

Oregon's ESF 8 Cascadia Planning— Public Health & Medical Services

Responding

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Healthy Oregon



Outcomes - Purpose

- Cascadia Health and Medical Response
- Internal Resources
- Incoming Resources
- Gaps
- Expectations

Opportunities

- Planning:
 - Communication and Planning with Partners
- Coordination Groups
 - Oregon Military Department
 - Office of Emergency Management
 - Federal Partners



It is Different!

Hurricane Sandy, Atlantic city, NJ
2012



Great Hanshin EQ, Kobe, Japan
1995



DISCLAIMER..... Roads will be gone, timelines will vary, response will be slow
We are working on planetary time..... Recovery will take years.

A New Normal?



Impacts on Western Oregon

- 24,000 buildings completely destroyed, and another 85,000 with extensive damage requiring months to years of repair.
- 27,600 displaced households.
- Approximately \$32 billion in economic losses.
- Almost 10 million tons of debris (1 million dump truck loads).

Cascadia Planning

	Deaths	Injuries
Earthquake/Tsunami - OR	4,500	24,400

Hospital Damage:	
Completely	9
Extensive	2
Moderate	25
Total	36 of 64

Fatalities 650 to 5,000, with another 600 to 5,000 deaths due to the tsunami.

And oh by the way, 388 Nursing homes or 11,000 Beds will be affected



HOSCAP

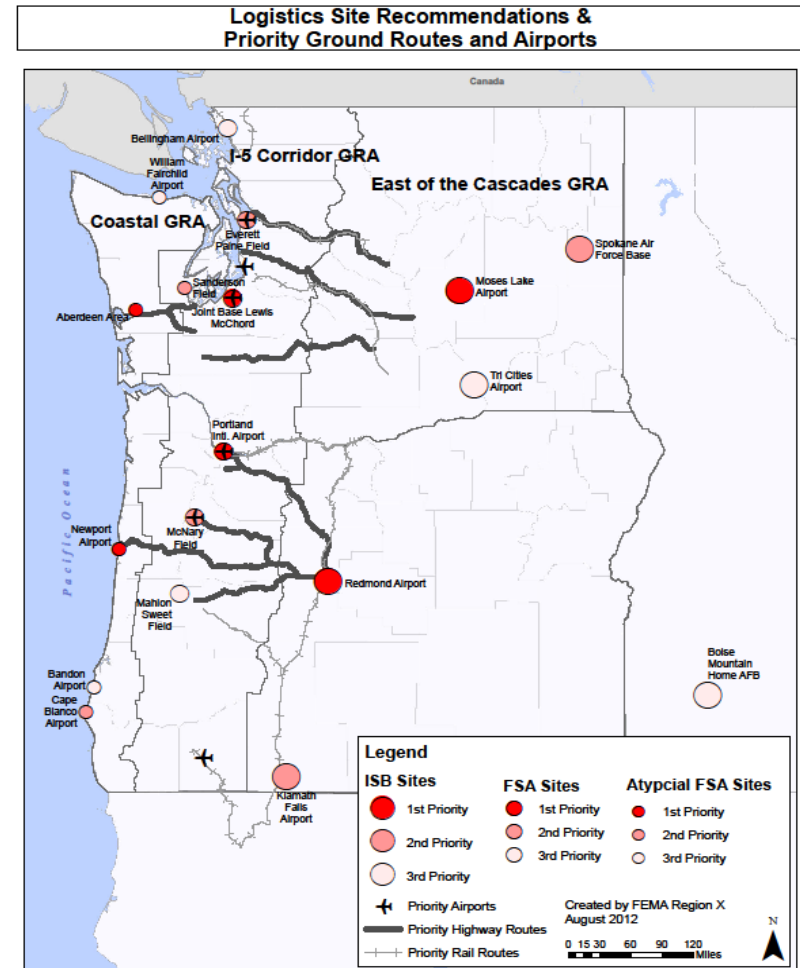


What we all know –

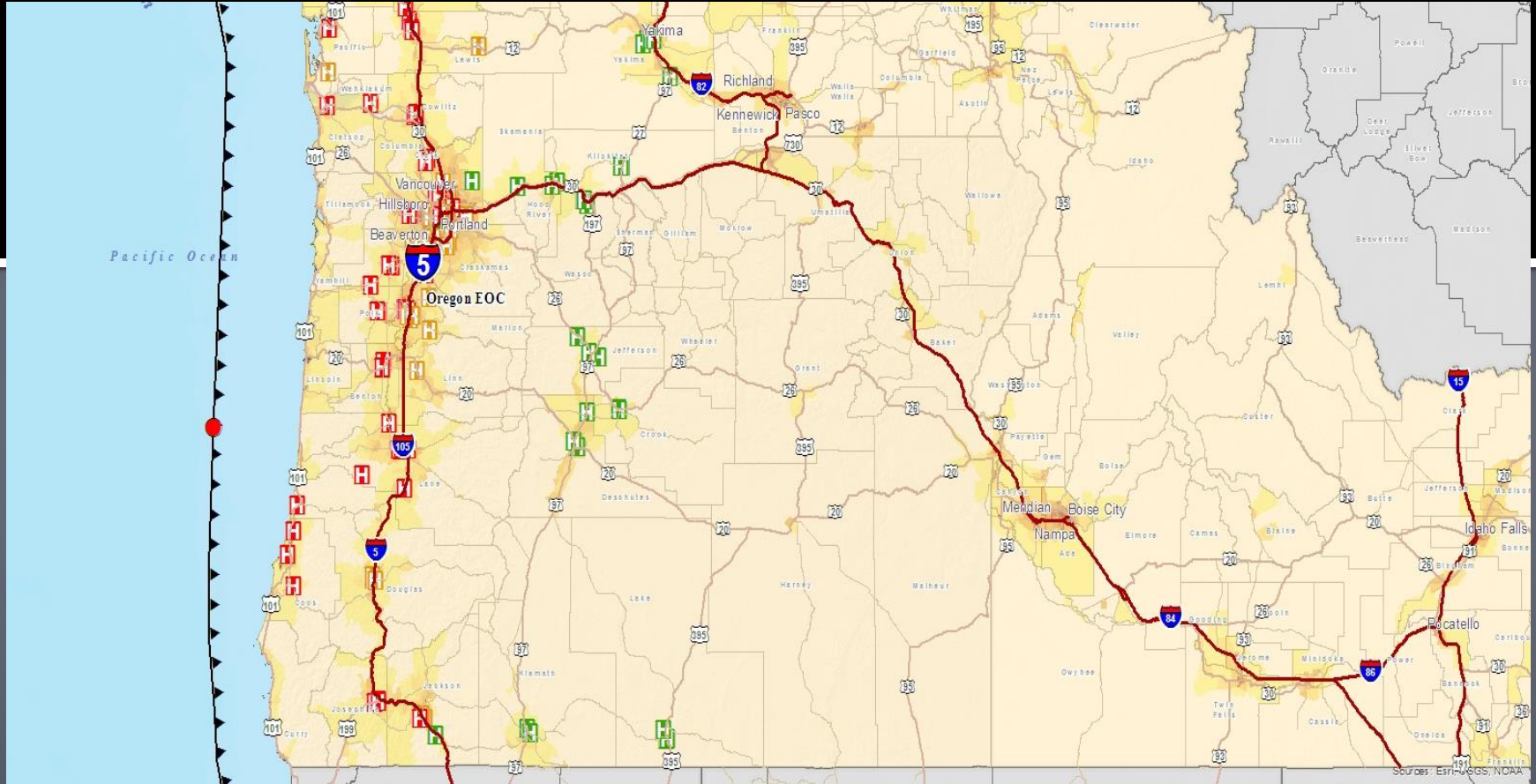
- Widespread Damage
- Infrastructure Failure
- Increased Medical Needs
- Isolated Communities

Additional Facts and Planning Assumptions based on Impact Analysis:

- Hospitals within 250 miles of the affected areas will be overwhelmed
- Loss of power and water will limit surviving hospitals ability to provide services
- Surviving patients in damaged hospitals, nursing homes and assisted living centers will need to be relocated
- Significant damage to road networks.
- Significant air or specialized ground transportation will be required
- NDMS will need to be activated for patient movement
- Fatality management challenges



HAZUS Damage

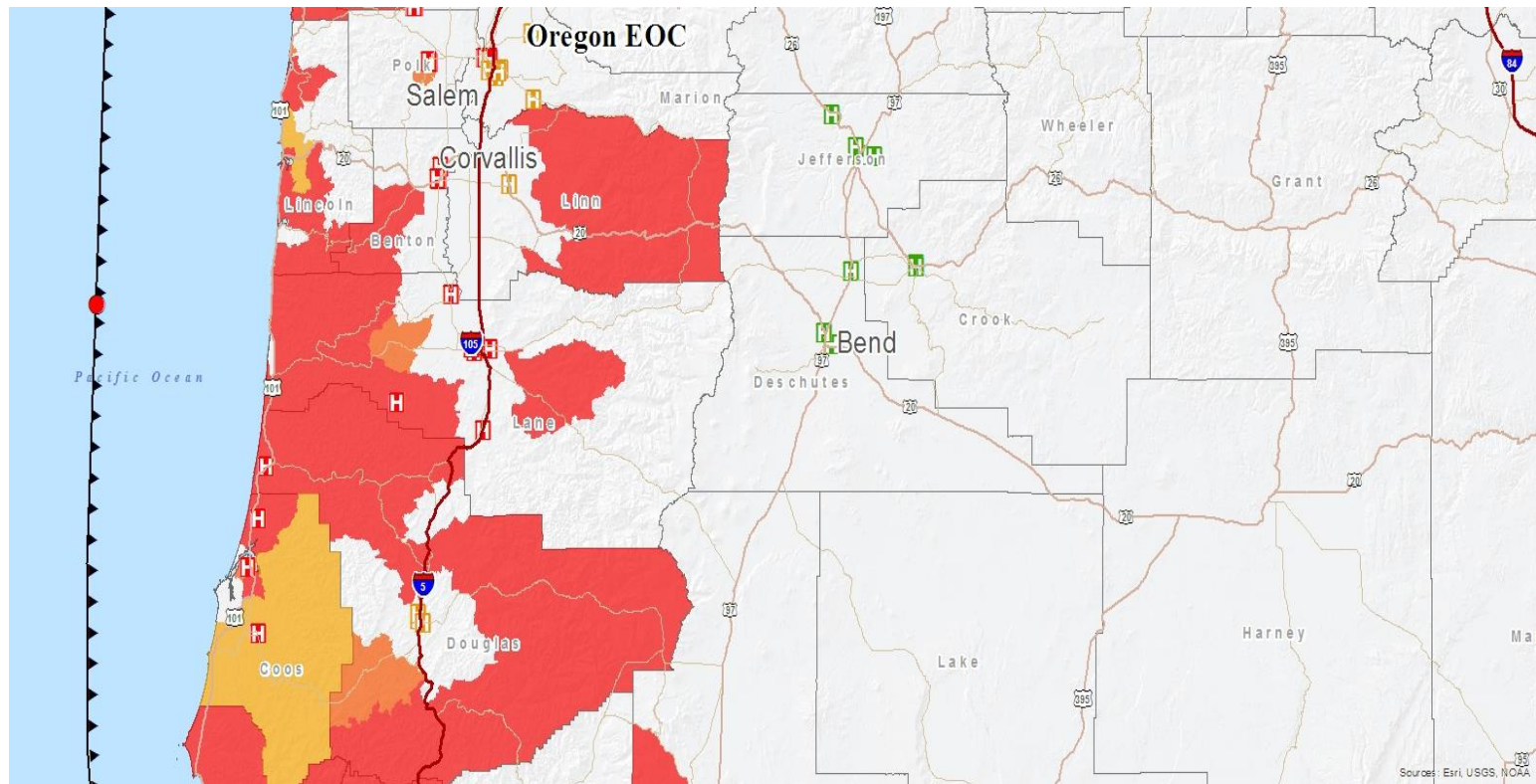


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Complication of Scenario

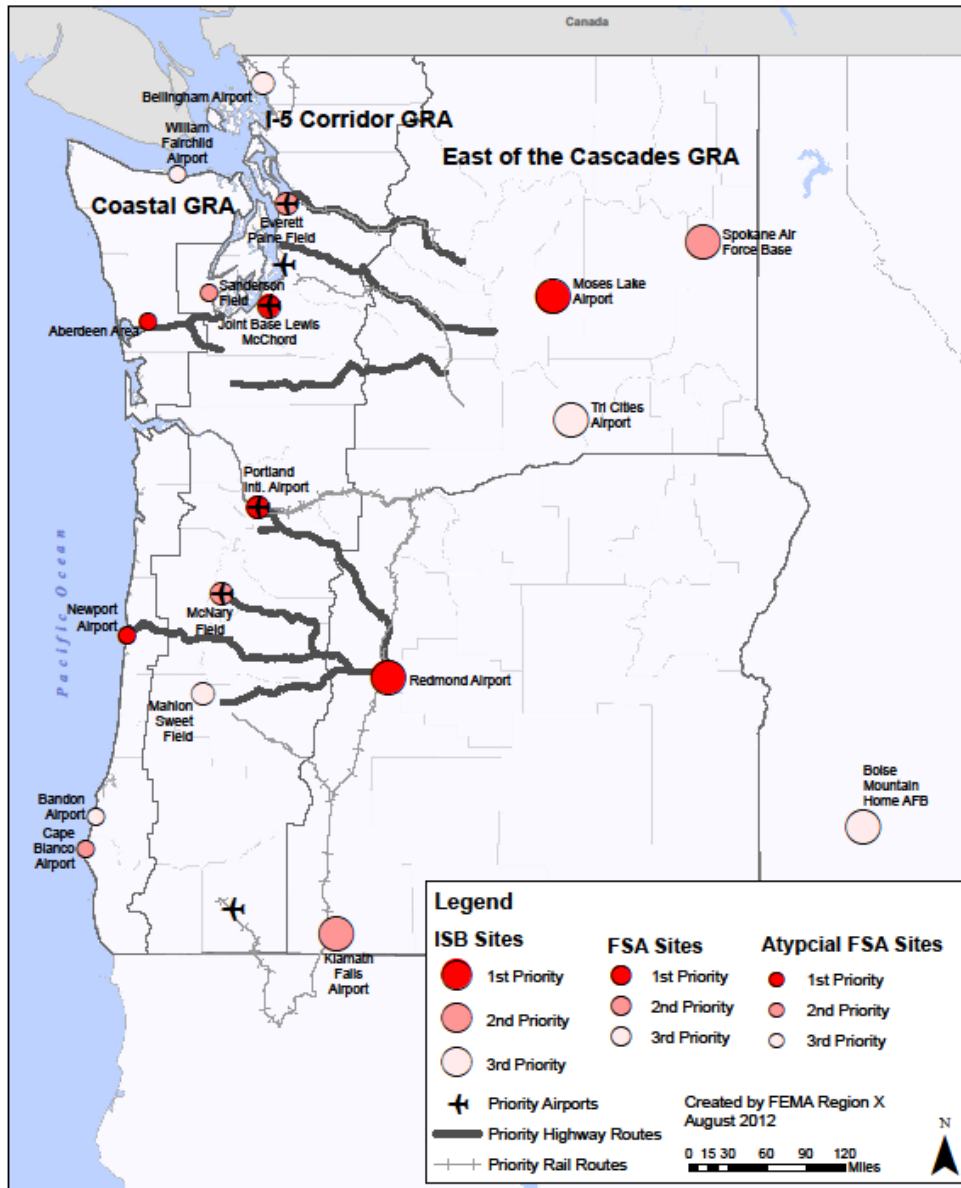
- Landslide risk



Cascadia Planning

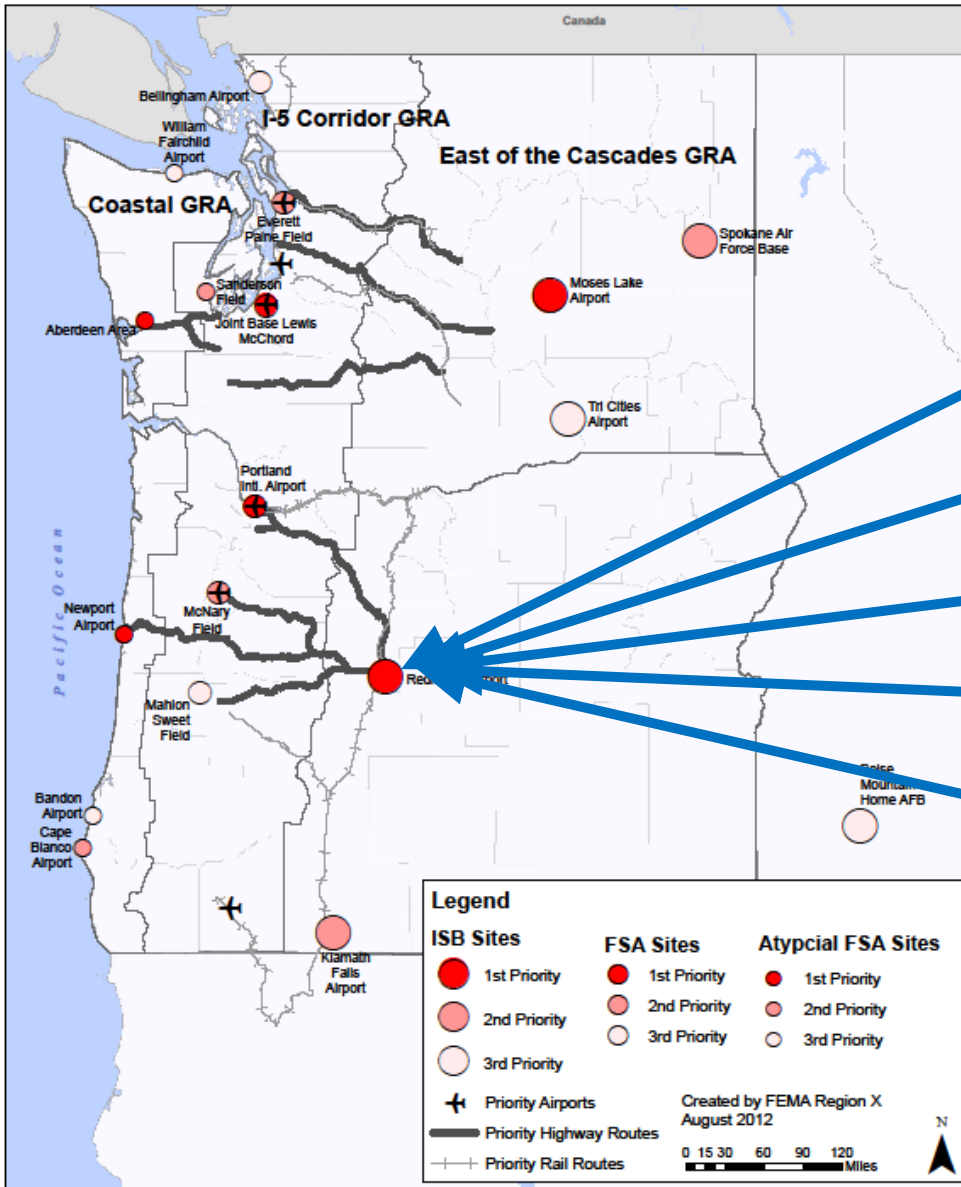
- HHS: Oregon – First Wave....
 - 10 DMATs (Medical Team)
 - 6 FMS's (Fed Medical Station)
 - 3 DMORTs (Mortuary)
 - 1 DPMU (Portable Morgue)
- National Ambulance Contract – 100 ground & 8 air
- National Disaster Medical System (NDMS)
- SNS – Medical supplies & some pre-deployed

Logistics Site Recommendations & Priority Ground Routes and Airports



- DMAT
- FMS
- DMORT
- DPMU
- Ambulance and Air

Logistics Site Recommendations & Priority Ground Routes and Airports



DMAT

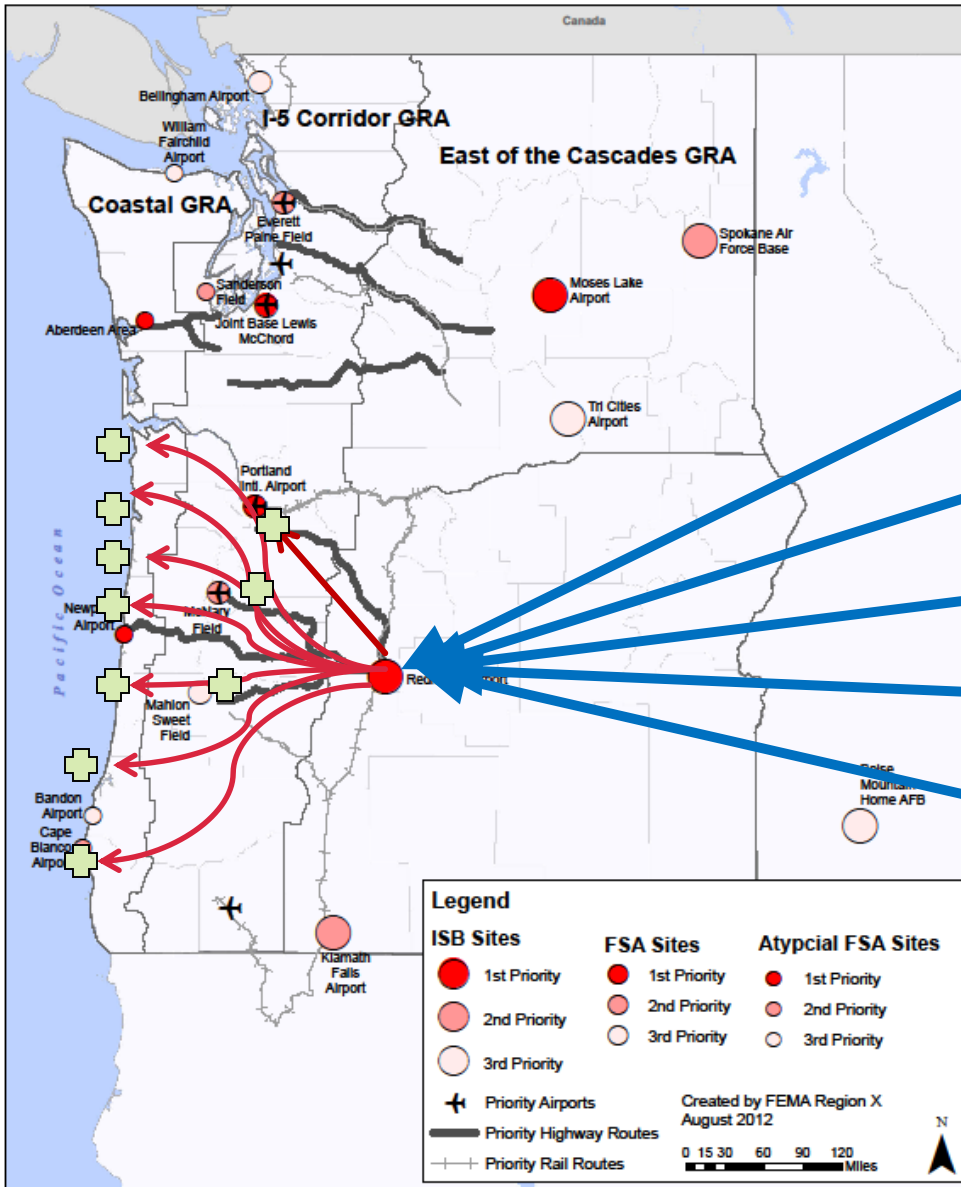
FMS





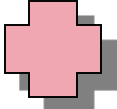
DMORT

DPMU

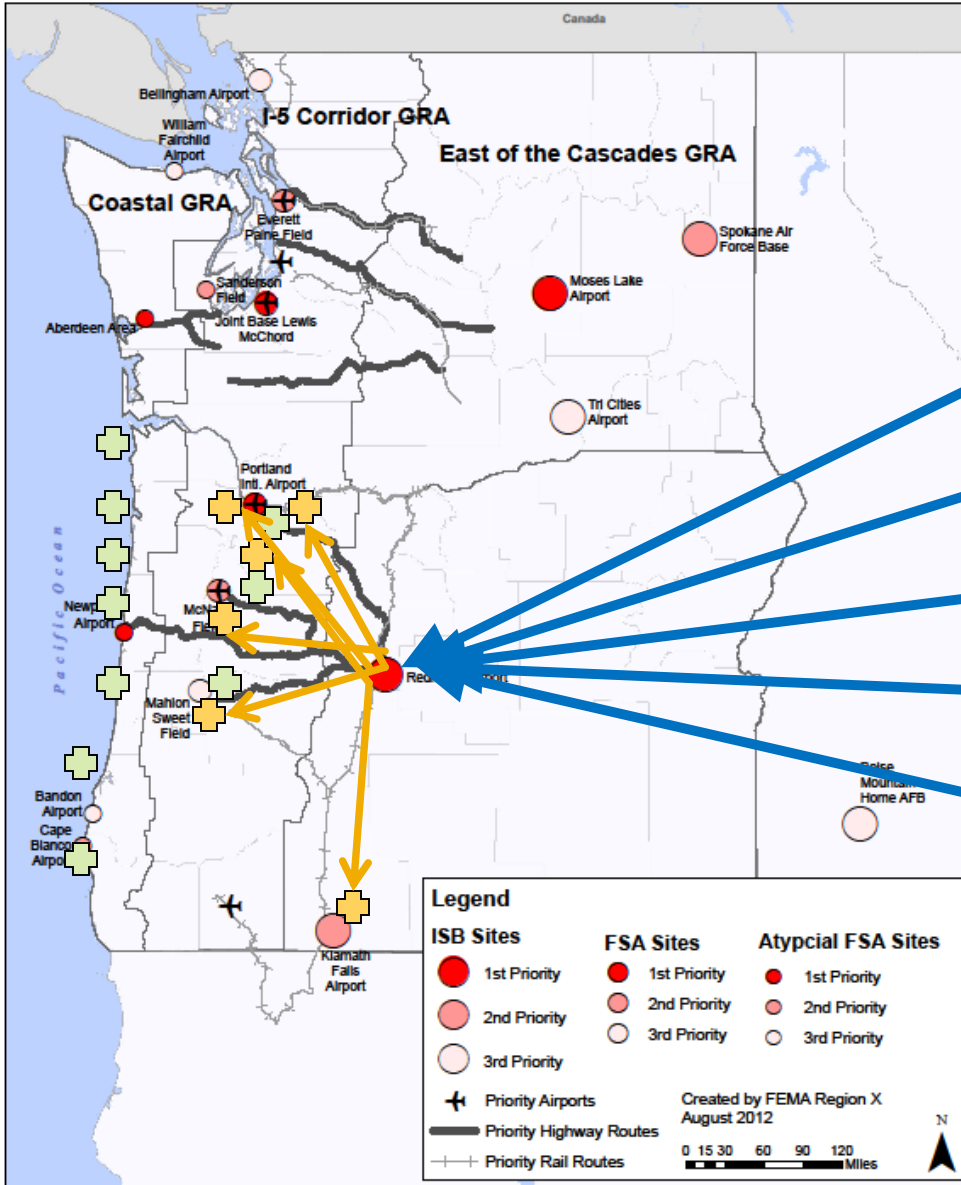
Ambulance and Air





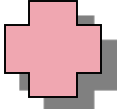
Logistics Site Recommendations & Priority Ground Routes and Airports



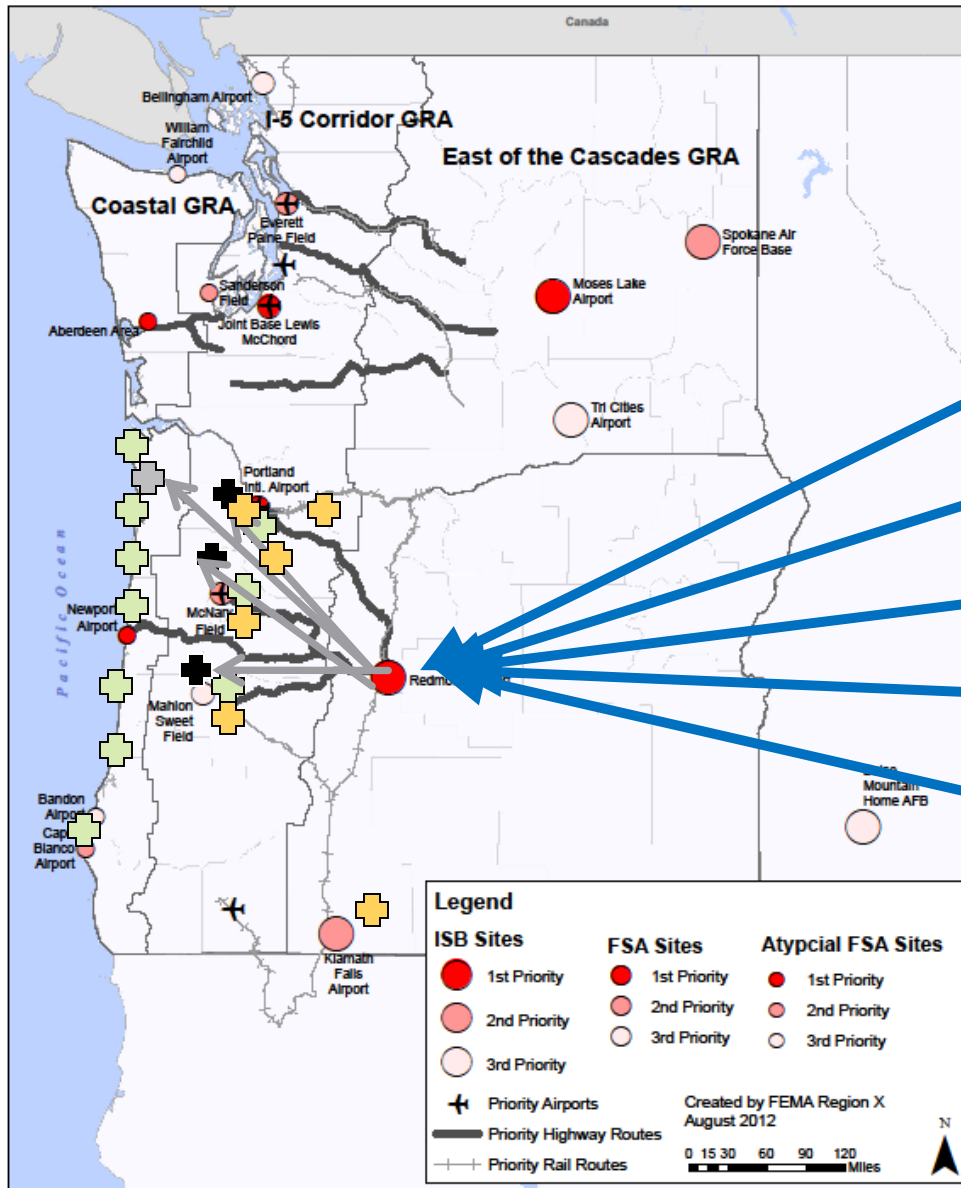
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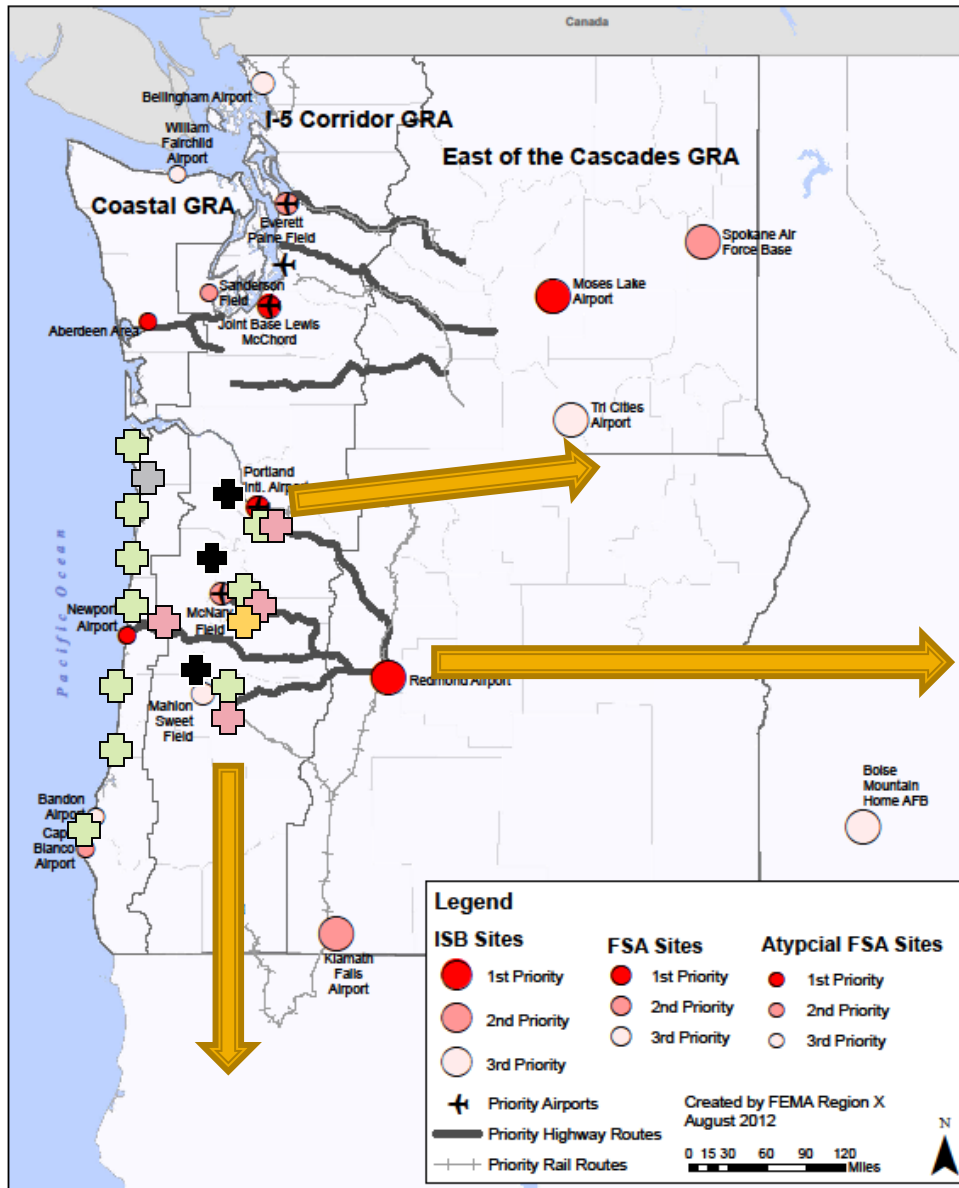
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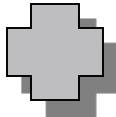
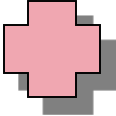
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Cascadia Planning

- Expectations
 - Lots of need, limited resources
 - Placement & Support
- Opportunities for OMD – Guard
 - Other ANG Assets discussion

What to expect

- Referral pattern changes
- Electric black-out
- Fuel issues
- Transportation issues
- Hospitals fill up, healthcare system overwhelmed
- MRC help
- FEMA and responders – lots of them, base hub in Redmond
- Evacuation

ESF 8 Pre-Script Missions (Federal)

1. *Strategic National Stockpile*
2. *Public Health Services*
3. *Federal Ambulance Contract*
4. *Medical Care & Support (Federal Medical Stations)*
5. *NDMS Patient Evacuation*
6. *NDMS (DMAT, VMAT, DMORT, & FMS)*
7. *Food & Product Safety Inspection*
8. *Workers Health & Safety*
9. *Behavioral Health Care*
10. *Environmental Health – Hazard & Control Measures*
11. *Mortuary Operations Assistance (non-NDMS)*
12. *Technical Assistance*

Discussion

- Back and forth
- Planning for the future
 - 2 Weeks of self sufficiency: engagement
 - ESF 8 Interface
 - Local jurisdictions
 - Broader statewide discussion about high demand – low resources, placement
- Informed, basic plan, manage expectations
- Input!!

The Good, The Bad

- Joint Planning – Collaboration!
 - HHS RECs, Washington, OMD, ODMT, Volunteers, Locals
- What is the right amount of time for this?
 - Anything we do is more than what we had.
 - Oregon Resiliency Plan
- GAPS
 - Amount of planning and resources
 - Economic recovery!
- Cascadia Rising 2016 – June 7-10
 - KISS - Practical, further planning efforts

"Our goal is to connect-the-dots with healthcare stakeholders and systems...to find that sweet spot between day-to-day healthcare delivery and response & recovery efforts when a bad day impacts our clients and healthcare systems"

Mike Harryman, MA

*Director of Emergency Operations
Oregon Health Authority
Public Health Division*



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Questions

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 - After a Cascadia event – please send carrier pigeon