23.	Veterinary Medical Assistance (Teams)	VMA
24.	National Veterinary Response Team	NVRT
25.	Standard Operating Guidelines	SOG's
26.	Strategic National Stockpile	SNS
27.	United States Environmental Protection Agency U.S.	EPA
28.	United States Department of Agriculture	USDA
30.	Search and Rescue	SAR
31.	Victim Identification Center	VIC
32.	American Society for the Prevention of Cruelty to Animals	ASPCA
33.	Department of Natural Resources	DNR

APPENDICES

1. Health and Medical Service Organizational Chart (Apx- 1)

2. Health & Medical Services (Apx- 2)

3. County Medical Disaster Plan [on file in the Office of the EMD] (Apx- 3)

4. Emergency Mortuary SOG: (Apx- 4)

   - Attachment A -- Mortuary Resource List (Apx- 4)
   - Attachment B -- Summary of Mortuary Resources (Apx- 4)

5. Public Health Services (Apx- 5)

6. Mental Health Services (Apx- 6)

7. Local Public Health Emergency Plan – Executive Summary (Apx- 7)

8. Mass Patient Care (Apx- 8)

9. List of Hospital Bed Capacities (Apx- 9)

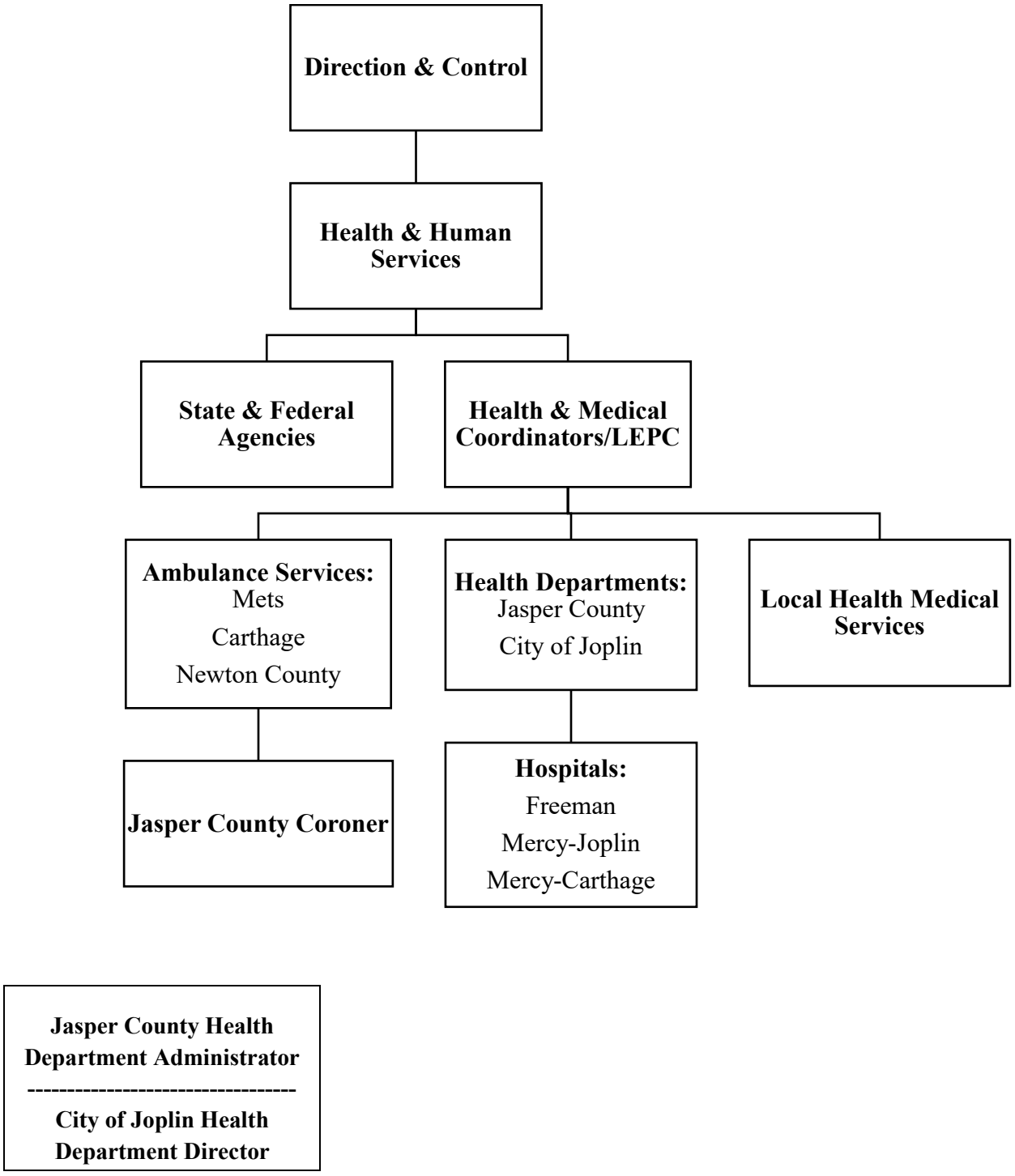
10. Non-Hospital Overflow Medical Facilities (Apx- 10)

11. Medical Sub-Committee Operating Protocol (Apx- 11)

12. Appendix – 7 to ESF – 8 (Nerve Agent / Decontamination)
    Plan/Process for Requesting CHEMPACK Medications (Apx- 12)
    (Attachment – 1 through Attachment – 8)

APPENDIX - 1

HEALTH AND MEDICAL SERVICES ORGANIZATIONAL CHART



APPENDIX - 2

HEALTH AND MEDICAL SERVICES

A. Hospitals: Licensed Beds

1. Freeman Health Systems — 444
   1102 West 32nd, Joplin
   932 East 34th, Joplin
   ER/Trauma # 625-6656

2. Mercy Hospital — 25
   3125 Dr. Russell Smith Way
   Carthage
   ER/Trauma # 359-1414

3. Mercy Hospital — 240
   100 Mercy Way, Joplin
   ER/Trauma # 625-2300

* Facilities capable of treating contaminated patients

B. Ambulance Services:

1. Metro Emergency Transportation Services (M E T S)
   625 Virginia, Joplin, Mo.
   9-1-1 EMERGENCY
   623-3347 non-Emergency

   ALS Service
   Hazardous Materials Training – Awareness Level
   # Ambulances: 9

2. Carthage Mercy Ambulance Service
   3125 Dr. Russell Smith Way, Carthage, Mo.
   9-1-1 EMERGENCY
   358-8121 non-Emergency

ALS Service
Hazardous Materials Training – Awareness Level
Ambulances: 4

3. Newton County Ambulance District
1011 W. Hill Street, Neosho, Mo.
9-1-1 EMERGENCY
451-5568 non-emergency

ALS Service
Hazardous Materials Training – Awareness Level
Ambulances: 8

4. Lifeline Air Ambulance Medical Services
Operated by Mercy Medical Center
100 Mercy Way, Joplin
EMERGENCY: 9-1-1
Non-Emergency: 800-433-5433
Service type: Rotary wing Advanced Life Support
Air Ambulance
Staffing: Consists of R.N.s and Paramedics
ALS Service
Hazardous Materials Training – Awareness Level

5. MedFlight - Owned & Operated by Air Methods Corp.
Based at Freeman Health Systems
1102 West 32nd Street, Joplin, Mo.
EMERGENCY: 9-1-1
Non-Emergency: (417) 347-5696
Service type: Rotary wing Critical Care Transport
Staffing: Consists of R.N.'s and Paramedics
ALS Service
Hazardous Materials Training – Awareness Level

APPENDIX – 3

COUNTY DISASTER MEDICAL PLAN

On file in the Office of the Emergency Management Coordinator (EMC)

APPENDIX – 4

EMERGENCY MORTUARY STANDARD OPERATING GUIDE (SOG)

I. CONCEPT OF OPERATIONS

To establish means and methods for the most reasonable and proper care and handling of the dead in multi-death situations. The Mortuary Disaster Response Team (MDRT) is responsible for aiding the Jasper County Coroner in the recovery, evacuation, identification, sanitation, and preservation, such as embalming, (if necessary), notification of the next of kin and facilitating means for release of the identified dead to the next of kin or their agent.

II. COMMUNICATION GUIDELEINES

Coordination of all mass fatality operations is the responsibility of the Jasper County Coroner. Notification of mass fatality operations should be made to the EOC of affected location and to the Emergency Management Director (EMD) for Jasper County, through the local 9-1-1 Dispatch Center.

III. AUTHORIZATION FOR ADMISSION OF DISASTER WORKERS INTO DISASTER SITE

All disaster workers must have, in their possession, the necessary identification card or pass, etc., as developed by the EMD or responsible official to gain entrance into the immediate disaster site area. These workers and members of the Mortuary Disaster Response Team (MDRT) will be required to register their name and address at the EOC, or area designated for such a purpose.

IV. RECOVERY OPERATIONS GUIDELINES

1. None of the dead shall be moved or touched by workers until approval has been given by the Jasper County Coroner.

2. Operations will be coordinated by the Jasper County Coroner and the Missouri Funeral Directors and Embalmer's Association (MFDEA), Disaster Response Team Coordinator.

3. A survey and assessment of the situation will be made by the Jasper County Coroner and the MFDEA Disaster Response Team Coordinator. They will note the approximate number of dead and the amount of personnel and equipment needed to deal with them.

4. Once workers have reported to the scene, a briefing will be held, assignments given, and workers will be divided into teams, as necessary.

5. Photos (or a sketch) will be made of the disaster site, and if desired, the scene will be divided into sections with the recovery teams assigned to the various sections.

6. Suitable stakes or markings will be placed at the location of each body and numbers will be assigned to each body (and/or body part found).

7. Bodies will be tagged, and records kept noting the location where each body (and/or body part) was found. (This tag numbering system will be developed by the Jasper County Coroner).

8. Personal effects of the dead will be tagged, and data recorded noting the location where each piece was found.

9. Body parts (i.e., limbs, etc.) should be treated as individual bodies. Recovery teams should not attempt to match the body parts at the disaster scene; body parts should be tagged and bagged separately.

10. When necessary, bodies will be placed in a body pouch and a tag with corresponding numbers will be placed on the pouch.

11. The major support group for this task will be the MFDEA Disaster Response Team.

V. MORGUE SITE

1. A list of possible morgue sites will be maintained for use in the event of a disaster.

2. Once a morgue site has been selected, the Jasper County Coroner and the MFDEA Disaster Response Team Coordinator will organize their operations and assign personnel to some, or all, of the following job titles:
   - General Supervisor
   - Uniformed Guards
   - Information Clerks
   - Counselors
   - Interviewers

- Telephone Communicators
- Admissions Clerk
- ID Personnel
- Orderlies
- Personal Effects Custodian
- Embalming Supervisor, (and Embalmers)
- Secretaries
- Inventory Clerk
- Distribution Clerk

3. The morgue site will be used for the storage, identification, sanitation, preservation if desired, as well as the distribution point for release of the dead to their next of kin or their agent.

4. Refrigeration units will be utilized, as necessary.

5. Bodies admitted to the morgue will be logged and necessary information gathered and recorded about each body.

6. Personal effects will be recorded and placed in a secure area.

7. Should embalming be necessary the Jasper County Coroner will rely on the MFDEA Disaster Response Team to organize the operations, equipment, supplies, and personnel needed.

8. A controlled area will be designated for the media. Law enforcement personnel will also be assigned to this area for security and control of media personnel. <u>This area should preferably, not be within line of sight of the morgue</u>.

9. Counselors, such as members of the clergy, will be present in waiting areas to assist persons visiting the morgue.

VI. <u>IDENTIFICATION OF THE DEAD</u>

The Jasper County Coroner will arrange for the necessary equipment and staff to accomplish this task. The members of the MFDEA Disaster Response Team will be at his/her disposal to be of assistance where needed.

VII. NOTIFICATION OF NEXT OF KIN

The Jasper County Coroner with the assistance of the MFDEA Disaster Response Team will determine the most practical method to be utilized in contacting the next of kin. Every effort will be made to lessen the extreme psychological impact on the families of the dead. The nature and scope of the disaster will determine what methods will be used.

VIII. COUNSELING OF SURVIVORS

The Jasper County Coroner and the MFDEA Response Team will keep listings of local clergy and personnel trained in counseling with grieving survivors. They will be asked to report to the waiting area of the morgue site. Phone counselors will also assist people calling the morgue site. Efforts will be made to keep the families of the dead informed as to what is taking place.

IX. DISTRIBUTION OF THE DEAD

1. Once the body has been positively identified, the next of kin will be contacted with this confirmation. At this point, the Jasper County Coroner or MFDEA Disaster Response Team personnel will coordinate the release of the body to the next of kin or their agent.

2. All efforts will be made to cooperate with the receiving agent or family. However, the nature and scope of the disaster may require policies that may appear unfair or delayed. These policies may be necessary for the smooth flow of operations at the morgue site. All policies will be made or approved by the Jasper County Coroner before being implemented.

- Mass Internment -

In situations where there are UNIDENTIFIED dead, the Jasper County Coroner will make the decision about their disposition. Mass internment may be necessary, and the location of burial sites will be determined at that time. It is suggested, however, that cremation not be utilized as later identification and exhumation may be practical and necessary. Records will be kept no matter what the decision is concerning the disposition of the remains.

X. COUNSELING OF SURVIVORS

The Jasper County Coroner and the MFDEA Disaster Response Team will keep listings of local clergy and or responsible persons trained in counseling with grieving survivors. These persons will be asked to report to the waiting area of the morgue site. Phone counselors will also assist people calling the morgue site. Efforts will be made to keep the families of the dead informed as to what is taking place.

XI. TERMINATION PROCEDURES

After the disaster cleanup operations are completed, efforts will be made to return donated equipment and supplies. Cleaning and sanitizing of the morgue site will be necessary. Records compiled during the operations will be arranged in some type of systematic order and efforts will be made to preserve and store these records for future use, if necessary.

Attachment - A

MORTUARY RESOURCE LIST

Funeral Service Firm	Telephone
_____	_____
_____	_____
_____	_____
_____	_____

Personnel	No. of Volunteers
Recovery Team personnel for locating and tagging the dead.	_____
Evacuation Team personnel for transferring remains from disaster site to temporary morgue.	_____
Embalmers.	_____
Orderly Team personnel to assist in all aspects at the morgue site.	_____
Interviewers to obtain vital statistics from next of kin.	_____

Equipment	Firm	Telephone
Transport vehicles	_____	_____
	_____	_____

Litters, cots, basket stretchers, etc. _____ _____

_____ _____

Embalming equipment (much of this equipment will be appropriated through the MFDEA disaster fund)

_____ _____

_____ _____

_____ _____

_____ _____

_____ _____

_____ _____

_____ _____

_____ _____

_____ _____

_____ _____

_____ _____

Attachment – B

SUMMARY OF MORTUARY RESOURCES

[List totals in each respective area of concern]

EQUIPMENT		PERSONNEL	
Hearses	_____	Qualified Disaster Coordinators	_____
Four-wheel-drive Vehicles	_____	Recovery Personnel	_____
Stretchers	_____	Evacuation Personnel	_____
Litters	_____	Funeral Directors	_____
Embalming Tables	_____	Embalmers	_____
Embalming Tables	_____	Radiation Specialists	_____
Water Trucks	_____	Interviewers	_____
Refrigeration Truck	_____	Dentists	_____
Containers for Capturing Drainage	_____	Pathologists	_____
Linen Supplies	_____	Telephone Operators	_____
Body Pouches	_____	Orderlies	_____

APPENDIX - 5

PUBLIC HEALTH SERVICES

Jasper County Health Department
105 North Lincoln
Carthage, MO 64836
(417) 358-3111
Fax: (417) 358-0494

Joplin Health Department
321 East 4th Street
Joplin, MO 64801
(417) 623-6122 – 6123
Fax: (417) 624-6453

APPENDIX - 6

MENTAL HEALTH SERVICES

(Responders and Victims)

American Red Cross (Springfield)	(417) 624-4411
Freeman Hospital (Stevens Behavioral Unit)	347-1111 347-5800
Mercy Hospital (Joplin)	556-3729
Mercy Clinic Behavioral Health	781-7337
Mercy Hospital (Carthage)	358-8121
Ozark Center	347-7600 825-1004
Dept. of Mental Health/Mental Health & Crisis Counseling	SEMA
** Procedure: Regarding Mental/Behavioral Health issues in Jasper County: SEMA contacts Vicky Mieseler at the Ozark Center, who in turns contacts Beckie Geier (the Disaster Response Coordinator at the Dept. of Mental Health)	417-859-6336
VOAD/Region-D Area Coordinator (Springfield):	
Jasper County Mental Health Board (Ozark Center): [Ms. Neina Bellm]	417-347-7604 Fax:347-7608

APPENDIX – 7

LOCAL PUBLIC HEALTH EMERGENCY PLAN: EXECUTIVE SUMMARY

I. The Local Public Health Emergency Plan (LPHEP) outlines the actions to be taken by the Local Public Health Agency (LPHA), in conjunction with local government officials and cooperating private and volunteer organizations. A local public health emergency can best be described as an event which threatens the safety and well-being of numerous people in an area, i.e., bio-terrorism incident, anthrax, smallpox, pandemic influenza, etc. To work towards a safer environment the plan has been developed to:

1 - Reduce the vulnerability of citizens to any disasters that creates a local public health emergency.

2 - Establish capabilities for protecting citizens from the effects of a local public health emergency.

3 - Respond effectively to the actual occurrence of disasters.

4 - Provide for recovery in the aftermath of any local public health emergency.

II. The Joplin/Jasper County LPHEP is a multi-hazard, functional plan that has three components:

1 - A Basic Plan that serves as an overview of the LPHA's approach to a local public health emergency.

2 - Annexes that address specific activities critical to emergency response and recovery.

3 - Appendices which support each annex and contain technical information, details and methods for use in emergency operations, etc.

III. In the Basic Plan you will find the primary and support responsibilities for the local health department as well as a Hazard Analysis for quick references. Some of the Annexes and Appendices, not normally found in an emergency plan are:

a.) The Homeland Security Advisory System

b.) DHSS Activities Corresponding to the Homeland Security Threat Levels

c.) Personnel Specialized in Bio-terrorism Training – (on file at the Health Department)

d.) Mass Patient Care

e.) Mass Fatality Management

f.) Nuclear & Chemical Incidents

g.) Food & Water Borne Outbreaks

h.) The Pandemic Influenza Response Plan.

IV. The importance of understanding the plan cannot be underestimated. All individuals who may have any involvement with the plan must be briefed and understand their roles in its implementation. Staff members of the Local Public Health Departments will be responsible for maintenance, training, updating, and developing exercises to improve the response plans.

APPENDIX – 8
MASS PATIENT CARE

[Update: 8-23-2021]

I. Purpose

To provide effective, rapid medical care on a large-scale, after a local public health emergency, to include counseling for the worried-well, and mental health counseling for emergency workers, victims, and their families.

II. Organization and Responsibilities

A. The plan for Mass Patient Care during a public health emergency (PHE) is defined in *Annex M, Appendix 3, County Medical Disaster Plan of the Joplin/Jasper County Local Emergency Operations Plan.* In this plan, it is the responsibility of the *first responding agencies (First Responders)*, i.e., Fire, EMS, or Law Enforcement, to respond to, and take charge of the situation. All agencies responding to a major disaster have the responsibility to initiate the Incident Command System (ICS) in a timely manner.

B. All agencies responding to a major disaster, requiring the combined resources of multiple agencies, will establish Unified Incident Command, to provide greater control and coordination and effectiveness of responding units.

C. Public Health for Jasper County is the responsibility of the Jasper County Health Department. Public Health for the City of Joplin is the responsibility of the Joplin City Health Department. They deal with such problems, as:

- Communicable Diseases
- Environmental Sanitation Problems
- Contamination of Water and Food
- Other Health-related Matters

Neither of the Health Departments have medical professional staffing or facility capacity to provide mass patient care.

D. Hospital Capacities:

Jasper County and Joplin are served by 3 hospitals: Two, Mercy Regional Medical

Centers: one located in Joplin, and the other located in Cartage. Freeman Health Systems is in Joplin. The hospitals each have internal medical disaster plans and together, they all participate in the County Medical Disaster Plan (Appendix-3 to Annex - M of the Joplin/Jasper County Local Emergency Operations Plan).

The County Medical Disaster Plan identifies the capacities and roles of each hospital in a PHE. Specific capacities for each hospital are included in Appendix- 1 of this annex:

- Freeman and Mercy Hospital Emergency Rooms are Trauma Level-2 Certified.
- Mercy Hospital (Joplin) has 4 ER Beds (with negative pressure).
- Mercy Hospital (Carthage) has 4 ER Beds (with negative pressure); plus, decontamination (DECON) shower areas.
- Freeman Hospital has 4 ER beds (with negative pressure).
- Each hospital's internal medical disaster plans have protocols for segregating communicable /contaminated patients at entry to ER's and have provisions for decontamination at entry to each ER.

E. Decontamination Capacities:

- Mercy Hospital: 6 external showers and 1 internal shower; can be activated with a capacity of 42 persons/hour.
- Mercy Hospital (Carthage): decontamination shower with capacity of 5 persons/hour.
- Freeman Hospital: 3 external showers can be activated with a capacity of 24 persons/hour.

F. Hospital Overflow Capacity:

In certain situations, existing hospital capacity may be overwhelmed. If this occurs additional non-hospital temporary facilities may be required. A list of potential pre-designated facilities and plans for implementation is included in Appendix-2 of this annex.

Additionally, if hospital capacity for a mass casualty PHE is exceeded, the Disaster Medical Assistance Team (DMAT-2) located in Springfield, Mo., or DMAT-1 in St. Louis may be available as a resource.

The DMAT teams will be requested through the Joplin/Jasper County EOC; all DMAT resources are contacted through the State Emergency Management Agency (SEMA) in Jefferson City, by calling the 24-Duty Officer number: (573) 751-2748. Pager #2020, or Back-Up Pager #2023: 573-634-2623. Fax# (573) 634-7966.

G. Medical Equipment Resources:

In situations where medical hospital capacity is overwhelmed, medical equipment needs may also be overtaxed.

A list of potential local resources for additional medical equipment is provided in Appendix-2 of Annex G of the Joplin/Jasper County Local Emergency Operations Plan (LEOP).

H. Ambulance service in Jasper County and Joplin is provided by four (4) ambulance services. They receive emergency ambulance calls through the emergency 9-1-1 system. These services include:

1.) METS
2.) Carthage Fire Department
3.) Jasper
4.) Newton County Ambulance Service
(In some Newton County portions of Joplin)

I. Medical transport helicopter services are provided by each of the Joplin hospitals. Landing pads are available at each hospital.

J. Additionally, if hospital capacity for a mass casualty PHE is exceeded, the Disaster Medical Assistance Team (DMAT-2) located in Springfield, Mo., or DMAT-1 in St. Louis may be available as a resource.

K. Medical Equipment Resources:

1.) In situations where medical hospital capacity is overwhelmed, medical equipment needs may also be overtaxed. A list of potential local resources for additional medical equipment is provided in Appendix-2.

2.) Alternate sites can be designated and established at the scene of most major emergencies, or in the vicinity, as designated by the on-scene commander.

3.) Additional information on medical transport is found in the County Medical

Disaster Plan (Appendix - 3 to Annex M of the Joplin/Jasper County Emergency Operations Plan)

L. Mental health counseling to victims, emergency workers and their families, as well as counseling for those classified as "worried-well," will be handled through the Ozark Center. If additional counseling resources are needed, the American Red Cross in Springfield will be contacted for assistance Chapter of *The National Voluntary Organizations Active in Disasters (NVOAD);* Point of Contact: President of the **Missouri VOAD**, at: (417) 832-9500 X22; or request assistance through the State Emergency Management Agency **(SEMA), Troop Region-D Office in Springfield**.

Point of contact: Mr. Chris Gaut, Area Coordinator; (573) 821-4683; FAX: (417) 895-6356, or the SEMA Duty Officer 24-hour number: (573) 751-2748. Additional mental health resources are found in Appendix-6 of Annex-M of the Joplin/Jasper County Emergency Operations Plan.

1.) Coordinate with ARC the activities necessary to provide the staff, supplies and facilities to treat victims suffering from disaster-related mental disorders.

2.) Provide representatives to assist the local Mental Health and/or joint Boards and Community Mental Health Centers in giving supportive services and treatment to disaster victims.

APPENDIX – 9

LIST OF HOSPITAL BED CAPACITIES

Hospital Check Lists	Mercy (Joplin)	Freeman (W)	Mercy (Carthage)
Adult Medicine Beds	240	320	25
Burn Unit Beds	0	0	0
ICU Beds	36	40	0
Mortuary Space	4	2	0
Mult. Trauma Beds	36	41	2
Pediatric Beds	11	15	0
Respiratory Isolation Unit	29	68	6
Respiratory Ventilators	20	60	4
Quarantine Areas	1	1	1
Decontamination Rooms	1	3	1
Ventilators (adult)	24	47	4
Ventilators (pediatric)	24	4	4
Ventilators (neonate)	10	13	0
IV Pumps	330	700	40
IV Poles	400	NA	60+
Suction Machines	71	20 portables	50+
Stretchers	60	45	20
Wheelchairs	60	50	20
PPE Suits	50	2000	10
Assessed ability to provide mass prophy?	Yes	Yes	Yes
ID-ed emergency pharmaceutical supply system:	No		
Local Pharmacies?	Yes	Yes	No
Pharmaceutical Vendors?	Yes	Yes	Yes
Separate ER entry for contaminated patients?	Yes	Yes	Yes
Can ER ventilation system be isolated from facility?	Yes	Yes	No
Ability to shut down air intake?	Yes	Yes	No

INFORMATION UPDATES

- Freeman (West):
- Mercy (Joplin):
- Mercy (Carthage):

APPENDIX – 10

LIST OF NON-HOSPITAL OVERFLOW MEDICAL FACILITIES

These facilities may be repurposed to provide acute care, non-ambulatory hospital overflow care, or elective surgeries not possible at hospitals, etc.

- **FREEMAN HEALTH SYSTEMS:**

1.) Freeman Health System (FHS) has established Freeman East, West, Mercy Joplin, and Freeman Neosho as the preferred Alternate Care Sites (ACS), but other available options include the Freeman YMCA, and Missouri Southern State University, as interim facilities. FHS also maintains a 24-Bed Modular Facility that can be utilized as a portable triage or patient transfer facility.

2.) Freeman Health System maintains an interactive map of possible receiving hospitals in SW Missouri, NE Oklahoma, SE Kansas, and NW Arkansas. The map will show the contact information and location of each receiving facility. The SWHCC can provide a bed availability report to show current availability of beds in the Missouri region.

3.) Information is available in the Freeman Health System Alternate Care Site (ACS) Plan.

- **MERCY HOSPITAL:**

If Mercy Health (Joplin Communities) are unable to remain open for services, alternate locations may include:

JOPLIN

1.) Mercy Hospital Carthage
2.) Ortho of the Four States
3.) DMAT Tent(s)

CARTHAGE

1.) Mercy Hospital Joplin
2.) Ortho of the Four States
3.) DMAT Tent(s)

COLUMBUS (KS.):

1.) Mercy Hospital Joplin
2.) Ortho of the Four States
3.) DMAT Tent(s)

More information concerning Alternate Care Sites (ACS) for Mercy Hospitals are spelled out in the Continuity of Operations (COOP) Plan.

APPENDIX – 11

JASPER/NEWTON COUNTY EMERGENCY HEALTHCARE COALITION

I. Purpose:

1. The purpose of the Jasper/Newton County Emergency Healthcare Coalition is to facilitate enhanced preparedness for community emergencies that impact community health. The J/NC-EHC will be responsible to review and recommend needed changes to the following Annexes in the Joplin/Jasper County Local Emergency Operations Plan (LEOP):

    - Annex - M of the Joplin/Jasper County Local Emergency Operations Plan (LEOP) --- (Health and Medical).

    - Other Annexes impacting community health response, as needed.

2. The J/NC-EHC will work with each member agency to review individual agency emergency response plans to ensure a coordinated response to community emergencies impacting community health. The Jasper/Newton County Emergency Healthcare Coalition will also work with member agencies to determine the need for and plan exercise activities for medical emergencies, as appropriate.

3. The J/NC-EHC will work, as a group, with each member agency to review individual agency emergency response plans to ensure a coordinated response to community emergencies impacting community health. J/NC-EHC will work with member agencies to determine the need for, and plan exercise activities for medical emergencies.

Additional responsibilities of the J/NC-EHC will include:

a.) Review of need for any potential Strategic National Stockpile Activation in Jasper County or Joplin.

b.) Review of need for DHSS Surge Capacity Cache activation (located at Freeman Hospital).

c.) Review of need for the Mass Casualty Trailer activation (located at Mercy Hospital) if needed out of area.

II. Membership:

A. Regular Membership:

Regular membership will include representatives as determined by the following entities:

- Jasper County Health Department

  1. Administrator
  2. Nursing Supervisor
  3. Other staff members, as designated

- Joplin City Health Department

  1. Director
  2. Environmental Health and Epidemiology Division Coordinator
  3. Medical Division Coordinator
  4. Regional Response Planner

- Freeman Hospital and Health System

  1. Facilities Supervisor/Safety Officer
  2. Director of Peri-Operative and Emergency Trauma Services
  3. Director of Emergency Trauma Services

- Mercy Medical Center (Joplin)

  1. Safety Manager
  2. Trauma Coordinator

- Mercy Medical Center (Carthage)

  1. Safety Manager
  2. Trauma Coordinator

- Landmark Hospital

  1. Safety Manager
  2. Trauma Coordinator

- Metro Emergency Transport System (METS)

  1. Director

2. Supervisor

- American Red Cross

1. SW Missouri Program Manager
2. SW Mo. Disaster Program Specialist (Emerg. Services Mgr.)

- Joplin Jasper County Emergency Management

1. Coordinator

- Newton County Ambulance District

1. Director

- Ozark Tri-County Health Care (FQHC)

1. Chief Operating Officer (COO)
2. Safety Officer

- Newton County Health Department

1. Administrator
2. Nursing Supervisor

- Missouri Southern State University (MSSU)

1. Administrator / Director
2. Student Health Supervisor
3. Fire Safety / Environmental Health

(These are minimum recommendations. Additional regular members may be added as needed by each agency).

B. Ad Hoc Emergency Members:

1.) During periods of specific need (i.e., large community emergency event impacting public health), additional specific (ad hoc) members may be requested to temporarily serve on the JJMS. These ad hoc members could include physicians with specific expertise relative to the emergency (i.e., communicable disease specialist), hospital or other community administrators, etc.

2.) Each hospital in Jasper County will be requested to pre-designate an administration representative as well as physician(s) to represent their facility at such meetings.

III. Officers:

The committee will have 2 co-chairs responsible for planning and conducting meetings of the committee. The co-chairs will be the Administrator of the Jasper County Health Department and the Director of the Joplin City Health Department.

IV. Meetings:

A. Regular Meetings:

Regular members will meet monthly or as needed to address routine issues associated with planning for medical LEPC issues.

B. Emergency Meetings

1.) Emergency meetings may be called by either co-chair at the request of any member. Emergency meetings may be called to address issues related to a public health Emergency.

Situations that may merit an emergency meeting may include:

- Major emergency (natural disaster or man-made) causing mass casualty.
- A community emergency requiring activation of the LEPC EOC.
- A communicable disease outbreak or threat of outbreak.
- A hospital capacity issue.
- An emergency requiring Strategic National Stockpile (SNS) request.

2.) Meetings may occur in person or by other electronic means (i.e., conference call, e-mail, etc.) that is appropriate to conduct business.

3.) An emergency phone/pager list (Appendix - A of this document) will be maintained by the co-chairs in conjunction with the LEPC Manager for use in emergency activation.

II. Membership

1. Regular Membership:

Regular membership will include any organization located in Newton County, Jasper County and/or the City of Joplin that has a role in community health, emergency

preparation and response. Membership must be approved by the total membership. [For a current member list is on file at the Joplin Health Department.]

2. Ad Hoc Emergency Members:

During periods of specific need (i.e., a community incident impacting public health), additional specific ad hoc members may be requested to temporarily serve on the J/NC-EHC.

3. There shall be no limit to the number of years a member may serve.

4. Vacancy of any organization representative shall be filled by the participating organization at the discretion of that organization.

5. To be considered an active member, organization representatives must participate in regular meetings and activities.

6. Membership will be reviewed at the first meeting of each year.

III. Officers

1. The officers of the coalition shall consist of a Chair, Vice Chair, and Secretary, and shall be elected by the Coalition.

2. Elected officers will serve a term of two years.

3. Officer elections will be held the second meeting of odd calendar years.

a.) The Chair shall preside at all Coalition meetings, appoint Coalition members (standing and ad hoc), and perform other duties as associated with the office.

b.) The Vice Chair shall assume the duties of the Chair in case of the Chair's absence.

c.) The Secretary shall be responsible for the minutes of the Coalition.

IV. Meetings

1. Regular Meetings:

a.) Regular members will meet monthly (or as needed) to address routine issues associated with planning for medical issues.

2. Emergency Meetings:

a.) Emergency meetings may be called by the Chair at the request of any member.

b.) Meetings may occur in person or by other electronic means (e.g., conference call, email, etc.) that is appropriate to conduct business.

c.) Agendas shall be provided at least 48 hours in advance, when appropriate.

APPENDIX – 12

PLAN/PROCESS FOR REQUESTING CHEMPACK) MEDICATIONS

I. Purpose

To establish Region-D procedures to request CHEMPACK Medications in the event of a nerve agent incident or organophosphate poisoning due to a terrorist attack or to Haz-mat event that occurs while transporting/handling/storing organophosphates.

II. Overview of CHEMPACK

A. The CHEMPACK Program is part of the Strategic National Stockpile (SNS) program. Containers of antidotes are pre-positioned in two locations in Region-D. Each CHEMPACK container includes medications with an initial treatment capacity of up to 1816 patients at a moderate or severe exposure level. These containers are portable, and contents can be transported as needed. The antidotes included in the CHEMPACK containers are specially packaged into auto-injectors and designed for rapid administration at the incident scene.

B. Medications in the CHEMPACK containers are only used for patient treatment of a chemical incident where exposure to organophosphates (agricultural pesticides such as Parathion, Malathion, Chlorpyrifos, or Diazinon) or nerve agent gases (Sarin, Soman, Tabun, and VX) has occurred. Organophosphates and nerve agents are highly toxic chemicals. Exposure can occur through inhalation, skin absorption, or ingestion, and requires immediate administration of life saving antidotes.

C. County and small community hospitals and other emergency responders don't stock nerve agent antidotes, or if they do have any stock, it is very small quantities, which would not be sufficient for a large event or large number of people exposed to these types of chemicals during a terrorist attack, or large chemical accident.

D. Signs and symptoms of nerve agent poisoning can present within seconds to minutes following exposure and after a significant exposure, death may occur. The following acronym may be helpful in remembering the signs and symptoms of Nerve Agent Exposure.

SLUDGEMM

- Salivation
- Lacrimation (Tearing)
- Urination
- Defecation
- Gastrointestinal upset
- Emesis (Vomiting)
- Muscle twitching
- Miosis (Pinpoint pupils)

III. Training, Education and Mitigation

A. First Responders such as law enforcement, firefighters, EMS, and others should be trained to recognize a possible nerve agent/organophosphate release. Law Enforcement responders are often the first responders on the scene of an emergency. Therefore, it is imperative that the officers can recognize a potential nerve agent release to report this to dispatch.

B. First responders also need to know about the CHEMPACK medications that are available, when to ask for them and the request process. Matrix is found in Attachment-7.

C. 9-1-1/Dispatch Centers should be trained on the CHEMPACK request process. Request Checklist is found in Attachment-2.

D. Annual training for all first responders should be made available to protect the first responders and the public in this type of event.

E. Emergency Management Personnel and First Responders should know organophosphate distributors in your county, where they are located, and what are the transportation routes of these chemicals?

1. Resources for EMDs to find Chemical Distributors in the County:
   a. Tier-II Reports
   b. Local Public Health Department Chemical Mapping Software

F. The Regional CHEMPACK Plan-Training Presentation can be found in Attachment-1. This training overview has been developed to introduce the CHEMPACK to emergency response personnel and the request process.

IV. CHEMPACK Locations:

A. Region - D Locations:

a.

Cox Medical Center
Meyer Orthopedic and Rehab Hospital
phone: 417-269-9800
fax: 417-269-4136

b.

Mercy Hospital Springfield
phone: 417-820-2000
fax: 417-820-7788

If additional CHEMPACKS are required, a CHEMPACK outside of Region - D will have to be requested.

B. Missouri Assets (closest):

a. Ozarks, Medical Center, West Plains, MO
b. Bothwell Regional Health Center, Sedalia, MO
c. Phelps County Regional Medical Center, Rolla, MO
(Additional Missouri Assets are found in this plan)

C. Out of State Assets to consider:

(See Attachment-9 for contact information).

a. Northwest Medical Center – AR
b. Northwest Arkansas Medical Center – AR
c. Washington Regional Medical Center – AR
d. Coffeyville Regional Medical Center – KS

V. Procedures for Requesting CHEMPACK Medications

A. On-Scene Incident Command, EMD, or an on-scene responder will notify 9-1-1 Dispatch to place the call to the closest CHEMPACK site/POC (listed above). Each county should be responsible for designating a 9-1-1 shift supervisor to be familiar with this process and have authority to complete this action.

B. In Region-D, Missouri State Highway Patrol Troop-D will provide transport of the medications. The Transportation Plan can be found in Attachment-8.

C. State and local law enforcement may also be called upon to ensure the security of CHEMPACK assets at the scene, during transport, and/or with security at the host hospital.

D. When a CHEMPACK is requested, the entire CHEMPACK will be moved.

E. 9-1-1 Dispatch staff should utilize the CHEMPACK Response Matrix in Attachment-7 and Checklist Documentation Form in Attachment-2 to ensure documentation of all information needed to request the CHEMPACK.

F. The CHEMPACK should be delivered to a safe staging area established by the Incident Commander to ensure additional response personnel are safe.

G. A Statewide CHEMPACK Locations Map is included in Attachment-3, in the event additional CHEMPACKS are needed. The map includes sites south in the State of Arkansas and Attachment-4 included is the CHEMPACK Locations Map for the sites in the State of Kansas.

H. CHEMPACK Site Contacts can be found on EMResource and WebEOC. In the event those two systems are not available, CHEMPACK custodial sit Point of Contact information is found in Attachment-5.

I. CHEMPACK contents list can be found in Attachment-6.

CHEMPACK REQUEST CHECKLIST

Name: Phone Number:

Agency: Date/Time:

911 Operator Checklist

Receive CHEMPACK Activation Request

CHEMPACK Requested by: *(Agency, Name, Contact Info)*	Department of Energy, Jan Doe, 800-100-800 1
Number CHEMPACK needed, and Situation: *(One CHEMPACK per 454 personnel)*	38 Personnel, 1 Chempack, Chemical Spill 2
Location CHEMPACK is needed:	201 Main St. 3
On site POC: *(if different from requestor)*	Jim Smith, 800-100-800 4

Contact CHEMPACK Custodial Site – (Mercy Hospital) @ *(Note: Location has 3 CHEMPACKs on site, see Map/Attachment for additional storage locations)*

- [X] Request <number of CHEMPACKS> (see #2 above)
- [X] Provide Delivery Location (see #3 above)
- [X] Identify Point of Contact at delivery location (see #4 above)

Contact Troop D HQ Dispatch (Transportation) POC:	Officer James May 417-895-6868
Estimated Time of Arrival	8:20pm

Contact requestor with confirmation and status

Troop D Checklist

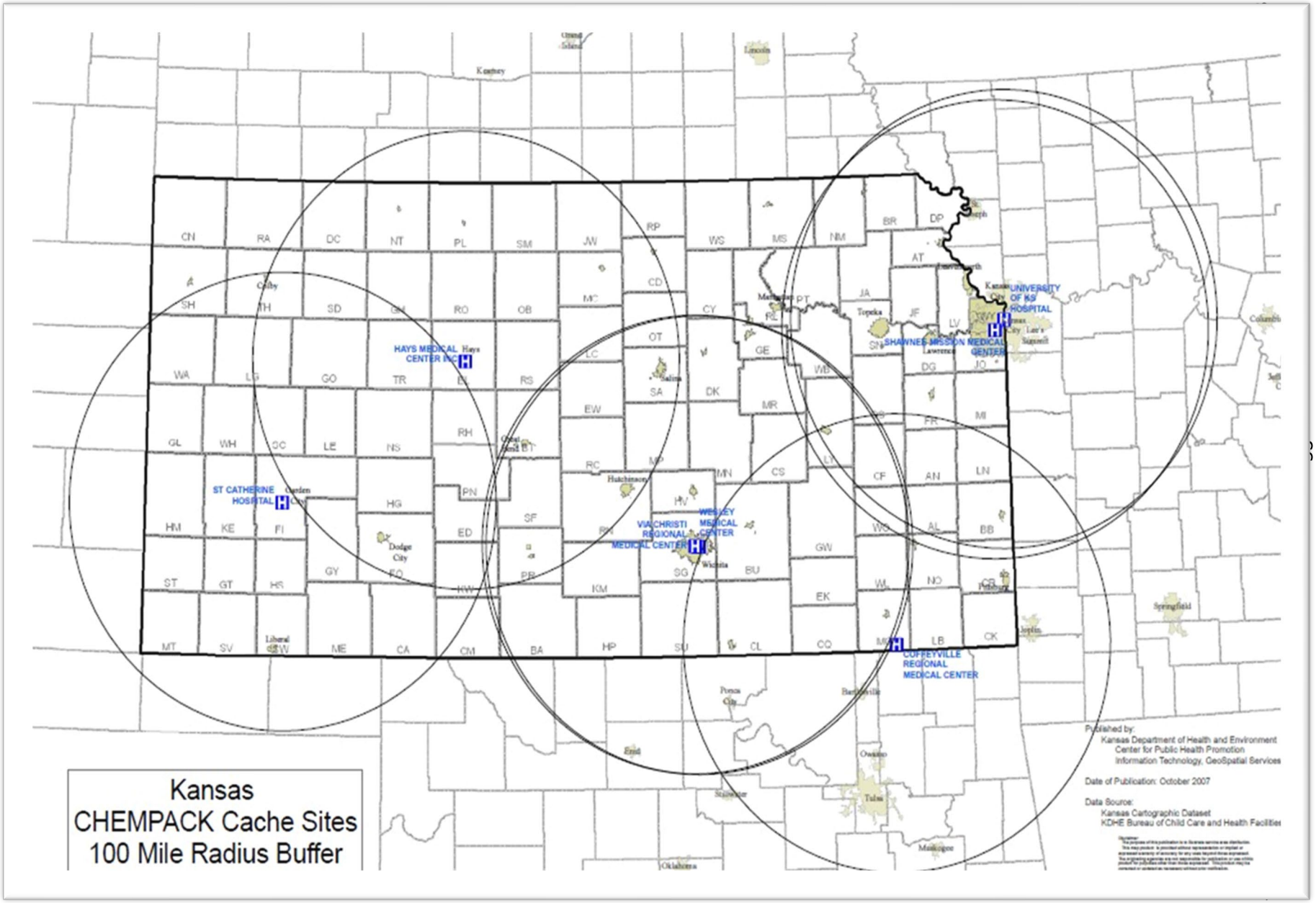
Receive Call from 911 Operator

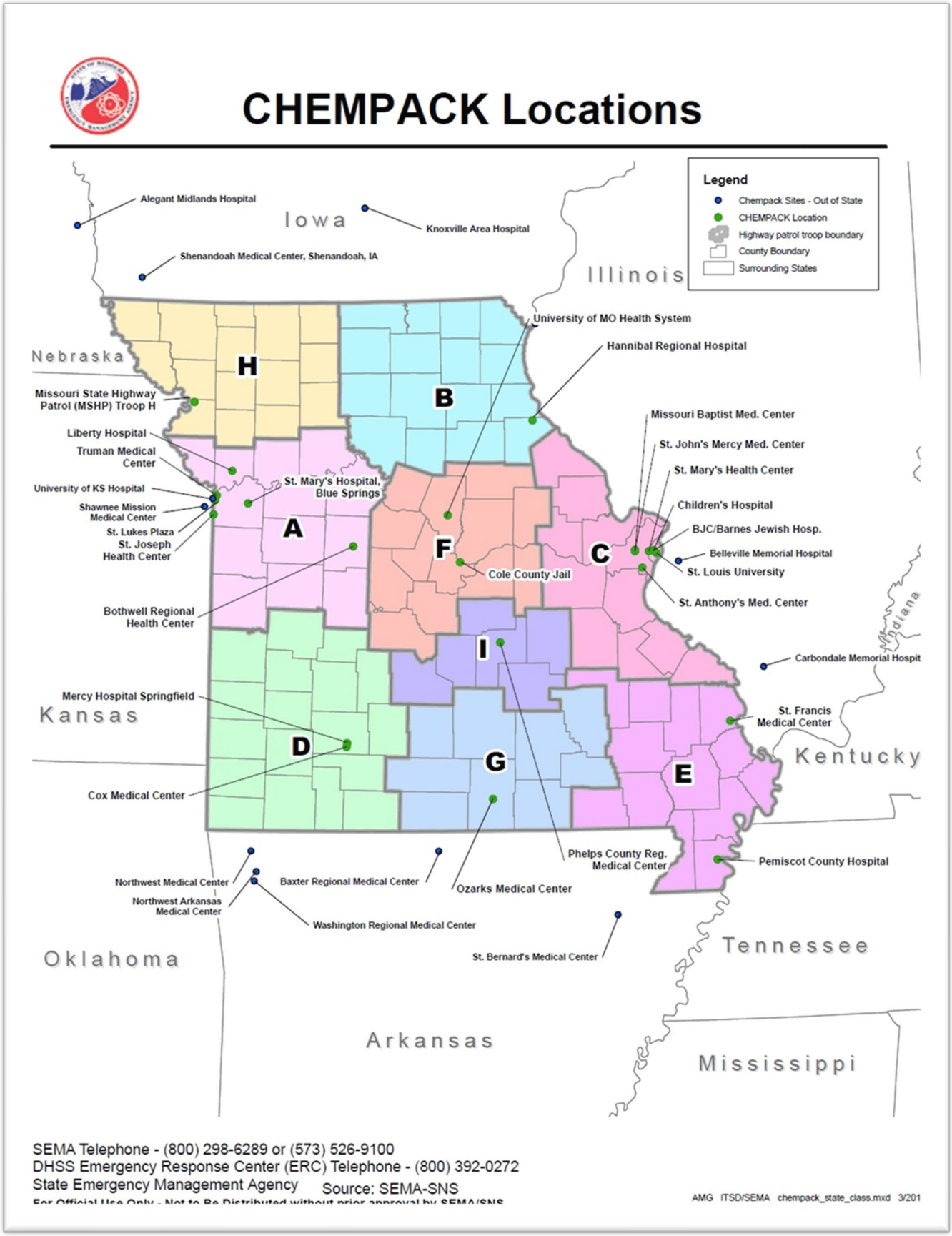
Who Called: *(name, agency, phone number)*	Department of Energy, Jan Doe, 800-100-800
Number of CHEMPACK(s) Requested:	1
Location CHEMPACK is needed:	201 Main St.

On Follow

Notify Agencies

Incident Commander	x	
County Emergency Management Director	x	
MO Department of Health Emergency Response Center	x	1-800-392-0272


Kansas
CHEMPACK Cache Sites
100 Mile Radius Buffer
HAYS MEDICAL CENTER INC
ST CATHERINE HOSPITAL
VIA CHRISTI REGIONAL MEDICAL CENTER
WESLEY MEDICAL CENTER
SHAWNEE MISSION MEDICAL CENTER
UNIVERSITY OF KS HOSPITAL
COFFEYVILLE REGIONAL MEDICAL CENTER
Published by:
Kansas Department of Health and Environment
Center for Public Health Promotion
Information Technology, GeoSpatial Services
Date of Publication: October 2007
Data Source:
Kansas Cartographic Dataset
KDHE Bureau of Child Care and Health Facilities


CHEMPACK Locations
Legend
Chempack Sites - Out of State
CHEMPACK Location
Highway patrol troop boundary
County Boundary
Surrounding States
Alegant Midlands Hospital
Iowa
Knoxville Area Hospital
Shenandoah Medical Center, Shenandoah, IA
Illinois
University of MO Health System
Hannibal Regional Hospital
Nebraska
H
B
Missouri State Highway Patrol (MSHP) Troop H
Liberty Hospital
Truman Medical Center
University of KS Hospital
Shawnee Mission Medical Center
St. Lukes Plaza
St. Joseph Health Center
St. Mary's Hospital, Blue Springs
A
F
C
Missouri Baptist Med. Center
St. John's Mercy Med. Center
St. Mary's Health Center
Children's Hospital
BJC/Barnes Jewish Hosp.
Belleville Memorial Hospital
St. Louis University
St. Anthony's Med. Center
Cole County Jail
Bothwell Regional Health Center
I
Indiana
Carbondale Memorial Hospit
Mercy Hospital Springfield
Kansas
D
G
E
St. Francis Medical Center
Kentucky
Cox Medical Center
Phelps County Reg. Medical Center
Pemiscot County Hospital
Northwest Medical Center
Baxter Regional Medical Center
Ozarks Medical Center
Northwest Arkansas Medical Center
Washington Regional Medical Center
Oklahoma
St. Bernard's Medical Center
Tennessee
Arkansas
Mississippi
SEMA Telephone - (800) 298-6289 or (573) 526-9100
DHSS Emergency Response Center (ERC) Telephone - (800) 392-0272
State Emergency Management Agency
Source: SEMA-SNS
AMG ITSD/SEMA chempack_state_class.mxd 3/201

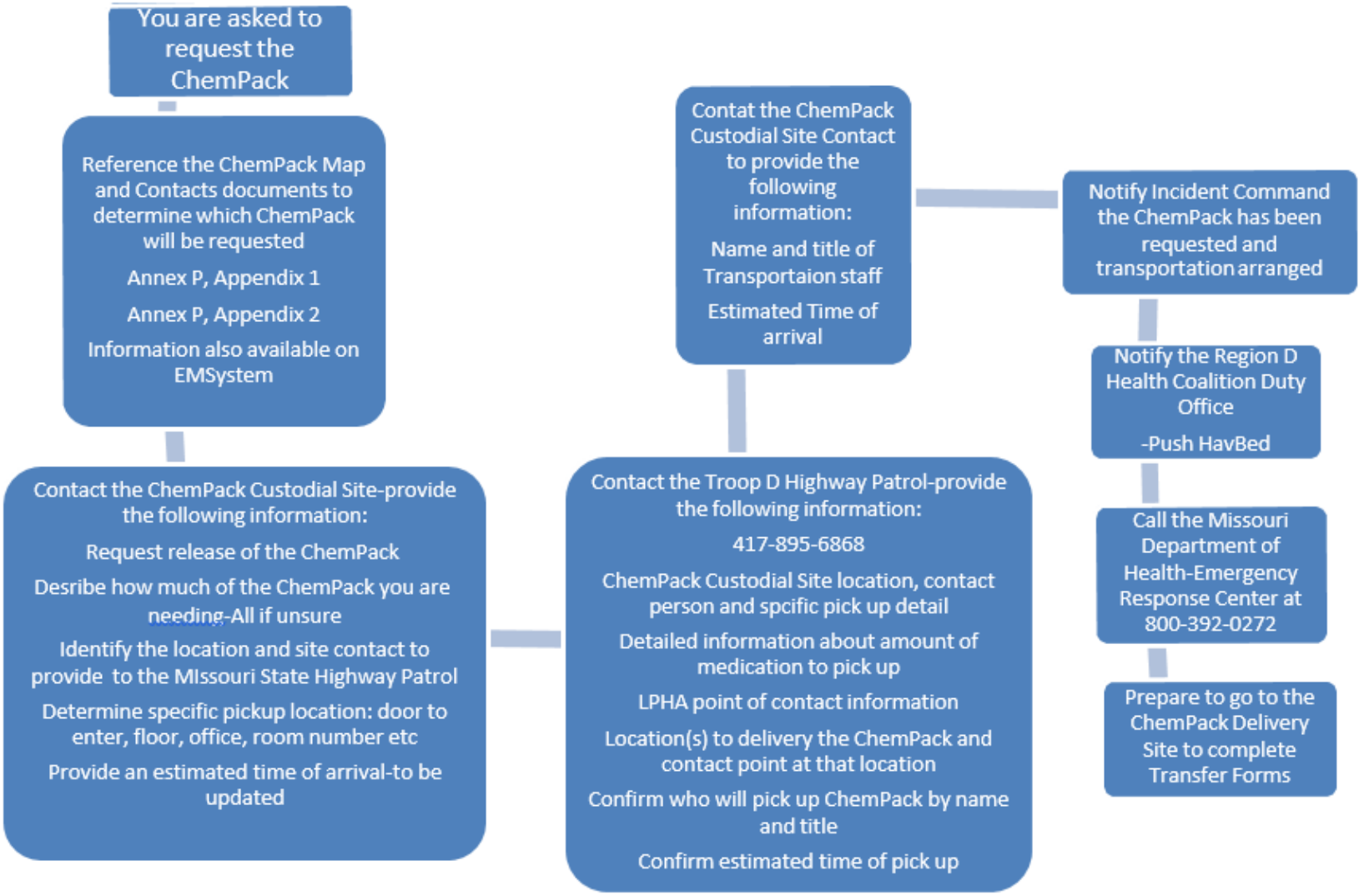
Attachment-5: CHEMPACK Custodial Site Contact Information

CHEMPACK Site	Primary	Secondary	Tertiary	Security	Pharmacy Main
Cox Medical Center	**James Houpt, Pharmacist**	**Jennifer Reeves, Pharmacist**	**Jason Henry/ Em Mgt Officer**	**Walnut Lawn**	**Supervisor**
Meyer Orthopedic and Rehab Hospital	wk: 417-693-0778	wk: 417-269-3001	wk: 417-269-4761	417-269-9673	317-269-6277
phone: 417-269-9800	cell: 417-269-9892	cell: 417-988-2752	cell: 417-827-9631-PRIMARY #		
fax: 417-269-4136	james.houpt@coxhealth.com	jennifer.reeves@coxhealth.com	jason.henry@coxhealth.com		
			Louis Kynard		
			wk: 417-269-5193		
Mercy Hospital	**Angelique Foster, Pharmacy Mgr.**	**Shane Edmonson, Pharm. Dir.**	**Russ Conroy, Emerg. Prep. Dir.**	**On-Duty**	**Pharmacy Main**
phone: 417-820-2000	wk: 417-820-6957	wk: 417-820-6793	wk: 417-820-7159	417-820-4357	wk: 417-820-2777
fax: 417-820-7788	cell: 417-827-4777	cell: 417-343-8484	cell: 417-773-0361		
	angelique.foster@mercy.net		russell.conroy@mercy.net		**Dennis Martin, Safety Mgr.**
					wk: 417-820-9561
					cell: 417-844-4076
					dennis.martin@mercy.net

Attachment 6: CHEMPACK Contents List

EMS CHEMPACK Container with a Treatment Capacity of 454									
Product	**Unit Of Measure**	**Case Quantity**	**Boxes in each Case**	**Units Per Box**	**Total Units Per Case**	**Case Height**	**Case Width**	**Case Length**	**Case Weight in Pounds**
Mark 1 auto-injector with-240 kits	Case	5	30	8	240	13.25	19	13.5	39.5
Atropine Sulfate 0.4mg/ml 20ml-100 vials	Case	1	25	4	100	6.13	5.63	13.5	12
Pralidoxime 1gm inj 20ml-276 vials	Case	1	6	46	276	11.81	14	12.31	11.5
Atropen 0.5 mg.-144 injectors	Case	1	12	12	144	14	10.5	19.18	16.8
Atropen 1.0 Mg.-144 injectors-	Case	1	12	12	144	14	10.5	19.18	16.8
Diazepam 5mg/ml auto-injector-150 injectors	Case	2	15	10	150	9.5	8.5	24.24	20
Diazepam 5mg/ml vial, 10ml-25 vials	Case	2	5	5	25	6	6.5	2.75	1.8
Sterile water for injection 20ml-100 vials	Case	2	25	4	100	13	6.63	6	7.2

ATTACHMENT – 7: **CHEMPACK Request Matrix**



Attachment 8: Missouri State Highway Patrol Transportation Plan for CHEMPACK Resources

CHEMPACK Operational Plan

Determine the need for transportation assistance
Does the requestor need air/ground transportation assistance? **What is the location of the chemical incident? Region/City/Address?** **Is it closer/quicker to deploy cache at Cole County Jail with air/flight assistance from MSHP?** **Steps for contacting MSHP for transportation assistance** • During Work Hours 8-5, Contact Capt. Greg Kindle (573) 526-6145, BB (573) 694-6416 or Capt. Normal Murphy (573) 526-6226, BB (573) 690-7940 • After Hours, Contact the Troop Headquarters nearest the CHEMPACK site to request ground transportation. Troop A: (816) 622-0800 Troop B: (660) 385-2132 Troop C: (636) 300-2800 Troop D: (417) 895-6868 Troop E: (573) 840-9500 Troop F: (573) 751-1000 Troop G: (417) 469-3121 Troop H: (816) 387-2345 Troop I: (816) 368-2345 **Steps for requesting aircraft through MSHP** • Contact Troop F Headquarters at (573) 751-0468 and request the on-call pilots to be contact with the Aircraft Division. **MSHP will make the determination of what type of aircraft/vehicle to assign, based on the following:** • Destination will determine airplane or helicopter requirement. MSHP aircraft are: o Beechcraft King Air 250- 1,900 lbs. o Beechcraft King Air C90- 1,600 lbs. o Cessna 210- 700 lbs. o Cessna 182- 400 lbs. o Bell 407 Helicopter- 400 lbs. o Bell 206 Helicopter- 300 lbs. o MD 500 Helicopter- 300 lbs

SOURCE: DPS/SEMA- November 2016

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When making a request for air or ground transportation assistance from the MSHP, provide the following information:

- Description of cargo to be transported (5 cases of Mark 1 kits, 39.5 lbs. per case, 197 lbs.)
- Justification for emergency request
- Name and phone number of person to receive delivery
- Destination of delivery
- Name and title of the individual(s) transporting the cargo

SOURCE: DPS/SEMA- November 2016

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ATTACHEMENT 9: Out-State CHEMPACK CONTACTS (Pgs-2)

ARKANSAS

Washington Regional Medical
3215 N. Northhill Blvd.

Fayetteville, AR 72143

Primary: Ramona McLean O: 479-463-1122 C: 479-409-

5639 Secondary: Brad Hodges O: 479-463-1170 C: 479-

747-2040 Tertiary: Grant Cates O: 479-463-6101 C: 479-

650-1720 Quaternary: Terry Lawson O: 479-463-1846 C:

479-841-8658

Northwest Arkansas Medical Center of Washington

609 W. Maple Ave.

Springdale, AR 72143

Primary: Caroll Barham O: 479-757-4581 C: 479-659-2406 P: 479-527-6165 O: 479-757-4834

Secondary: Marla Smith O: 479-757-4580 C: 479-200-2565

Northwest Arkansas Medical Center of Benton

3000 Medical Center Parkway

Bentonville, AR 72143

Primary: Kevin Sediacke O: 479-553-4151 C: 479-871-1073 Email: ksediacke@nw-health.com

Secondary: Phil Davis O: 479-553-4208

Tertiary: Paul Taylor C: 479-553-4600

KANSAS

Coffeyville Regional Medical Center

1400 W 4th Street

Coffeyville, KS 67337

Primary: Jim Wilhelms O: 620-252-1690 C: 620-870-8268 Email: jmw@crmcinc.org

Secondary: Stephen Haley O: 620-252-1695 C: 580-351-8346

Tertiary: Jim Wilson O: 620-252-1526 C: 620-515-0919

Quaternary: Matthew Sortore O: 620-252-1564

ANNEX N TERRORISM

I. PURPOSE

The purpose of this annex is to establish a unified approach for emergency response agencies of Jasper County to respond to and recover from a threat or act of terrorism. Also, to establish a terrorism response system that prescribes responsibilities and actions required to respond to and recover from a terrorist event.

II. SITUATION AND ASSUMPTIONS

A. Situation

1. Jasper County has assets that could be targets for terrorist activities. These include, but are not limited to:

   a. Federal, state, county and municipal government facilities and structures

   b. Chemical Facilities

   c. Medical facilities

   d. Religious facilities

   e. Businesses and manufacturing centers

   f. Airports, railroads, highways and navigable rivers

   g. Pipelines; power plants; public utilities; landmarks; and large public gatherings

   h. Agriculture

2. Terrorism takes many forms: bombings, arson, infrastructure attacks (on water, electric, gas, or telecommunications systems), mass shootings, cyberspace failure or disruption, transportation attacks (hijacking, bombing, sabotage etc.), and common law torts.

   a. Weapons of Mass Destruction (WMD). Any weapon designed or intended to cause death or serious bodily injury through the release, dissemination, or impact of toxic or poisonous chemicals, or their precursors; any weapon involving a disease organism; or any weapon designed to release radiation or radioactivity at a level dangerous to human life (18 USC 2332a).

b. Chemical Agent. A chemical substance intended to kill, seriously injure, or incapacitate people through physiological effects. Hazardous chemicals, including industrial chemicals and agents, can be introduced via aerosol devices (including munitions, sprayers, or aerosol generators), breaking containers, or covert dissemination. A chemical agent attack might release a chemical warfare agent (such as a nerve or blister agent) or an industrial chemical that may have serious consequences. Whether an infectious agent or a hazardous chemical causes an outbreak may not be obvious early in an investigation; however, most chemical attacks are localized, and their effects become evident within a few minutes. Different chemical agents can be persistent or non-persistent. Persistent agents remain in the affected area for hours, days, or weeks. Non-persistent agents may have high evaporation rates, be lighter than air, or disperse rapidly; therefore, the ability to cause casualties is significantly reduced over a relatively short period of time (although they may persist longer in small unventilated areas).

c. Biological Agents. Living organisms or materials derived from them that cause disease; harm humans, animals, or plants; or deteriorate materials. Recognition of a biological hazard can occur by identifying it as a credible threat; discovering bio-terrorism evidence (devices, agents, clandestine labs); diagnosing a disease caused by an agent identified as a possible bio-terrorism agent; or gathering and interpreting public health surveillance data. People exposed to a pathogen such as anthrax or smallpox may not know they have been exposed, and those infected or subsequently infected may not feel sick for some time. Infectious diseases typically progress with a delay between exposure and onset of illness -the incubation period. The incubation period may range from several hours to a few weeks, depending on the exposure and pathogen. Unlike acute incidents involving explosives or some hazardous chemicals, direct patient care providers and the public health community are likely to first detect a biological attack on civilians (See annex M and/or the LPHA ERP). Terrorists also could use biological agents to affect agricultural commodities (agro-terrorism). These agents include wheat rust or viruses that could devastate the local or even national economy.

d. Radiological/Nuclear. High-energy particles or gamma rays emitted by an atom undergo radioactive decay. Emitted particles can be charged alpha or beta particles, or neutral neutrons, or gamma rays. The difficulty of responding to a nuclear or radiological incident is compounded by the nature of radiation itself. Also, involvement of radioactive materials in an explosion may or may not be obvious; depending on what explosive device was used. The presence of a radiation hazard is difficult to ascertain unless the responders have the proper detection equipment and the training to use it. Most of the many detection devices available are designed to detect specific types and levels of radiation -they are not appropriate for

measuring or ruling out the presence of all possible radiological hazards. Terrorists may use the following delivery methods:

1) An improvised nuclear device (IED) is any explosive device designed to cause a nuclear yield. Either uranium or plutonium isotopes can fuel these devices, depending on the trigger. While "weapons-grade" material increases the efficiency of a device, materials of less than weapons grade can still be used.
2) A radiological dispersal device (RDD) is any explosive device that spreads radioactive material when detonated. A RDD includes an improvised explosive device that could be used by placing it in close proximity to radioactive material. A RDD also includes devices identified as "dirty bombs".
3) A simple RDD spreads radiological material non-explosively (for example, medical isotopes or waste).

e. Explosives. Conventional explosive devices or improvised bombs are used to cause massive local destruction or to disperse chemical, biological, or radiological agents. Improvised explosive devices are categorized as explosive or incendiary -using high or low filler explosive materials to explode and/or cause fires. Bombs and firebombs are inexpensive and easily constructed. They are not technologically sophisticated. Of all weapons, these are the easiest to obtain and use. The components are readily available, as are detailed instructions for constructing these devices. They are the likeliest terrorist weapons.

f. Cyber Terrorism. "Malicious conduct in cyberspace to commit or threaten to commit acts dangerous to human life, or against a nation's critical infrastructures … in order to intimidate or coerce a government or civilian population … in furtherance of political or social objectives."

3. Homeland Security Regional Response System includes a response network developed regionally.

Several of the regions include hazardous materials response teams with enhanced capabilities for response to WMD incidents, including incidents involving nuclear or radiological materials, and biological and chemical agents. The following provides a general overview of their locations, number of teams and capabilities:

a. There is currently a Homeland Security Regional Response System located throughout the State of Missouri. (See Appendix 2 to annex N)

b. Many of the existing teams are continuing to develop their heavy and light search and rescue capabilities, acquire the latest technology detection equipment, expand decontamination capability and address logistical support requirements.

c. For all terrorist response operations, the Unified Command System will be used for Direction and Control.

4. Request for Homeland Security Regional Response System (HSRRS):

a. In order to deal with a terrorist event, a network of resources must already

be in place (personnel, equipment and supplies). The current situation will determine the type of resources needed and techniques to be employed.

b. These teams will be mobilized and deployed by the Division of Fire Safety through Statewide Fire Mutual Aid to support local jurisdiction response and recovery operations.

c. Local jurisdictions must request support from the Division of Fire Safety. Call (573) 690-3782 or their regional Statewide Fire Mutual Aid coordinator.

d. If a terrorist attack should occur in Jasper County, which does not have a Homeland Security Regional Response System (HSRRS) and will require support in responding to the terrorist incident, it is the local jurisdiction's responsibility to contact the Division of Fire Safety and request support.

B. Assumptions

1. Jasper County recognizes the responsibility for public health and safety, and the need for a plan to set forth guidelines to deal with terrorism, and the need to exercise the procedures, policies, and guidelines set forth in this Annex.

2. Proper implementation of this Annex can reduce the effects a Terrorist attack and limit related exposure to the public.

3. No single agency at the Local, State, or Federal level possesses the authority and/or the expertise to act unilaterally on the many difficult issues that may arise in response to a threat or act of terrorism, particularly if WMD is involved.

4. Should a terrorist incident be identified, Jasper County could be acting alone pending mobilization and deployment of other local, State and Federal assets.

5. An act of terrorism involving WMD in Jasper County, could immediately overwhelm the local response capabilities.

6. Counter terrorism efforts including intelligence gathering and appropriate response training may reduce some incident potential, but incidents can occur with little or no warning.

7. If appropriate personal protective equipment (PPE) is not readily available, entry into the contaminated area (hot zone) may be delayed until the arrival of trained and equipped emergency response personnel. Responders must also be

aware of secondary devices targeting first responders.

III. CONCEPT OF OPERATIONS

A. General

Upon authorization by the Division of Fire Safety, the Homeland Security Regional Response System (HSRRS) will be able to respond to any terrorism incident that will occur in their region.

B. Primary Objectives in Response to a Terrorist Act:

1. Protect the lives and safety of the citizens and first responders.

2. Isolate, contain, and/or limit the spread of any cyber, nuclear, biological, chemical, incendiary, or explosive device.

3. Identify the type of agent or devices used.

4. Identify and establish control zones for suspected agent used.

5. Identify appropriate decontamination procedure and/or treatment.

6. Ensure that responders have appropriate equipment and personal protective equipment (PPE).

7. Notify emergency personnel, including medical facilities of the danger and anticipated casualties.

8. Notify appropriate state and Federal agencies.

9. Provide accurate and timely public information.

10. Preserve as much evidence as possible to aid investigations.

11. Protect critical infrastructure.

C. Operational Time Frames

1. Mitigation

a. Develop a method for processing information.

b. Analyze potential threats, targets, and potential hazards for the jurisdiction. Disseminate on a need-to-know basis when appropriate.

c. Identify facilities, agencies, personnel, and resources necessary to support a terrorist incident response.

d. Whenever possible, training exercises conducted by local jurisdictions should include terrorism (WMD) and the use of the HSRRS. The purpose is to provide a training opportunity, and to exercise HSRRS capabilities as required by the Office of Domestic Preparedness (ODP).

e. Review and become familiar with the SEOP.

2. Preparedness: Jasper County will take the appropriate security measures. See Appendix 2 of this Annex for Federal and State Homeland Security Advisory System threat guidelines.

a. Develop and review Plans and SOG's for response to a terrorist incident. Open and prepare the EOC for possible full activation.

b. Advise key personnel of the potential risk.

c. Make a recommendation as to a possible course of action.

d. Maintain increased readiness status until the situation escalates or the decision to discontinue operations is given. Train personnel and maintain inventory of equipment and supplies.

3. Response

a. Any individual who receives notification of a terrorist incident or who is responsible for making notifications must assure that every effort is made to contact primary and support personnel as identified in the Basic Plan and to immediately notify SEMA.

b. Once a terrorism incident is suspected, local law enforcement will report and request assistance from the state using existing operating guidelines and/or procedures.

c. Each Emergency Response agency shall send a representative to the EOC and may be required to provide a representative to the on-scene Unified Command.

d. Local government departments will provide assistance to the EOC as dictated by the current situation.

e. Designated local jurisdiction Public Information Officer (PIO) will coordinate all public information releases. (See Annex C)

4. Recovery

a. Determine the extent of damages, prepare a damage assessment report and request assistance.

b. Test, check, and exercise equipment to identify its serviceability.

c. Restore essential public services to critical facilities.

d. Inventory and replace supplies as necessary.

e. Restore all public services to the general population.

Note: Team leaders/Team technicians will contact local jurisdictions to determine specific recovery action items that are specific to the jurisdiction.

IV. ORGANIZATION AND ASSIGNMENT OF RESPONSIBILITIES

Note: Team leaders/Team Technicians will check with each jurisdiction to determine their terrorism responses. If they prefer to use the standard functional guidelines for all hazards, a brief statement will be placed here. If not, the following organization is proposed for their review and editing.

A. Organization

A response organization for a terrorism incident will be under the Direction and Control of the Presiding Commissioner. The coordinated response will be conducted from the EOC. The primary responders to terrorism are normally local law enforcement, fire, and County Health and Medical personnel. All other departments are considered to be support. Each jurisdiction should prepare an SOG and functional check list for response to a terrorism incident as defined in the Basic Plan (P&S Chart). All participating agencies must comply with training requirements set forth by SEMA. In addition, an up-to-date list of emergency response personnel will be maintained and available. The following provides a breakdown by functional areas:

B. Assignment of Responsibilities

1. EOC Function: (See Basic Plan and Appropriate Annex's for Additional Information.)

   a. The Federal Government is responsible for determining the Nations threat level. See Appendix 1 to Annex N for HOMELAND SECURITY TERRORIST WARNING SYSTEM CHART. However, it is up to the local jurisdiction to determine their appropriate threat level based upon their current situation.

   b. If notification of a terrorist incident is received, the Emergency Management Director/Coordinator will immediately contact the Chief elected official and primary and support agencies as identified in the Primary & Support Responsibility Charts.

   c. If notification of an incident is received by someone other than the Emergency Management Office, the individual receiving the notification will contact the Emergency Management Office and/or the Chief elected official immediately.

   d. The Emergency Management Office is responsible for contacting the SEMA Staff Duty Officer and informing them of their current situation and threat. Other local departments will follow their respective SOG's for notifications.

   e. Activate the EOC at either the primary or alternate location. The EOC serves as the clearinghouse for local jurisdiction to collect, discuss, and disseminate information in regard to a particular event occurring within their jurisdiction. The EOC is responsible for maintaining contact with appropriate State and Federal Agencies throughout the incident period.

   f. Review EOP and determine if pre-designated staging areas, mobilizations and reception centers are far enough away from the actual scene so that safety is guaranteed.

   g. If necessary, a Joint Operation Center (JOC) will be established by the Lead Federal Agency (LFA) and will be under the operational control of the Federal on Scene Commander (OSC). The JOC is the focal point and is responsible for coordinating requests from the State. The on Scene Commander may request that a representative from the impacted jurisdiction be assigned to the JOC.

2. Emergency Management:

   a. Direction and Control will originate from the EOC.

b. Ensure the alternate EOCs are ready in the event that the primary EOC is not available.

c. The EOC will be staffed in accordance with the Basic Plan.

d. Coordinate with SEMA and other Federal, State or Local Agency's EOCs as necessary.

e. Prepare and distribute Situations Reports (SITREPS).

f. Coordinate response and recovery operations.

g. Identify and coordinate resource requirements.

3. Local Law Enforcement:

a. Manage the incident scene. Set-up Incident Management System (IMS) to manage/coordinate with other departments and agencies using the Unified Command System.

b. Respond to requests for support/assistance from other departments; local, state, and federal.

c. Provide security, maintain order, prevent unauthorized entry, control and re-route traffic and maintain open access/egress for authorized vehicles into the terrorist incident scene.

d. Assist in evacuation/in place protection notification of the affected area as requested by the EOC or the on-scene incident commander.

e. Develop and maintain Standard Operating Guides (SOGs) of duties, roles and responsibilities for any terrorism incidents involving Chemical, Biological, Radiological, Nuclear, and Explosives (CBRNE).

f. Ensure Scene Security and evidence preservation pending arrival of the FBI and assist the FBI and other investigative authorities in determining responsibility.

g. Establish access control into and out of crime scenes.

h. Provide security for Command Post and EOC.

i. Manage crowd control when necessary.

4. Fire Department

    a. Respond to all reports of terrorist incidents to determine the nature and scope of the incident.

    b. Provide a representative to the EOC and coordinate with Jasper County law enforcement and other agencies for support and resource requirements.

    c. Establish site security areas and hazard exclusion zones in accordance with established procedures and guidelines.

    d. Determine the nature of the incident.

    e. Provide information on hazardous material/evaluation and environmental damage assessment.

    f. Develop and maintain internal guidelines to identify specific roles and responsibilities of fire service personnel in each of the major terrorism incidents involving CBRNE.

    g. Keep the EOC informed.

5. Health Department

    a. Provide personnel safety information to the EOC.

    b. Provide an environmental analysis, with help from the MO Dept. of Health and Senior Services and the Centers for Disease Control and Prevention. Coordinate with County Health Director on all health issues. The County Health Director is responsible to determine the health risk and recommend epidemiological and toxicological solutions to deal with public health issues involved in a terrorist incident. (See Annex M)

    c. Monitor response personnel and general public exposure to chemical, biological, and radiological agents.

    d. Monitor and track potential victims.

    e. Provide information regarding exposure and treatment to potential victims and workers.

    f. The County Health and Medical Director or a designated representative will assist the PIO on Health and Medical issues and in broadcasts concerning public and individual health issues.

g. Keep the EOC informed.

6. Public Works

   a. Respond to emergency requests from the EOC by providing resources, i.e., trucks, earth moving equipment and other needed assets/materials along with operators to reduce hazards, minimizing secondary damage.

   b. Provide barricades to assist in evacuation and/or scene security.

   c. Assist in providing temporary storage of equipment and materials until appropriate locations can be located.

   d. Coordinate with the EOC and the on-scene commander to ensure the area is safe to enter. Do not enter any area if it has not cleared and declared safe for reentry.

7. Emergency Medical Services

   The Chief of Emergency Medical Service (EMS) is primarily responsible for directing the medical response and on-scene operation within the impacted area. The EMS is responsible for identifying and anticipating resource requirements and allocating resources accordingly. EMS coordinates mutual aid in conjunction with the County Health Officer.

8. Public Information Officer (PIO)

   Note: Team Leader/Team Technician: For information on this topic, see Annex C of this plan.

C. All departments, agencies, and individuals support the Direction and Control function as follows:

   1. Initial response operations are the responsibility of the local jurisdiction. The FBI is the Lead Federal Agency for all terrorist attacks and will establish a JOC for Direction and Control if one is needed. The MSHP has primary responsibility for coordinating the state level response.

   2. Local Public Information Operations will be coordinated by the EOC. Note: FEMA/FBI may establish a Joint Information Center (JIC).

   3. Response and Recovery operations are the responsibility of the local jurisdiction. When making a formal request to SEMA for assistance, the local jurisdiction must exhaust its capabilities and resources.

V. CONTINUITY OF GOVERNMENT

A. Line of Succession for Terrorism

1. The line of succession for the Presiding Commissioner of Jasper___County is through the District Commissioners, in order of their seniority.

2. All local departments listed above are required to maintain a line of succession of at least three people. See Basic Plan or appropriate annex for names and/or positions.

VI. ADMINISTRATION AND LOGISTICS

A. Administration

1. To implement Annex N, an incident must be designated a suspected or actual terrorist threat or incident by the Chief elected official.

2. Procedure for dealing with expenses incurred and liability for actions and injuries are outlined in local ordinances, mutual aid agreements and this plan.

3. A post-incident report and critique shall be the responsibility of the lead agencies with input from all involved agencies. This will be used for plan modifications and training exercises.

B. Logistics

1. On Hand stockpiles of Critical Essential materials and supplies should be inventoried and updated annually to ensure its operational readiness or serviceability.

2. Emergency purchasing authority may be authorized by the chief elected official if a terrorist incident has occurred.

3. The cleanup, removal and disposal of contaminated materials will be handled with the same care that was used during the incident. The MO Department of Natural Resources and the US Environmental Protection Agency may provide assistance in removal, disposal oversight, technical considerations and funding.

Appendices

Appendix 1 - Homeland Security Advisory System

Appendix 2 - Homeland Security Regional Response System Overview

Appendix 1 to Annex N HOMELAND SECURITY

ADVISORY SYSTEM

Because of the potential for future terrorist-related incidents, a national security alert system was developed to disseminate information regarding the risk of terrorist acts to federal, state, and local governments and to the American people. This system, known as the Homeland Security Advisory System (HSAS), is based on five color-coded threat conditions, which are summarized in the bellow table.

HOMELAND SECURITY ADVISORY SYSTEM COLOR CODES

RED: Signifies ***severe risk*** of attack and may require the pre-positioning of especially trained teams, closing public and government facilities and monitoring transportation systems.
ORANGE: Signifies a ***high risk*** of attack, meaning the government should coordinate necessary security efforts with armed forces or law enforcement agencies and take additional precautions at public events.
YELLOW: Signifies an ***elevated condition*** meaning there is a significant risk of attack. Increased surveillance of critical locations and implementing some emergency response plans are called for
BLUE: Signifies a ***general risk***, and agencies are asked to review and update emergency response procedures
GREEN: Signifies a ***low risk*** of terrorist attack.

NOTE: The Chief elected official will determine the appropriate Threat Level based on the current situation and recommendations from SEMA.

Appendix 2 to Annex N

Homeland Security Regional Response System Overview

In the late 1990s, the State Emergency Management Agency began to serve as a conduit for federal and state grant money that was provided to local jurisdictions in Missouri to both build basic haz-mat response capability, as well as enhance already existing haz-mat response capability. Some of this money was used to provide training for participants in the program, in addition to buying equipment. Participants were involved in the State Fire Mutual Aid system recognized by the State Fire Marshal's Office. However, there was little consistency between participants in expectations or commitment to the program.

After the terrorist attack and anthrax letters in the fall of 2001, and the advent of Homeland Security grant funding, additional money was made available to the participants involved in the haz-mat program to focus on the terrorist threat. Existing participants were rolled into a Homeland Security Response Team (HSRT) program. Additional haz-mat teams were brought into the program, and other emergency response capabilities such as SWAT and EMS were combined together to constitute 28 individual HSRT "Teams" throughout Missouri. However, there was no consistency from team to team as to size, types of emergency response disciplines involved, or under what circumstances they would respond outside of their own jurisdiction.

In some but not all instances, MOUs were entered into between the state of Missouri and the local jurisdictions who were participating in the HSRT program. However, there was no consistency in these MOUs from team to team. Some HSRT teams with lesser capabilities were designated as "forward teams" and received less funding than other teams, but there was no well thought out plan or strategy on deployment of the teams, under what authority they would be deployed, etc. There was no ability to ask for or deploy only the SWAT or haz-mat component of the team if that is all that was needed.

To date, over 30 million dollars of federal Homeland Security grant money has been spent on the HSRT program in Missouri. The federal Department of Homeland Security recognized the lack of consistency and sustainability in Missouri's CBRNE/WMD initiative and when they awarded the FY-2006 Homeland Security grants, prohibited Missouri from spending any more money on this program until the program justification was re-designed and rewritten to truly reflect a sustainable, consistent, multi-hazard response capability.

In December 2005, with the oversight of the Governor's Homeland Security Advisory Council (HSAC) on the HSRT program, the Council decided that this program needed to evolve into a true regionally focused multi-hazard "CBRNE/WMD" response network or system that was scalable as the need dictated. The Homeland Security Coordinator and the Executive Director of the Missouri Emergency Response Commission were directed by the Advisory Council to become involved in the HSRT program and develop it into a regionally focused system of local resource that could receive homeland security grant funding and other state support. This was the start of the Homeland Security Regional Response System concept.

As a result of the HSAC mandates, an Executive Steering Committee for the Homeland Security Regional Response System was formed. The goal of the Executive Steering Committee was to help obtain regional and local input on moving from 28 multi-discipline teams to a concept of having a network or system in each homeland security region that can bring together individual disciplines as need to respond to CBRNE/WMD incidents. The primary members of the Committee are generally comprised of the Homeland Security Response Team representatives who are already on the nine (9) Homeland Security Regional Oversight Committees (RHSOC), as well as representatives from each of the two Urban Area Security Initiative areas of Kansas City and St. Louis. In several instances, the Executive Steering Committee members are not the RHSOC representatives but have been elected by the consensus of the members of a working group in their region.

The Executive Steering Committee's mission is to provide operational and tactical guidance for the Homeland Security Regional Response System (HSRRS) program. Under the HSRRS, the funding for the program in each region is tied to a "threat matrix". This threat matrix is based on population, number of counties, and number of critical infrastructure and key assets as reflected in the Homeland Security Critical Infrastructure Data Base, in each region. The Governor's Homeland Security Advisory Council sets the overall funding level for this program, utilizing federal Homeland Security grant funding.

Primary and alternate representatives from each region who serve on the HSRRS Executive Steering Committee are responsible for setting up a working group within their regional to determine how that money will be spent to sustain a HSRRS program in their region. The money is administered through the State Administrative Agent, SEMA, to the individual jurisdictions through the regional working groups.

To participate in the HSRRS, a jurisdiction has to agree, in principle, that they are willing, under the existing mutual aid framework, to allow their participant disciplines such as a haz-mat team or SWAT team, to respond to CBRNE/WMD emergencies within their region, and possibly statewide, as their availability and the situation warrants. It is recognized that the state has no authority to order deployment of HSRRS participants, and any response is within the guidelines of the existing Missouri mutual aid system. Part of the grant money acceptance documentation, which each grantee must sign before they receive federal homeland security grant money, articulates this expectation.

Participation in the old HSRT program does not mandate continuing participation in this program, and the expectations or lack thereof for any individual jurisdiction under the old HSRT program does not automatically carry over into the HSRRS.

The HSRRS recognizes that individual jurisdictions in each region have basic response assets and capabilities such as haz-mat response teams, SWAT team, EMS, bomb squads, etc. The grant money provided through the HSRRS is not designed to sustain these basic core capabilities, nor establish new basic core capabilities in jurisdictions that do not already have them. The HS grant money from this program is meant to

sustain CBRNE/WMD related enhanced capabilities for the above-described response assets, such as the capability of a SWAT team to operate in a hazardous materials environment with level A or B or personal protection equipment (PPE), or a haz-mat team to operate at a higher "resource type" level than is expected of a basic haz-mat team. The working groups in each region are expected to collectively agree on funding priorities, the number of different disciplines involved in the program in each region, and other related matters for their regions.

ANNEX O
Catastrophic Event
(Earthquake)

I. PURPOSE

The purpose of this annex is to provide operational concepts unique to catastrophic event planning and response and assign responsibilities to Joplin-Jasper County to meet needs of local jurisdictions following a catastrophic event. It serves as a supplement to the Joplin-Jasper County Emergency Operations Plan (EOP) and is intended to expand the response and recovery organization for a catastrophic event and most likely an earthquake. Many of the operational concepts could be easily adapted to a large scale man-made or natural hazard.

II. SITUATION AND ASSUMPTIONS

A. Situation

1. A catastrophic incident, as defined by the NRP, is any natural or manmade incident, including terrorism, that results in extraordinary levels of mass casualties, damage, or disruption severely affecting the population, infrastructure, environment, economy, national morale, and/or government functions. A catastrophic incident could result in sustained national impacts over a prolonged period of time; almost immediately exceeds resources normally available to State, local, tribal, and private-sector authorities in the impacted area; and significantly interrupts governmental operations and emergency services to such an extent that national security could be threatened. All catastrophic incidents are Incidents of National Significance. These factors drive the urgency for coordinated national planning to ensure accelerated Federal/national assistance.

2. A major earthquake centered in the New Madrid seismic zone is one of the most catastrophic natural hazards facing the State of Missouri. Based on current information, earthquake experts have identified 47 Missouri Counties and the City of St. Louis as those jurisdictions most likely to be impacted by a Richter magnitude 7.6 or greater earthquake on the Modified Mercalli Scale Additional information on Missouri's earthquake threat is provided in the Joplin-Jasper County Hazard Analysis and the State of Missouri Hazard Analysis.

3. The earthquake-planning scenario used to develop this annex is based on the Federal Emergency Management Agency (FEMA) Hazards United States (HAZUS) model-MH Earthquake Event Report, Southeast MO and

was used to develop the loss estimation (damage estimates). The primary purpose of HAZUS is to provide a methodology and software application to develop loss estimations. Although no loss estimation will prove completely accurate, it can provide potential damage patterns and conclusions which provide guidelines for emergency response planning.

B. Assumptions

1. Joplin-Jasper County has the primary responsibility to prepare for and respond to incidents and disasters. As such, Joplin-Jasper County must be prepared to manage initial emergency response and recovery activities for at least the first 96 hours through internal capabilities and/or mutual aid agreements, regardless of the size and scope of the incident. State and federal government will make every effort to provide additional life safety support as quickly as possible; however, state and federal resources may not be available in the early stages of an emergency.

2. Damage to transportation (roads, bridges, rail, air, etc.), communication (phone, cell, emergency 911, public warning sirens, etc.), utility distribution systems (electric, gas, and water, etc.), pipelines, chemical and fuel storage and other infrastructure systems will isolate communities creating virtual islands within the disaster areas. Damaged transportation routes may not be functional for many weeks or months. For at least 96 hours after an earthquake, Joplin-Jasper County must be prepared to meet their own emergency needs.

3. A number of people will self-evacuate the damaged area, if possible, while many others will stay for a variety of reasons including protecting property or caring for farm/companion animals. Evacuation, if necessary, shall be conducted in accordance with Annex J, Evacuation, of the Joplin-Jasper County EOP.

4. Shelters identified for use during other natural disasters may not be available in the impacted area. Temporary sheltering in campers and tents may be determined to be the safest option until buildings and residences are inspected. Prudent and safe actions must be taken into consideration when determining whether to remain in their residence or utilize temporary shelters. Sheltering may take place outside the impacted area.

5. The Governor may suspend some governmental operations in the affected tier and response tier of the state (as required) to direct maximum utilization of available resources in the initial response.

6. Joplin-Jasper County will use all available local resources and implement established mutual aid agreements as needed.

III. CONCEPT OF OPERATIONS

A. General

1. Response Concept:

    a) The State of Missouri's actions in the event of a catastrophic event is based on the concept of automatic response. At a 6.5 magnitude or greater earthquake all state departments/agencies will activate their plans and take appropriate actions for an earthquake response (i.e., assessment of bridges and roads, communication infrastructure, building damage).

    b) Joplin-Jasper County will activate their plans and take appropriate actions for a catastrophic event (earthquake) response to include assessment of bridges and roads, communication infrastructure, building damage, immediate assessment of injuries and medical system status. Initial injury and damage assessments will be forwarded to the State Emergency Operations Center.

2. Tiered Response: In order to implement a coordinated response, the state may be divided into three tiers: Affected Tier, Initial Response Tier, and Support Tier. These tiers were established to facilitate the planning process based on a New Madrid earthquake event but can be applied to any catastrophic event. Tier assignments may change depending upon the event. Refer to Appendix 2 for response tier map.

    a) The Affected Tier consists of jurisdictions that have been identified as the most likely to be impacted by a catastrophic event. For a New Madrid earthquake with a magnitude of 6.5 or greater, regions C and E have been identified as the affected tier.

    b) The Initial Response Tier consists of jurisdictions that have been identified as potential sources of immediate response assets into impacted areas. For a New Madrid earthquake with a magnitude 6.5 or greater, regions B, F, I and G have been identified as the initial response tier.

    c) The Support Tier consists of jurisdictions that have been identified as potential sources of support and replenishment of assets (i.e., sheltering, medical surge, and staging areas.) For a New Madrid earthquake with a magnitude 6.5 or greater, regions H, A and D have been identified as the support tier.

3. Direction and Control:

a) State Unified Command

1) The Missouri State Emergency Operations Center (SEOC) serves as the State's Unified Command.
2) This is the state level command where direction and control will be exercised for the statewide response.

b) State Area Command

l) Area commands will be established at state run facilities in regions C and E in order to facilitate the state's response and recovery efforts to unique region situations.
2) Once established these area commands will coordinate response in their respective regions between local emergency operation centers and the state unified command.
3) Incident Management Teams (IMT) will be deployed by the state to manage state area command operations. An IMT is an overhead management team to facilitate the ICS organization.
4) Additional area commands will be established as the situation warrants.

c) Local Emergency Operations Centers (Local Unified Command)

1) Local Unified Command is the NIMS terminology used for the Direction and Control function within the local emergency operations center.
2) Joplin-Jasper County must be prepared to manage initial emergency response and recovery activities for at least the first 96 hours through internal capabilities and/or mutual aid agreements.
3) Joplin-Jasper County will report initial damage assessments, casualty figures, and condition of critical infrastructure to the State Unified Command at the State Emergency Operations Center.
4) Joplin-Jasper County will coordinate with the State Unified Command/SEOC until otherwise directed.

d) Region D Multi-Agency Coordination Center (D-MACC)

1) Unified Command is the MIMS terminology used for the Direction and Control function within the D-MACC.
2) The D-MACC will activate and coordinate with the Region D

18 counties for emergency response and recovery activities in the first 96 hours or as long as needed.

3) The D-MACC will coordinate Region D's damage assessments, casualty figures, and condition of critical infrastructure to the State Unified Command at the SEOC.
4) The D-MACC will coordinate with the State Unified Command/SEOC until otherwise directed.

4. Damage Assessment

a) Damage assessment of Joplin-Jasper County will be conducted as outlined in Annex D, Damage Assessment, of the Joplin-Jasper County emergency operations plan.
b) Joplin-Jasper County will report damage assessment information to the State Emergency Operations Center as soon as possible. Information should be passed using any available means (web based, faxed, phone, radio, etc.).
c) One of the first priorities of damage assessment for Joplin-Jasper County) will be inspection of local roads and bridges. (Technical assistance may be available from MODOT).

5. Communications

a) The Missouri State Highway Patrol is the lead state agency for providing initial emergency communications to and from the affected areas.
b) Due to anticipated communications limitations, all communications should be limited to critical life safety messages.
c) Communications assets and locations have been identified and are listed in Annex A, Direction and Control, and B, Communications & Warning, of the (Enter jurisdiction name here) emergency operations plan.
d) A NIMS compliant communications plan is attached as shown in Appendix 7, Communications Plan, to this Annex.

6. Points of Distribution (PODs)

a) PODs are temporary locations at which commodities are distributed directly to disaster victims. These may be different locations than where the commodities arrive in the jurisdiction's Points of Arrival (POA).
b) It is the responsibility of Joplin-Jasper County to identify locations and to operate the PODs in their jurisdiction. POD locations are listed in Appendix 4, Points of Distribution, to this Annex.

7. Transportation

a) Joplin-Jasper County must identify available transportation resources for the movement of personnel and/or equipment.
b) Identify vehicles that can be used for transportation of access and functional needs population.
c) These resources are listed in Annex G, Resource and Supply, in the Joplin-Jasper County local emergency operations plan.
d) Local transportation routes are identified in Annex J, Evacuation.

8. Evacuation

a) An Evacuation Management Team (EMT) will be established as part of the State Unified Command. The EMT is responsible for coordinating all evacuations throughout the state.
b) Joplin-Jasper County will coordinate all of their evacuation operations through the Evacuation Management Team located at the SEOC.

9. Mass Care and Access and functional needs Population

a) Refer to Annex L, Reception and Care, of Joplin-Jasper County Emergency Operations Plan.
b) Note: This section of the local plan should address the specific needs of the local jurisdictions associated with mass care, shelters, access and functional needs population, and pets.

B. Phases of Emergency Management

Refer to the general responsibilities in Appendix 2, Attachment B of the (Enter jurisdiction name here) Basic Plan for agency-specific actions.

I. Mitigation (Prevention)

It is recognized that you cannot prevent a catastrophic event from happening; however, there are measures that can be taken to lessen their effect. Such measures could include:

a. Adopt seismic resistant design standards, some of which are currently being followed (i.e., bridges built since 1990).
b. Comply with floodplain management guidelines.
c. Adopt seismic non-structural design standards such as FEMA guides: "Avoiding Earthquake Damage: A Checklist for Homeowners"; "FEMA 74-Reducing the Risks of Non-Structural

Earthquake Damage: A Practical Guide"; "FEMA 232-Homebuilders' Guide to Earthquake-Resistant Design and Construction", etc.

2. Preparedness

The preparedness phase occurs prior to and in anticipation of a catastrophic event (earthquake). This phase focuses on promotion of increased public awareness of the potential emergency, preparation of necessary materials and equipment or response to the emergency, and training for emergency response personnel. Typical functions of the preparedness phase include conducting public information programs, maintaining emergency resources inventory lists and conducting exercise and training programs.

a. Provide training and information to mitigate the effects of a catastrophic event (earthquake).
b. Train and equip response personnel.
c. Identify local staging areas and fuel sources.
d. Identify transportation resources and facilities, to include injured and access and functional needs populations.
e. Identify large, adequately equipped shelter facilities and transportation resources.
f. Identify adequate locations that could serve as Points of Distribution (PODS).
g. Promote personal preparedness i.e., Community Emergency Response Team (CERT).

3. Response

The response phase occurs from the onset of a catastrophic event (earthquake) and lasts until lifeline systems are at least partially restored. During this phase, functions that are critical to saving lives, to protecting people, and meeting basic human needs are performed.

In the event of an earthquake with a 6.5 magnitude or greater all departments/agencies identified in this plan will activate their plans. For other catastrophic events this plan will be activated as determined by the senior elected official.

See Appendix 3 to this Annex for the actions for each Tier Level.

4. Recovery

The recovery phase usually overlaps the response phase. It begins a few days after the catastrophic event (earthquake) and can last for years. During the recovery phase, the federal government provides disaster relief upon Presidential Declaration. Functions during this phase include federal

relief under P.L. 93.288, as amended, for public and individual assistance, establishment of Disaster Recovery Centers, establishment of temporary housing facilities, and federal disaster loans and grants. Long-term recovery includes restoration of affected areas to their normal or to a substantially improved state.

a. Establish liaisons and hold at a minimum, annual meetings of state and local agencies, non-governmental organizations, and volunteer groups that would play significant roles in returning communities to livable conditions.
b. Focus should key on returning social services, schools, environmental issues and public utilities to normal as quickly as possible.

IV. ORGANIZATION AND ASSIGNMENT OF RESPONSIBILITIES

A. Organization

The organization for a catastrophic event (earthquake) will be based on the (Enter jurisdiction name here) LEOP Basic Plan. All operations will be conducted under the National Incident Management System (NIMS). See Appendix 1 to this Annex.

B. Assignment of Responsibilities

The LEOP Basic Plan includes the Primary and Support Responsibilities Chart that shows agency assignments. Agencies and organizations with primary and/or support assignments are responsible for developing and maintaining SOGs, checklists, and other supporting documents that detail how to perform their assigned tasks.

1. In accordance with RSMo, Chapter 44, the chief elected official of the (Enter jurisdiction name here) is ultimately responsible for the coordination of response to a catastrophic event (earthquake).
2. Responsibilities include but are not limited to:

    a. Activate the EOC. (Once activated, the EOC is the coordinating point for all local response and recovery activities.)
    b. Serve as the collection point for damage assessment information.
    c. Coordinate the provision of services, equipment, and supplies to support expedient operations associated with an earthquake disaster; for the approval and acquisition of equipment and supplies not available through normal purchasing channels and ordering time frames following an earthquake.
    d. Identify sites for Points of Distribution (PODS).
    e. Identify sites for Emergency Rest Area Stops.

V. DIRECTION AND CONTROL

Direction and control will be consistent with guidance found in Annex A, Direction and Control and Section III-3 of this Annex.

VI. CONTINUITY OF GOVERNMENT

Continuity of government will be consistent with guidance found in (Enter jurisdiction name here) Local Emergency Operations Plan (LEOP).

VII. ADMINISTRATION AND LOGISTICS

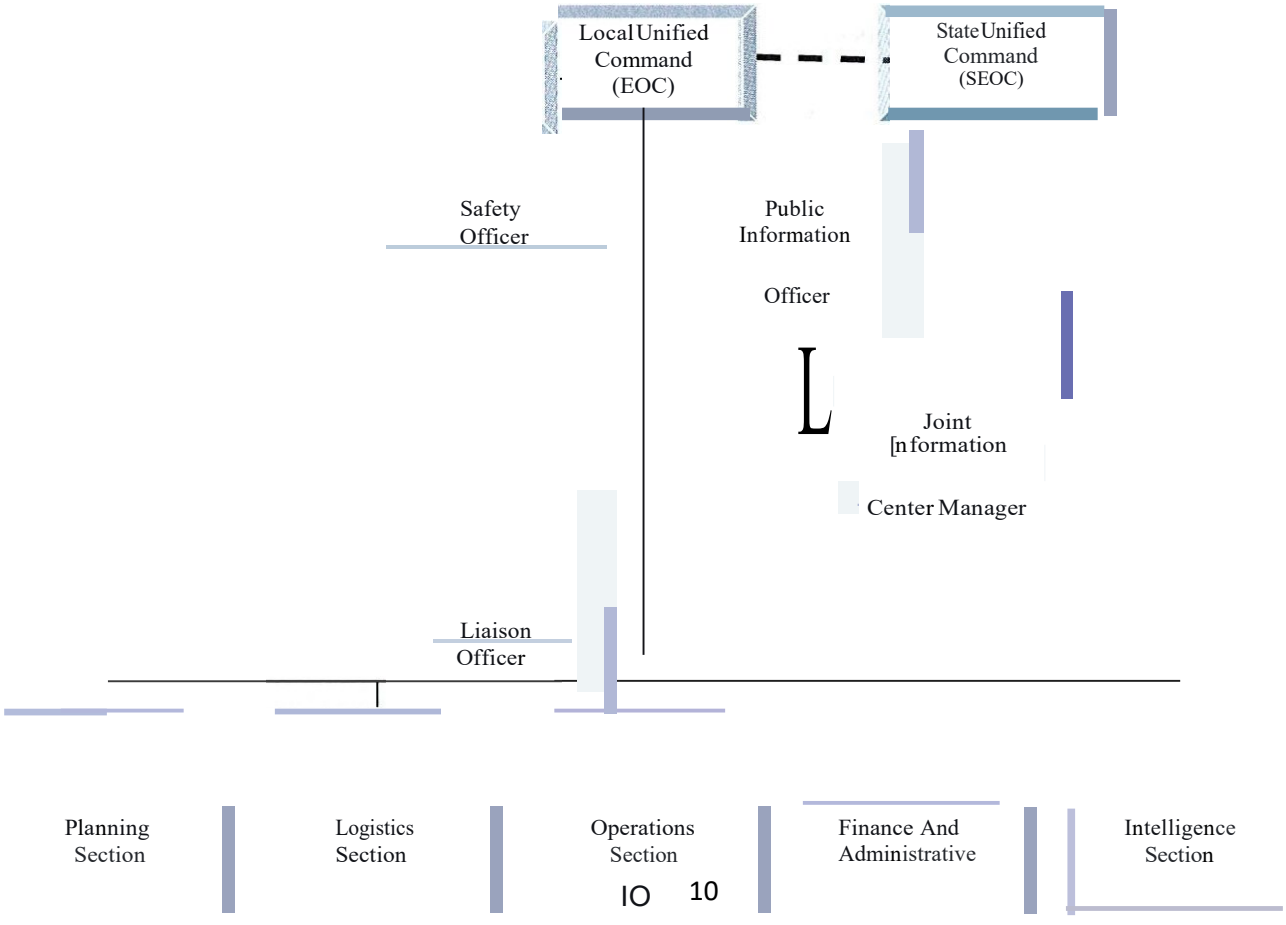
Administration and Logistics will be consistent with guidance found in (Enter jurisdiction name here) Local Emergency Operations Plan (LEOP).

APPENDICES

1. ICS Organization
2. Tier Response Map
3. Tier Response Actions
4. Points of Distribution (PODs)
5. Staging Areas
6. Command Structure -Organization Assignment List (Optional use)
7. Communications Plan (Optional use)
8. Resource Assessment
9. Local Resource Request Form
10. Emergency Rest Area Sites

Appendix 1 to Annex 0

ICS Organization



Appendix 2 to Annex O
Tier Response Map

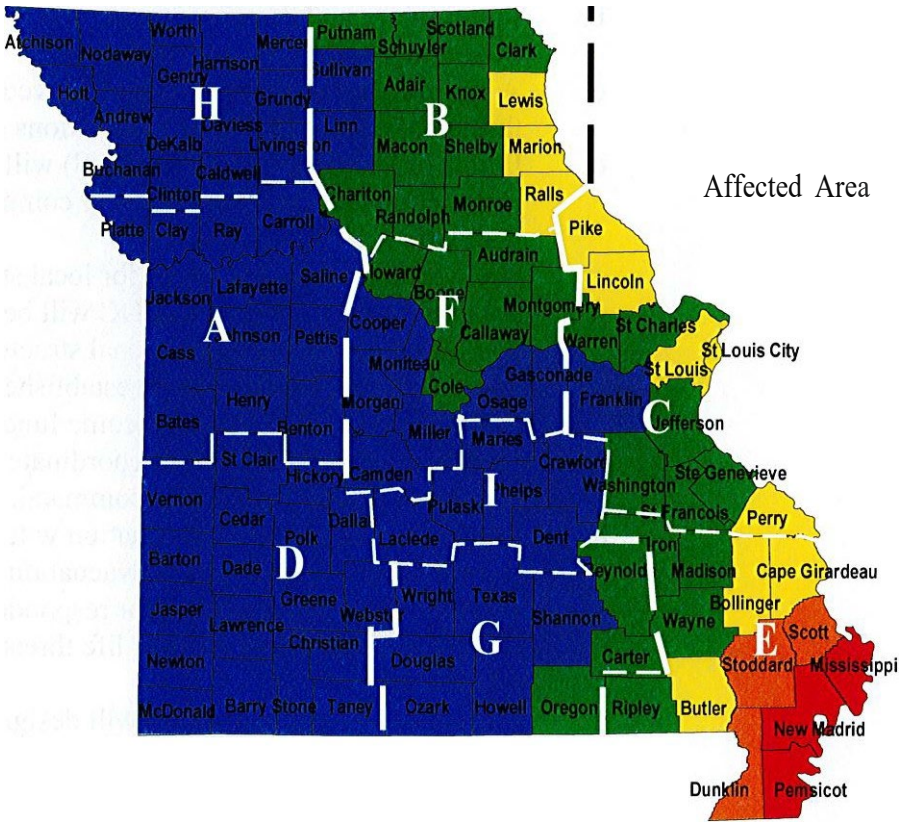
Response Tiers

Initial
Support Response

Affected Area

7.6 Intensity

- Zone VI
- Zone VII
- Zone VIII
- Zone IX
- Zone X



Initial
Support Response Affected Area

(H- A -D) (B -F -1-G) (C-E)

Appendix 3 to Annex 0

Tier Response Actions

Actions following a catastrophic event (earthquake) are as follows:

I. Affected Tier

a. Immediate assessment should be conducted to ascertain injuries and medical system status (i.e., functioning hospitals, clinics, ambulances)
b. Initial injury and damage assessments will be forwarded to the State Emergency Operations Center.
c. A coordinated response will be achieved by mobilizing resources through the local emergency operations center.
d. Points of Distribution Sites (PODS) will be identified by local jurisdictions for the distribution of commodities to the affected population.
e. See Appendix 5 to this annex for local staging area designations.
f. A Local Unified Command EOC will be established. See *Appendix 6* to this Annex for organizational structure.
g. State Area Commands will be established for Regions C and E. When the Area Commands become functional the local emergency operations organizations will coordinate response with their respective region's state area command.
h. Any locally coordinated evacuation will be conducted in coordination with the state's Evacuation Management Team.
i. The priority of movement is for responders into the affected area and movement of victims with life threatening conditions out of the affected area.
j. The Local Unified Command will designate a Local Net Control Station (LNCS) to coordinate radio traffic and frequency allocation. This will be coordinated with the Regional Net Control Station (RNCS), located at State Area Command. See Appendix 7 to this Annex for a sample communications plan form.

II. Initial Response Tier

a. Immediate assessment should be conducted to ascertain available resources that could be deployed to affected regions. This information should be forwarded to the SEOC using the form shown in Appendix 8 to this Annex.
b. Assessments should be done to determine medical surge capacity to support critical patient evacuation from the affected tier.

c. A coordinated response will be achieved by mobilizing resources through the state emergency operations center.

d. All activated response elements must report to assigned staging areas upon mobilization. All response to affected areas will be deployed from designated staging areas.

e. Discipline specific staging areas will be established for initial response tier resources. See Appendix 5 to this Annex.

f. Responders should report equipped for operation and be self-sufficient for up to 96 hours. Initial responders should be prepared for a deployment period of 14 to 28 days.

g. The concept of operations for a voluntary evacuation of the affected tier is to move the affected population through the initial response tier to the support tier of the state.

h. To facilitate evacuation, local jurisdictions will identify, establish, and support emergency rest area sites in coordination with the state's Evacuation Management Team. Emergency rest area sites will be designed to distribute information, emergency medical treatment, fuel, food and water to the evacuating population as they pass through to the support tier of the state. See Appendix 10 to this Annex.

i. Response from the Initial Response Tier will be coordinated through the State Unified Command.

J. State Area Coordination Centers (SACC) may be established.

k. The priority of movement is for responders into the affected tier and movement of victims with life threatening conditions out of the affected tier.

III. Support Tier

a. Immediate assessment should be conducted to ascertain resources that could be used to support mass care of the evacuated population from the affected tier. This information should be forwarded to the State Emergency Operations Center using the form shown in Appendix 8 of this Annex.

b. Assessments should be done to determine medical surge capacity to support critical patient evacuation from the affected tier.

c. Assessments should be conducted to prepare for mass care of the evacuated population and functional needs support services (FNSS) population.

d. Mass care and support of deployed resources are the primary function for the support tier.

e. Response enhancement and replenishment will be drawn from the support tier.

f. Support Tier jurisdictions will activate sites to support mass care of the evacuated population.

g. Any Response from the Support Tier to the Affected Tier will be

coordinated through the State Unified Command.

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h. State Area Coordination Centers (SACCs) may be established.

1. The Region D Multi-Agency Coordination Center will be activated to coordinate the 18 counties in Region D for response and recovery efforts to support the affected area.

J. Any evacuation will be conducted in coordination with the state's Evacuation Management Team.

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ANNEX O

Catastrophic Event (Earthquake)

I. PURPOSE

The purpose of this annex is to provide operational concepts unique to catastrophic event planning and response and assign responsibilities to Joplin-Jasper County to meet needs of local jurisdictions following a catastrophic event. It serves as a supplement to the Joplin- Jasper County Emergency Operations Plan (EOP) and is intended to expand the response and recovery organization for a catastrophic event and most likely an earthquake. Many of the operational concepts could be easily adapted to a large scale man-made or natural hazard.

II. SITUATION AND ASSUMPTIONS

A. Situation

1. A catastrophic incident, as defined by the NRP, is any natural or manmade incident, including terrorism, that results in extraordinary levels of mass casualties, damage, or disruption severely affecting the population, infrastructure, environment, economy, national morale, and/or government functions. A catastrophic incident could result in sustained national impacts over a prolonged period of time; almost immediately exceeds resources normally available to State, local, tribal, and private-sector authorities in the impacted area; and significantly interrupts governmental operations and emergency services to such an extent that national security could be threatened. All catastrophic incidents are Incidents of National Significance. These factors drive the urgency for coordinated national planning to ensure accelerated Federal/national assistance.

2. A major earthquake centered in the New Madrid seismic zone is one of the most catastrophic natural hazards facing the State of Missouri. Based on current information, earthquake experts have identified 47 Missouri Counties and the City of St. Louis as those jurisdictions most likely to be impacted by a Richter magnitude 7.6 or greater earthquake on the Modified Mercalli Scale Additional information on Missouri's earthquake threat is provided in the Joplin-Jasper County Hazard Analysis and the State of Missouri Hazard Analysis.

3. The earthquake-planning scenario used to develop this annex is based on the Federal Emergency Management Agency (FEMA) Hazards United States (HAZUS) model-MH Earthquake Event Report, Southeast MO and was used to develop the loss estimation (damage estimates). The primary purpose of HAZUS is to provide a methodology and software application to develop loss estimations.

Although no loss estimation will prove completely accurate, it can provide potential damage patterns and conclusions which provide guidelines for emergency response planning.

B. Assumptions

1. Joplin-Jasper County has the primary responsibility to prepare for and respond to incidents and disasters. As such, Joplin-Jasper County must be prepared to manage initial emergency response and recovery activities for at least the first 96 hours through internal capabilities and/or mutual aid agreements, regardless of the size and scope of the incident. State and federal government will make every effort to provide additional life safety support as quickly as possible; however, state and federal resources may not be available in the early stages of an emergency.

2. Damage to transportation (roads, bridges, rail, air, etc.), communication (phone, cell, emergency 911, public warning sirens, etc.), utility distribution systems (electric, gas, and water, etc.), pipelines, chemical and fuel storage and other infrastructure systems will isolate communities creating virtual islands within the disaster areas. Damaged transportation routes may not be functional for many weeks or months. For at least 96 hours after an earthquake, Joplin-Jasper County must be prepared to meet their own emergency needs.

3. A number of people will self-evacuate the damaged area, if possible, while many others will stay for a variety of reasons including protecting property or caring for farm/companion animals. Evacuation, if necessary, shall be conducted in accordance with Annex J, Evacuation, of the Joplin- Jasper County EOP.

4. Shelters identified for use during other natural disasters may not be available in the impacted area. Temporary sheltering in campers and tents may be determined to be the safest option until buildings and residences are inspected. Prudent and safe actions must be taken into consideration when determining whether to remain in their residence or utilize temporary shelters. Sheltering may take place outside the impacted area.

5. The Governor may suspend some governmental operations in the affected tier and response tier of the state (as required) to direct maximum utilization of available resources in the initial response.

6. Joplin-Jasper County will use all available local resources and implement established mutual aid agreements as needed.

III. CONCEPT OF OPERATIONS

A. General

1. Response Concept:

a. The State of Missouri's actions in the event of a catastrophic event is based on the concept of automatic response. At a 6.5 magnitude or

greater earthquake all state departments/agencies will activate their plans and take appropriate actions for an earthquake response (i.e., assessment of bridges and roads, communication infrastructure, building damage).

b. Joplin-Jasper County will activate their plans and take appropriate actions for a catastrophic event (earthquake) response to include assessment of bridges and roads, communication infrastructure, building damage, immediate assessment of injuries and medical system status. Initial injury and damage assessments will be forwarded to the State Emergency Operations Center.

2. Tiered Response

In order to implement a coordinated response, the state may be divided into three tiers: Affected Tier, Initial Response Tier, and Support Tier. These tiers were established to facilitate the planning process based on a New Madrid earthquake event but can be applied to any catastrophic event. Tier assignments may change depending upon the event. Refer to Appendix 2 for response tier map.

a. The Affected Tier consists of jurisdictions that have been identified as the most likely to be impacted by a catastrophic event. For a New Madrid earthquake with a magnitude of 6.5 or greater, regions C and E have been identified as the affected tier.

b. The Initial Response Tier consists of jurisdictions that have been identified as potential sources of immediate response assets into impacted areas. For a New Madrid earthquake with a magnitude 6.5 or greater, regions B, F, I and G have been identified as the initial response tier.

c. The Support Tier consists of jurisdictions that have been identified as potential sources of support and replenishment of assets (i.e., sheltering, medical surge, and staging areas.) For a New Madrid earthquake with a magnitude 6.5 or greater, regions H, A and D have been identified as the support tier.

3. Direction and Control:
   a. State Unified Command
      i. The Missouri State Emergency Operations Center (SEOC) serves as the State's Unified Command.
      ii. This is the state level command where direction and control will be exercised for the statewide response.

   b. State Area Command

i. Area commands will be established at state run facilities in regions C and E in order to facilitate the state's response and recovery efforts to unique region situations.

ii. Once established these area commands will coordinate response in their respective regions between local emergency operation centers and the state unified command.

iii. Incident Management Teams (IMT) will be deployed by the state to manage state area command operations. An IMT is an overhead management team to facilitate the ICS organization.

iv. Additional commands will be established as the situation warrants.

c. Local Area Operations Centers (Local Unified Command)

i. Local Unified Command is the NIMS terminology used for the Direction and Control function within the local emergency operations center.

ii. Joplin-Jasper County must be prepared to manage initial emergency response and recovery activities for at least the first 96 hours through internal capabilities and/or mutual aid agreements.

iii. Joplin-Jasper County will report initial damage assessments, casualty figures, and condition of critical infrastructure to the State Unified Command at the State Emergency Operations Center.

iv. Joplin-Jasper County will coordinate with the State Unified Command/SEOC until otherwise directed.

d. Region D Multi-Agency Coordination Center (D-MACC)

i. Unified Command is the NIMS terminology used for the Direction and Control function withing the D-MACC

ii. The D-MACC will activate and coordinate with the 18 Region D counties for emergency response and recovery activities in the first 96 hours, or as long as needed.

iii. The D-MACC will coordinate Region D's damage assessments, casualty figures, and conditions of critical infrastructure to the State Unified Command at the SEOC.

iv. The D-MACC will coordinate with the State Unified Command/SEOC until otherwise directed.

4. Damage Assessment
    a. Damage assessment of Joplin-Jasper County will be conducted as outlined in Annex D, Damage Assessment, of the Joplin-Jasper County emergency operations plan.

    b. Joplin-Jasper County will report damage assessment information to the State Emergency Operations Center as soon as possible. Information should be passed using any available means (web based, faxed, phone, radio, etc.).

    c. One of the first priorities of damage assessment for Joplin-Jasper County) will be inspection of local roads and bridges. (Technical assistance may be available from MODOT).

5. Communications
    a. The Missouri State Highway Patrol is the lead state agency for providing initial emergency communications to and from the affected areas.

    b. Due to anticipated communications limitations, all communications should be limited to critical life safety messages.

    c. Communications assets and locations have been identified and are listed in Annex A, Direction and Control, and B, Communications & Warning, of the (Enter jurisdiction name here) emergency operations plan.

    d. A NIMS compliant communications plan is attached as shown in Appendix 7, Communications Plan, to this Annex.

6. Points of Distribution (POD)
    a. PODs are temporary locations at which commodities are distributed directly to disaster victims. These may be different locations than where the commodities arrive in the jurisdiction's Points of Arrival (POA).
    b. It is the responsibility of Joplin-Jasper County to identify locations and to operate the PODs in their jurisdiction. POD locations are listed in Appendix 4, Points of Distribution, to this Annex.

7. Transportation
    a. Joplin-Jasper County must identify available transportation resources for the movement of personnel and/or equipment.

    b. Identify vehicles that can be used for transportation of access and functional needs population.

c. These resources are listed in Annex G, Resource and Supply, in the Joplin-Jasper County local emergency operations plan.

d. Local transportation routes are identified in Annex J, Evacuation.

8. Evacuation
   a. An Evacuation Management Team (EMT) will be established as part of the State Unified Command. The EMT is responsible for coordinating all evacuations throughout the state.

   b. Joplin-Jasper County will coordinate all of their evacuation operations through the Evacuation Management Team located at the SEOC.

9. Mass Care and Access and Functional Needs Populations
   a. Refer to Annex L, Reception and Care, of Joplin-Jasper County Emergency Operations Plan.

   b. Note: This section of the local plan should address the specific needs of the local jurisdictions associated with mass care, shelters, access and functional needs population, and pets.

B. Phases of Emergency Management
Refer to the General Responsibilities in Appendix 2, Attachment B of the ***(Enter Jurisdiction Name Here)*** Basic Plan for agency-specific actions.

1. Mitigation (Prevention)

   It is recognized that you cannot prevent a catastrophic event from happening; however, there are measures that can be taken to lessen their effect. Such measures could include:

   a. Adopt seismic resistance design standards, some of which are currently being followed (i.e., bridges built since 1990)

   b. Comply with floodplain management guidelines.

   c. Adopt seismic non-structural design standards such as FEMA guides: "Avoiding Earthquake Damage: A Checklist for Homeowners"; "FEMA 74- Reducing the Risks of Non-Structural Earthquake Damage: A Practical Guide"; "FEMA 232- Homebuilders' Guide to Earthquake Resistant Design and Construction"; etc.

2. Preparedness

The preparedness phase occurs prior to and in anticipation of a catastrophic event (earthquake). This phase focuses on promotion of increased public awareness of the potential emergency, preparation of necessary materials and equipment or response to the emergency, and training for emergency response personnel. Typical functions of the preparedness phase include conducting public information programs, maintaining emergency resources inventory lists and conducting exercise and training programs.

a. Provide training and information to mitigate the effects of a catastrophic event (earthquake).

b. Train and equip response personnel.

c. Identify local staging areas and fuel sources.

d. Identify transportation resources and facilities, to include injured and access and functional needs populations.

e. Identify large, adequately equipped shelter facilities and transportation resources.

f. Identify adequate locations that could serve as Points of Distribution (PODS).

g. Promote personal preparedness i.e., Community Emergency Response Team (CERT).

3. Response

The response phase occurs from the onset of a catastrophic event (earthquake) and lasts until lifeline systems are at least partially restored. During this phase, functions that are critical to saving lives, to protecting people, and meeting basic human needs are performed.

In the event of an earthquake with a 6.5 magnitude or greater all departments/agencies identified in this plan will activate their plans. For other catastrophic events this plan will be activated as determined by the senior elected official.

See Appendix 3 to this Annex for the actions for each Tier Level.

4. Recovery

The recovery phase usually overlaps the response phase. It begins a few days after the catastrophic event (earthquake) and can last for years.

During the recovery phase, the federal government provides disaster relief upon Presidential Declaration. Functions during this phase include federal relief under P.L. 93.288, as amended, for public and individual assistance, establishment of Disaster Recovery Centers, establishment of temporary housing facilities, and federal disaster loans and grants. Long-term recovery includes restoration of affected areas to their normal or to a substantially improved state.

IV. ORGANIZATION AND ASSIGNMENT OF RESPONSIBILITIES

A. Organization

The organization for a catastrophic event (earthquake) will be based on the (Enter jurisdiction name here) LEOP Basic Plan. All operations will be conducted under the National Incident Management System (NIMS). See Appendix 1 to this Annex.

B. Assignment of Responsibilities

The LEOP Basic Plan includes the Primary and Support Responsibilities Chart that shows agency assignments. Agencies and organizations with primary and/or support assignments are responsible for developing and maintaining SOGs, checklists, and other supporting documents that detail how to perform their assigned tasks.

1. In accordance with RSMo, Chapter 44, the chief elected official of the (Enter jurisdiction name here) is ultimately responsible for the coordination of response to a catastrophic event (earthquake).

2. Responsibilities include, but are not limited to:
    a. Activate the EOC. (Once activated, the EOC is the coordinating point for all local response and recovery activities.)

    b. Serve as the collection point for damage assessment information.

    c. Coordinate the provision of services, equipment, and supplies to support expedient operations associated with an earthquake disaster; for the approval and acquisition of equipment and supplies not available through normal purchasing channels and ordering time frames following an earthquake.

    d. Identify sites for Points of Distribution (PODS).

    e. Identify sites for Emergency Rest Area Stops.

V. DIRECTION AND CONTROL

Direction and control will be consistent with guidance found in Annex

A, Direction and Control and Section III-3 of this Annex.

VI. CONTINUITY OF GOVERNMENT

Continuity of government will be consistent with guidance found in (Enter jurisdiction name here) Local Emergency Operations Plan (LEOP).

VII. ADMINISTRATION AND LOGISTICS

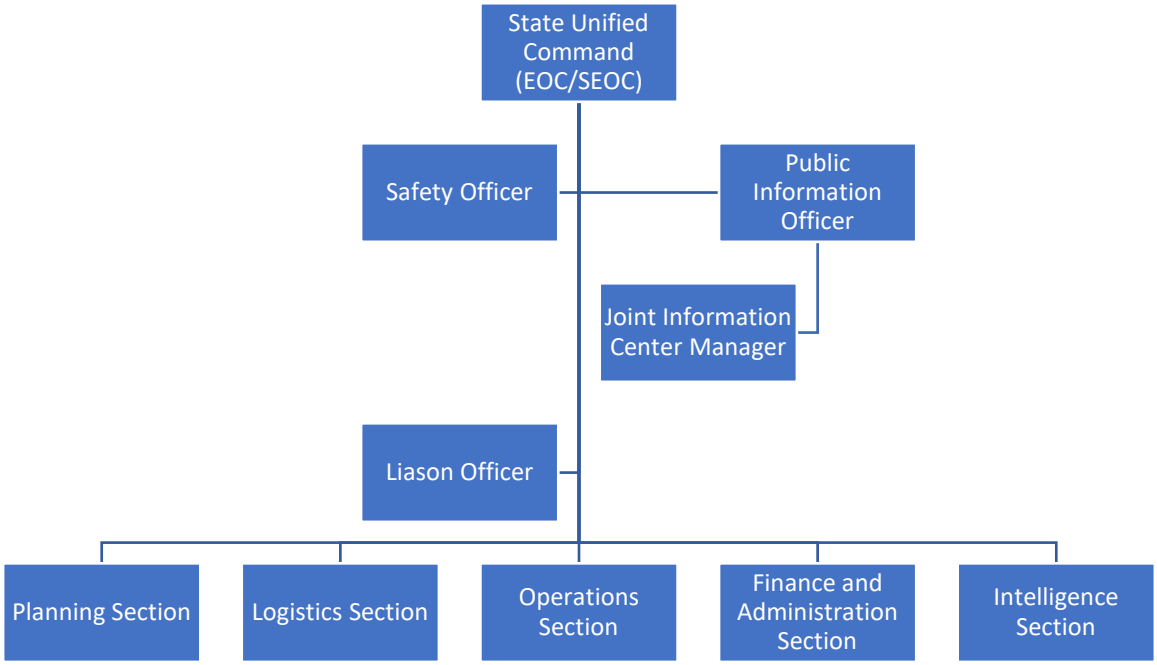
Administration and Logistics will be consistent with guidance found in (***Enter Jurisdiction Name Here***) Local Emergency Operations Plan (LEOP)

APPENDICES

1. ICS Organization
2. Tier Response Map
3. Tier Response Actions
4. Points of Distribution (POD)
5. Staging Areas
6. Command Structure- Organization Assignment List (Optional use)
7. Communications Plan (Optional use)
8. Resource Allocation
9. Local Resource Request Form
10. Emergency Rest Area Lists

Appendix 1 to Annex O

ICS Organization



Appendix 2 to Annex O

Tier Response Map

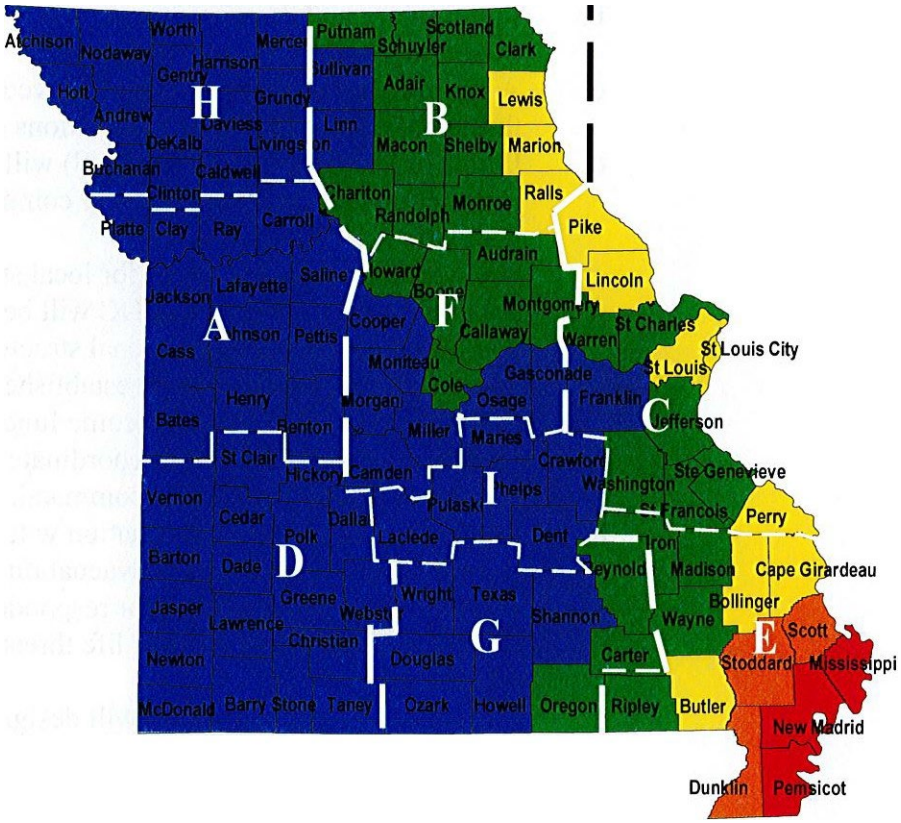
Zone VI

Zone VII

Zone VIII

Zone IX

Zone X



Support	Initial Response	Affected Area
H, A, and D	B, F, 1, and G	C and E

Appendix 3 to Annex 0

Tier Response Actions

I. Affected Tier

A. Immediate assessment should be conducted to ascertain injuries and medical system status (i.e., functioning hospitals, clinics, ambulances)

B. Initial injury and damage assessments will be forwarded to the State Emergency Operations Center.

C. A coordinated response will be achieved by mobilizing resources through the local emergency operations center.

D. Points of Distribution Sites (PODS) will be identified by local jurisdictions for the distribution of commodities to the affected population.

E. See Appendix 5 to this annex for local staging area designations.

F. A Local Unified Command EOC will be established. See *Appendix 6* to this Annex for organizational structure.

G. State Area Commands will be established for Regions C and E. When the Area Commands become functional the local emergency operations organizations will coordinate response with their respective region's state area command.

H. Any locally coordinated evacuation will be conducted in coordination with the state's Evacuation Management Team.

I. The priority of movement is for responders into the affected area and movement of victims with life threatening conditions out of the affected area.

J. The Local Unified Command will designate a Local Net Control Station (LNCS) to coordinate radio traffic and frequency allocation. This will be coordinated with the Regional Net Control Station (RNCS), located at State Area Command. See Appendix 7 to this Annex for a sample communications plan form.

II. Initial Response Tier

A. Immediate assessment should be conducted to ascertain available resources that could be deployed to affected regions. This information should be forwarded to the SEOC using the form shown in Appendix 8 to this Annex.

B. Assessments should be done to determine medical surge capacity to support critical patient evacuation from the affected tier.

C. A coordinated response will be achieved by mobilizing resources through the state emergency operations center.

D. All activated response elements must report to assigned staging areas upon mobilization. All response to affected areas will be deployed from designated staging areas.

E. Discipline specific staging areas will be established for initial response tier resources. See Appendix 5 to this Annex.

F. Responders should report equipped for operation and be self-- sufficient for up to 96 hours. Initial responders should be prepared for a deployment period of 14 to 28 days.

G. The concept of operations for a voluntary evacuation of the affected tier is to move the affected population through the initial response tier to the support tier of the state.

H. To facilitate evacuation, local jurisdictions will identify, establish, and support emergency rest area sites in coordination with the state's Evacuation Management Team. Emergency rest area sites will be designed to distribute information, emergency medical treatment, fuel, food and water to the evacuating population as they pass through to the support tier of the state. See Appendix 10 to this Annex.

I. Response from the Initial Response Tier will be coordinated through the State Unified Command.

J. State Area Coordination Centers (SACC) may be established.

K. The priority of movement is for responders into the affected tier and movement of victims with life threatening conditions out of the affected tier.

III. Support Tier

A. Immediate assessment should be conducted to ascertain resources that could be used to support mass care of the evacuated population from the affected tier. This information should be forwarded to the State Emergency Operations Center using the form shown in Appendix 8 of this Annex.

B. Assessments should be done to determine medical surge capacity to support

critical patient evacuation from the affected tier.

C. Assessments should be conducted to prepare for mass care of the evacuated population and functional needs support services (FNSS) population.

D. Mass care and support of deployed resources are the primary function for the support tier.

E. Response enhancement and replenishment will be drawn from the support tier.

F. Support Tier jurisdictions will activate sites to support mass care of the evacuated population.

G. Any Response from the Support Tier to the Affected Tier will be coordinated through the State Unified Command.

H. State Area Coordination Centers (SACCs) may be established.

I. The Region D Multi-Agency Coordination Center will be activated to coordinate the 18 counties in Region D for response and recovery efforts to support the affected area.

J. Any evacuation will be conducted in coordination with the state's Evacuation Management Team.

K.

JASPER COUNTY

ANIMAL DISASTER & AGRICULTURE RESPONSE PLAN

Agriculture Terrorism

(Agro-Terrorism)

Annex - P

I. INTRODUCTION

An outbreak of a Foreign Animal Disease (FAD) would devastate the U.S. livestock industry. Frequent and rapid movement of livestock throughout the country assures such an event would quickly impact not only Missouri, but also many states, and could dramatically impact the economic health and well-being of livestock, poultry and regulated agriculture industries.

Contamination of foodstuffs can occur at any point during the food production process, as well, from the importation of seeds to the unpacking of finished products at the supermarket.
Along the way, even relatively unprocessed food passes through warehouses and packaging/labeling facilities and is transported several times on vehicles that are not always secure.

Due to their complexity, infectious animal diseases add new dimensions to disaster management. Response functions will vary greatly depending upon the specific disease. There are many disease characteristics to consider such as:

i. stability of the disease agent,
ii. route of disease transmission,
iii. incubation time,
iv. potential species affected, and
v. zoonotic potential.

For example, consider routes of transmission and their influence on response actions. While some agents can be transmitted through aerosols, other agents may require close contact for spread. On the surface, the complexity and unique characteristics of disease agents appears to raise the difficulty of mounting an effective response, but if effective lines of communication are established in advance of a disease incident, major conflicts can be avoided during the response. In short, if responder's focus on whom they communicate with, and how information is received and sent, the specific details about a particular disease can be fed into existing pathways at the beginning of an incident.

The two extremes: "Crops that are grown over thousands of square miles" and "A modern animal farm with often several hundred thousand animals in one location…require that a terrorist use markedly different technique." Such diverse vulnerabilities pose a challenge to law enforcement, emergency management personnel, government regulators and producers aiming to prevent and/or respond to agro-terror attacks. Risk management is critical. By focusing on key vulnerabilities, industry and government leaders can significantly reduce the likelihood of an attack as well as the severity of damage if an attack does occur; smaller sites with fewer animals may be harder to secure, but the consequences of an attack must also be considered.

II. PURPOSE

The purpose of this document is to provide guidance for Jasper County and its various Emergency Response Agencies, to use during Foreign Animal Disease (FAD) or infectious animal disease outbreaks and other events affecting the health, safety, and welfare of humans and animals in disease situations. A coordinated local response is necessary to effectively deal with a crisis of this magnitude and minimize the consequences, in order to return the jurisdiction to a normal state of readiness as quickly as possible following the disaster or incident. This guidance will aid in response organization and resource management during an incident, so that disease-specific information can be inserted to tailor the response for a particular infectious animal disease.

A. **Authority:**

The Missouri Department of Agriculture (MDA) is the lead state agency when dealing with agricultural emergencies; the MDA - Animal Health Division is the lead agency when dealing with infectious animal diseases in the state. The Lead Agency in Jasper County will be the Jasper County Sheriff's Office who will in turn set up a *Unified Command* structure, based upon the National Incident Management System (NIMS) and will work in conjunction with all responding state and federal agencies to deal with this emergency. MDA has the authority to work with local officials and responders to make all necessary rules for suppression and prevention of infectious and contagious diseases among animals in the state, as stated in *Title XVII, Chapter-267 of the Missouri Revised Statutes, specifically, 267.560 – 267.660.* When responding to disease outbreaks, they may need other state agencies and county resources in order to effectively and efficiently contain and eradicate the disease. The **State of Missouri Emergency Operations Plan**, [**Annex-W**], addresses interagency cooperation and responsibilities at the state level. If local resources are overwhelmed, this plan will be activated. This guidance is intended to aid in the structure of county level involvement in infectious animal disease response.

III. SITUATION AND ASSUMPTIONS

A. Situation:

1. Domestic animals, livestock, poultry, and wildlife in Missouri, are resources important to the state. Missouri livestock and poultry industries exceed a value of $4 billion dollars. There are estimated to be 4.1 million head of cattle, 3.7 million head of swine, 99,000 sheep, 16.5 million turkeys, 85,000 horses, a very large egg and brooder business and numerous other domestic and wild animals within the state of Missouri. Missouri is the second ranking state in the nation with 1.99 million beef cattle. A livestock or poultry disease emergency affecting the agricultural community would pose grave economic consequences for the State's livestock and poultry producers and consumers. It may require extraordinary response measures, including animal quarantine and/or euthanasia.

2. Specifically, there are 57,000 cattle and 15,000 hogs in addition to numerous horses and sheep, in Jasper County alone. The county also produces a large number of turkeys, broilers and shell eggs. Including hay, crop production and food processing, agriculture contributes greatly to Japer County's economy. The cattle and hog numbers are the latest county numbers from the National Agriculture Statistics Service (NASS). NASS no longer supplies specific numbers for sheep, poultry or equine.

3. It is not unusual for agriculture in Missouri to be affected by drought, frost, hail or flooding. In the event of any natural or man-made disaster affecting farmers and livestock owners, the priority of emergency services will go to, (in this order):

   i. People
   ii. Livestock
   iii. Facilities and Crop Land

4. Missouri also raises approximately 283.5 million bushels of corn, 34.2 million bushels of wheat, 170 million bushels of soybeans, 1 million pounds of rice and several other grains that are key to the economic strength of the state.

5. Any large disaster or emergency may cause substantial suffering to the human and animal populations in the area. With the advent of larger animal production facilities, an ever-increasing pet population, and the increased vulnerability to intentional introduction of animal diseases, a coordinated local animal response plan is imperative.

6. The outbreak of *Foot-and Mouth Disease* in the United Kingdom in 2001 resulted in the slaughter of millions of livestock and dealt a devastating blow to their agriculture. The damage has been estimated in the billions of dollars. The industry has only recently started to recover from this disease.

7. Globally, recent outbreaks of diseases such as *Classical Swine Fever* and *Bovine Spongiform Encephalopathy (BSE)* forced the slaughter of millions of animals and reduced consumer confidence in food supplies throughout the world. Additionally, the spread of *Chronic Wasting Disease (CWD)* in farmed cervid and wildlife demonstrates the need to address foreign animal diseases on a coordinated and continual basis.

8. Not all animal disease introductions require emergency response functions. Many disease introductions are routinely handled by private practice veterinarians and/or veterinarians employed by the Missouri Department of Agriculture (MDA). If an animal disease is suspected, veterinarians must report *Foreign Animal Diseases* (FAD's) disease

information within 24 hours to MDA - Animal Health Division. Response measures are greatly influenced by the infectivity of the disease, disease transmission characteristics, and the actions necessary to control and contain disease. Response functions may be initiated in the event of an introduction of a highly infectious animal disease, FAD, emerging animal disease, or any other animal disease that meets one or more of the following criteria:

i. It is one of the **International Animal Health Code "List A"** *(Appendix-6)*diseases, as designated by the *Office International des Epizooties (OIE)* which includes the following diseases:

- Foot and Mouth Disease
- Swine Vesicular Disease
- Peste Des Petits Ruminants
- Lumpy Skin Disease
- Bluetongue
- African Horse Sickness
- Classical Swine Fever
- Newcastle Disease
- Vesicular Stomatitis
- Rinderpest
- Contagious Bovine Pleuropneumonia
- Rift Valley Fever
- Sheep Pox and Goat Pox
- African Swine Fever
- Highly Pathogenic Avian Influenza

See Appendix-6 for Animal to Human transmittal

i. It falls outside of the domain of the state's routine prevention and response activities and capabilities.

ii. It is highly contagious, and therefore creates a significant risk of rapid transmission across a large geographical area, including non-contiguous areas.

iii. It creates the potential to cause widespread personal hardship within the agricultural community and/or is detrimental to the state or national economy.

B. Assumptions:

The initiation and distribution of response functions would fall to the discretion of the Missouri Department of Agriculture - Animal Health Division and be carried out by the State Veterinarian, or official designee.

1. Local Jurisdictions have an All-Hazard Emergency Operations Plan in place, which provides the framework for the jurisdiction's response to emergencies and disasters. Local jurisdictions will take necessary initial steps to respond to any agriculture-related emergency, securing the scene until state response agencies arrive.

2. Disasters in the past decade have shown that damage to production agriculture can be not only an economic crisis to individuals and

communities, but especially in animal production agriculture, can prove to be an economic and public health challenge.

3. The extent of a National Incident Command Structure / (ICS) and relevant procedures will be determined to ensure an effective and safe response to the incident. Incident command is a method for all agencies or individuals who have jurisdictional responsibility, and in some cases functional responsibility, to contribute to determining overall objectives for the incident and selection of a strategy to achieve the objectives.

4. The identification of an FAD outbreak anywhere in Missouri would affect Jasper County. This could result in the creation and enforcement of movement control of people, livestock, agricultural products and other property.

5. It is likely that livestock producers will be the first to notice unusual behavior or symptoms in their animals.

6. Private veterinary practitioners will likely be the first responders to any FAD outbreak. A local veterinarian is required to immediately notify suspected FAD cases to the State Veterinarian, or Area Veterinarian in Charge (AVIC).

7. Foreign animal disease can be used as a weapon of mass destruction, causing enormous economic damage, but may also pose as a vehicle or reservoir for zoonotic disease that may threaten human life and the ability to feed the nation.

8. The potential exists in Missouri for FAD introduction as a mechanism of agro-terrorism.

9. Suspected or positive detection of an FAD in our jurisdiction will prompt State and/or Federal officials to employ additional precautions to prevent or mitigate the possibility of spreading the disease.

10. Numerous local, State and Federal agencies will play a role in eradicating the (FAD) disease outbreak.

11. Large numbers of domestic livestock and wildlife may need to be destroyed or controlled, to prevent the spread of a disease after it has been conformed in/around Jasper County.

12. Immediate quarantine areas may be required where suspected or confirmed cases may have originated, inside of which increased bio-security measures can be implemented. The establishment of "Special Zones" may require the development of cleaning and disinfecting

procedures and additional record keeping by producers and/or veterinarians.

13. Facilities and transport vehicles suspected of being contaminated will need to be cleaned and disinfected.

14. The Chief Elected Official (CEO) of Jasper County may issue an *Emergency Proclamation,* or *Disaster Declaration.*

15. The City of Joplin/Jasper County Emergency Operations Center (EOC) may be activated to manage the emergency. Because of the likelihood that this type of event will not be in just a single area, a Joint Information Center (JIC) will be set up and activated to handle press releases and all public information efforts.

16. Any disaster may (potentially) have adverse effects on the jurisdiction's animal population, or the public health and welfare of its citizens.

17. Animal shelters may need to be quickly established and staffed for extended periods of time throughout the disaster, and possibly, after the disaster.
[See Appendix – 10 for a list of pre-designated Animal Shelters and Sheltering Areas].

18. De-population of animals will be conducted in the most humane and expeditious manner, to stop the spread of the disease and limit the number of animals affected.

19. Carcass disposal sites will need to be rapidly identified and established. Potential Solutions, in preferred order by Missouri DNR, are as follows: *[See Appendix –11]*
   i. Rendering
   ii. Composting
   iii. Burning
   iv. Sanitary Landfill
   v. On-site Burial

20. People with "Companion Animals" frequently will choose **not** to evacuate, rather than leave animals (livestock or pets) behind.

21. Large scale evacuations of livestock are not considered feasible, <u>regardless</u> of the type of disaster.

22. State or Federal assistance to deal with an FAD may not be available for several hours or days following an event. <u>Local resources</u> must be

utilized before requesting outside assistance.

IV. CONCEPT OF OPERATIONS

A. General:

During an animal communicable disease outbreak or natural hazard emergency, initially, local response agencies will be the first line of defense, and state agencies will respond when advised or may respond on their own if the deem the situation warrants it. If the situation warrants, applicable federal agencies will be called in by the State Department of Agriculture - Animal Health Division. Technical advice and assistance through established statewide organizations and associations, is the Missouri Department of Agriculture's primary emergency responsibility.

B. Actions to be Taken (by Operating Time Frame):

Refer to the General Responsibilities (in the General Plan Section) of the Joplin/Jasper County Jasper Emergency Operations Plan. The following agency-specific responsibilities must be completed:

1. **MITIGATION**

   i. Any zoological or wildlife parks, marine animal aquariums, laboratory animal research facilities, animal shelters, the University of Missouri Extension, other university veterinary medical and animal science centers, livestock markets and large livestock operations (i.e., stockyards), will be encouraged to develop emergency procedures and evacuation plans for the animals in their care and custody. Any written plans should be provided to the Joplin/Jasper County Emergency Coordinator, for comment and review.

   ii. The Joplin/Jasper County Emergency Coordinator will determine the best methods to disseminate information to the media.

2. **PREPAREDNESS**

   i. Develop a close working relationship with the USDA representative in the local area, as well as the University of Missouri Extension.

   ii. **Joplin/Jasper County EOC-** Organize and establish command structure, chain-of-command (for field response as well as EOC response), and review all annexes of this plan as well as the Joplin/Jasper County EOP, to clarify FAD outbreak roles and

responsibilities.

iii. **Joplin/Jasper County EOC-** Ensure all local veterinary services, animal care facilities, humane society personnel and local animal care personnel are identified and incorporated into the EOP, as well as contact information being maintained.

iv. **Jasper County Health Department-** Maintains an accurate lists of all food processors in the area, as well as their emergency contact information, (and has access to all dairy processors in the area). [See Appendix – 12 for information].

v. **Joplin/Jasper County EOC-** Ensure that First Responders and officials that would likely be involved in the response to an FAD incident, are trained in the Incident Command System (ICS)//National Incident Management System (NIMS)

vi. **USDA-** Undertake surveillance for diseases at all meat and poultry processing plants. (Utilize Regional or State Animal Health Division personnel to accomplish this task).

vii. **MDA-** Monitor required testing (by Regional or State Animal Health Division personnel) of test-eligible breeding animals at all livestock markets.

viii. **MDA-** Monitor Disease Reports from Missouri veterinary practitioners.

ix. **MDA-** Monitor federal reports of animal disease outbreaks in other states.

x. **Joplin/Jasper County EOC-** Ensure veterinary services and animal care considerations are incorporated into the EOP's *Evacuation [Annex-J]* and *Sheltering [Annex-L].*

xi. **Joplin/Jasper County EOC-** Check the status of all communications systems to ensure complete and proper communications are available and operational when needed.

xii. **Joplin/ Jasper County EOC**- Develop Mutual Aid Agreements with other county and state agencies, professional associations, the private sector and volunteer organizations.

xiii. **Joplin/Jasper County EOC-** Coordinate with the local Humane Society in your area, to identify potential pet

shelters near approved Red Cross shelters. Also, work with local church groups, the Salvation Army and anyone else in your area, that does, or assists with sheltering.

3. **RESPONSE**

i. **MDA & USDA-** Execute ALERT & WARNING procedures. [Appendix-8].

ii. **Joplin/Jasper County EOC-** Respond to and take initial steps to contain the incident. Notify SEMA, the Missouri Department of Agriculture, the State Animal Health Division, the United States Department of Agriculture, of the incident in the Joplin/Jasper County area, (if they are unaware of the incident).

iii. **MDA & Joplin/Jasper County EOC-** Conduct information gathering and dissemination.

iv. **On Scene Commander-** Establish contact with the Joplin/Jasper County EOC, or any other Departmental Operations Center's (DOC's), that may be activated as part of this response effort.

v. **Joplin/Jasper County EOC-** Initiate call-out plans as outlined in Annex-A, (*Direction and Control Annex*) of the Joplin/Jasper County EOP.

vi. **On-Scene Commander-** On-Scene/Incident Commander makes recommendations to the County/City EOC, about:
   a. Priority of Actions
   b. Outside Assistance Needed

vii. **Joplin/Jasper County EOC & Jasper County Sheriff's Office-** Set up and start operating a Joint Information Center (JIC) in accordance with Annex-C of the Joplin/Jasper County EOP, to coordinate all public information efforts. Ensure proper local, state, federal and private industry representatives are on site and part of the JIC. Press releases, news conferences and briefings will be done jointly. Notify the Region-D Public Information Officer at the Springfield/Greene County Health Department, and apprise her of the situation.

viii. **Joplin/Jasper County EOC-** Request federal assistance through SEMA, if local resources are overwhelmed.

ix. **Joplin/Jasper County EOC-**Monitor and support the needs of county, state, federal and private industry Animal Disaster

Response Teams (ADRT's) that respond to the emergency.

x. **On-Scene Commander-** During an animal disease emergency, ensure all responding personnel have the proper safety equipment and clothing needed to handle the emergency and that it is worn at all times.

xi. **Joplin/Jasper County EOC & Jasper County Sheriff's Office-** Secure and have available, all supplies, equipment, additional personnel, and technical assistance needed, from support agencies, volunteer organizations and private sector resources, as needed.

xii. **Jasper County Sheriff's Office-** Manage and direct the evacuation and/or disposal of animals from the disaster area. Ensure proper technical experts are on- scene to prevent animal injury, and further disease dissemination.

xiii. **USDA/MDR/DNR-** Using available technology, record the location of all animal disposal sites, using Geographic Information System (GIS) technology. Place information files of the sites with all appropriate local, state, federal and private sector industries, as well as with the County Recorder(s) of Deeds.

xiv. **Joplin/Jasper County EOC & Jasper County Sheriff's Office-** Ensure proper shelter facilities are provided at the site(s) to house responders and protect them and their equipment from the elements (as needed).

xv. **Joplin/Jasper County EOC-** Ensure portable toilets (Porta-Potties) are procured, delivered and properly maintained in shelter areas and in field areas where first responders are working.

xvi. **Jasper County Sheriff's Office**- Ensure proper staging areas (and security) are provided to stage equipment brought in by responding agencies.

xvii. **All Agencies-** Report casualties, damages, and unmet needs.

xviii. **Joplin/Jasper County EOC & Jasper County Sheriff's Office-** Determine unmet needs and meet them as needed.

xix. **Joplin/Jasper County EOC-** Continue to augment all services at the scene, to affect in the rapid recovery from this incident.

xx. **Joplin/Jasper County EOC-** Maintain administrative and financial records of personnel, supplies and other expended resources; report this information to local, state (and federal authorities) when needed.

xxi. **USDA/State Veterinarian/Jasper County Health Department-** Establish quarantine zones and/or quarantine areas for the quarantine of animals throughout the emergency, as necessary. Maintain these areas until no longer needed. The State Veterinarian issues and controls Animal Quarantines. The State Health Department along with the local jurisdiction (City/County) Health Department, issues and controls Human Quarantines.

xxii. **USDA/DNR/MDA/Jasper County Health Department-** USDA will Act as On-Scene Safety Officer Ensure proper sanitation stations (hand washing) and/or hand sanitizer is made available and utilized at the scene. Ensure proper protective clothing and other safety/PPE is worn at all times.

xxiii. **Jasper County Health Department-** Be available to conduct an on-scene shot clinic for workers at the scene who may need some sort of a vaccination (if needed).

xxiv. **Jasper County Red Cross/Salvation Army**- Be ready to feed all workers at the scene as well as volunteers at the scene and other locations that are involved in this incident, as necessary.

2. RECOVERY

i. **All Agencies-** Continue all response efforts, as needed.

ii. **Joplin/Jasper County EOC/Joint Information Center (JIC)** Continue all Public Information activities, as required.

iii. Jasper County Sheriff's Office Ensure proper safety barriers are in place and maintained. Monitored (on a regular basis), sites used to dispose of animal carcasses. Work with appropriate local, regional and/or state agencies to monitor sites, surrounding areas and water supplies in the area.

iv. **Joplin/Jasper County EOC & Jasper County Health Dept.-** Ensure mental health workers are on-scene and at other areas that were activated, as well as at any shelter areas, to conduct mental health counseling for first responders, volunteers and victims.

v. **Joplin/Jasper County EOC-** Ensure proper State and/or Federal authorities are on scene to deal with financial assistance for victims, as needed.

vi. **USDA/State Veterinarian/Jasper County Health Department-** Evaluate the quarantine status (animals and/or humans) that was put in place during the FAD outbreak, to decide if it is still needed, or not.

vii. **All Agencies-** Submit preliminary expense reports on personnel, resources and supplies expended, to the proper state (and/or federal) agencies.

viii. **All Agencies**- Maintain all administrative and financial documentation from the event, for historical and legal purposes.

ix. **Joplin/Jasper County EOC**- Arrange for and augment veterinary medical services, to expedite rapid recovery, using local resources, as needed.

x. **All Agencies**- Conduct cleanup. Restore all equipment and supplies to a normal state of operational readiness.

xi. **Joplin/Jasper County EOC-** Establish a Long Term Recovery Committee to deal with all aspects of Recovery from an animal-related or agricultural event.

C. Communication/Resources:

1. Introduction of an agent capable of causing an infectious animal disease incident could occur either accidentally, or deliberately, (through an act of agro-terrorism). Detection of agents can occur through routine slaughter surveillance or inspection, trace back information from a disaster outside of Missouri, or on a farm during a foreign animal disease investigation.

2. A Foreign Animal Disease (FAD) investigation is initiated by a call to state veterinary officials from a producer or veterinarian reporting clinical signs of a foreign, emerging, or unusual animal disease on a farm. An FAD investigation can also be initiated by the report of a positive trace from any infected or suspect farm, to a farm in Missouri. The State Veterinarian or Area Veterinarian in Charge initiates the investigations, using specially trained personnel.

3. Upon identification of a highly suspect or confirmed case of an infectious animal disease, the State Veterinarian's office will notify the Joplin/Jasper

County Emergency Management Director either directly, or through State DHSS, SEMA, or the Missouri Center for Emergency Response and Terrorism (CERT). The Joplin/Jasper County Emergency Management Director will be briefed on the situation and will provide assistance, and/or activate their Emergency Operations Center (EOC), if applicable.

4. As a courtesy and in an effort to be prepared in the event that the FAD investigation is "positive" for an FAD, all Hospitals and Physicians in the area should be contacted in advance and advised of the situation and told to be prepared for an on slot of people that may have actually been exposed in some way, as well as those who think they may have been exposed, the "worried well."

i. If EOC activation is necessary, primary support agencies that should be present in the EOC and incorporated into the incident command structure include:
   a. City/County Elected Officials
   b. City/County EMS
   c. City/County Law Enforcement
   d. City/County Public Works
   e. City/County Engineers
   f. City/County Fire Department (as well as Hazmat)
   g. City/County Health Department
   h. City/County Division/Department of Human Services
   i. Volunteer Agencies

ii. Other agencies, that will serve a vital function in response, include:
   a. State (District or Regional) Veterinarians
   b. Rapid Response Veterinary Team(s)
   c. Local Missouri Department of Natural Resources (DNR)
   d. Missouri Department of Transportation (MoDOT)
   e. American Red Cross (ARC)
   f. Local COAD or State VOAD

Depending upon the magnitude of the outbreak, it may not be possible for all of these groups to be physically present in every county, but they should be relied upon as valuable resources. Again, depending upon the magnitude of the outbreak, City/County and/or Regional Emergency Operational Centers, may/may not need to be established.

i. Additional resources that should be pre-identified and available to assist with infectious animal disease disasters, include:

   a. Local Veterinarians,
   b. County (College and/or University) Agricultural Extension Staff, and

These personnel could be incorporated into the Emergency Public Information Plan (Annex -C), or could coordinate logistical resources and supplies (personnel and equipment/supplies). Also considered are existing resource sharing agreements (or Sheriff's Department and/or Fire Department Mutual Aid Agreements) in response planning and implementation.

D. Public Information:

Due to the complexity of infectious animal disease incidents and the concern for causing widespread panic, accurate and reliable public information is critical. Any information received at the Joplin/Jasper County EOC or the Jasper County (Carthage) EOC from the Missouri Department of Agriculture - Animal Health Division should be regarded as confidential and not for distribution to the general public, as well as any information passed through the Joint Information Center (if it is staffed at this point).

Confidentiality is particularly vital in the initial stages of an investigation, prior to confirmation. The local jurisdiction will retain the right to issue statements/information, in consultation with State and/or Federal agencies involved. If any word gets out before it is ready to be OFFICIALLY released, people thinking they have been infected or exposed, referred to as "worried well," will be flooding the hospitals in great numbers. [For example, in March 2002, news of livestock being tested for Foot and Mouth Disease in Kansas became public and caused the cattle futures to drop drastically. The test results were negative, but the damage had been done, this incident illustrates how imperative confidentiality is in a disease investigation]. The Missouri Department of Agriculture - Animal Health Division will have information compiled specifically for producers and the general public, and this information will be supplied to local jurisdictions.

This information should be incorporated into existing Emergency Public Information Plans (Annex - C) of the Joplin/Jasper County EOP. During all animal and/or agricultural-related emergencies, a Joint Information Center (JIC) will be activated to handle all press releases, press conferences and interviews. All agencies (City, County, State and Federal will be invited to be part of this JIC).

V. ORGANIZATION AND ASSIGNMENT OF RESPONSIBILITIES

A. Organization:

A. During an emergency, the Missouri Department of Agriculture (MDA) will operate under its normal organizational structure. Emergency activities will be conducted from the departmental headquarters building in Jefferson City, unless otherwise advised. Access for all local jurisdictions to MDA will be through SEMA Headquarters.

B. Each county in Missouri has a comprehensive All-Hazards Emergency Operations Plan, which provides the framework for the jurisdiction's operational response to natural and man-made disasters; this would include any response to suspect and/or actual FAD outbreaks. The State Veterinarian, in close coordination with the County Emergency Management Director (EMD), and the State Emergency Management Agency (SEMA), will direct all FAD responses in Missouri.

Joplin City/Jasper County EOC
303 E. 3rd Street
Joplin, Mo.

Jasper County (also has an additional EOC)
401 W. Chestnut
Carthage, Mo.

ii. The County EMC will coordinate with support agencies and organizations (such as local veterinary practitioners, humane society organizations, animal rescue groups, and private sector entities), to meet all emergency responsibilities.

iii. The County EMC, with the approval of the County Commission, may designate a willing individual to serve as the County Animal Emergency Coordinator (CAEC), if needed. Duties may include:

a. Assisting veterinarians and agriculture officials in making appropriate and timely FAD Reports.
b. Ensuring all communications from the State Veterinarian is received and passed on to the County Veterinarian(s) and other animal health professionals, in a timely manner.
c. Consulting with emergency response officials on animal issues during disaster or emergency operations.

C. Jasper County (and local governments in the impacted area) will utilize their available resources first in any emergency response effort. Additional State assistance may be requested through SEMA. Emergency management response strategies will be based depending on the location(s) of the animal population, and where the disease or disaster is located. More impacted areas have a higher priority for State and /or Federal resources.

Missouri Department of Agriculture - Animal Health Division
Normal Business Hours: (573) 751-3377
24-Hour Number / SEMA Duty Officer: (573) 751-2748
Missouri Department of Natural Resources
24-Hour Emergency Response Hotline: (573) 634-2436
24-Hour Number / SEMA Duty Officer: (573) 751- 2748

B. When a suspected case of an FAD is observed, it shall be reported immediately to the Mo. Department of Agriculture (Division of Animal Health), the USDA (Animal and Plant Health Inspection Service/Veterinary Service Office) and the Mo. Dept. of Natural Resources (DNR), 24-hour emergency response hotline. Local farmers and/or growers can contact their veterinarian for animal issues. This will trigger an FAD investigation by a Foreign Animal Disease Diagnostician (FADD). The State Veterinarian will determine the need for a quarantine order following consultation with the FADD and the USDA/APHIS/VS Area Veterinarian in Charge, based on the findings of the FADD. The FADD will work in close coordination with the State Veterinarian, the Joplin/Jasper County Emergency Manager, the Jasper County Animal Services Coordinator, and other local officials and organizations.

B. Responsibilities:

A. **<u>State Emergency Management Agency (SEMA)</u>**

i. The State Emergency Operations Plan (SEOP), or portions of it are implemented according to the emergency and disaster classification procedures outlined in Appendix-1 of the Joplin/Jasper County Basic Plan, and the SEOP. *<u>For confirmed cases, Emergency Classification-III will be declared…</u>*

ii. SEMA drafts the Governor's Executive Order for a Declaration of a State of Emergency when an animal disaster emergency is <u>confirmed</u>.

iii. SEMA coordinates the State response and acts on requests from local jurisdictions.

iv. SEMA coordinates Public Information.

v. SEMA activates the State Emergency Operations Center (SEOC) in accordance with Annex-A of the SEOP.

vi. SEMA will call out the Disaster Medical Assistance Team (DMAT) or the Disaster Mortuary Operational Response Team (DMORT) if

it is deemed necessary by forces on the ground in the disaster area.

vii. SEMA evaluates whether to request a Presidential Disaster Declaration.

B. **Missouri Department of Agriculture (MDA)**

i. Will be the point of contact for access to all state agencies and resources needed to mitigate the emergency.

ii. Ensure all required sampling and analysis is conducted and/or provide proper access to correct laboratory facility following USDA protocol, as required.

iii. Provide an MDA Liaison to the Joplin/Jasper County EOC if one is not already on scene.

iv. Assist in the alleviation of immediate agriculture problems, including disruption of product supply and distribution, as needed.

v. Supply technical advice and assistance in the inspection and disposal of damaged or contaminated foodstuffs and commodities, decontamination of household goods and alleviation of public health hazards, including actions associated with the food and vector transmitted disease outbreaks and vector control activities, as requested.

vi. **MDA/USDA/FDA/Jasper County Health Dept.-** Coordinate a joint effort to conduct inspections and assure the purity of food at the retail, wholesale and processor level, as needed. The USDA/MDA/FDA, will handle the *processor level*. The Jasper County Health Dept. will handle the *retail/wholesale level.*

vii. Coordinate, identify and maintain a site specific listing of food, grain, other consumable agricultural products and distributors in the South-Western Missouri, and the Four-Corners area.

viii. **Local Joint Information Center (JIC)/MDA-** In coordination with the Missouri Department of Health and Senior Services, issue public information notices, as required, pertaining to the use of agricultural products, livestock and land use, during and after a major disaster.

ix. Animal Carcass Disposal Assistance – (see Appendix – 9)

a. Work with and coordinate all animal carcass disposal sites through DNR.

b. Provide a list of equipment that could be used for carcass disposal.

c. Assist in burial and/or disposal of dead animals.

C. **Joplin/Jasper County Emergency Management Coordinator (EMC)**

i. If not already done, immediately determine which county and local agencies/departments/organizations, have responsibilities in an animal emergency for sheltering, feeding, and routine care, for stray or abandoned pets, livestock, or exotic animals (exotics). Maintain phone/contact information.

ii. Maintain current listings of emergency contacts and resources necessary for an FAD response, or other animal emergencies (see Appendix - 3).

A complete list of emergency contacts can be found in the *Supplemental Annexes* of the Joplin/Jasper County EOP. A list of resources can also be found in the *Supplemental Annexes* of the Joplin/Jasper County EOP.

iii. Act as a liaison to local veterinarians, regulatory veterinarians, humane organizations, farm service agencies, and other responders, on emergency planning and preparedness issues.

iv. Produce and maintain maps with the locations of large animal operations or other special animal facilities identified, to include:
a. Volume (numbers/types on animals)

b. Contact Information (names/phone numbers)

c. GIS Coordinates (to include natural resources information)

v. Coordinate with the Humane Society American Red Cross (ARC) to provide information to residents and transients, on animal care instructions and emergency procedures in the event of an evacuation or sheltering recommendation. Coordinate with local kennels and animal shelters, for temporary pet sheltering. **Animals are not allowed in any American Red Cross Shelter. The exception to this is seeing-eye dogs and assistance dogs for the**

handicapped.

vi. Oversee the activities of the Jasper Co. Animal Emergency Coordinator.

vii. Coordinate with State agricultural / environmental officials, to determine the best methods for disposing of dead animals.

viii. Joplin/Jasper County EMC // JIC Ensure accurate and credible information is relayed in a timely fashion, Address misunderstandings, questions, rumors and/or confusion about the emergency and its effects, as necessary. Utilize the EAS system, reverse 9-1-1, or route-alerting (by local law enforcement, fire services or volunteer agencies), as needed, working through the Jasper County Sheriff's Office.

D. District Veterinarians and Animal Disaster Response Teams (ADRT's)

i. The Missouri Department of Agriculture - Animal Health Division has eight (8) District Veterinarians, (see Appendix-3 and Appendix-4) for district representation and veterinarian contact information).

ii. The following applies to Southwestern Missouri:

a. DISTRICT 8: Barton, Vernon, Jasper, Newton, McDonald, Dade and Lawrence.

b. DISTRICT VETERINARIAN: Valerie Gaeke, DMV (417) 576-3643

District Veterinarians and an Animal Disaster Response Team (ADRT's), provided by the Midwest Animal Response Organization out of Shawnee, Kansas, are responsible for administering state and cooperative state-federal animal health programs, acting as a designated official of the state veterinarian when conducting investigations or initiating quarantines, or providing veterinary resources to the local level.

E. Technical Assistance Resource:

i. Due to the complexity of infectious animal diseases, response functions will vary greatly depending on the disease in question. Veterinary support will be vital during the "**Response Phase"** and needs to be integrated into the Incident Command System. The situation will dictate where the State [District] Veterinarian and ADRT's will be most valuable. In some instances, it may be on the

scene, and for others it may be in the EOC.

F. State Veterinarian Liaison and Coordination:

i. The State [District] Veterinarian and ADRT's play an important role in an incident; they represent a direct conduit to the State Veterinarians office and act as a designee. They should be looked to as a resource to provide information and vital feedback to the city/county command structure.

C. Law Enforcement

Law enforcement agencies will be called upon to establish and maintain perimeter control and security for various "Enforcement Zones" that may be developed. Because of the vast area that may be affected, additional resources could be utilized, such as Sheriff Reserves and (sworn) Mutual Aid law enforcement personnel from other counties. Community Emergency Response Team Members (CERT), Volunteers in Police Service (VIPS), or other volunteer agencies that may wish to help and can be utilized in a support capacity, as the Sheriff sees fit.

1. Site Security and Conflict Resolution

   i. In the event of a disaster, livestock producers may not cooperate with veterinary inspectors and the quarantine restrictions that may need to be imposed. Law Enforcement Agencies will be called upon to assure the safety of veterinarians and inspection personnel and resolve any conflicts that may arise during this process.

2. Enforcing Movement Restrictions and Establishing Perimeters

   i. Movement restrictions will likely need to be initiated, and law enforcement personnel may be asked to assist with identifying and stopping violators.

   ii. Law enforcement will be asked to set up perimeters in accordance with the Regional and/or State Veterinarians specifications. A minimum perimeter will be designated, unless otherwise specified by the on-scene Incident Commander.

   iii. After consultation with Missouri Department of Agriculture - Animal Health Division, a perimeter may be expanded if law enforcement officials determine it is necessary, in order to better control the perimeter, and surrounding area.

   iv. Law enforcement officials will be consulted prior to mandating the number of entrances/exits on a given perimeter.

Only the minimum number of entry/exit points will be established in the perimeter to allow for maximum security in the area of the disaster.

3. Investigation Assistance

   i. Should the incident be ruled a deliberate disease introduction, Law Enforcement officials will be asked to aid in the investigation. Law Enforcement personnel know how to preserve evidence and control access to a crime scene and their expertise will be needed. Additional state and/or federal agencies will likely be called in as well.

   ii. The USDA and the FBI will collect evidence and ensure it is properly packaged and sent to the correct laboratory for analysis.

   iii. Jasper County Sheriff's Department and the Missouri Department of Highway Patrol will secure and preserve the scene.

D. Public Works / Municipal and County Engineers / MoDOT / County Highway Department / State Department of Conservation/MDNR.)

   i. Coordinate Perimeter Development

      a. Assist with perimeter establishment through coordination of signage and barricades.

      b. Coordinate heavy equipment resources and Transport (as needed).

   ii. Provide Technical Assistance and Expertise

      a. Be available to provide drivers/operators for heavy equipment (if/when needed).

B. Fire

   i. Coordination and Operation of Decontamination Stations

      a. In an infectious animal disease disaster, assistance from the local Fire Department may be requested through the County Emergency Management Coordinator, to help with decontamination station coordination and vehicle, property, and personal decontamination (at the scene as well as in other areas close to the scene).

      b. The State Veterinarian's office will go through the State Emergency Management Agency (SEMA), to provide "disinfectant" (decontamination protocols) to the appropriate local authorities. If the SEMA EOC is not in operation, they will go straight to the local official in charge.

ii. Aiding in Possible Rescue Situations

a. In the event of a rescue situation, Fire Department Rescue Teams will be expected to fulfill their normal roles with decontamination occurring after their emergency role has been completed.

C. **Local Department of Transportation (MoDOT) and Department of Natural Resources (DNR) Personnel**

i. Coordinate MoDOT Resources

a. If any MoDOT resources are provided, track and coordinate their usage. Serve as a liaison to the Joplin/Jasper County EOC (as requested).

ii. Coordinate DNR Resources

a. If any DNR resources are provided, track and coordinate their usage. Serve as a liaison to the Joplin/Jasper County EOC (as requested).

b. Act as Liaisons to their State-level offices to determine the availability of State resources, necessary to respond to any/all incidents.

c. DNR and Mo. Department of Agriculture Coordinate animal carcass disposal and disposal resources:

d. Ensure animal carcasses are properly disposed of in a safe manner, following all applicable local, state and/or federal guidelines.

e. If any carcasses are buried on site, ensure proper security fencing is installed and proper identification and information is posted on all sides of fencing.

f. Ensure proper records of disposal are kept as well as being filed with appropriate federal, state, and local agencies.

iii. Perimeter rerouting & logistic support

a. Working with MoDOT, ensure all necessary routes in/around disaster are available, if needed.

D. **Department of Health**

i. Disease Characteristics:

a. If the disease can be transmitted to humans, the local Public Health Department will be involved in:

- Impact assessments on local citizens and
- Implementation of protective actions.

ii. Surveillance:

a. Health Alerts to Doctor's Offices and Hospitals
b. Public Information (through the JIC)
c. Investigations (of active diseases)
d. Prophylaxis (if necessary)
e. Food Inspections (as needed)

iii. Coordinate and Provide Mental Health Services:

American Red Cross / Salvation Army / Mo. Dept. of Mental Health

a. [Annex-M of the Joplin/Jasper County EOP] The local Public Health Department should have a plan in place and protocols, to ensure that mental health issues are addressed:

- Schedule and coordinate mental health services to livestock producers, families, responders, and others affected by the disease outbreak.
- Provide or arrange for various counseling services, as needed.

iv. Assist with Community Outreach and Education:

a. The local Public Health Department will work with the JIC to:

- Provide for the dissemination of information to the community regarding the human health risks associated with the particular disease.
- Provide timely information about health issues related to the emergency.
- Be prepared, if necessary, to set up community forums, public meetings, and/or joint public information briefings to disseminate information and/or answer questions for those affected by the emergency, or those who just need first-hand, reliable answers.

v. Missouri Department Heath and Senior Services Liaison:

a. The local Public Health Department will work in partnership with the Missouri DHSS Liaison (if there is one on scene) to request all DHSS supplies, services and assistance available for use by local Public Health Departments, as needed.

VI. ADMINISTRATION AND LOGISTICS

1. ADMINISTRATION

Basic administration and accountability procedures for any agricultural/animal-related emergency will be followed as required, by county government and state government regulations. Keep all logs, records of emergency actions and expenses. As with any disaster/incident response, ICS/IMS (Incident Management System) will be used to organize and coordinate response activities. Refer to the Joplin/Jasper County EOP (Basic Plan).

2. LOGISTICS

If supplies, materials, and equipment are required, records have to be maintained and monitored. Refer to the Joplin/Jasper County EOP (ANNEX-G). Maintain current contact information of food suppliers and distributors. Maintain current contact information on alternative food supply sources from outside the local area.

3. PUBLIC INFORMATION

The Jasper County Public Information Officer (PIO) will follow procedures established in the Joplin/Jasper County EOP (ANNEX-C), to:

A. Establish a Joint Information Center (JIC) to coordinate press releases, press briefings, and the release of information surrounding this emergency.

> It is anticipated that because of this type of emergency, numerous local, state and federal agencies will be on scene and one coordinated center for the handling of public information, not only streamlines the process, but also is invaluable, helping to keep the media in check, as well as allowing key County Officials and State and local Veterinary experts to meet in one place prior to the release of information to the public.

i. Provide public information and emergency risk communication to the public, on all aspects of the emergency.

ii. Coordinate all VIP visits from State and Federal agencies/organizations.

iii. Media interviews, walk-throughs & Photo Ops will not be allowed in the immediate area of the disaster site. The media will get their information from the JIC during scheduled press briefings. Security of the site, safety, and minimizing the amount of traffic in the area is the first priority.

iv. Monitor the media.

v. Keep chronological log of events throughout the emergency.

vi. Set up a Call Center and/or hotlines to answer questions and address rumors (Rumor Control).

vii. Provide appropriate messages to all agencies, as needed.

viii. If available: Post information on website.

ix. Ensure the media has suitable space to work and process their press releases and/or interviews.

x. Do not allow the media close to the scene if it is deemed unsafe or is considered a Crime Scene.

VII. DIRECTION AND CONTROL / CONTINUITY OF GOVERNMENT

1. ICS (IMS)

   All agricultural disaster operations will be coordinated through the Joplin/Jasper County EOC and will employ ICS/IMS. The (On-Scene) Incident Commander may be a joint effort, coordinated by the Jasper County Sheriff's Office and the District Veterinarian. Another Veterinarian should also be assigned to the Joplin/Jasper County EOC to act as a Liaison to the EOC Commander.

2. ON-SCENE SUPPORT

   The Joplin/Jasper County EOC is responsible for providing all logistical support to the On-Scene Incident Commander, in matters dealing with personnel, equipment, and other types of resources needed to deal with the incident.

3. JOPLIN/JASPER CO. EMERGENCY MANAGEMENT COORDINATOR (EMC)

   The Joplin/Jasper County EMD will advise and assist the EOC Commander, in the EOC, as well as coordinating press and media efforts, with the PIO. This is a vital area of responsibility and needs to be coordinated so there is 24-hour coverage and support.

4. JOINT OPERATIONS

   In the event that an incident is suspected or determined to be a *Terrorist Event*, a Joint Operations Center will need to be established, to coordinate local, state and federal response agencies. A separate Joint Information Center (away from EOC operations) will need to be established as well, to provide media interface.

APPENDICES:

Appendix 1	Emergency Response Checklist(s)
Appendix 2	Missouri FAD Policies and Procedures
Appendix 3	Emergency Contact List(s)
Appendix 4	Quarantine Procedures
Enclosure 1	Quarantine Zoning Map and Procedures
Appendix 5	Veterinary Districts in Missouri [Map]
Appendix 6	List "A" Animal/Zoonotic Diseases
Appendix 7	Local Resource/Equipment List
Appendix 8	State Infectious Animal Disease Planning Levels
Appendix 9	Environmental Concerns/Carcass Disposal
Appendix 10	Animal Shelters/Sheltering Areas in Joplin/Jasper County
Appendix 11	Animal Disposal Sites in Joplin/Jasper County (Including rendering companies)
Appendix 12	Food Processors/Facilities/Distribution Sites in the Joplin/Jasper County Area

APPENDIX – 1:

ANIMAL (AGRO-TERRORISM) EMERGENCY RESPONSE CHECKLIST

PREPAREDNESS PHASE

JOPLIN/JASPER COUNTY EMERGENCY MANAGEMENT COORDINATOR

_____ Develop and maintain a contact list of those agencies (as well as volunteers) willing to care for animals during an emergency.

_____ Develop and maintain a contact list of all Local, State and Federal Agencies that would be involved in responding to an FAD event.

_____ Assist with site-specific animal/agro-terrorism emergency planning (for Joplin/Jasper County) as well as other agencies and/or organizations that may need to play a part during an animal-related emergency.

_____ Identify buildings and/or sites that would be suitable for use as pet shelters or holding facilities.

_____ Make arrangements with owners/managers for permission to use pre-designated buildings/facilities as pet shelters/holding facilities.

_____ Work with and train veterinary medical and non-medical volunteers and agencies that will provide animal care during an emergency.

_____ Ensure animal owners are aware of the location of all pet shelters/holding facilities.

_____ Conduct periodic training (and at least one exercise annually), for Jasper County staff members and other interested personnel that would respond during an FAD event. Utilize ICS/NIMS procedures during all training and exercises.

RESPONSE PHASE

JOPLIN/JASPER COUNTY EMERGENCY MANAGEMENT COORDINATOR

_____ Track the activities of all available buildings/facilities and shelters/holding facilities that were previously identified; track before, during and after the disaster.

_____ Keep the public advised of the situation on a regular basis; when situations change, set-up and conduct news briefings, as needed (other than regularly scheduled ones).

_____ Assure the availability of storage facilities and staging areas for equipment, animal food and medical supplies brought in to be used during the disaster.

_____ Coordinate with the Jasper County Sheriff (and other local Sheriff agencies), as well as with various other State Law Enforcement agencies, for the establishment of *Quarantine Zones* and the enforcement of animal movement restrictions.

_____ Act as a Liaison and/or Advisor to local government(s) during these disaster response actions.

JASPER COUNTY HEALTH DEPARTMENT

_____ Support the disaster response (and Recovery) with all available resources (equipment and personnel), as needed.

_____ Assess disaster impact on humans and take appropriate actions and/or make appropriate recommendations.

_____ Monitor the health and well-being of all responders (paid and/or non-paid); take appropriate actions.

_____ Provide a Health Department Liaison to the Jasper County EOC.

JASPER COUNTY PUBLIC WORKS

_____ Support the disaster response (and Recovery) with all available resources (equipment and personnel), as needed.

_____ Assist with the disposal of dead/dying animals, as requested by on-scene commander.

_____ Ensure personnel working in the field around dead/dying animals have been provided with proper safety clothing and other equipment and that they are trained and familiar with this equipment.

_____ Provide a Public Works Liaison to the Jasper County EOC, if requested.

JASPER COUNTY SHERIFF'S OFFICE

_____ Conduct (or assist in conducting) the on-scene investigation.

_____ Support the disaster response (and Recovery) with all available resources (equipment and personnel), as needed.

_____ Enforce animal movement restrictions, and control previously established quarantine zones. Take appropriate actions when violations are made.

_____ Ensure a proper system is in place for checking the identification of all responders and other officials in the area. Do not impede or restrict movement unless specifically advised to by the Incident Commander. Ensure personnel on scene are easily identifiable and correctly ID'd at all times.

_____ Ensure personnel working in the field around dead/dying animals are properly outfitted with safety clothing and other equipment, and that they are trained and familiar with this equipment.

_____ Provide a Sheriff Department Liaison to the Jasper County EOC.

JASPER COUNTY FIRE DEPARTMENT / FIRE DISTRICT

_____ Support the disaster response (and Recovery) with all available resources (equipment and personnel), as needed.

_____ Coordinate the decontamination of personnel who are working in the field around dead/dying animals.

_____ Coordinate the decontamination of equipment used in the field to move or dispose of dead/dying animals.

_____ Monitor and contain the runoff of water that was used to decontaminate exposed personnel and equipment, ensuring it does not flow into streams, wells and other water supplies in the area.

_____ Ensure personnel working in the field around dead/dying animals are properly outfitted with safety clothing and other equipment, and that they are trained and familiar with this equipment.

_____ Provide a Fire Department Liaison to the Jasper County EOC.

RECOVER PHASE

JOPLIN/JASPER COUNTY EMERGENCY MANAGEMENT COORDINATOR

_____ Coordinate with, and assist the Animal Coordinator, with the long-term care, placement, and/or disposal of animals which cannot be returned to their normal habitat, or to their normal owners.

_____ Act as the Liaison and/or Advisor to local government, during all recovery actions (short- term and long-term).

_____ Document all animal disaster related activities, and their costs.

_____ Restore equipment, personnel and supplies to their normal state of readiness.

_____ Resume day-to-day operations.

APPENDIX – 2:

MISSOURI FOREIGN ANIMAL DISEASE (FAD) POLICIES & PROCEDURES

To be developed…

The Missouri Department of Agriculture and District Veterinarians will develop and maintain Standard Operating Guidelines SOG's to deal with specific area FAD situations, based on the local area hazard analysis and risk assessments.
(Supporting SOG's may need to be developed by local jurisdictions to complement and support District and State SOG's)

APPENDIX – 3:

EMERGENCY CONTACT LISTS
(NAMES, PHONE & FAX NUMBERS)

AGENCY NAME PHONE#
FAX#

LOCAL VETERINARIANS:

Name	Phone	Fax
Academy Animal Hospital (Joplin)	417-781-8681	
Animal Clinic of the Four States	417-623-6433	
Animal Clinic (Diamond)	417-325-4136	
Animal Hospital (Neosho)	417-451-1556	
Banfield, The Pet Hospital (Joplin)	417-781-1599	
Central Pet Care (Carthage)	417-358-1300	
Carthage Animal Hospital (Carthage)	417-358-4914	
College View Animal Hospital (Joplin)	417-781-1563	
Paws Veterinary Clinic	417-626-2828	
Cornerstone Animal Hospital (Joplin)	417-623-3080	
Country Care Clinic (Oronogo)	417-642-5553	
Joplin Humane Society	417-623-3642	
Madison Animal Clinic (Webb City)	417-673-2455	
Smith Equine and Veterinary Services	417-825-8387	
Parkview Animal Hospital (Joplin)	417-781-0906	
Pet Clinic of Neosho (Neosho)	417-451-1200	
Kasie Nelson (Sarcoxie)	417-548-2363	
Dennis Wade (Carthage)	417-358-9225	

LARGE ANIMAL VETERINARIANS:

Gainsway Veterinary Clinic (Carthage)	417-358-2633
Paul Gautz (Sarcoxie)	417-548-2363
William Gentry, DVM (Diamond)	417-325-4137
Delinda Volskay, DVM (Carthage)	417-437-6154

MO. DEPARTMENT of AGRICULTURE / DISTRICT VETERINARIAN:

Valerie Gaeke, DVM	417-576-3643

SALVATION ARMY:

Joplin Chapter	417-624-4528
Carthage Chapter	417-358-2262

STATE EMERGENCY MANAGEMENT AGENCY (SEMA):

SEMA Duty Officer	573-751-2748
Chris Gaut (Region D Coordinator)	573-821-4683

STATE DEPARTMENT OF MENTAL HEALTH:

City of Joplin	417-629-3020	
Southwest Missouri (Burrell)	800-494-7355	
Jefferson City	800-364-9687	

FEDERAL BUREAU OF INVESTIGATION:

1. Joplin Field Office 417-624-6545
   If No Answer……..1-816-512- 8200

FEDERAL BUREAU OF INVESTIGATION (MAIN OFFICE):

1. Kansas City Office 1-816-512-8200

JOPLIN REGIONAL STOCKYARD:

Mark Harmon	Work Ph:	417-548-2333
	Home Ph:	417-466-7082
	Cell Ph:	417-461-2131

JOPLIN/JASPER COUNTY HUMANE SOCIETY:

Joplin	417-623-3642	417-623-4839
	417-623-4839	417-623-5343
Carthage		417-358-6402

MISSOURI HIGHWAY PATROL / TROOP-D HEAD QUARTERS:

1.	Emergency Number:	1-800-525-5555
2.	Service Center (Carthage)	417-359-1500
3.	Troop-D Head Quarters (Springfield)	417-895-6868

JASPER COUNTY SHERIFFS OFFICE:

1. Sheriff Randee Kaiser 417-358-8177

2.	Capt. Becky Stevens			417-358-8177
3.	Lieutenant Alvin Peavler			417-358-8177

"OTHER"/ SURROUNDING COUNTY SHERIFF OFFICES:

1. Newton County Sheriff's Office
   Newton County 9-1-1 (Central Dispatch) 417-451-8331
   (Fax) 417-451-8275
   Emergency Management Director (Charla Geller) 417-451-4357

2. McDonald County Sheriffs Office
   Emergency Management Director (Gregg Sweeten) 417-223-7575

3. Barton County Sheriffs Office
   Emergency Management Director (Tom Ryan) 417-682-3529

4. Vernon County Sheriffs Office
   Emergency Management Director (Derik White) 417448-9292

5. Dade County Sheriffs Office
   Emergency Management Director (Darren Gallup) 417-438-8724

JASPER COUNTY FIRE DEPARTMENT / HAZMAT TEAM:

1.	Joplin Fire Department	911 or 417-623-0403

2.	Carthage Fire Department	911 or 417-237-7100

JASPER COUNTY HEALTH DEPARTMENT:

1. City of Carthage 417-358-3111

(Fax) 417-358-0494
Debbie Darby, Administrator

JOPLIN (CITY) HEALTH DEPARTMENT:

1. Joplin 417-623-6122

Ryan Talken, Director

"OTHER" / SURROUNDING COUNTY HEALTH DEPARTMENTS:

1.	Barton County Health Dept.	417-682-3363
2.	Vernon County Health Dept.	417-667-7418
3.	Dade County Health Dept.	417-637-2345
4.	McDonald County Health Dept.	417-223-4351
5.	Newton County Health Dept.	417-451-3743

JASPER COUNTY ANIMAL CONTROL:

1.	Webb City	417-673-1911
2.	Carthage (Jasper County Sheriff)	417-358-8177/624-1601
3.	Carthage Police Dept.	417-237-7200
4.	Carl Junction	417-649-7010/649-7070

JOPLIN (CITY) ANIMAL CONTROL:

1. Joplin Health Department 417-623-6122
623-6123/3131

AMERICAN RED CROSS OFFICE:

1. South-Western Missouri (Joplin/Barton Co. Chapter) 417-624-4411

MISSOURI DEPARTMENT OF TRANSPORTATION / MO-DOT:

1.	State Highway Department Office (Granby)	417-472-3505

2.	State Highway Department Office (Seneca)	417-776-2664

MISSOURI DEPARTMENT OF NATURAL RESOURCES:

1. 24-Hour Hot Line Number 573-634-2436

U.S. DEPARTMENT OF AGRICULTURE:

1. Farm Services Agency (Carthage) 417-358-8198

"	"	"	(Lamar)	417-682-3571
"	"	"	(Neosho)	417-451-1007 X2

Ed Gladden 573-526-2090 / 751-3377
(Fax) 573-751-6919

2.	USDA Offices (Jasper County)		417-358-8198
	USDA Farm Services Agency	Kelly Beason	417-358-8198

3. USDA – APHIS-VS John Wilcox 573-636-3116

"	"	Steven Finch		515-323-2175
			(Fax)	515-669-4172
"	"	Robert Fischer		573-636-3116
			(C/Ph)	573-338-0151

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES / CERT:

1.	CERT: 24-hour number		1-800-392-0272
		(Fax)	573-522-8636
2.	Nancy Bush, CERT Manager		573-526-4768
		(Fax)	573-522-8636
3.	Maria Del Rosario, MD (Medical Epidemiologist)		417-895-6900
		(Fax)	417-895-6975

MISSOURI DEPARTMENT OF CONSERVATION - (REGIONAL):

1.	John Thomas (Joplin)	
	Joplin Office	417-629-3423
	Neosho Office	417-451-4158

U.S. DEPARTMENT OF THE INTERIOR (NEWTON COUNTY OFFICE):

1. Neosho Office 417-451-0554

417-451-3590

EPA REGIONAL OFFICE (REGION –7):

1. Kansas City, Kansas (913) 551-7003/7169
Toll Free: (800) 223-0425

UNIVERSITY OF MISSOURI – EXTENSION:

		Jasper County	417-358-2158
		Newton County	417-455-9500

MISSOURI SOUTHERN STATE UNIVERSITY (MSSU):

1.	Crime Lab	Joplin Campus	417-625-9382
2.	(State) Crime Lab	Jefferson City	573-526-6134

HOSPITALS IN THE JOPLIN/JASPER COUNTY AREA:

1.	Mercy Hospital	Joplin	417-781-2727
2.	Freeman Hospital	Joplin (East)	417-347-1111
4.	Freeman Hospital	Joplin (West)	417-347-1111
3.	Mercy Hospital	Carthage	417-358-8121

APPENDIX – 4

QUARANTINE PROCEDURES

Quarantine:

For effective response, everyone involved must use the same terms and vocabulary. Responders should use the following terminology. Updates will be sent if the terminology changes.

Definitions:

1. Initial Isolation Zone (IIZ)

Premises where disease has been confirmed by scientifically and epidemiologically sound methods. Alternatively, a premise where disease has been confirmed by veterinary exam or by a positive trace after the first case of disease in Missouri. Certain movement restrictions on people, vehicles, animals and animal products will apply and may differ from other areas or zones.

2. Protection Action Zone (PAZ)

Premises that have been designated based on epidemiological investigation, to be depopulated by humane euthanasia because of the proximity to an infected premise. Certain movement restrictions on people, vehicles, animals and animal products will apply and may differ from other areas or zones.

3. Depopulation Zone (DZ)

Includes Infected Premises, Contiguous Premises, and Contact Exposed Premises. The area in which susceptible animal(s) would be humanely euthanized. Certain movement restrictions on people, vehicles, animals and animal products will apply and may differ from other areas or zones.

4. Contact Exposed Premises (CEP)

Premises that have been designated, after epidemiological investigation, for depopulation by humane euthanasia because:
Premises have received animals from Infected Premises or Contiguous Premises prior to infection.

Persons or equipment were determined to have posed a significant epidemiological risk for the transmission of an infectious animal disease to susceptible animals.

5. High Risk Zone (HRZ)

The zone around the depopulation zone signifies a high epidemiological risk to species susceptible to infectious animal disease. The distance will be at the discretion of the State

Veterinarian, based on the best available information and sound epidemiological principles. Certain movement restrictions on people, vehicles, animals and animal products will apply and may differ from other areas or zones.

6. Buffer Zone (BZ)

The zone that extends from the outer perimeter of the high-risk zone and will extend to the outer perimeter of the quarantine zone. The distance will be at the discretion of the State Veterinarian, based on the best available information and sound epidemiological principles. Certain movement restrictions on people, vehicles, animals and animal products will apply and may differ from other areas or zones.

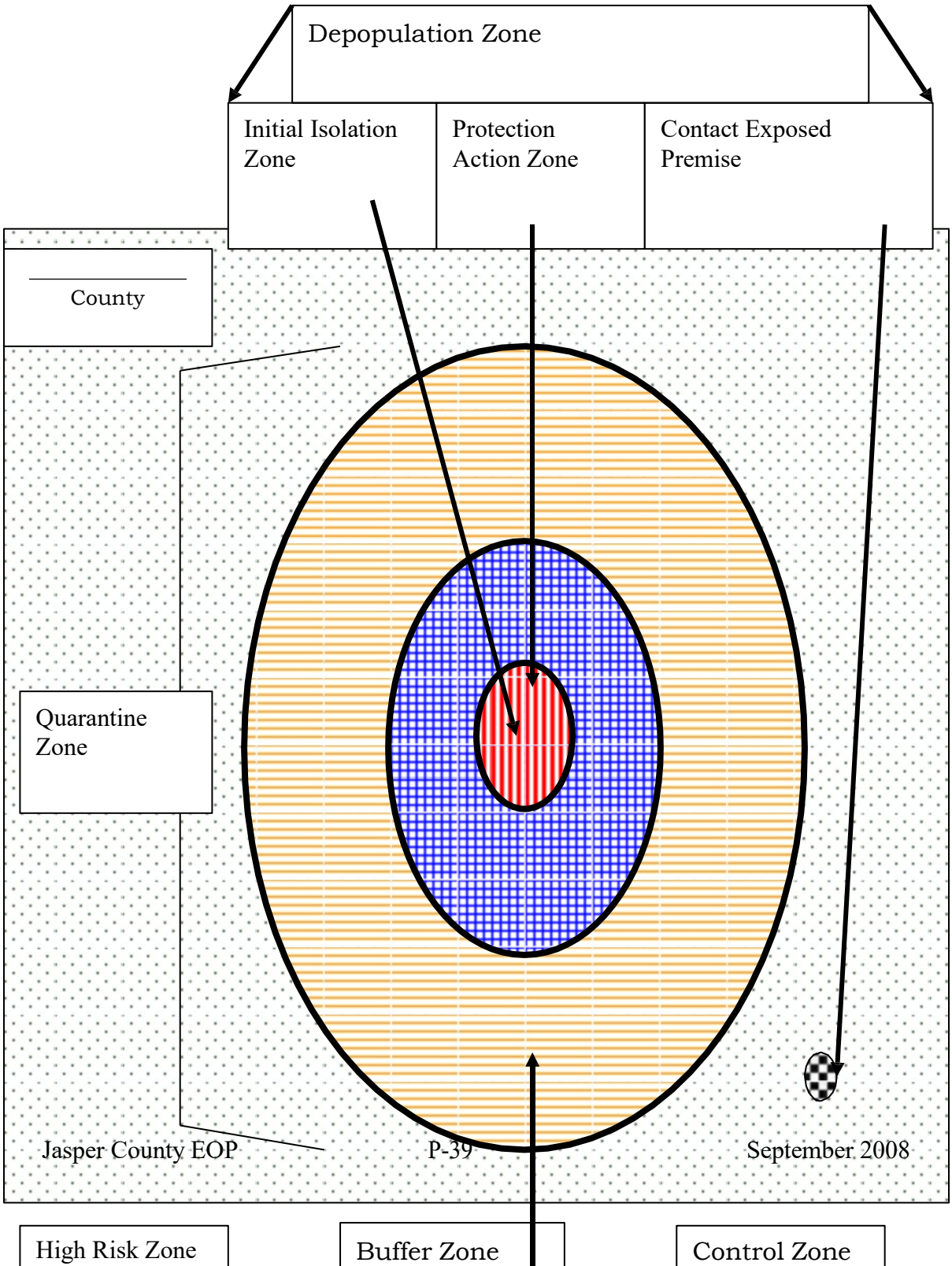
7. Quarantine Zone (QZ)

The zone made up of the Infected Premises to the outer perimeter of the Buffer Zone. Certain movement restrictions on people, vehicles, animals and animal products will apply and may differ from other areas or zones.

8. Control Zone (CZ)

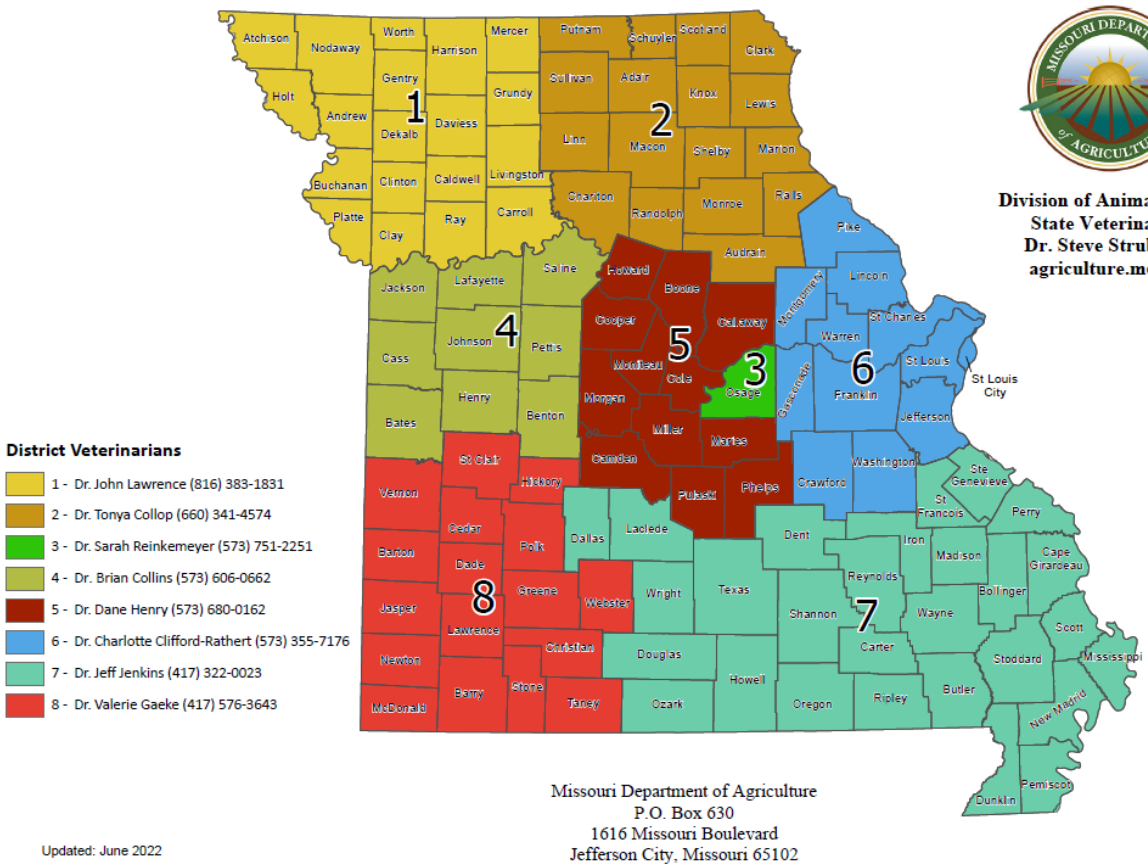
The zone outside of the quarantine zone. Certain movement restrictions on people, vehicles, animals and animal products will apply and may differ from other areas or zones.

Quarantine


Depopulation Zone
Initial Isolation Zone
Protection Action Zone
Contact Exposed Premise
County
Quarantine Zone
High Risk Zone
Buffer Zone
Control Zone

APPENDIX – 5

Veterinarian Districts of Missouri



District Veterinarians

- 1 - Dr. John Lawrence (816) 383-1831
- 2 - Dr. Tonya Collop (660) 341-4574
- 3 - Dr. Sarah Reinkemeyer (573) 751-2251
- 4 - Dr. Brian Collins (573) 606-0662
- 5 - Dr. Dane Henry (573) 680-0162
- 6 - Dr. Charlotte Clifford-Rathert (573) 355-7176
- 7 - Dr. Jeff Jenkins (417) 322-0023
- 8 - Dr. Valerie Gaeke (417) 576-3643

Updated: June 2022

Division of Animal Health
State Veterinarian
Dr. Steve Strubberg
agriculture.mo.gov

Missouri Department of Agriculture
P.O. Box 630
1616 Missouri Boulevard
Jefferson City, Missouri 65102

APPENDIX – 6:

ANIMAL HEALTH CODE: LIST "A" DISEASES

Disease or Agent	Humans affected	Species Affected	Incubation Period	Mode of Transmission	Prominent clinical signs in Livestock
African horse sickness virus	No	horses, donkeys, mules , camels	5-7 days	culicoides midges, mechanically by other insects	Variable forms; fever; severe dyspnea, spasmodic cough, serosanguinous nasal discharge; edema of sopraorbital fossa, head, neck, and chest; profuse sweating; hydrothorax, hydropericardium.
African swine fever virus	No	domestic and wild pigs	5-15 days	Direct contact with body fluids especially blood, fomites, ticks	High fever; recumbency; skin reddening, cyanotic blotching on ear, tail, legsenlarged friable spleen; hemorrhagic lymph nodes, swollen tonsils, petechiae; fibrinous pericarditis; death.
Akabane virus	No	Cattle, sheep, goats	1-6 days	unknown thought to be mosquitoes	Adults: asymptomatic; abortions, stillbirths, dystocia; Young: congenital abnormalities, (arthrogryposis, ankylosis, hydranencephaly); nystagmus, blindness; death.

Avian influenza virus (Highly pathogenic)	Yes	Chickens, turkeys wild birds waterfowl	3-7 days	aerosol, body fluids, fomites, migratory waterfowl	Depression; respiratory signs (coughing, sneezing, nasal discharge); ataxia; green watery diarrhea; swollen, cyanotic combs and wattles; edema of eyes and neck, hemorrhage of legs; decreased egg production; death.
Bluetongue virus	Rare	Sheep, goats, cattle, deer, elk, antelope	5-10 days	culicoides midges, ticks sheep keds, fomites	Erosions of ulcers of mucous membranes; cyanotic tongue; salivation; dyspnea; fever; petechiae; edema of head; lameness, hyperemic coronary bands; abortion, "dummy lambs".
Bovine spongiform encephalopathy	Yes	0	4-7 days	ingestion of contaminated cattle products (meat bone meal nervous tissue)	Neurological and behavioral changes, nose lickin, sneezing, teeth grinding, exaggerated menace and corneal reflex, ataxia, hypermetria, paresis; coma; death.
Classical swine fever	No	Pigs	2-14 days	ingestion (uncooked garbage) fomites aerosol, direct contact	Variable. Fever, dullness; ataxia; constipation followed by diarrhea; cyanosis of abdomen and ears; abortions, stillbirths, mumification, congenital malformations; death

Contagious bovine pleuropneumonia	No	cattle	20-123 days	close contact with respiratory droplets and other body fluids	Dyspnea, tachypnea, cough; fever; calves may have polyarthritis with or without pneumonia. Postmortem lesions: fibrinous, thickend, hyperemic "marbled" lung tissue; thickened interlobular septa.
Coccidioides immitis	Yes	cattle, horses, sheep, pigs, mammals	1-4 days	inhalation	Inapparent to benign; chronic rrespitory disease; focal lesions in lungs and thoracic lymphnodes
Foot and mouth disease	Rare	Cattle, sheep, goats, pigs	1-5 days	aerosol, direct contact, ingestion, fomites	Fever; vesicles and erosions in mouth, nares muzzle, and feet (coronary band, interdigital) or teats; depression, anorexia; salivation; nasal discharge; sloughing of hoof; abortion.
Heartwater	No	cattle, sheep, goats, wild ruminants	7-16 days	ticks	Fever; respitory distress, lacrimation neurologic signs (tongue protrusion, circling, high stepping gait) convulsions, death. Post mordom leions hydropericardium ascites, hydrothrax, petechiae
Japanese encephalitis virus	Yes	horses pigs	8-10 days	mosquitoes	Horse: fever lethargy; ataxia stupor; teeth grinding; blindness; coma, death. Pigs: SMEDI Stillbirth mummification embryonic death infertility

Lumpy skin disease	No	cattle	2-5 days	mosquitoes, flies, body fluids	Inapparent; fever; painful, deep, skin nodules (1-5 cm diameter) with inverted conical necrosis scabs and crusts; lymphadenopathy
Malignant catarrhal fever virus	No	cattle wild ruminates	9-77 days	aerosol, close contact	Sudden Death; depression; diarrhea; dysentery; DIC; dyspnea; bilateral corneal opacity; oculonasal discharge; hyperemic oral mucosa; ulcerated, scabbed skin
Menangle virus	Yes	pigs	unknown	respiratory secretion	Reproductive signs such as decreased litter size mummified or stillborn fetus, congenital deformities (arthrogryposis, degeneration of brain and spinal cord)
Newcastle disease	Yes	poultry, other avian species	2-15 days	Direct contact with feces and respiratory droplets, fomites	Respiratory signs (coughing, gasping); neurological signs (muscle tremors, circling, paralysis), green watery diarrhea, decreased egg production.
Peste des petits ruminants virus	No	goats, sheep	3-10 days	close contact with body fluids aerosol, fomites	Sudden Death; fever; restless; nasal discharge, respiratory distress; bronchopneumonia; necrotic stomaitis; diarrhea; death.
Rift valley fever	Yes	Sheep, goats, cattle	2-6 days	mosquitoes, flies, body fluids	Abortion storms; hepatic necrosis; high mortality in young

Rinderpest	No	cattle, sheep, goats, pigs	3-15 days	Direct contact or close contact with body fluids	High fever; tachypnea; tachycardia;oculonasal discharge; oral erosions and necrosis; watery to hemorrhagic diarrhea, abdominal pain; weakness, recumbence; sudden death.
Screwworm myiasis	Yes	mammals, birds	5-7 days	eggs laid in wounds	Variable diameter openings containing migrating larvae; death can occur from toxicity or secondary infections.
sheep pox and goat pox	No	goats, sheep	8-13 days	aerosal, direct contact, fomites mechanically by insects	Fever; macules and papules with edema and hemorrhage which became depressed, gray and necrotic and have hard, sharply demarcated scabs; conjunctivitis, rhintis; dyspnea; lymphadenopathy; death
swine vesicular disease	Yes	pigs	2-7 days	ingestion of contaminated meat direct contact nasal, oral, feces	Fever; vesicles, erosions in oral cavity, snout, mammary glands, coronary band and interdigital; congestion of mucous membranes; dyspnea; diarrhea, lameness, no abortion.
Vesicular stomatitis	Yes	horses, donkeys, mules, cattle, pigs	1-21 days	sand flies and black flies direct contact, fomites, aerosol	Fever, vesicles in oral cavity and coronary band, inter digital (for cloven hoof), salivation, lameness.

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APPENDIX – 7:

LOCAL RESOURCES LIST

Farm Supplies / Feed Supplies / Rental Equipment

Tractor Supply Co. #329
1315 North Range Line Joplin, MO 64801……
417-781-7111

Atwoods
1899 South Madison Webb City, MO…… 417-673-3100

Ag Service Center of SW MO
9721 County Road 80
Carthage, MO 64836……..417-358-7019

Maneval Inc.
321 West Ball
Jasper, MO……..417-394-2121

Riley Specialties
14744 County Road 270
Asbury, MO…….417-642-5600

H & H Farm Equipment
HH Hwy (4 mi. North of Carthage)
Carthage, MO……..417-673-1176

Race Brothers Farm & Home
2309 Fairlawn
Carthage, MO 64836……..417-358-3529

Ag Service Center of SW MO
9721 County Road 80
Carthage, MO 64836……417-358-7019

Midwest Agriculture Supply
Central & Grant
Carthage, MO 64836……417-358-1521

Rice's Feed Service
303 West Airport
Carthage, MO 64836…….417-358-6464

Metz Grain
310 West Mercer Street
Jasper, MO…….417-394-2022

Sarcoxie Feed & Farm Supply
648 State Highway 37
Sarcoxie, MO…….417-548-7142

Whitehead Farm Supply
3rd & Main
LaRussell, MO……...417-548-7351

Center Creek Feeds Inc.
6545 State Highway 171
Joplin, MO 64801……..417-781-8834

Danel's Feed & Farm Supply
1326 Joplin
Joplin, MO 64801……..417-623-7772

Littlefield Enterprises
7742 Newman Road
Joplin, MO…….417-623-2088

Jasper Farmers Exchange
308 W. Morrison Ave.
Jasper, MO 64755……..417-394-2156

Home Depot
3110 East 20th
Joplin, MO 64801……..417-206-7510
Lowe's
2600 Range Line Road
Joplin, MO 648091…….417-782-1940

Sutherlands
2805 Rangel Line Road
Joplin, MO 64801……..417-624-8000
Halls Fencing
703 Oak Hill Road
Carthage, MO 64836……..417-358-4455

TNT Fence Systems
1749 County Road 120
Carthage, MO 64836……..417-358-4993

Murrell Equipment Company
13743 Kafir Rd.
Carthage, MO 64836……..417-358-7839

Housh Implement
7692 State Hwy. 96
Carthage, MO 64836……..417-246-5700

E.A. Martin Machinery Co.
3534 E. 20th St.
Joplin, MO 64801……...417-624-3010

John Deer Farm & Lawn **Steve Currence**
7th & Prosperity Rd. 417-781-5556
Joplin, MO……..417-624-0768

Anderson Farm & Tractor
3030 Rangeline
Joplin, MO……..417-624-7283

Generators and other types of equipment that may be needed for an extended field operation, should be requested through the Joplin/Jasper County EOC (if activated), or the Jasper County EOC. Information about resources is in the Joplin/Jasper County Local Emergency Operations Plan "Supplemental Annex"

APPENDIX – 8

State Infectious Animal Disease Planning Levels

The purpose of this document is to establish a tentative list of standard "Triggers" or "Action Levels" for use by states, in response to a threatened or actual infectious animal disease outbreak. Under this proposal, **Level-I** is the most serious (highest priority), **Level-IV** is the least serious (lowest priority). At each action level, additional actions may be required or recommended if the disease outbreak is strongly suspected to be, or is confirmed to be, intentionally caused.
For the purpose of this document, an "infectious animal disease" refers to a highly contagious, less contagious, or vector-borne foreign, or emerging animal disease.

Level-IV	**An event that creates a potential to cause widespread personal hardship within the agriculture community, or is detrimental to the state or national economy.**

Triggered by a confirmed positive case from one of the National Veterinary Services Laboratories (NVSL) in Ames, Iowa or Plum Island, N.Y. for a case of an infectious animal disease in the U.S., Canada, or Mexico, with no preliminary or confirmed cases within Missouri.

- or -

Triggered by a preliminary positive case received from an NVSL lab for a state with confirmed trace-outs to Missouri and/or with high commerce in susceptible animals with Missouri and/or having a shared border with Missouri, with no preliminary or confirmed cases within Missouri.

Level-III	**A disease that is highly contagious or creates a significant risk of rapid transmission across a large geographical area.**

Triggered by a preliminary positive case received from an NVSL lab for a case in Missouri. This is the first case in Missouri. For subsequent cases in Missouri, a preliminary positive case may trigger a higher action level, at the discretion of the State Veterinarian.

Level-II	**A disease that falls outside the domain of the State's routine prevention activities.**

Triggered by a confirmed positive case from an NVSL lab for a case in Missouri. This is for the first case in Missouri. At the discretion of the State Veterinarian, this level of action may potentially be triggered by a preliminary positive result in Missouri, if other cases exist in Missouri, or are verified in another state with confirmed trace-outs to Missouri, and/or with high commerce in susceptible animals with Missouri, and/or having a shared border with Missouri.

Level-I	**An OIE List "A" Disease.**

Triggered by a confirmed positive case from an NVSL lab for a case in Missouri, accompanied by at least one or more additional preliminary or confirmed positive case(s) at a non-contiguous site (or sites) within Missouri. The number of additional non-contiguous infected sites needed to trigger this action level will vary depending on the disease. [For Example: for foot & mouth disease, one additional site would generally be sufficient].

APPENDIX – 9

ENVIRONMENTAL CONCERNS

I. SITUATION

Animals may escape or be killed during and/or after disasters. There is the potential for decaying carcasses that may possibly impact the environment. Carcasses create biologic waste and can attract flies and rodents, which can then spread disease. There is also the potential for groundwater contamination and bad odors. Animals that have escaped, may wander onto land where they may contaminate water supplies, cause manure build-up, overgraze sensitive ecosystems and cause damage to crops. Jasper County has numerous farm animals throughout the county as well as in close proximity to the City of Joplin. These animals could be killed during disasters or wander onto city, private or business property, causing any number of problems. The disposal of dead animals is regulated as a solid waste by the Missouri Department of Natural Resources (DNR), and by the Missouri Department of Agriculture, Division of Animal Health.

A. Carcass Disposal:

Animal carcasses should be disposed of as soon as possible to avoid creating a health hazard to other animals or humans. A small number of animals will not usually create a major problem if they can be disposed of by a rendering company. However, the disposal of a large number of animals, i.e., several million chickens or several hundred cattle, requires advanced planning and preparedness.

Certain governmental agencies may restrict certain types of disposal methods. Local ordinances should be reviewed and State and Federal health, agricultural, and environmental agencies should be contacted prior to the disposal of any animal carcasses. It may be necessary to obtain waivers.

II. ANIMAL DISPOSAL METHODS

The following acceptable methods of dead animal disposal, are listed in order of preference by DNR:

a.) Rendering
b.) Composting
c.) Sanitary Landfill
d.) Incineration
e.) On-Site Burial

The method used depends on the type of disaster, the location of the bodies, the type and number of animals killed and local ordinances. Regardless of the method used, carcass disposal should be given TOP PRIORITY. If community services are not interrupted, the usual methods

for disposal of animals that die naturally can be used. If community services are disrupted, special arrangements will need to be made to accommodate the method chosen.

1. **Rendering:** The easiest way to dispose of carcasses, especially those of farm animals. Rendering is a process whereby the carcass is cooked at high temperatures and converted into animal feed or fertilizer. Commercial companies perform this service and may, for a fee, pick up the animals. This method can be used if normal transportation methods and utilities are functional and the rendering company has sufficient trucks and personnel available to handle the volume.

2. **Composting:** Used to dispose of large numbers of poultry carcasses. Composting of dead animals is only allowed in properly designed and properly sized dead animal composter. Composting is the mixing by volume, 1 part carcass to 2 parts litter and 1 part straw, in alternate layers in a boxed, enclosed area. This method can also be used for larger animals. Whereas poultry can be placed whole, in layers, larger animals need to be cut up or ground into smaller parts first. The composting is accomplished by the bacteria in the litter, and takes about two weeks to complete. The completed compost process allows the end product to be recycled back to the land as a fertilizer.

3. **Sanitary Landfill:** Landfills are permitted to accept dead animals under Chapter 260, RSMo. Modern landfills are designed and operated to prevent leaching into groundwater or surface waters. The drawback of landfills is that they are only for disposing, not for recycling, and landfill space is becoming scarce. Even though a land fill is permitted to accept dead animals, it may not be the policy of the landfill operator.

4. **Burning:** Incineration of dead animals is feasible, but not always economical. It can be done outside, or by using commercial incinerators. Some animal hospitals, humane societies, and diagnostic laboratories may have incinerators, given that prior arrangements are in place. Open burning of dead animals or burning in a trash barrel or similar type of container, is not allowed. Any commercial incineration of dead animals must be done in an incinerator designed, constructed and operated according to Chap-643 RSMo, Air Conservation Law and Regulation 10CSR10-6.160.

5. **On-Site Burial:** This option is the least desirable due to the potential for water pollution. Although on-site burial is the least-preferred method of disposal, it may be the only practical option for some producers. Can be done only where local ordinances and the terrain permit. Burial sites will not be in low-lying areas subject to flooding, or within 100 feet from any body of surface water (stream, lake, pond, etc.). The location selected should be approved in advance by the appropriate environmental agency. Contact the Missouri Department of Agriculture for proper procedures for preparing an outside burn site, burning procedures and proper burial procedures.

It is unlikely that Composting will be used to dispose of animal carcasses that may have been exposed to chemical and/or biological hazards, and have died from this exposure. Rendering, Burning and/or Burial will most likely be used to dispose of these animal carcasses…

B. Organizational Roles/Responsibilities:

The following organizations have specific roles, in terms of responding to animal issues during and/or after disasters:

Agency / Center	Responsibility
State Department of Natural Resources	Deals with the impact on the environment.
Department of Conservation	Deals with threats to wildlife.
State Department of Health and Senior Services	Deals with water quality issues.
State Department of Agriculture	Would become involved if there was a concern about animal welfare.

III. PUBLIC HEALTH ISSUES SURROUNDING ANIMALS IN DISASTERS

Historically, the greatest concern regarding animals in disasters has been public health. Particular public health concerns, include the following:

1. Contamination of the food and water supply
2. Limited food supply
3. Zoonotic disease transmissions (and dog bites)

- Zoonotic Diseases are diseases that are transmittable between animals and humans. Examples of organisms that cause zoonoses, include salmonella, Cryptosporidium, Campylobacter and Giardia.

A. Contamination of Food Supplies:

An example of potential food contamination (on a large scale) occurred after the 1986 Chernobyl Nuclear Power Plant reactor incident. Clouds of radioactive material caused international concern about radioactive contamination of cows, sheep and other food-producing herbivores. Significant public health concerns stemmed from studies on the level of radio-nucleotide contamination in food, including meat, milk, and eggs. Scientific monitoring was necessary to prevent the contamination of animals and their products from entering the human food chain.

More commonly, hazardous materials are released in many types of disasters. Especially on farms, there may be large amounts of fertilizers, herbicides, pesticides and fuels that are spilled during the disaster. These hazardous materials can be spread over pastures, contaminate animal feed, or directly contact the animal; then, potentially

contaminating animal-based food products. The agency that deals with the inspection of livestock and poultry as food for humans is the *U.S. Department of Agriculture (Food Safety and Inspection Service).* The *Food and Drug Administration (FDA)* inspects milk products, seafood and non-animal products.

B. Zoonoses:

Zoonotic diseases are transferred between animals and people. Incidences of zoonoses following disasters have not been a documented problem in the United States since the 1950s. The spread of zoonoses is controlled through our Public Health and food inspection service. Nevertheless, more common zoonotic diseases and the means by which these can affect humans, warrants concern. In particular, pets can be infected and expose children to zoonotic diseases.

Humans are most likely to be exposed to zoonotic diseases when animal waste contaminates the drinking water supply. This can occur in floods and after a power failure at water treatment plants. Water can also become contaminated when hazardous materials are blown or washed into supply sources, or when animal manure or dead animals contaminate wells and reservoirs. Some organisms that cause zoonotic diseases, are listed below:

Common Organisms That Cause Zoonotic Diseases

1.	Coliform, bacteria…….	Diarrhea
2.	Salmonella……	Diarrhea
3.	Cryptosporidium……..	Diarrhea
4.	Giardia…….	Diarrhea
5.	Ringworm……	Skin Infection
6.	Rabies	
7.	Vector-Borne Diseases……	e.g., Equine Encephalitis
8.	Clostridium Perfringens……..	Diarrhea
9.	Clostridium Botulinum……	Weakness & Collapse

This list is not complete. Consult a local Veterinarian or the (District) State Veterinarian if you have questions or need additional information.

ANIMAL SHELTERS/SHELTERING AREAS IN JOPLIN AND JASPER COUNTY

I. JOPLIN:

1. Joplin Humane Society……..(417) 623-5343

(other facilities will be added as identified…)

II. JASPER COUNTY:

1. The *Tarzan Zerbini Circus* "winters-over" in Jasper County each year on a 10-acre lot of land, usually during the months of November, December and January. At any one time, the maximum number and types of animals that they deal with is 6 elephants and 6 large work-type horses. Usually, they only have 3 of each here in Missouri. If they are not in Missouri or Florida, then they are on the road.

2. If the need arises to move any of these animals in a hurry, they have a special trailer and truck that are designed to carry and move the elephants.

Address: Tarzan Zerbini Circus (Office)
2317 S. Hall Street
Webb City, MO.
Phone: (800) 707-4510 or (417) 781-4883
Contacts: Ms. Harriet Miller or Ms. Connie Watts

APPENDIX –11

ANIMAL DISPOSAL SITES IN THE JOPLIN / JASPER COUNTY AREA

Name of Facility	Address	Contact Person	Phone

To be based on Missouri Department of Agriculture (MDA) and Missouri Department of Natural Resources (DNR) recommendation and/or approval…

RENDERING COMPANIES ALLOWED TO OPERATE IN MISSOURI

National By-Products, LLC	Kansas City Hides 800 N. Atlantic Kansas City, MO. 64116	Ph: 816-842-0815 Fx: 816-842-9904
	Bellevue Plant 14401 S. 5th St. Omaha, NE. 68123	Ph: 402-291-8800 Fx: 402-291-4034
	Kansas City Plant 229 N. James St. Kansas City, KS. 66118	Ph: 913-371-7083 Fx: 913-371-7086
	Des Moines Plant 601 SE 18th St. Des Moines, IA. 50317	Ph: 515-265-0381 Fx: 515-265-8960 Toll Free: 800-362-2405
Millstadt Rendering Co.	3151 Clover Leaf School Rd. Belleville, IL. 62223	Ph: 618-538-5312 Fx:
Halfway Packing Co.	4427 South 222nd Road Halfway, MO. 65663	Ph: 417-445-2346 Fx:
Animal Care Services, Inc.	 Herculaneum, MO. 63048	Ph: Fx:
All Professional Pest Elimination	 Ballwin, MO. 63011	Ph: Fx:

Darling International, Inc.

The Vice President over all facilities around Missouri is Mr. Mike Molini in Collinsville, OK. He is also the General Manager for the Rendering Plant located north of Tulsa. His phone number is: (918) 371-2528.

Darling Transfer Station
Mr. Richard Brewer, Station Manager
947 Clay Hill Road — Ph: 417-744-2287
Billings, MO. 65610 — Fx: 417-744-2340

Darling – Kansas City
Mr. Pat Lappe, General Manager
685 Adams Street — Ph: 913-321-9328
Kansas City, MO. 66105 — Fx: 913-321-0028

Darling – St. Louis
Mr. Garry Byrd, General Manager
#2 Exchange Avenue — Ph: 618-271-8190
National Stock Yards, IL. 62071 — Fx: 618-874-1001

APPENDIX – 12

FOOD PROCESSORS/FACILITIES/DISTRIBUTION SITES IN THE JOPLIN/JASPER COUNTY AREA

Name of Facility Address Contact Person Phone #

CONCENTRATED ANIMAL FEEDING OPERATION (CAFO)

CAFO	ADDRESS	CONTACT	PHONE	PRODUCT
BYRON FREEMAN	28572 Hwy T Excello, MO 65247	SAME	NONE	TURKEYS
LARRY HARTMAN	12264 OLIVE LN CARTHAGE, MO 64836	SAME	417-358-3253	TURKEYS
CHRIS HUFF	7470 ELM RD CARTHAGE, MO 64836	SAME	417-359-5025	LAYERS
NORMAN JANTZ	24223 MAPLE RD ORONOGO, MO 64855	SAME	417-673-4489	TURKEYS
JOPLIN REGIONAL STOCKYARDS	12592 LAWRENCE 2090 MT VERNON, MO 65712	JACKIE MOORE	417-466-7866	CATTLE
WILLIAM JOYCE	11042 SUMAC RD JASPER, MO 64755	SAME	417-394-2221	PULLETS
MISSOURI FARMS DAIRY INC	13485 CR 50 GOLDEN CITY, MO 64748	DANNY HYLTON	417-246-1005	DAIRY CATTLE
MOARK HATCHERIES INC	5335 S GARRISON AVE CARTHAGE, MO 64836	JERRY COMPTON	417-358-6481	LAYERS
RUSSELL RITCHHART	15428 BARTON CR JASPER, MO 64755	SAME	417-394-2020	TURKEYS
FELIXWRIGHT	2195 CR 110 CARTHAGE, MO 64836	SAME	UNLISTED	TURKEYS

POULTRY OPERATIONS

PRODUCER	ADDRESS	CONTACT	PHONE
DOUGLAS BALL	18899 ST HWY 96 CARTHAGE, MO 64836	SAME	417-358-1062
EARL BENENTINDI	30754 KAFIR RD ASBURY, MO 64832	SAME	417-642-5641
BUTTERBALL	251 LAWRENCE 2075 LA RUSSELL, MO 64848	UNKNOWN	417-246-5825
CON AGRA TURKEY	1228 ST HWY 96 AVILLA, MO 64833	UNKNOWN	417-246-5246
DON GRISHAM	17286 PEMBROOK RD CARTHAGE, MO 64836	SAME	417-394-2159
LARRY LUNDIEN	10565 ST HWY 43 WEBB CITY, MO 64870	SAME	417-673-1142
RANDY RECTOR	15318 CR 225 JASPER, MO 64755	SAME	417-525-4494
ROY SCHOENHALS	11479 BLACKBERRY RD CARTHAGE, MO 64836	SAME	417-358-6795
BRIAN STEVENS	11923 CR 280 CARL JUNCTION, MO 64834	SAME	417-642-5594
LONNIE TAYLOR	302 MAPLE RD SARCOXIE, MO 64862	SAME	417-246-5580

PORK OPERATIONS

PRODUCER	ADDRESS	CONTACT	PHONE
MATHEW JOYCE	18119 CR 110 JASPER, MO 64755	SAME	417-394-2616
TIMOTHY JOYCE	14543 CR 80 CARTHAGE, MO 64836	SAME	417-358-8525
NEAL RUSH	17826 CR 90 JASPER, MO 64755	SAME	417-394-2384
ROCKY RUSH	8378 SUMAC RD JASPER, MO 64755	SAME	417-394-2453

DAIRY OPERATIONS

PRODUCER	ADDRESS	CONTACT	PHONE
DENNIS ANIBAL	7028 NUTMEG RD CARTHAGE, MO 64836	SAME	417-246-5341
RCHARD BLOSS	10367 HWY F SARCOXIE, MO 64862	SAME	417-548-7212
BOB BRUFFETT	11286 BASE LINE BLVD JASPER, MO 64755	SAME	417-394-2478
EDDY CAWYER	22915 ROSEBUD LN ORONOGO, MO 64855	SAME	417-642-5579
RONNIE CRAIG	9463 CR 290 CARL JUNCTION, MO 64834	SAME	417-649-6271
GARY GORDON	8472 NUTMEG RD CARTHAGE, MO 64836	SAME	417-358-9714
JOHN JOHNSON	19251 OLD TRAIL RD JASPER, MO 64755	SAME	417-525-4394
LARRY KELLHOFER	255 DOGWOOD LN SARCOXIE, MO 64862	SAME	417-548-7512
GALE KNIGHT	15649 CR 138 CARTHAGE, MO 64836	SAME	417-394-2866
ROBERT MYERS	18397 CR 220 ORONOGO, MO 64855	SAME	417-394-2339
DOUG PROBERT	19028 CR 120 JASPER, MO 64755	SAME	417-394-2168
EUGENE PUGH	20657 N MAIN ST JASPER, MO 64755	SAME	417-394-2896
Q L REYNOLDS	3320 CR 90 CARTHAGE, MO 64836	SAME	417-358-5428
MARK ROBINSON	P O BOX 264 CARTHAGE, MO 64836	SAME	417-358-9381
JANICE SANDOVAL	P O BOX 439 ALBA, MO 64830	SAME	417-525-6149
MICHAEL TUBAUGH	12280 NUTMEG RD CARTHAGE, MO 64836	SAME	417-358-9781
BERNIE VAN DALFSEN	6792 INCLINE RD REEDS, MO 64859	SAME	417-246-5230
TERRY WINDER	24231 STATE HWY 96 WEBB CITY, MO 64870	SAME	417-673-4774

BEEF OPERATIONS

PRODUCER	ADDRESS	CONTACT	PHONE
HOWARD BECKER	11050 CR 10 SARCOXIE, MO 64862	SAME	417-246-5578
MIKE DAWSON	821 CR 20 SARCOXIE, MO 64862	SAME	417-548-7655
BROOKS GUBSER	19256 LOCUST LN CARTHAGE, MO	SAME	417-525-6127
JIMMIE IRWIN	410 ST HWY 96 SARCOXIE, MO 64862	SAME	417-246-5706
WILBUR JONES	17601 MILLWOOD RD CARTHAGE, MO 64836	SAME	417-358-2576
MATT MATHEWS	12200 MESQUITE RD CARTHAGE, MO 64836	SAME	417-358-5272
RAYMOND PETERS	11384 CIVIL WAR AVE CARTHAGE, MO 64836	SAME	417-358-5380
RICHARD STRAMMEL	11750 CR 140 CARTHAGE, MO 64836	SAME	417-358-1415
LLOYD TUBAUGH	13503 ST HWY 37 GOLDEN CITY, MO 64748	SAME	417-246-5665

POULTRY FARMS

Butterball Turkey Company (Live Operations)

Carthage, MO 64836……..417-359-2000

Heasley Farms
8328 Harmony Road
Carthage, MO. 64836…….417-359-8084

Nicholas Turkey Breeding Farms
1230 Douglas Court
Carthage, MO 64836…….417-359-0029

R & W Poultry
RR-3
Carthage, MO 64836…….417-358-6917

Smith Egg Farm

Carthage, MO 64836…….417-358-8766

Tackborn Farms

Carthage, MO 64836…….417-359-8542

DAIRY FARMS

Hiland Quality Checkered Dairy Products
601 South Maiden Lane
Joplin, MO 64801……..417-623-2272

LIVESTOCK DEALERS / LIVESTOCK AUCTIONS / STOCKYARDS / ANIMAL BOARDING AREAS

Double Diamond Ranch
16730 Cherry Road
Diamond, MO 64840…….417-325-7181
(Horse Boarding, Horse Dealing, Riding Stables, Rental, etc.)

Ernest Kimbrough Hog Market
17892 Cherry Road
Diamond, MO 64840…….417-325-6460
(Livestock Auctions, Livestock Dealers)

White's Equine Sale (Feed and Tack)
1863 Highway 59
Diamond, MO 64840…….417-325-4143
(Livestock Auctions, Animal Feeds, Stock Yards)

J-Bar-E Livestock, Inc.
204 Shepherd Street
Diamond, MO 64840…….417-325-4454
(Animal Transportation)

Pear Tree Lane Stables
20160 Highway J
Diamond, MO 64840…….417-325-4137

Cattleman's Livestock
(Melvin Thogmartin)
Sarcoxie, MO 64862……..417-548-2600
417-325-5458
(C/Ph) 417-438-1501

CITY OF JOPLIN DISASTER DEBRIS MANAGEMENT PLAN
O c t o b e r 2 0 2 3

A SUBSECTION OF THE CITY OF JOPLIN EMERGENCY MANAGEMENT PLAN
(Page I-2)
III. CONCEPT OF OPERATIONS
B. Actions to be Taken by Operational Time Frame
1. Mitigation
d. Develop emergency procedures to include, but not limited to the following: 1) Debris removal and 8) Garbage disposal

as directed by the Public Works Department/Solid Waste Division
Nicholas Heatherly, P.E. ~ Director of Public Works and
Scott Patterson ~ Recycling Coordinator & Storm Water Education Mgr.
Joplin City Hall: 602 South Main Street ~ 417-624-0820 ext. 501
Recycling Center: 1310 West A Street ~ 417-627-8870
Public Works Center: 1301 West 2nd Street ~ 417-624-0820 ext. 564
Employee Roster ~ Appendix A

While it is advisable to have a written plan, practically every disaster is a special case simply because of the diversity of events (tornados, straight line winds, ice storms, hail storms, fire, flooding, riots, vandalism, criminal activities, etc.), the diversity of damage, types and condition of the debris, geographic location, time of day, weather conditions during clean-up efforts, availability of personnel and equipment, and many other factors. This plan documents resources and options for disaster debris management as well as guidelines for meeting Federal Emergency Management Agency (FEMA) and Missouri State Emergency Management Agency (SEMA) reimbursements.

For legal and background purposes, a portion of the booklet titled,
EPA Solid Waste and Emergency Response-Planning for Disaster Debris,
is printed below.

FEDERAL RESOURCES AVAILABLE TO HELP

If the President declares a community a natural disaster area, considerable federal assistance is available from FEMA. In addition to FEMA, the U.S. Army Corps of Engineers (USACE) and the U.S. Environmental Protection Agency (EPA) can provide federal assistance. Most natural disasters, however, do not qualify for full federal assistance.

Congress and the President

The Robert T. Stafford Disaster Relief and Emergency Assistance Act sets forth federal disaster relief responsibilities and procedures. Among many other activities, the Stafford Act authorizes debris removal in "the public interest … from publicly and privately owned lands and water." The President makes the final decision to declare an area a natural disaster and therefore eligible for federal assistance.

Federal Emergency Management Agency (FEMA)

The Stafford Act authorizes FEMA to respond to disasters and emergencies in order to help save lives and protect public health, safety, and property. FEMA operates under specific regulations, which are spelled out in Section 206.224 of Title 44 of the *Code of*

Federal Regulations (CFR). The Stafford Act and the CFR use the term "debris removal" in a broad sense to encompass the entire process of removing, handling, recycling, and disposing of debris. The CFR declares debris removal to be "in the public interest," not only to protect "life, public health, and safety" but also to "ensure economic recovery of the affected community." Thus, the authorizing statements in the Stafford Act and CFR are broad and inclusive.

For communities to qualify for FEMA assistance, the effort needed to recover from the disaster must be of such magnitude as to be beyond the capabilities of the state or local government. A local government must make a declaration of natural disaster to the state emergency management agency, and the state's governor must request through FEMA that the President declare the affected area a disaster. Once the President concurs, the local government becomes eligible for reimbursement of some portion of its debris management expenses and other recovery costs. FEMA also opens a Regional Operations Center and a Disaster Field Office in the affected area to coordinate efforts with local and state authorities.

Once the declaration is made by the President, FEMA negotiates the disaster relief efforts with the state emergency management agency. The state agency represents the local communities during this discussion. FEMA staff advise local government officials regarding the activities eligible for reimbursement specific to that community; FEMA also sets reasonable cost standards for these activities. Under the Stafford Act, FEMA is authorized to pay for activities to handle debris posing an immediate threat to the public, generally including debris removal, transportation, volume reduction at staging areas, and ultimate disposal. FEMA requires careful recordkeeping regarding expenditures for communities to obtain reimbursement. FEMA may fund recycling of disaster debris if the local government has in place prior to the natural disaster a policy emphasizing recycling, or if the local government can demonstrate that recycling is a cost-effective debris management option.

FEMA does not respond alone to natural disasters. Other federal agencies also have substantial roles. In particular, two agencies are involved in hazardous and non-hazardous waste management.

U.S. Army Corps of Engineers (USACE)

The Department of Defense is responsible for emergency support related to public works and engineering and has designated USACE as its operating agent. USACE provides technical advice and evaluations, engineering services, construction management and inspection, emergency contracting, emergency repair of wastewater and solid waste facilities, and real-estate support.

USACE assistance is arranged through FEMA. In the Miami area after Hurricane Andrew in 1992, USACE removed debris in the hardest hit areas by contracting with six large general contractors.

U.S. Environmental Protection Agency (EPA)

EPA is the primary agency responsible for emergency support related to hazardous materials. EPA responds to releases of hazardous materials and provides technical assistance for environmental monitoring needs. EPA regional offices also can provide technical assistance on municipal solid waste issues.

STATE AND LOCAL RESOURCES AVAILABLE TO HELP

State and local governments are communities' first source of assistance in the wake of a natural disaster and in planning for disaster debris management. Such assistance is available to communities impacted by disasters, regardless of whether they receive a federal disaster declaration.

State Governments

The state emergency management agency and state waste management agency have specific roles to play in cleaning up disaster debris. The state emergency management agency serves as the local government's liaison to FEMA and can provide information for emergency planning. This state agency also can help represent the local government's interests to FEMA during a disaster and cleanup. The state waste management agency's role can be to make special accommodations for the unusual waste management needs resulting from a natural disaster. For example, this agency could temporarily lift permit requirements for solid waste facilities. In addition, specialized assistance is often available from other state agencies.

Other Government Assistance

Both state and local governments may enter into mutual aid agreements with other state and local governments prior to any disaster. Such an agreement could provide for either binding commitments or nonbinding intentions of support by state and local governments to assist one another in the event of a disaster. Through these agreements, communities can loan equipment and personnel with specific expertise or experience.

The Southern Regional Emergency Management Assistance Compact is an example of a mutual aid agreement originally signed by 17 states, Puerto Rico, and the Virgin Islands. The resolution supporting this pact now has been offered to all states and includes model legislation for state legislatures. The compact also contains broad language and a legal framework addressing authority, liability, licensing, reimbursement, injury or death benefits, and use of the National Guard. For more information on the Southern Regional Emergency Management Assistance Compact, contact: The Southern Governors' Association, The Hall of the States, 444 North Capitol Street, NW., Washington, DC 20001 - 202 624-5897.

WHAT A COMMUNITY CAN DO TO SPEED RECOVERY AND REDUCE COSTS

Preparing a disaster debris management plan in advance can pay off in the event of a natural disaster. Planning can help a community identify its debris collection, recycling, and disposal options. Although the recovery process will take a long time, perhaps even years, careful planning will prevent costly mistakes, speed recovery, and avoid creation of more waste. A plan also can save money by identifying cost-effective debris management options and sources of help, increasing control over debris management in your community, and improving administrative efficiency.

Short and Long-Term Debris Collection

Debris removal needs and procedures shall be determined by the Director of Public Works. If he/she is not available, the City organizational chart shall be followed. Depending on the severity of destruction and depending on residential and commercial debris, priority removal shall be to unblock streets, alleys, essential service companies, hospitals, schools, communication and emergency agencies, City facilities, and

temporary storage and staging areas of debris. Streets Department and Parks and Recreation Department “emergency snow routes” and “snow plowing procedures” shall be adopted for initial or secondary debris removal locations.

Depending on the severity and volume of debris in residential areas as determined by the Public Works Director, City crews or hired contractors shall collect the debris. If necessary, the Director of Public Works shall have City staff assist in trash/recycling collection, hauling, processing, etc. The Director may also contract with trash companies, general contractors, heavy equipment operators or neighboring municipalities if needed for debris removal or transporting debris to permanent disposal areas and temporary staging areas. The Public Works Director shall determine if temporary staging sites shall be established for residents to drop off designated debris. The Public Works Director shall determine if residential trash billing should continue in accordance with contracts. Contractors must submit a bill to the City in accordance with FEMA guidelines.

Temporary Storage and Staging Areas

Appendix F and G lists areas that may be established for the drop off of yard waste, building debris, appliances, tires, electronics, hazardous waste, food waste, general municipal solid waste, etc. by city employees, contractors, volunteer groups and residents. A city employee or contractor shall document all loads that are dropped off. A temporary observation deck shall be constructed by the City or contractor if necessary, or a scissor lift shall be rented.

Recycling

The City of Joplin has established policies for recycling through the Solid Waste Code that include:

- Trash and recycling haulers must be licensed.
- Trash companies and commercial solid waste generators are to recycle at least 40% from their waste stream.
- City Council appointments of seven Solid Waste Commissioners
- Annual Recycling and Waste Disposal Guide attached as **Appendix B.**

The Solid Waste annual budget allows for Recycling Coordinator and Recycling Attendant personnel; recycling procedures at City facilities; the Joplin Recycling Center and Joplin Household Hazardous Waste Satellite Collection Facility; bulky items clean up events that recycle tires, appliances, batteries, and brush; targeted tire/appliance/electronic collections; annual “Recycling and Waste Disposal Guides” bulk mailed to area residents; tree limb drop-off location; compost facility and more. The City has a history of promoting private recycling businesses and activities.

Some of the many reasons to recycle debris are as follows:

- Reduce disposal costs.
- Save landfill space.
- Minimize environmental impacts.
- Minimize threats to health and safety.

- Recycling infrastructure is in existence.
- Some items such as metal has monetary value.
- Some yard waste (also known as green waste) can be composted or ground into useable landscape mulch.
- Open burning is an environmental and health hazard.
- City code only allows for the burning of yard waste, not trash.
- City owns and operates a compost facility.
- City has experience in collecting ferrous and non-ferrous metal, lead acid batteries, tires, large appliances, electronics, household hazardous waste (HHW), yard waste.
- Some items are banned from Missouri and Kansas landfills and must be recycled.
- Save money on traditional disposal cost.

Hazardous Waste Identification and Handling

Truly hazardous waste as generated by commercial entities shall be identified by City staff (Fire, Police, Recycling, Health, Wastewater, etc. Departments) or the generator. City staff shall identify the entities and make them pay for proper disposal through existing solid waste and nuisance codes. If the proper entity cannot be identified, the City shall pay for proper disposal of orphan or abandoned hazardous waste and request reimbursement from FEMA. All evidence, photographs, location, markings on containers, etc. will be kept in a record by the Recycling Coordinator. The hazardous waste will be staged at the Recycling Center HHW Satellite Facility. Depending on the severity and types of HHW, the fire stations (pending approval by Department officials) will be the secondary locations.

Administration

The Recycling Coordinator, Emergency Management Director and Finance Director shall keep track of all purchases and expenses such as personnel, equipment, supplies, tools, sub-contractors, trash haulers, communication expenses, public information expenses, etc.

Dissemination of Information to the Public

The Director of Public Works, Public Information Officer, Recycling Coordinator, Finance Director, Health Department Director, and Emergency Management Director shall be responsible for informing the public about debris management such as who to contact for removal, where to take various items, health issues, hazardous materials issues, etc. If possible, temporary signs shall be placed in all possible City parks, the Public Works Center, Recycling Center, City Hall, the Fire Stations, the marquee at Memorial Hall, and at major intersections. A plan and/or agreement shall already be established with key radio, television, print, and on-line media for the quick dissemination of information. **Appendix H** is the media contact list.

Mutual Aid Arrangements

Prior to any disaster, Joplin can agree with the listed cities to provide for either binding commitments or nonbinding intentions of support to assist in the event of a disaster. Joplin may pay the expenses for the personnel, or the loan of equipment, as well as any maintenance or repair costs for equipment on a short-term basis. This agreement can be developed for the municipalities, either formal or informal as listed in **Appendix I.**

Dissemination of Plan

City of Joplin *Disaster Debris Management Plan* shall be filed with and/or offered to the entities listed in **Appendix C, D, E and I.**

APPENDIX A: City of Joplin Public Works Employees Roster (for limited distribution)

APPENDIX B: Annual Recycling and Waste Disposal Guide

APPENDIX C: Licensed Trash Haulers; area Municipal Solid Waste and Construction and Demolition Debris Transfer Stations and Landfills

APPENDIX D: Heavy equipment contractors, demolition companies, tree trimmers and interested parties.

APPENDIX E: Utilities and Parties with equipment/personnel such as Missouri Department of Transportation, Joplin Special Road District, Joplin RVIII School District, Empire District Electric Co., SBC, Inc., Missouri-American Water Co., Missouri Gas Energy, Cable One.

APPENDIX F: Temporary Staging Locations

- City "40" acre tree limb processing site, 1702 North Schifferdecker Avenue
- Public Works Center, 1301 West 2nd Street
- Recycling Center, 1310 West A Street
- Compost Facility, 3457 Eddy Lane (next to Turkey Creek Wastewater Treatment Plant)
- Decommissioned Lone Elm Wastewater Treatment Plant, Lone Elm Road
- Humphrey Park - Schifferdecker Park – McClelland Park - Others
- Occupied and unoccupied commercial properties (such as former box stores) may be leased by the City.
- Closed City Landfill, Belle Center Road and North Black Cat Road
- Joplin Regional Airport Industrial Park and Public Safety Training Facility, 5102 North Swede Lane
- Wheeler Excavating Site, 1832 Crane Drive; McCutcheon Street east of Range Line Road; area north of D Street, east of North Schifferdecker Avenue
- Shoal Creek Wastewater Treatment Plant, 2860 Apricot Drive
- Turkey Creek Wastewater Treatment Plant, 3457 Eddy Lane
- Crossroads Industrial Park, Springmore Avenue and Highway FF
- Kevin Southard area south of Elm Road and west of North Prosperity Avenue

APPENDIX G: Debris Disposal Site Candidate Location Map

APPENDIX H: Media List

APPENDIX I: List of area cities and counties for mutual aid arrangements