

Mahoning County District Board of Health

COMPREHENSIVE COMMUNICATION PLAN



Public Health
Prevent. Promote. Protect.

**Mahoning County
District Board of Health**

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Plan Creation Information

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September 20, 2004

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The Mahoning County District Board of Health recognizes the need to communicate timely, accurate, and credible information.

Communication planning helps the Mahoning County District Board of Health deal effectively with both crisis/emergency and daily processing/release of information to the community. The following communication plan is a framework of action incorporating the ethical, professional, and guiding principles needed to communicate to the media, public, and employees with confidence and credibility.

Therefore, this Comprehensive Communication Plan, approved by the Mahoning County District Board of Health December 16, 2013 is the policy that the District's employees shall follow to communicate during daily and extraordinary events that impact our community.

Patricia Sweeney, Health Commissioner
Mahoning County District Board of health

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I. INTRODUCTION

A Comprehensive Communication Plan is essential for successful communications with internal and external stakeholders on a daily basis and during crisis response. The purposes of include:

- Build trust
- Disseminate accurate, timely information to protect the public's health
- Minimize or dispel misinformation or rumors
- Inform and instruct widely divergent audiences (e.g., employees, customers, emergency responders, and the news media)
- Minimize panic or fear
- Encourage the adoption of appropriate protective actions by individuals

The Mahoning County District Board of Health's Communication Plan provides a framework for timely, accurate, and credible communication and information dissemination. It is based on a coordinated approach between the Mahoning County District Board of Health (MCDBOH) and other community partners.

Communication is intended to ensure the delivery of timely and accurate messages through appropriate channels and to support the department's public health protection efforts.

The plan outlines the roles and responsibilities for Mahoning County District Board of Health personnel in communicating with employees, response partners, the media, government entities, and the community.

II. KEY OPERATIONAL ROLES AND ASSUMPTIONS

A. Roles

- Ensure an efficient flow of timely, accurate, and credible information before, during, and after an event.
- Facilitate communication among key internal and external stakeholders.
- Provide a system of information to affected or interested target audiences through the media and other information channels.

B. Assumptions

- Dissemination and sharing of timely, accurate, and credible information among stakeholders (affected, interested, and influential target audiences) is one of the most important facets of communications.
- Education will be an important part of the communication plan.
- It is likely that particular individuals and groups will be hard to reach, including people who are hearing and visually impaired.
- Different types of information will have to be communicated to different target audiences.
- Communication must be coordinated among all relevant individuals and groups to ensure consistent messages.
- In an emergency, it is highly likely there will be widespread circulation of conflicting information, misinformation, and rumors.
- Demand for information by affected and interested individuals and groups will be high.
- Negative consequences will affect those who experience a large-scale crisis or emergency, either first hand as survivors or as observers. The effects can include anxiety, depression, family disruption and violence, substance abuse, absenteeism, and other related physical and mental health symptoms. Every effort needs to be made to prevent such negative outcomes.

III. STANDARD COMMUNICATION PLAN PROCEDURES

A. Internal Clearance & Approval for Written Material

1. Situational (Internal/External) Communications

All information to be released to employees, the public, the media, and to community partners must be pre-approved by the PIO and/or the Health Commissioner. Based on time constraints, efforts will be made to obtain pre-event clearance of all communication messages.

Brochures, Flyers and other awareness documents

- All brochures, flyers and similar documents providing education and information that are disseminated externally must be approved by the divisional manager.
- Peer review is strongly encouraged for all documents with timeliness being a critical factor.
- A copy of all above described documents must be provided to the Community Health Division (electronic copies will be placed in a central location for filing). The central file location will contain copies of press releases, published media reports, and all published disseminated reports.

Press Releases

Programs that wish to issue a press release should submit draft releases with management approval to the lead PIO for review. The press release will be reviewed by all PIOs with final approval by the Health Commissioner prior to distribution to the media.

Information will be released to appropriate media contacts. (*See Appendix E, Local Media Contact List*).

See Appendix G, *News Release Template*, for the approved template for press releases issues by the Mahoning County District Board of Health.

2. See Section IV. for Emergency Communication Management

3. Social Media Communications

Social Media (Website, Facebook, and Twitter) will be used for educational purposes to promote Mahoning County District Board of Health messages.

- Only designated staff will have authority for social media access to post/delete information.
- When appropriate, subject matter experts are to be consulted prior to responding to Facebook and Twitter messages from the public.
- Social media sites are reviewed daily by designated staff and messages are disseminated on a regular or priority basis depending on content.
- Messages are reviewed for appropriateness and are subject to the Social Media Public Comment Policy. (See Appendix P)

B. Public Disclosure of Non-Identifying, Individual Data

Reports received by the Mahoning County District Board of Health may contain identifiable private data about individuals. Pursuant to the HIPPA and other privacy laws as well as ethical standards of public health practice, identifiable private data about individuals shall **not** be disclosed, except as noted below.

The Health Commissioner will evaluate the personal information it has obtained in the context of only permitting disclosures of the minimum amount necessary for public health /emergency response purposes, and will determine if it is necessary to share this information to accomplish that purpose. The

content of any release will depend on the nature of the crisis or emergency, how the information was acquired, who may be affected or at risk if the information is/is not disclosed, and what interest there may be in identifying the subject of the report.

C. News Media Communications (Media Inquiries and Requests for Interviews)

The lead PIO or Health Commissioner is responsible for coordinating responses to press inquiries.

- If the Mahoning County District Board of Health is participating in a Joint Information Center (JIC)
See Section IV: EMERGENCY COMMUNICATIONS MANAGEMENT

All media inquiries and requests for interviews to the Mahoning County District Board of Health must be referred to the lead PIO, backup PIOs, or Health Commissioner at 330-270-2855.

The PIO or Health Commissioner will arrange an interview with the designated Mahoning County District Board of Health staff member or refer the reporter to another source.

In a major event, news conferences will be held on a regular basis to engage the media and to inform the public. (See Section III. F).

D. Criteria for Authorizing Interviews

Decisions regarding the authorization of an interview are made by the Health Commissioner or PIO (in consultation with designated spokespersons/subject matter experts) and are based on:

- Appropriateness of the interview, topic and venue
- Availability of selected key staff in light of primary responsibilities
- Potential for exacerbating versus calming public fear or anxiety
- Potential for relating information that cannot or should not be disclosed
- The impact the information conveyed could have on other organizations
- The assessed intent of reporter or other media representative

The PIO has established a media room for conducting interviews located at the Mahoning County District Board of Health, 50 Westchester Drive, Youngstown, Ohio 44515.

E. News Dissemination Methods

Several options for disseminating information to the public via the news media may be used:

1. Individual Interviews - Used to respond to individual media requests for information.
2. News Releases - Used to disseminate important information to news media (Distributed via the *Local Media Contact List*, Appendix E).
3. Updates - Posted to the Mahoning County District Board of Health social media sites as an efficient way of responding to repetitive requests for the same information. Updates may also be distributed as news releases.
4. News Conferences - Held only when major developments occur or major announcements need to be made, to convey information to all interested news media at once. Media Briefings - Similar to news conferences but held daily (or regularly scheduled throughout the day) to provide information to all interested news media at once. Briefings are rarely held, except in times of extensive and continuing media interest in developing situations. See Section III. F for additional information regarding news conferences.
5. Website – press releases will be posted to our website

6. Other - Video news releases, audio news releases, and news features also may be used, typically to provide background or more in-depth information.

F. News Conference

Communicating with the media is a critical component of ensuring that the public receives accurate, factual and appropriate information. Often, media communication includes news conferences that enable the health department to provide media representatives with the facts of conditions or events as known and not known, provide information on steps being taken in response to an event or situation, and provide opportunities for reporters to ask questions.

Possible sites for news conferences are Mahoning County District Board of Health library or conference room.

Basic elements of a news conference agenda generally include:

- What Happened/is Happening? - Opening remarks to provide confirmed and appropriate facts of the event.
- What is Being Done by the Mahoning County District Board of Health? - For example, steps personnel are taking, are appropriate to discuss
- What is Being Done for Affected Individuals or Groups?
- Questions and Answers - The person opening the news conference should moderate, should direct any undirected questions to the appropriate person, and should close with a repetition of key messages.
- Possible handouts
 - Agenda with names and title of participants
 - Situation Fact Sheet
 - Issue Fact Sheet

G. Spokespersons

The Health Commissioner or a subject matter expert can be designate (by the Health Commissioner or the PIO) as a spokesperson. When an approved spokesperson responds to a press call, the Health Commissioner will be informed of the inquiry and briefed on the general response. Once an interview is completed, spokesperson should promptly send a brief update via email to the lead PIO (provide reporter's name, media outlet, city, phone number, general topic and any unique questions or responses). Spokesperson should immediately call the Health Commissioner if post-interview concerns are urgent.

If Mahoning County District Board of Health staff is contacted by a reporter off-site or after-hours on a public health issue, the staff person should direct the reporter to a PIO or the JIC, if appropriate.

H. Inter-Agency Communication Coordination

Coordination of communications between the Mahoning County District Board of Health and its partners is extremely important to foster consistent messages to employees, the media, and the public. A primary purpose for centrally coordinating information dissemination to the news media is to improve the chances that information is credible, consistent, and accurate. Information released to the media through several sources also must be coordinated to assure that information released is not confusing.

To facilitate this coordination, the Public Information Officer will issue advisories and other information to key partners (via the JIC if activated). The PIO will also share press releases and media advisories with select partners in advance of their release to the media. These communications will occur over Virtual JIC or e-mail. The Virtual JIC can be found at www.neco5.org and is maintained by the

Northeast Central Ohio (NECO) Region 5 partners from public health, hospitals, public safety and emergency management.

If the Mahoning County District Board of Health has overlapping jurisdiction with response partners, such as local health authorities, health care organizations, or law enforcement, the PIO will coordinate with appropriate partners **prior** to the release to the media. Media inquiries about any criminal investigation will be referred to the appropriate law enforcement agency or legal authority.

I. Channels and Formats

Communications channels that can be used include:

1. Mahoning County District Board of Health Network - The Mahoning County District Board of Health has established a communications network based on fax and computer network capabilities. The network links the Mahoning County District Board of Health to its emergency response partners. Through the network, information can be exchanged on a 24/7 basis among key emergency response partners.
2. Website – www.mahoninghealth.org - The Mahoning County District Board of Health maintains a public access website and an internal website for employees. The websites include a crisis and emergency risk information page as well as an “Advisories” section for important press releases and information. The web team will post press releases, fact sheets, advisories and articles, and other information in a timely fashion as it becomes available.
3. Social Media - The Mahoning County District Board of Health will utilize the social media site such as Facebook and Twitter to distribute public information.
4. Main Telephone Line - The Mahoning County District Board of Health uses a public access telephone line (330-270-2855) and employee access telephone line during normal working hours. Calls are screened (via an automated phone system and staff who cover the line) and referred to the appropriate program or individual. After business hours, the same telephone number acts as a warm-line for Communicable Disease, Foodborne Disease, and Dog Bite reporting mailboxes. The calls via the warm-line are answered by the Health Commissioner. The appropriate manager will then be contacted by the Health Commissioner depending on the type of emergency reported.

Primary means of communication used by MCDBOH include:

External/Public

- Mass Media – See Appendix E, *Local Media Contact List*
- Facebook www.facebook.com/pages/Mahoning-County-District-Board-of-Health and Twitter <https://twitter.com/mahoninghealth>
- I-Contacts – www.icontact.com
- OPHCS- An internet program used to communicate health and emergency messages
- Website – www.mahoninghealth.org
- Functional Needs - See Appendix O, *Notify Now Procedure for Notification of Functional Needs Agencies*
- Blast Fax - Appendix K, *Blast Fax Procedure for Physicians and Veterinarians*

Internal

- Phone/landline – provided to all staff including voice mail capabilities - See Appendix C *Department Emergency Response List*
- Mobile phone – mobile phones are provided to MCDBOH staff - Appendix C *Department Emergency Response List*
- Radios-
 - Mahoning County Disaster Response Radios (EMA)

- Multi Agency Radio Communication System (MARCS) - See Appendix M, *MARCS Radio Protocol*
- Ohio Public Health Communication System (OPHCS) - See Appendix L, *Mahoning County OPHCS Alert Protocol* (OPHCS is a secure, web-based electronic emergency notification system operated by Ohio Department of Health and used to alert all public health emergency response staff of an event requiring a public health response.
- E-mail
- Amateur Radio – coordinated by EMA and EOC when activated
- Emergency Alert System (EAS) – national warning system

Special Populations

The Mahoning County District Board of Health will work with its partners to communicate crisis and emergency risk communication information to audiences who are likely not to receive messages through mass media channels

The Mahoning County District Board of Health has a contract in place with Language Line Services to provide translation services. See Appendix R, *Procedure for Meeting Americans with Disabilities Act Requirements for Communication Services*.

For the purpose of this section, “vulnerable” or “special needs” populations are individuals who feel they cannot comfortably or safely access and use the standard resources offered in disaster preparedness, relief, and recovery. This population may include individuals with physical or mental disabilities, (visual or hearing impaired, cognitive disorders, and/or mobility limitations), limited or non-English speaking, geographically or culturally isolated, medically or chemically dependent, homeless, frail/elderly, and children.

J. Demographics:

Mahoning, Trumbull, and Columbiana Counties compared to the Ohio and the United States- 2007

	Mahoning County	Trumbull County	Columbiana County	State OH ****	U.S**
Population size	237,978	211,317	107,873	11,542,645	301,237,703

Data Source: Community Health Status Indicators
 **Census.gov
 ***ODJFS Stats and Demographic Data/Ohio Quick Facts Census Data

Race/Ethnicity	Mahoning County	Trumbull County	Columbiana County	State (Ohio)	U.S
White	81.8%	90.1%	96.2%	84%	65.9%
African American	16.1%	8%	2.4%	11.7%	12.1%
American Indian	0.2%	0.2%	0.2%	0.2%	0.7%
Asian/ Pacific Islander	0.7%	0.5%	0.3%	1.5%	4.4%
Hispanic Origin	3.6%	1%	1.3%	2.5%	15.1%

Data Source: *County Health Rankings from the University of Wisconsin*

Age Distribution	Mahoning County	Trumbull County	Columbiana County	State (Ohio)	U.S **
Under 19	22.9%	22.8%	22.4%	26.7%	27.5%
19-64	60%	60.2%	61.9%	59.6%	59.5%
65-84	14.2%	14.4%	13.6%	11.7%	10.9%
85+	2.9%	2.6%	2.1%	1.9%	1.7%

Data Source: *Community Health Status Indicators* ** Data Source: *Census.gov*

K. Functional Needs and Vulnerable Populations:

The Mahoning County District Board of Health works with and through many of the county’s advocacy, civic, school and religious groups to reach out for preparedness planning and response. Many of these partner groups have participated in the Mobilizing for Action through Planning and Partnership (MAPP) program aimed at building healthy and safe communities.

Whenever there is an emergency, the department will work with these community partners to reach out to Mahoning County’s vulnerable population. The following chart identifies these groups:

Local Organization	Vulnerable Group
ACTION	Impoverished, Disabled, Children, Immigrant
Austintown Local Schools	Children
Austinwoods DBA Woodlands at Austinwoods	Seniors, Disabled
Beatitude House	Impoverished, Children, Homeless
Boardman Local Schools	Children
Briarfield at Ashley Circle	Seniors, Disabled
Camelot Arms Care Center	Seniors, Disabled
Campus Healthcare Center	Seniors, Disabled
Canfield Local Schools	Children
Caprice Health Care	Seniors, Disabled
Catholic Charities Regional Agency	Immigrants, Impoverished
Clare Bridge Austintown	Seniors, Disabled
Comfort Keepers	Seniors, Disabled
Community Support Network	Mental Health Services
Compass Family and Community Services	Addiction Services
Dandridge Burgandi Manor	Seniors, Disabled
Early Childhood Learning Center-Holy Family	Children
Early Childhood Learning Center-St. Luke's	Children
Gospel Baptist Church	Homeless, Impoverished
Greenbriar Commons	Seniors, Disabled
Guardian Health Care Center	Seniors, Disabled
Habitat for Humanity	Homeless, Impoverished
Hampton Woods	Seniors, Disabled
Hands on Volunteer Network of the Valley	Volunteer Agency
Help Hotline Crisis Center	Mental Health, Suicide
Heritage Manor	Seniors, Disabled
HM Home Health Services	Seniors, Disabled
Home Instead Senior Care	Seniors, Disabled
Homecare with Heart, LLC	Seniors, Disabled
Hospice of the Valley	End of Life
Humility House	Seniors, Disabled
Immaculate Heart of Mary Church	Families, Seniors, Disabled
Inn at Christine Valley	Seniors, Disabled
Jackson-Milton Local Schools	Children
Levy Gardens	Seniors, Disabled

Local Organization	Vulnerable Group
Mahoning County Board of Developmental Disabilities	Physically and Mentally Disabled
Mahoning County Children's Services Board	Children
Mahoning County Educational Service Center	Children
Mahoning County Emergency Management Agency	All
Mahoning County Homeless Continuum of Care	Homeless, Impoverished
Mahoning County Job & Family Services	Impoverished, Children, Non English, immigrant
Mahoning County Sheriff's Office	Disabled, Crisis response
Mahoning County Veterans Service Commission	Seniors, Disabled
Mahoning-Youngstown Community Action Partnership	Children
Maplecrest Nursing Home	Seniors, Disabled
Meridian Arms Living Center	Seniors, Disabled
Meridian Community Care	Addiction Services
Neil Kennedy Recovery Clinic	Addiction Services
OCCHA Inc.	Non English/Hispanic
Omni West Assisted Living	Seniors, Disabled
Paisley House	Seniors, Disabled
Park Vista Retirement Community	Seniors, Disabled
Pembroke Place	Seniors, Disabled
Poland Board of Education	Children
Potential Development Program	Disabled Children
Red Cross	Disaster Victims
Rescue Mission of Mahoning Valley	Homeless
Safehouse Ministries Inc.	Addiction Services, Mental Health
Salvation Army	Impoverished, Children
Sateri Homes Inc.	Seniors, Disabled
Sebring Local Schools	Children
Shepard of Valley: Boardman	Seniors, Disabled
South Range Local Schools	Children
Springfield Local Schools	Children
St. Charles School	Children
St. Christine School	Children
St. Mary's Alzheimer's Center	Seniors, Disabled
St. Nicholas School	Children
Stambaugh Charter Academy	Children
Struthers Local Schools	Children
Sunrise of Poland	Seniors, Disabled
The Inn at Ironwood	Seniors, Disabled
Ursuline High School	Children
Vista Care Center	Seniors, Disabled
West Branch Local Schools	Children
Western Reserve Joint Fire District	First Responder, Crisis Response
Windsor House at Omni Manor HCC	Seniors, Disabled

Local Organization	Vulnerable Group
Youngstown City School District	Children
Youngstown Community Center for the Deaf	Deaf, Hard of hearing
Youngstown Community School	Children
Youngstown Developmental Center	Physically and Mentally Disabled
Youngstown Metropolitan Housing Authority	Impoverished
Youngstown State University Police Department	First Responder, Crisis Response

L. Training and Plan Maintenance

The lead PIO is responsible for the Communication Plan development, distribution, periodic review, and updating. The plan will be reviewed as necessary based on lessons learned during emergencies, exercises, county or state public health organizational changes, and state planning guidance or as other events warrant. The lead PIO is responsible for assuring routine quarterly and annual review of contact information, as well as organizing exercises designed to test emergency risk communication strategies.

The PIO roles need to complete National Incident Management System (NIMS)/ICS training as required including:

- Core ICS Courses-100, 200, 250, 700, 702, 800

Lead PIOs will receive training on Crisis and Risk Communications and when possible, attend regional or state trainings on communication and Public Information.

PIOs must also complete the following two independent study online courses within six months of hire and at least once every five years thereafter: CDC Crisis and Emergency Risk Communication Basic and CDC Crisis and Emergency Risk Communication for Pandemic Influenza found at www.bt.cdc.gov/cerc

The PIOs needs to complete at least 8 hours of public information professional development per year (conferences, workshops, distance learning, or another related activity).

PIOs will also be responsible for assuring that an evaluation is conducted and an After Action Report is completed on all exercises or real events related to the function of the Emergency Risk Communications Annex.

IV. EMERGENCY COMMUNICATION MANAGEMENT

A. Incident Command System and Public Information Officer Appointment/Duties

In the event of a public health crisis The Mahoning County District Board of Health will utilize the Incident Command System (ICS), including the appointment of an Incident Commander (See Appendix B, *Incident Command System*). ICS is a standardized on-scene emergency management system that enables multiple agencies and jurisdictions to respond to single or multiple incidents using an integrated organizational structure. The Incident Commander (IC) is the individual responsible for all incident activities, including the development of strategies and tactics and the ordering and release of resources. The IC has overall authority and responsibility for conducting incident operations and is responsible for managing all incident operations at the incident site.

- If the event is large, the responsibility for Incident Command, mitigation, investigation, and recovery will progress through appropriate agencies.

- If the event is small enough, response can be handled by a Communicable Disease Team, composed of nurse, sanitarian, and epidemiologist for example.

The Incident Command System, depending on the size, scope, and complexity of the incident, may be activated according to stages outlined in Appendix H, *Graduated Response to Demand for Public Health Information*.

Emergency Response Plans will be activated at any time that the MCDBOH Department of Operations Center (DOC) is activated or at other times as determined by the Incident Commander or designee.

Under the ICS structure, the Health Commissioner, or designee of the Mahoning County District Board of Health shall designate a Lead Public Information Officer (PIO) to coordinate risk communication and information dissemination activities. The Lead PIO must be named within one hour of the establishment of incident command by the Incident Commander (health commissioner or designee) and the PIO will report to the IC. Such activities are conducted in concert with the Mahoning County Emergency Management Agency (EMA).

PIO activities may include: Press Briefings, Press Releases, Postings to the Mahoning County District Board of Health's website and social media sites, Monitoring of media reports, Initiating rumor control

B. Joint Information Center (JIC)

In certain circumstances, such as in the event of large-scale crisis or emergency involving multiple organizations, an Emergency Operations Center (EOC) and Department Operations Center (DOC) will be activated. Staff will be notified by a call down list established by Incident Commander if they must report to the EOC or DOC. Communication activities are coordinated through a Joint Information Center (JIC). A JIC is a facility established to coordinate all incident-related public information activities. It is the central point of contact for all news media. It is designed to disseminate a variety of information and instructions to interested and affected parties through press briefings, news releases and advisories. Public and news media queries are also coordinated through the JIC.

The designated PIO will facilitate communications via the JIC, coordinate all press inquiries, briefings, interviews, information releases, rumor control activities, and all other media relations functions. If the EOC is activated, all press inquiries to the Mahoning County District Board of Health shall be referred to and processed via the JIC. All public information is released through the JIC.

Once a JIC is established, the Mahoning County District Board of Health must:

- Assure that the lead PIO participates in the JIC and serves as a liaison with other organizations
- Assure that the JIC is staffed by a PIO during all operational hours (potentially 24-hours/day)

Important Notes on the JIC:

- After an emergency has been declared, the local Joint Information Center (JIC) will coordinate all public information efforts and media relations activities.
- In the event that a JIC is established, the JIC will be housed near the EOC. (See Appendix J, *Equipment and Supplies Checklist*)
- The media will not come to the JIC unless they can speak with decision-makers; Media will instead report physically where the story is located.
- Every participating response organization with a PIO should send a representative to the JIC.
- Every participating response organization should refer journalists and other media representatives to the JIC, rather than attempt to deal with them directly.

- It may be necessary to make arrangements at the JIC to credential the press and to route lay people who want information.
- At least one JIC representative must be available during all operational periods to report to the incident command or unified command center.

C. Policies

Mahoning County Emergency Operations Plan (MCEOP) - In the event of an incident, the MCDBOH would coordinate efforts with the Mahoning County Emergency Management Agency (EMA) and the State of Ohio Emergency Management Agency through the Mahoning County Emergency Operations Center (EOC). The Mahoning County Emergency Management Agency maintains plans for the residents of Mahoning County.

D. Emergency Risk Communications

In a crisis or emergency, information voids could possibly be filled by others in the public with erroneous information. What would normally take several days to coordinate and get proper clearances needs to be done in minutes.

- Communications will be coordinated in the Department Operations Center (DOC) and/or JIC (if applicable).
- Communications will be documented, recorded, and approved by DOC personnel and under the structure of the Incident Command System.
- Only the Health Commissioner (or designee) or designated PIO will release information to employees, the media, the public, or government entities (Appendix D, *Emergency Notification Roster*).
- The following Mahoning County District Board of Health staff will approve information before it is released.

Senior Leadership/Incident Commander	Health Commissioner or designee
Subject matter expert	Will vary according to the nature of the crisis or emergency and level of expertise
Public Information Officer	Assigned by Health Commissioner or designee

- In the case of a multiple agency involvement and JIC activation, then the lead PIO designated by the Emergency Manager at the EOC will release information to the media. The above referenced staff will clear information provided to the JIC for release to the media.
- See Appendix F, *Message Development for Emergency Communication* for assistance in message development.

E. Timing of Public Information and Warning

After a public health crisis has been identified, the Lead PIO must be able to provide basic information to the media and allow for initial questions within one hour of the onset of the emergency. The Lead PIO must be able to draft a media release and secure approval and publish the media release within two hours of onset of the public health emergency. If necessary, a news conference must be conducted within three hours of notification.

For addition information regarding MEDIA INTERVIEWS, ETC. see Section II.C.- II.L.

V. ABBREVIATIONS

DOC	Department Operations Center
EMA	Emergency Management Agency
EAS	Emergency Alert System
EOC	Emergency Operations Center
MCEOP	Mahoning County Emergency Operations Plan
ICS	Incident Command System
JIC	Joint Information Center
MCDBOH	Mahoning County District Board of Health
MARCS	Multi Agency Radio Communication System
NIMS	National Incident Management System
OPHCS	Ohio Public Health Communication System
PIO	Public Information Officer

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**Appendix A
Individual Assignment Sheets**

Appendix A: Communication Team Individual Assignment Sheet

COMMUNITY HEALTH EDUCATION LIAISON (PIO)

Assigned To:	
Tasks:	Done
1. Monitor potential areas of confusion and lack of information.	
2. Work with content team to develop materials to address gaps in knowledge of audiences.	
3. Develop programs for public information campaigns.	
4. Speak with affected communities to educate and inform.	
5. Coordinate dissemination with content clearance.	

Appendis A : Communication Team Individual Assignment Sheet

CLINICIAN COMMUNICATION LIAISON

Assigned To:	
Tasks:	Done
1. Identify critical groups and channels to reach them.	
2. Arrange for routine briefings to key clinician networks.	
3. Prepare information in appropriate formats for clinicians.	
4. Coordinate information dissemination with content clearance.	
5. Work with OPHCS and EPI-X on message dissemination.	
6. Respond to requests for information.	

Appendix A: Communication Team Individual Assignment Sheet

CONTENT AND MATERIALS DEVELOPMENT (PIO)

Assigned To:		
Tasks:		Done
1.	Determine your key messages and information based only what is currently known about the event. Use these as the basis for all communication materials.	
2.	Express empathy and caring in the first lines or first 30 seconds of your communications.	
3.	<p>Answer what the public wants to know: magnitude, immediacy duration, control/management of emergency, timely/accurate information</p> <ul style="list-style-type: none"> • Are my family and I safe? • What have you found that will affect my family and me? • What can I do to protect my family and me? • Who (what) caused this problem? • Can you fix it 	
4.	<p>Prepare to answer what media and communities want answered:</p> <ul style="list-style-type: none"> • Who is in charge here? • How are those who got hurt getting help? • Is this thing being contained? • What can we expect? • What should we do? • Why did this happen? (Do not speculate. Repeat facts of the situation, describe data collection effort, and describe treatment from fact sheets). • Did you have forewarning this might happen? • Why wasn't this prevented from happening (again)? • What else can go wrong? • When did you begin working on this (e.g. when were you notified of this or determined this had occurred)? • What does this data/information mean? • What bad things aren't you telling us? (Don't forget to tell them the good things.) 	

5.	<p>Create an information sheet on the event that can be used for public, public health partners and stakeholders.</p> <p>Have it ready within the hour. It doesn't always have to be a press release. If it's quicker, issue a press statement of facts and what's currently being done.</p>	
6.	<p>Line up your clearance personnel and give everyone the ground rules.</p> <p>If you are the main clearance officer, be sure that you are set up to get clearance from your higher authority if that is required. However, be certain that they know you must release within a set time period (usually if the event is critical, you have a one to two hour time frame before you should have information released).</p>	
7.	<p>Prioritize incoming information for clearance and dissemination. Activate your key three people to clear information. Clear simultaneously and in person when possible.</p> <p>It is best if you can get the primary clearance authorities in one room with the door closed and no interruptions allowed. This allows for questions/comments about the information, discussions and resolutions quickly. Make sure everyone would be comfortable seeing this information as the headline of the local paper the next day or on CNN within the hour. Remind everyone that the information you've compiled and are attempting to clear either: (1) answers important questions from the public, media and partners; or (2) is in response to troubling trends from your own analysis about where the event is heading and that you are trying to mitigate effects.</p>	
8.	<p>Develop a quick fact sheet or Q&A sheet on the event based on what is currently known.</p> <p>You will update this constantly in the next 48 hours. Pull any fact sheets on the incident that have been prepared in advance and are in your database (e.g. on the disease, on the type of crisis, etc.).</p>	
9.	<p>Make sure all communications functions (e.g. Web team, hotline personnel) have the communication material and key messages.</p>	
10.	<p>Get information out as soon as possible.</p> <p>Explain to responsible authorities that "no release" is worse than an "incomplete" release. Get "need-to-know" information out the door fast. Get "want-to-know" information released as soon as possible without straining relationships with authorities who must clear new information.</p>	

Appendix A: Communication Team Individual Assignment Sheet

MEDIA MONITOR (PIO)

Assigned To:	
Tasks:	Done
1. Monitor Google Alerts.	
2. Analyze what messages are appearing on the event. <ul style="list-style-type: none"> ○ Determine what messages are needed. ○ Determine what misinformation needs correcting. ○ Identify concerns, interests and needs arising from the crisis as it is being reported. 	
3. Prepare short analysis of this for the triage decision-making team. This should not be more than a page or two. Update it frequently during the first 48 hours.	
4. Research whether there have been similar events to the one you have, and whether there is anything in the communication to be used from it.	
5. Set up daily mechanisms to capture and do short analysis reports of information needs from hotline reports and Web site or special Web page hits.	
6. Determine whether you can bring together representatives from the affected populations quickly to test messages . Identify whether the event is of such magnitude that attitudes need to be measured quickly. If so, mount a quick survey.	
7. Monitor public inquiries and media contact logs to look for information gaps and needs.	

Appendix A: Communication Team Individual Assignment Sheet

INFORMATION LINE COORDINATOR (PIO)

Assigned To:	
Tasks:	Done
1. Obtain all communication being developed and brief hotline operators on the content and how to respond.	
2. Obtain FAQ's and use them as scripts for operators in responding to public calls.	
3. Provide the public with the Web site or special Web page information if they want to have frequent updates.	
4. Report all information about the event coming from the public to the communication team. This lets them know the concerns of the public about the event and will assist in message development.	
5. Update the communication team frequently on callers' questions that do not have answers and work up a suitable response.	

Appendix A: Communication Team Individual Assignment Sheet

MEDIA RELATIONS COORDINATOR (PIO)

Assigned To:	
Tasks:	
1. Assess media needs and organize mechanisms to fulfill media needs during crisis (e.g. determine whether you will do daily briefings in person, how you will handle media that are camped out there and when you might use Web site updates for media).	Done
2. Develop triage for response to media requests and inquiries. Make sure this team knows what you will do and won't do with the media.	Done
3. Activate media contact lists and call logs.	Done
4. Begin logging all media calls and types of inquiries.	Done
5. Produce and distribute immediate information materials (e.g. press releases, media alerts, press statements, fact sheets and Q & As).	Done
6. Prepare graphics, if necessary , to illustrate the incident or what is being done.	Done
7. Translate and test messages for cultural and language requirements of special populations.	Done
8. Review with spokesperson , tips for personal demeanor and message content, prior to media contact. (Refer to spokesperson's checklist.)	Done
9. Get with director for frequent updates of the information coming in about the event. Prepare further communication materials as new information comes in (it may be in the first 48 hours, depending on the severity of the event and media response, you will need to produce and release new information many times).	Done

Appendix A: Communication Team Individual Assignment Sheet

SPOKESPERSON

Assigned To:	
Tasks:	Done
1. Be the organization , act like the organization. Embody its identity, especially if your organization is about caring and protecting health and people’s lives. Be real.	
2. Express empathy and caring about the situation immediately.	
3. Describe the health and safety impact on individuals and communities – what is the risk.	
4. Describe the incident and its magnitude – what happened: <ul style="list-style-type: none"> ○ What ○ Where ○ When ○ Why ○ How 	
5. Describe the process in place to respond to the incident – what we are doing.	
6. Give anticipatory guidance (e.g. side effects of antibiotics).	
7. Be regretful , not defensive. Say “We feel terrible about...” or “We are very sorry that...” to acknowledge the incident.	
8. Acknowledge the shared misery (people are frightened, feeling a lack of control) from the event. Give them the actions your organization is taking, or they can take themselves.	
9. Express wishes . “I wish we knew more right now.” “I wish our answers were more definitive about...”	

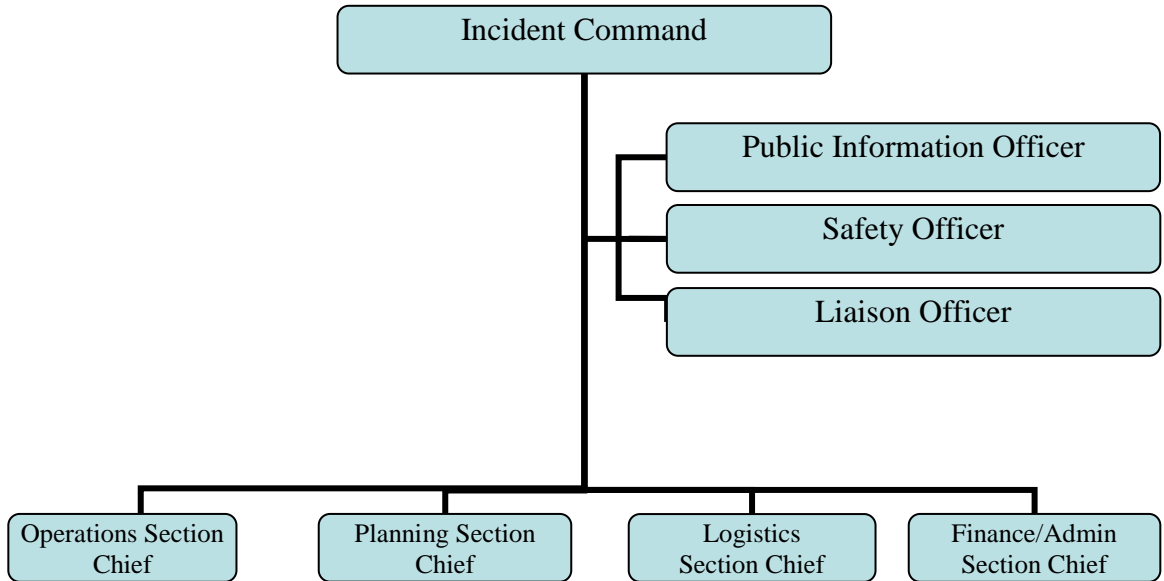
10.	<p>Be willing to answer the questions everyone wants to know:</p> <ul style="list-style-type: none"> ○ What has happened? ○ What is the impact? ○ What is being done? ○ Are my family and I safe? What will affect us? ○ What can I do to protect my family and me? ○ Who (what) caused this problem? Can you fix it? ○ Who is in charge here? ○ How are those who got hurt getting help? ○ Is this thing being contained? ○ Why did this happen? (Don't speculate. Repeat facts of the situation, describe data collection effort, and describe treatment from fact sheets). ○ Why wasn't this prevented from happening (again)? ○ What else can go wrong? ○ When did you begin working on this? (E.g., we were notified of this, determined this had occurred). ○ What does this data/information mean? ○ What bad things aren't you telling us? (Don't forget to tell them the good things). 	
11.	<p>Ask people to share the risk with you. Show your caring and determination as a role model for them.</p>	
12.	<p>Don't over reassure. Reassurance can backfire. Acknowledging to people how scary the situation is, even though the actual numbers affected are small, can make them calmer about the situation.</p>	
13.	<p>Did you recognize that public perception matters more than facts?</p>	
14.	<p>Did you test your message content prior to delivery?</p>	
15.	<p>Did you refrain from going "off the record?"</p>	
16.	<p>Did you avoid the use of technical and legal jargon?</p>	
17.	<p>Did you practice what you planned to say to the media aloud and did you test it?</p>	
18.	<p>Did you indicate that you would get back by a specific time with an answer if you did not know an answer to a question?</p>	
19.	<p>Did you know exactly what you wanted to say to the media and did you use two key messages?</p>	

Appendix A: Communication Team Individual Assignment Sheet

WEB SITE MANAGER

Assigned To:	
Tasks:	Done
<p>1. Format content materials developed by the communication team and published on the organization’s Web site.</p> <p style="padding-left: 40px;">Expect to start publishing information within one to two hours of activating the crisis action plan for the event.</p> <p style="padding-left: 40px;">Make sure everything published has been released first.</p>	
2. Create links to other governmental agency Web sites that also will have information about the event.	
3. Prepare to update your Web site as frequently as information changes. This could be hourly.	
4. Release information to other partner Web site operators as you have it.	
5. Begin developing special Web pages for the event, if the emergency warrants it.	

Appendix B
Incident Command System



Appendix C
Department Emergency Response List
MCDBOH- Internal Phone Numbers and Extensions (330) 270-2855

Environmental Health

106 Genevieve Bufano
111 Jack Crish
135 Dave Fetchko
116 Kyle Gabrick
107 John Hallas
103 Kaitlin Hill
130 Amy Holinbaugh
124 Dan Hutton
133 Angelo Italiano
110 Kari Jones
114 John LuBonovic
104 Deanna Maurer
100 Michele Olin
101 Tina Schneider
105 John Schoeni
134 Vacant
162 Drew Stefan
108 Ryan Tekac
102 Linda Zmith
169 Extra Extension behind Tina
113 Small Conference Room
311 Small Conf Spider Phone
199 Phone Room

Nursing

118 Brenda Christensen
128 Chris Cunningham
125 Judy Draper
171 Marianne Evans
127 Teresa Kilbert
119 Debbie Moss
138 Laura Scalise
126 Kathy Terreri
155 Nancy Wloch
121 Diane Zagorsky

WIC Austintown - (330) 792-2397

222 Anna Cappitti
226 Lillian Davila
224 Heidi DiBacco
223 File/Server Room
225 Loretta Floyd-Pleas
221 Megan Hughes
227 Melissa Rogers

WIC Boardman - (330) 788-1485

105 Nalita Carter*
104 Daljeet Dhillon*
102 Rose Fragoso*
103 Moore-Parker, Carla*
106 Catherine Pontino*
101 Wanda Vega*

WIC Youngstown - (330) 743-3333, ext. 299

298 Jamie Culp*
295 Linda Evans*
294 Jeffery Holloway*
296 Maria LeBron*
297 Michelle Rovnak*

*Extensions only work when dialing satellite site number first

Finance & Human Resources

153 Kathy Affagato
143 Ed Janik
146 Lori Keller
148 Darlene Sawyers
129 Katie Svasta

Community Health

142 Joe Diorio
137 Intern Desk
132 Susan Kovach
139 Steve Napolitano
109 Tracy Styka

Health Commissioner's Office

144 Patt Sweeney
149 Julie Thompson
174 John Venglarcik
175 Large Conference Room
310 Conference Spider Phone

Laboratory Services

181 Scott Bolam
184 Cory Powell
180 Rachael Ruby
182 Janine Soubra

**Mahoning County
Planning Commission
270-2890**

201 Dana Donoghue
200 Chrystaline McArdle
204 Mike O'Shaughnessy
202 Open Office
203 Open Office
205 Conference Room

**Mahoning County Building
Inspection Department
270-2894**

255 John Armeni
254 Amy Ferns
256 Ron Helsel
253 John Pirko
257 Lois Slicker
259 Jeff Uroseva
251 Mike White
258 Barb Yuengert

Paging Zones

02 Board of Health
03 Planning
04 Lab
05 Building
06 WIC
32 All Page

Satellite Offices

Disease Intervention Specialist,
Sandy Panezich – 743-3333, ext. 271
Laboratory Services – 270-2841
TB Clinic - 744-4246
WIC Boardman – 788-1485
WIC Goshen – 507-9290
WIC Youngstown – 743-3333, ext. 299

Fax Numbers

270-9194 – Community Health
747-2522 – DIS, Sandy Panezich
270-2859 – Environmental
270-0625 – Health Commissioner
270-5418 -- Lab
270-2860 -- Nursing
744-4633 -- TB Clinic
792-2691 – WIC Austintown
788-1982 – WIC Boardman
743-3960 – WIC Youngstown

General Transfers

601 Environmental
602 Laboratory
603 Building Inspection
604 Nursing

To report a problem with your phone, please call extension 199 and leave a message describing the problem.

Revised: March 19, 2015

Appendix C
Department Emergency Response List
Cell Phones
(This page omitted for Website)

Appendix D

Emergency Notification Roster (Mahoning County Government Offices)

<i>Department</i>	<i>Phone Number</i>	<i>Fax</i>
<u>Alcohol & Drug Addiction Services Board</u>	330-743-9509	330-743-9514
<u>Auditor</u>	330-740-2010	330-480-7571
<u>Austintown County Court</u>	330-740-2001	330-740-2036
<u>Board of Elections</u>	330-783-2474	330-783-2801
<u>Board of Health</u>	330-270-2855	330-270-2860
<u>Board of MRDD</u>	330-797-2925	330-797-2843
<u>Boardman County Court</u>	330-726-5546	330-740-2035
<u>Building Inspection</u>	330-270-2894	330-270-2898
<u>Canfield County Court</u>	330-533-3643	330-740-2034
<u>Children Services</u>	330-941-8888	330-941-8787
<u>Clerk of Courts</u>	330-740-2104	330-740-2105
<u>Commissioners</u>	330-740-2130	330-740-2006
<u>Common Pleas Court</u>	330-740-2158	330-740-2088
<u>Coroner</u>	330-740-2175	330-742-5868
<u>Court of Appeals - 7th District</u>	330-740-2180	330-740-2182
<u>Data Processing Dept</u>	330-740-2190	330-740-2195
<u>Department Jobs & Family Services</u>	330-740-2600	330-740-2617
<u>Dog Warden</u>	330-740-2205	330-740-2499
<u>Domestic Relations Court</u>	330-740-2208	330-740-2503
<u>Educational Service Center</u>	330-965-7828	330-965-7902
<u>Emergency Mgmt and Comm. Agency</u>	330-740-2200	330-270-7779
<u>Engineer</u>	330-799-1581	330-799-4600
<u>Facilities Management Dept</u>	330-740-2040	330-740-2043
<u>GIS Department</u>	330-740-2010	330-740-2195
<u>Green Team - Solid Waste Mgmt District</u>	330-740-2060	330-740-2066
<u>Human Resources</u>	330-740-2130	330-740-2006
<u>Jail Medical</u>	330-480-4960	330-480-5093
<u>Juvenile Justice Center</u>	330-740-2278	330-740-2272
<u>Lead Abatement</u>	330-740-2124	330-740-7998
<u>Mahoning & Columbiana Training Assoc.</u>	330-747-5639	330-743-1741
<u>Mental Health Board</u>	330-746-2959	330-746-4323
<u>Microfilm Dept</u>	330-740-2303	330-744-8604
<u>Office of Management and Budget</u>	330-740-2130	330-740-2667
<u>Planning Commission</u>	330-270-2890	330-270-2893
<u>Probate Court</u>	330-740-2310	330-740-2325
<u>Prosecutor's Office</u>	330-740-2330	330-740-2008
<u>Purchasing Dept</u>	330-740-2193	330-742-4684
<u>Recorder</u>	330-740-2345	330-740-2347
<u>Risk Management</u>	330-740-2130	330-740-2006
<u>Sanitary Engineering</u>	330-793-5514	330-792-5270
<u>Sebring County Court</u>	330-938-9873	330-938-6518
<u>Sheriff</u>	330-480-5000	330-480-5089
<u>Soil and Water Conservation District</u>	330-740-7995	330-259-1075
<u>Special Projects</u>	330-740-8799	330-740-7798
<u>Treasurer</u>	330-740-2460	330-740-2142
<u>Veterans Service Commission</u>	330-740-2450	330-788-3501
<u>Western Reserve Port Authority</u>	330-856-1537	330-539-4833

**Appendix E
Local Media Contact List
(Updated October 2013)**

(This page omitted for the website)

Message Development for Emergency Communication

Six Basic Emergency Message Components:

1. Expression of empathy: _____

2. Clarifying facts/Call for Action:

Who _____

What _____

Where _____

When _____

Why _____

How _____

3. What we don't know: _____

4. Process to get answers: _____

5. Statement of commitment: _____

6. Referrals: _____

For more information _____

Next scheduled update _____

Finally, check your message for the following:

<ul style="list-style-type: none"> ▪ Positive action steps ▪ Honest/open tone ▪ Applied risk communication principles ▪ Clarity ▪ Simple words, short sentences 	<ul style="list-style-type: none"> ▪ No jargon ▪ No judgmental phrases ▪ No humor ▪ No extreme speculation
--	--

Appendix F

Emergency Risk Communication: Immediate Response to Inquiries

By phone

- “We’ve just learned about the situation and are trying to get more complete information now. How can I reach you when I have more information?”
- “All our efforts are directed at bringing the situation under control, so I’m not going to speculate about the cause of the incident. How can I reach you when I have more information?”
- “I’m not the authority on this subject. Let me have XXXX call you right back.”
- “We’re preparing a statement on that now. Can I fax it to you in about two hours?”
- “You may check our Web site for background information and I will fax/e-mail you with the time of our next update.”

At incident site or press availability

Response to Inquiries (you are authorized to give out the following information)

Date: _____ **Time:** _____

Approved by: _____

This is an evolving emergency and we, like you, want as much information as possible. While we work to get your questions answered as quickly as possible, I want to tell you what we can confirm right now:

At approximately, _____ (time), a (brief description of what happened)

At this point, we do not know the number of (persons ill, persons exposed, injuries, deaths, etc.).

We have a system (plan, procedure, operation) in place for just such an emergency and we are being assisted by (police, FBI, EOC) as part of that plan.

The situation is (under)(not yet under) control and we are working with (local, State, Federal) authorities to (e.g., contain this situation, determine how this happened, determine what actions may be needed by individuals and the community to prevent this from happening again).

We will continue to gather information and release it to you as soon as possible. I will be back to you within (amount of time, 2 hours or less) to give you an update. As soon as we have more confirmed information, it will be provided. We ask for your patience as we respond to this emergency.

Source: CDC Public Health Training Network satellite and web broadcast *CDC Responds: Risk Communication and Bioterrorism* December 6, 2001, Barbara Reynolds, CDC Crisis Communication Plan, Draft 1999.

Appendix G
News Release Template



Public Health
Prevent. Promote. Protect.
Mahoning County
District Board of Health

NEWS RELEASE



FOR IMMEDIATE RELEASE DATE:	Contact:
	Title:
	Phone:
	Email:

TITLE
Subtitle

body

####

Appendix H

Graduated Response to Demand for Public Health Information

Stage One: Demand for public health information increases

- Front line staff alert Preparedness Team to an increase in call volume OR a call volume increase is anticipated due to news media reporting of a public health issue.
- Information about the public health issue is incorporated into the recorded phone greeting and voicemail box 122.
- Preparedness Team provides front line staff, Help hotline, and other health districts with “Talking points” and reference information (i.e. Fact sheets, press releases) and member are available for consultation.

Stage Two: Demand for public health information exceeds front-line staff capacity

- Incident Commander or Health Commissioner designates spokesperson and Public Information Officer (PIO) schedules news conference as frequently as needed.
- “Warm line” staffed by District Board of Health employees is activated. Calls are diverted to employees assigned to the duty roster. Preparedness Team ensures that warm-line staffs are briefed with talking points and reference materials.
- PIO provides the same briefing, talking points, reference materials, and contact information for Preparedness Team members designated to provide “Backstop” support to Help Hotline.
- After-hours phone greeting is revised to invite after-hours callers to visit the website or call 211 (Help Hotline)

Stage Three: Demand for public health information exceeds District Board of Health capacity

- Preparedness Team will brief Help Hotline staff at daily shift changes to prepare them for diversion of calls to 211 and provide updates.
- Business hours and after hours phone greetings are recorded directing callers to 211
- News media are asked to direct the public to call 211 for information regarding the public health issue.
- PIO will create a duty roster from available staff members to assist Help Hotline as necessary.

Stage Four: Demand for public health information exceeds 211 capacity

- PIO (or Incident Commander) asks Mahoning County Emergency Management Agency to provide phone volunteers to Help Hotline
- Health Commissioner requests that Ohio Department of Health set up a hotline.

Appendix I

Strategic National Stockpile (SNS) Communication Worksheet

As a local public health communicator, you should contact the individual managing SNS planning under the cooperative agreement to coordinate health communications needs.

Pre-event planning:

- Is the disease and drug information material prepared in the various languages spoken by your community?
- Are processes in place to create incident-specific messages that tell people who are potentially exposed where they must go for prophylactic medications if they are well, and where they need to go if they are sick?
- Are processes in place to ensure that public information officers know which dispensing and treatment locations are active?
- Are media aware—before an event—of the need to disseminate SNS-related information and messages?

Your plan should include the following:

- Multi-language text of all documents used to inform the public during an emergency.
- Storage location(s) of all informational material (including electronic versions).
- Methods for reproducing and disseminating informational materials during an emergency.
- Specific communication channels, partnerships, and staffing pools that support public information release, reproduction and dissemination.

To determine how much SNS-related information you will need to provide to site locations, consider the following:

- Is the agent contagious?
- Who should be concerned about exposure?
- Who should seek preventive treatment at dispensing sites and who should seek symptomatic treatment at treatment centers?

Appendix I
Strategic National Stockpile (SNS) Communication Worksheet (cont'd)

- Directions to, and information about, dispensing and treatment locations.
 - When will the dispensing operation start and what hours will it be open?
 - Where are the dispensing sites?
 - What is the best street access to each dispensing site?
 - Where should those who drive park at each dispensing site?
 - What is the best way to get to the dispensing site (e.g., walk, use public transportation, drive)?
 - What is the dispensing process?
 - What forms of identification are needed?
 - What information must someone have in order to pick up medications for family members?
Children: weight, age, health information, drug allergies and current medications. Adults: health information, drug allergies and current medications.

Information about the drugs the public must take

The information should include the following:

- Reasons for using specific drugs or changing drug regimens. Remember that cultural and ethnic sensitivities will affect the public's acceptance of those drugs.
- The importance of taking the medication. This information must stress the importance of taking all of a prescribed drug (e.g., 60 days of doxycycline for anthrax).
- Messages about the importance of adherence.
- Message to warn patients of the danger of overmedicating.

Additional information can be found on the CDC Web site at:

<http://www.bt.cdc.gov/stockpile/>

Appendix J
Equipment and Supplies Checklist

Equipment:		Location	How to Obtain It
<input type="checkbox"/>	Fax machine (pre-programmed for broadcast fax releases to media and partners)		
<input type="checkbox"/>	Computers (on LAN with e-mail listservs designated for partners and media)		
<input type="checkbox"/>	Laptop computers		
<input type="checkbox"/>	Printers for every computer		
<input type="checkbox"/>	Copier (and backup)		
<input type="checkbox"/>	Several tables		
<input type="checkbox"/>	Cell phones/pagers/personal data devices and e-mail readers		
<input type="checkbox"/>	Visible calendars, flow charts, bulletin boards, easels		
<input type="checkbox"/>	Designated personal message board		
<input type="checkbox"/>	Small refrigerator		
<input type="checkbox"/>	Paper		
<input type="checkbox"/>	Color copier		
<input type="checkbox"/>	A/V equipment		
<input type="checkbox"/>	Portable microphones		
<input type="checkbox"/>	Podium		
<input type="checkbox"/>	TVs with cable hookup		
<input type="checkbox"/>	VHS VCR		
<input type="checkbox"/>	CD-ROM		
<input type="checkbox"/>	Paper shredder		

**Appendix J
Equipment and Supplies Checklist**

Supplies:	Location	How to Obtain It
<input type="checkbox"/> Copier toner		
<input type="checkbox"/> Printer ink		
<input type="checkbox"/> Paper		
<input type="checkbox"/> Pens		
<input type="checkbox"/> Markers		
<input type="checkbox"/> Highlighters		
<input type="checkbox"/> Erasable markers		
<input type="checkbox"/> FedEx and mail supplies		
<input type="checkbox"/> Sticky notes		
<input type="checkbox"/> Tape		
<input type="checkbox"/> Notebooks		
<input type="checkbox"/> Poster board		
<input type="checkbox"/> Standard press kit folders		
<input type="checkbox"/> Organized B-roll beta format (keep VHS copies around for meetings)		
<input type="checkbox"/> Formatted floppies/CD-ROMs		
<input type="checkbox"/> Color-coded everything (folders, inks, etc.)		
<input type="checkbox"/> Baskets (to contain items not ready to be thrown away)		
<input type="checkbox"/> Organizers to support your clearance and release system		
<input type="checkbox"/> Expandable folders (indexed by alphabet or days of the month)		
<input type="checkbox"/> Staplers (several)		
<input type="checkbox"/> Paper punch		
<input type="checkbox"/> Three-ring binders		
<input type="checkbox"/> Organization's press kit or its logo on a sticker		

Appendix J
Equipment and Supplies Checklist

Supplies:	Location	How to Obtain It
<input type="checkbox"/>	Colored copier paper (for door-to-door flyers)	
<input type="checkbox"/>	Paper clips (all sizes)	
<input type="checkbox"/>	Personal "go kit": <ul style="list-style-type: none"> • sweater/sweatshirt • rain gear • ball cap • comfortable shoes • socks • underwear • gloves (cold climates) • toothpaste/toothbrush, floss • mouthwash • deodorant • brush/comb • snacks (nutrition bars) • bottled water • other personal toiletries as needed 	

Appendix K

Blast Fax Procedure for Physicians and Veterinarians

Summary:

Blast fax is used for quick notification of physicians and veterinarians in the event of a disaster. This procedure can be used for non-emergency information as well. Mid Atlantic Computer Connections, Inc. is used for blast fax capabilities. Some physicians have requested to receive information by email or US mail.

Company Name & Contact Information:

Mid Atlantic Computer Connections, Inc.	Phone:	(410) 835-2317
Attn: Diane Thomas	Fax:	(410) 835-2341
34426 Old Ocean City Road	E-mail:	macc@maccco.com or
Pittsville, MD 21850		info@b2bfax.net
	2 nd Email:	macc4@earthlink.net

Procedure:

1. Request is made to have blast fax sent
2. Obtain a Purchase Requisition for the above company identifying which fund it will be charged to
3. Format information/letter
 - a. Add disclaimer (*IMPORTANT NOTICE: If you received this fax in error, or wish to be removed from our fax list, please provide your fax number on the line and fax this form to (330) 270-9194. My fax number is _____.*)
 - b. Document must be in Pdf or Word format
4. Send formatted file, spreadsheet of applicable fax numbers and Purchase Requisition Number to company contact listed above
5. Email file to “MD Lists for Notifications” located in contact list in Outlook file
6. Mail non-emergency info to those requesting document by US mail in that format
7. Email file to “Employee Blast Fax Recipients” located in contact list in Outlook file to notify them of the transmittal

Location of Transmittal Information:

1. Physician Fax List: In J Drive under Policies - Procedures – Plans/Emergency Preparedness/Blast Fax Procedure and Recipients entitled “2014 Physician Fax Database” or “2014 Physician Fax Database with Spec and Email”
2. Veterinarian Fax List: In J Drive under Policies - Procedures – Plans/Emergency Preparedness/Blast Fax Procedure and Recipients entitled “2014 Veterinarian Fax List”
3. Email list: In contact list of Outlook marked “Blast Fax Recipients”
4. US Mail: In file marked “Blast Fax Recipients Email or Mail Transmissions” located in top left drawer of Community Health Secretary’s desk (MD hardcopy email information is also in this file)

Reports:

When transmission is complete, a report will be emailed identifying successes and failures. Identify each failure and determine why it failed (wrong number, no longer in business, etc.)

Revision and Maintenance:

1. All contact information will be revised when the new WebMD Blue Books are updated as well as through the year when changes to contact information are identified.
2. This procedure is reviewed and updated annually or as needed.

Appendix L
Mahoning County OPHCS Alert Protocol

- All Health Districts and the EMA in Mahoning County have been linked within The Ohio Public Health Communication System.
- We will conduct monthly OPHCS alerts to test the response of users within our county.
- Alerts will be conducted by the Mahoning County District Board of Health Administrator.
- These alerts will be unannounced and will be either high or low level alerts.
- The alert confirmation goal will be the same as ODH:
- ***90% respond to a high priority alert within 60 minutes for each OPHCS user.**
- ***90% respond to a low priority alert within 3 days for each OPHCS user.**
- The results are posted on OPHCS website
- Mahoning County Hospital partners have OPHCS capability. The Hospitals maintain their own administrative control of OPHCS just as the Mahoning County District Board of Health does for their agency and staff

Appendix L
Mahoning County OPHCS Alert Protocol
Ohio Public Health Communication System (role-based directory)

1. Name of Staff Receiving License: Joseph Diorio
Organizational Affiliation: Mahoning County District Board of Health
License Type Assigned: Administrative
Role/Roles Assigned: Mahoning Co-HAN Notification; Mahoning Co-Leadership; Mahoning Co GHD-OPHCS Coordinator; Youngstown City HD-OPHCS Coordinator; Mahoning Co GHD-SNS PODS Response
Mobile: on file
Office: 330-270-2855 x142
Email: jdiorio@mahoninghealth.org

2. Name of Staff Receiving License: John Venglarcik
Organizational Affiliation: Mahoning County District Board of Health
License Type Assigned: Alerting
Role/Roles Assigned: Mahoning Co GHD-Epidemiology-Surveillance; Mahoning Co GHD-Nursing-Physician-Medical
Mobile: on file
Office: 330-884-3893
Email: jvenglarcik@mahoninghealth.org and Margaret_venglarcik@valleycarehealth.net

3. Name of Staff Receiving License: Christopher Cunningham
Organizational Affiliation: Mahoning County District Board of Health
License Type Assigned: Collaborative
Role/Roles Assigned: Mahoning Co GHD-HAN Notification; Mahoning Co GHD-Leadership; Mahoning Co GHD-Epidemiology-Surveillance; Mahoning Co GHD-Nursing-Physician-Medical; Mahoning Co GHD-SNS PODS Response; Mahoning Co GHD-Public Information Officer
Mobile: on file
Office: 330-270-2855 x128
Email: ccunningham@mahoninghealth.org

4. Name of Staff Receiving License: Susan Kovach
Organizational Affiliation: Mahoning County District Board of Health
License Type Assigned: Collaborative
Role/Roles Assigned: Mahoning Co GHD-HAN Notification; Mahoning Co GHD-Epidemiology-Surveillance; Mahoning Co GHD-SNS PODS Response; Mahoning Co GHD-Environmental Health; Mahoning Co GHD-Nursing-Physician-Medical
Mobile: on file
Office: 330-270-2855 x132
Email: skovach@mahoninghealth.org

5. Name of Staff Receiving License: Tracy Styka
Organizational Affiliation: Mahoning County District Board of Health
License Type Assigned: Collaborative
Role/Roles Assigned: Mahoning Co GHD-Public Information Officer; Mahoning Co GHD-HAN Notification
Mobile: on file
Office: 330-270-2855 x109
Email: tstyka@mahoninghealth.org

6. Name of Staff Receiving License: Ryan Tekac
Organizational Affiliation: Mahoning County District Board of Health
License Type Assigned: Collaborative
Role/Roles Assigned: Mahoning Co GHD-HAN Notification; Mahoning Co GHD-Leadership; Mahoning Co GHD-Environmental Health; Mahoning Co GHD-Public Information Officer.
Mobile: on file
Office: 330-270-2855 x108
Email: rtekac@mahoninghealth.org
7. Name of Staff Receiving License: Patricia Sweeney
Organizational Affiliation: Mahoning County District Board of Health
License Type Assigned: Collaborative
Role/Roles Assigned: Mahoning Co GHD-HAN Notification; Mahoning Co GHD-Leadership; Mahoning Co GHD-Epidemiology-Surveillance; Mahoning Co GHD-SNS PODS Response; Mahoning Co GHD-Environmental Health; Mahoning Co GHD-Nursing-Physician-Medical
Mobile: on file
Office: 330-270-2855 x144
Email: psweeney@mahoninghealth.org
8. Name of Staff Receiving License: Scott Bolam
Organizational Affiliation: Mahoning County District Board of Health
License Type Assigned: Collaborative
Role/Roles Assigned: Mahoning Co GHD-HAN Notification; Mahoning Co GHD-SNS PODS Response; Mahoning Co GHD-Environmental Health
Mobile: on file
Office: 330-270-2855 x181
Email: sbolam@mahoninghealth.org
9. Name of Staff Receiving License: Dennis O'Hara
Organizational Affiliation: Mahoning County EMA
License Type Assigned: Alerting
Role/Roles Assigned: Mahoning Co GHD-Agency Partners
Mahoning Co GHD-LEMA Partner
Mobile: on file
Office: 330-740-2200
Email: dohara@mahoningcountyoh.gov

Revised 2-17-2012 & 3-7-2012 & 1-30-2013 & 12-11-2014 & 5-14-2015

Appendix M
MARCS Radio Protocol for
Mahoning County District Board of Health

- Both Health Districts have been trained on the use of the MARCS radio system.
- Only Mahoning County District Board of Health has a MARCS user manual and Talk Group Configuration Chart.
- Mahoning County District Board of Health has their radios assigned to a designated person during regular business hours.
- During an event the designated Communication Unit Leader is responsible for getting the radios to any drills, exercises and /or actual events.
- During an event the designated Communication Unit Leader is responsible for assigning them out and maintaining the location of the radios / chargers during an event, drill or exercise.
- The base unit is kept on 24 hours / 7 days a week. They are kept in the DOC during normal business hours.
- The MARCS portables are kept on their “respective Health Districts channel at all times unless directed otherwise, i.e. during an exercise or drill.
- The Health District is required to participate during the ODH monthly MARCS radio checks.
- A log is maintained via OPHCS of the MARCS radio checks.

Assigned MARCS Radios / Bases:

Mahoning County District Board of Health –3 Portables w/ Chargers and 1 Base;

Assigned to:

- Joe D –Portable and Charger
- Susan K –Portable and Charger
- Julie T –Portable and Charger
- Base –1st Floor Conference Room (DOC) Mahoning County District Board of Health

Appendix N

Emergency Response Templates

Emergency Response Templates saved at the following locations:

- J:\Emergency Response\Emergency Response Templates
- J:\POLICIES - PROCEDURES - PLANS\Emergency Preparedness\2012 revised plans\ERCA 2013\Emergency Response Templates
- A hard copy can be obtained from the Mahoning County District Board of Health Departmental Operations Center (DOC) (main conference room, 50 Westchester; closet)

Appendix O
Notify Now Procedure for Notification of Functional Needs Agencies

Agencies within Mahoning County were asked to register to be notified if a public health emergency occurs and they need to respond internally and externally. The list of agencies that registered is kept in the Notify Now database at www.notifynow.biz

The agencies contact information is updated and tested annually.

Procedure for sending an alert:

1. Call 1-800-747-6172
 - a. Login ID: on file
 - b. Password: on file

2. Follow the prompts to select the list
 - a. #03: Emergency Agencies

3. When prompted say the message that you want sent to the agencies in the list.
 - a. **Examples:** This is the MCDBOH. A public health emergency has occurred consisting of _____.
 - i. For additional information, please call _____ or go to website_____.
 - ii. Medication is available for you to provide to your agency please contact _____ for more information
 - iii. You must shelter in place or evacuate the area, if more information is needed please contact_____

4. The information will then be sent by email and all listed phone numbers immediately.
5. Call logs can be checked on the www.notifynow.biz website using the same log in and password.

Appendix P

Social Media Public Comment Policy

The Mahoning County District Board of Health (MCDBOH) participates in social media in order to engage community individuals and organizations in leading healthier lives and to promote the services and programs of the MCDBOH.

While we encourage the sharing of thoughts and opinion, we expect that this will be done in a respectful manner. The MCDBOH will monitor our social media sites, but does not agree with or endorse every comment that individuals post. Our policy is to accept the majority of comments made to our profile. Content posted may be subject to deletion if they contain:

- Hate speech,
- Profanity, obscenity or vulgarity,
- Defamation to a person or people,
- Content that promotes, fosters, or perpetuates discrimination on the basis of race, creed, color, age, religion, gender, marital status, status with regard to public assistance, national origin, physical or mental disability, or sexual orientation,
- Name calling and/or personal attacks (including individuals or businesses/agency),
- Commercial endorsements,
- Political campaigning,
- Misleading or false information,
- Comments that infringe on copyrights,
- Other comments that the MCDBOH Social Media team deems inappropriate, off-topic, excessively repetitive, and/or disruptive to the online community and our social media efforts.

Repeated violations of our comment policy may cause the author to be blocked from the social media site.

Content posted on our social media sites becomes a public record. Information shared is not intended as a final rule for legal situations. There may be specific subjects, such as litigation, licensing processes, permitting, etc., which will not be discussed using social media outlets.

If you need immediate assistance or have any specific business related questions, please call or email us. Do not post personal information such as addresses, social security numbers, health conditions, and other confidential/private information.

Call: 330-270-2855 or 1-800-873-MCHD (1-800-873-6243)

Email: info@mahoninghealth.org

Appendix Q

Communication Procedure Checklist

- ✓ A signed endorsement from your director.
- ✓ Designated line and staff responsibilities for the public information teams.
- ✓ Internal information verification and clearance/approval procedures.
- ✓ Agreements on information release authorities (i.e., who releases what/when/how).
- ✓ Regional and local media contact list (including after-hours news desks).
- ✓ Procedures to coordinate with the public health organization response teams.
- ✓ Designated spokespersons for public health issues and third-party validators in an emergency.
- ✓ Your organizations emergency response team after-hours contact numbers.
- ✓ Contact numbers for emergency response information partners (e.g., Governor's public affairs officer, local FBI public information special agent in charge, local or regional department of agriculture or veterinarian public information officers, Red Cross, and other nongovernmental organizations).
- ✓ Agreements/procedures to join the joint information center of the emergency operations center (if activated).
- ✓ Procedures to secure needed resources (space, equipment, people) to operate the public information and media operation during a public health emergency 24 hours a day/7 days a week, if needed.
- ✓ Identified vehicles of information dissemination to public, stakeholders, partners (e.g., e-mail, listservs, broadcast fax, door to door leaflets, press releases) during a crisis.

Appendix R

Procedure for Meeting Americans with Disabilities Act Requirements for Communication Services

All Mahoning County District Board of Health employees will review this procedure and receive annual training on providing reasonable accommodation for persons with disabilities, low literacy and limited English proficiency. Records of the trainings will be maintained in the human resource department. Documentation will include sign-in sheets or meeting minutes. Forms will identify the date of the training, the trainer and the employees trained.

All hearing impaired clients will be provided the following:

Interpreter Services

1. The MCDBOH contracts with the Youngstown Speech & Hearing Center to provide interpreter service for the hearing impaired and the deaf. MCDBOH (or the appropriate program) will pay the contracted hourly rate for an interpreter to provide sign language during the client's appointment.
2. Staff must call the Youngstown Speech & Hearing Center least 5 working days prior to the appointment to schedule the interpreter.
3. The client should be told that MCDBOH (the program) must pay for interpreter even if the client does not keep the appointment.
4. The staff must fill out a purchase order showing the name and number of hours the interpreter is needed at the appointment.
5. The purchase order must be given to the program director. There is no charge to the client.

Ohio Relay Services

1. The Ohio Relay Service is used to enable persons with communication disabilities to use their TTY (Text Telephone Yoke) to place calls to and receive calls from hearing people anywhere.
2. MCDBOH employees will use the Ohio Relay Service to contact hearing impaired/deaf clients to make appointments, reminder calls, or give information by calling the Ohio Relay Service at either 7-1-1 or 1-800-750-0750.
3. A Communication Assistant (CA) at the Relay Service will connect the call and request that you to speak your message slowly and clearly. The CA will type and transmits your message to the hearing impaired/ deaf client.
4. The client will then reply by typing and transmitting their answer or question back to the CA. The CA will speak the client's message to you. This will continue until the conversation is completed.

All visually impaired clients will be provided the following:

Vision Device

1. The staff will read materials to the visually impaired.
2. The MCDBOH will supply a magnified reading glass for a visually impaired client to use while at his/her appointment.

All clients with low literacy will be provided:

Low Literacy Written Materials

1. The MCDBOH will evaluate written material for the grade level difficulty using the SMOG (Simple Measure of Gobbledegook) Readability Test Formula.
2. Written material will be targeted for the 6th to 8th grade level.
3. Written material will be positive and in an active voice text, contain culturally sensitive pictures/terminology.
4. Written material will be evaluated using an Educational Evaluation Tool.

All Limited English Speakers will be provided:

A. Staff that can translate Languages to English

Several MCDBOH employees who speak other languages have volunteered to translate into English when needed.

1. MCDBOH employee Daljeet Dhillon speaks Hindi and Punjabi. She can be reached at 330-788-1485 ext. 104;
2. MCDBOH employees Rose Fragoso and Wanda Vega speak Spanish. They can be reached at 330-788-1485 ext. 102 and ext. 101 respectively; and
3. MCDBOH employee Maria LeBron speaks Spanish. She can be reached at 330-743-3333 ext. 296.
4. Call and request translation in advance, if possible. Otherwise, call and they will translate depending on availability.

B. Language/Interpretive Services

1. Trained MCDBOH employees will have the option to use the **Language Line Services**, a contracted professional telephone translation service, which is available 24 hrs/day, 7 days a week.
2. If the employee is not sure what language needs to be interpreted he/she can show the client the Language Line Language Identification Card, which lists the languages most frequently encountered in North America. The client can point to the language they speak. The message underneath each language says, "Point to your language. An interpreter will be called. The interpreter is provided at no cost to you."
3. To access Language Line Services:
 - 1) Dial 1-866-874-3972
 - 2) Enter on the telephone key pad or provide the representative the 6-digit Mahoning County District Board of Health Client ID: **on file**
 - 3) Press 1 for Spanish and 2 for other languages
 - 4) Speak the name of the language.
 - 5) When the interpreter answers, summarize what is needed and give any special instructions.
 - *6) Submit Purchase Request to Darlene Sawyers listing Language Line Services as the vendor and the number of minutes (estimate) spent on the translation call.
 - 7) Language Line will bill Ohio Department of Health – WIC directly.

Ohio State University Extension Service

1. The OSU Extension Service will provide in-service presentations on the Ohio Revised Code Food Regulations in Mandarin and Spanish for Food Service providers.
2. Scheduling of the in-services with the OSU Extension Service will be done by Tracy Styka, Community Health Division, Ext. 109.

10/8/2013

Appendix S

Health Alert Network

Assumptions:

- A Health Alert, Advisory or Update is received from an outside source (i.e.; ODH, CDC) or an event is occurring in Mahoning County that needs attention from, or needs to be brought to the immediate attention of additional health partners and/or the general public.
- During an Emergency Event, the Health Commissioner, Incident Commander, and/or their designee will be responsible for generating and distributing HAN alerts.
- During regular business hours, the Health Commissioner, Supervisor, and/or their designee will be responsible for generating and distributing HAN alerts.
- The Health Commissioner or Incident Commander maintains the position of Spokesman and Public Information Officer unless otherwise designated.
- The following levels of urgency will be assigned to messages:
 - **Health Alert:** conveys the highest level of importance; warrants immediate action or attention.
 - **Health Advisory:** provides key information for a specific incident or situation; might not require immediate action.
 - **Health Update:** provides updated information regarding an incident or situation; unlikely to require immediate action.

Procedure for Approval of a HAN Message:

1. Staff member requesting Health message informs the Health Commissioner and/or immediate Supervisor of the need for an alert and at what level of immediacy:
 - a. Immediate – within 2 hours.
 - b. Intermediate = within 8 hours or more as designated.
 - c. Delayed = within 48 hours or more as designated.
2. Health Commissioner and/or Supervisor will advise or coordinate with other staff member to determine how to route the information. Options include:
 - a. Do nothing.
 - b. Copy to all staff.
 - c. Send to staff and selected partners (i.e., staff and county physicians, staff and schools, staff and media).
 - d. Send to staff, health partners, First Responder agencies, community partners, schools and media.
 - e. Share with everyone including the public

3. The alert/advisory will be sent to designated groups via:
 - a. Ohio Public Health Communication System (OPHCS) – to alert public health and hospital partners.
 - b. Fax – preferred method for *Alert* status messages.
 - c. Phone – alternative method for *Alert* status messages that cannot be sent by fax.
 - d. Email – *Advisories* and *updates* only.
 - e. Mail – *Advisories* and *Updates* only – those that do not require immediate notification or action from the recipient.

Procedure for Developing a HAN Alert

1. Cover Sheet

Cover Sheet refers to the information contained on the first page of the message that the reader will see before progressing to the actual content of the alert/advisory/update. The cover sheet should be used to share pertinent details about the health event or issue, including information such as the nature of the event, contact number, email address and web address for more information, and specific action(s) that may be required of the recipient. The following points should be considered:

- a. Develop the HAN message on appropriate agency letterhead.
- b. Provide a bold, succinct subject line or title for the alert (i.e., Pandemic Influenza)
- c. Include the date and time the alert is issued.
- d. Identify the level of urgency (i.e., health alert, health advisory, health update) and footnote the definitions of these urgency levels.
- e. Specify the target audience(s) to whom the alert is directed.
- f. Include complete contact information for the person(s) responsible for issuing the message.
- g. If the urgency level requires immediate action by the recipient, make sure that the action requested is obvious. Be as specific as possible in summarizing any action steps required.
- h. Include a message that encourages recipients to share or protect the information as needed (i.e., “Please share with staff in ICU, ED, laboratory medicine and Pediatrics”, “Highly sensitive, do not share beyond administrative level”).
- i. Provide complete information for point of contact and website to visit for more information regarding the Han message.
- j. Include the health department’s emergency contact information.
- k. Include page numbers on each page of the advisory.

2. Message Content

Message content will vary depending on the particular situation; the rule of thumb for health alerts should be to keep the message as short and simple as possible while maintaining the urgency desired.

- a. Be as clear and concise as possible; the actual content of the message should be limited to 1 – 2 pages. If necessary, recipients can be referred to a website or alternate source of more in-depth information; this should be noted on the cover sheet.
- b. Ensure that the language within the body of the message is appropriate to, and consistent with, the level of urgency (i.e., if the urgency level is that of a health advisory then do not use terms such as high alert in the text of the message).
- c. Refrain from addressing multiple public health problems on alert/advisory/update.

Cover sheet is attached.



Public Health
Prevent. Promote. Protect.
Mahoning County
District Board of Health

Public Health Alert Network (HAN)



Subject:

Date/Time Sent:

Urgency Level:

- Health Alert:** conveys the highest level of importance; warrants immediate action or attention.
- Health Advisory:** provides important information for a specific incident or situation; may not require immediate action.
- Health Update:** provides updated information regarding an incident or situation; unlikely to require immediate action.

Sent To:

Sent From:

Message:

Action Required:

For More Information Contact:

The Mahoning County Health Department has a Health Alert Network that is designed using a multi-tier approach for the sharing of information. Stakeholders may include: county coroner, healthcare coalition, law enforcement, fire, emergency medical services, private healthcare organizations-hospitals, clinics, medical providers, urgent care, fusion centers.

1. **iContact:** The Mahoning County District Board of Health maintains iContact via the agency website: www.mahoninghealth.org . Once on the home page, scroll to the bottom of the page to locate “Subscribe”. Clicking on “Signup Now” will take the individual to the subscription area to enable the receipt of health alert emails and information.

The “Subscription” page is fairly simple. Information is entered by the individual such as email; first name; last name; and organization. Next the individual will be able to check any or all health alert information that they wish to receive via email. The health alert categories include:

- Communicable and Emerging Infectious Diseases
- Emergency Preparedness
- Environmental Health Services and Regulations
- Food and Drug Recalls
- Health and Wellness
- Information for Medical Professionals
- Vaccination Clinic Schedules
- Information for Veterinarians

The “Subscription” master list is maintained in a file “Health Alert Network”. The Mahoning County District Board of Health Preparedness Coordinator maintains this list and the Health Commissioner Secretary maintains the website (thus can generate new lists annually). This list includes the total iContact users (N=760 as of May 14, 2015), Email information, and which subscriptions they have subscribed.

The PIO is responsible for the distribution of iContact public information distribution through this system based on category. The Health and Wellness is used for general information distribution due to all subscribers are registered for this Category. The Health Commissioner’s Secretary is also the back-up for iContact information distribution. iContact information distribution can be accomplished with any viable internet connection thus remote access is possible.

2. **Blast Fax:** The Blast Fax process is described in this plan under Appendix K. This distribution list is for Urgent medical information distribution intended for either Physicians (N=200) and/or Veterinarians (N=25). The Health Commissioner or Public Health Emergency Preparedness Coordinator determines content of information and which group should receive the fax. This information is usually of an urgent and sensitive nature that is also specific to population health. It is not for general public.
3. **Mahoning County Townships, City and Village Officials:**
(Contact via Email) Information is routed to the townships, city and villages via email to the Mahoning County District Advisory Council Secretary, Jodi Kale, (jodikale@yahoo.com) Berlin Township Trustee. Either the Health Commissioner or the Health Commissioner Secretary provides information to be disseminated to the townships, cities and villages within the Mahoning County District Advisory Council. This would include mayors and county commissioners as well.

(Contact via Fax) Information is routed to all townships, cities and villages within the Mahoning County District Advisory Council via group fax. This group fax is established and maintained by the Health Commissioner Secretary.

The Directory of Townships, City and Village Officials and the Fax List is available in the file “Health Alert Network” with the Public Health Emergency Preparedness Coordinator.

4. Emergency Notification Roster:

A Mahoning County Agency emergency notification roster is maintained in this plan. (See appendix D)

5. First Responders:

Emergency information distribution to first responders within Mahoning County is processed through the Mahoning County Emergency Management Agency Director, Dennis O’Hara, (dohara@mahoningcountyoh.gov) 330-740-2200. The EMA Director maintains an email distribution list which includes first responders and government officials.

6. District Board of Health Call Lists (Notify NOW!):

Mahoning County District Board of Health maintains call distribution lists for Employees, Managers, Board Members, Youngstown City Health Department Employees, and Emergency Agencies responsible for Functional Needs (see Appendix O) that are notified if a public health emergency occurs and they need to respond internally and externally. The list of agencies that registered is kept in the Notify Now database at www.notifynow.biz. This list also includes restaurant emergency contacts by geographic area for any food/water/power related emergencies.

The Call Lists are maintained by Darlene Sawyers, Fiscal Personnel Officer, Mahoning County District Board of Health. A copy of the Notify NOW! master list is available in the “Health Alert Network” file with the Public Health Emergency Preparedness Coordinator.