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## **HEALTH AND SAFETY CODE - HSC**

DIVISION 2.5. EMERGENCY MEDICAL SERVICES [1797 - 1863] (Division 2.5 added by Stats. 1980, Ch. 1260.) CHAPTER 3. State Administration [1797.100 - 1797.197a] (Chapter 3 added by Stats. 1980, Ch. 1260.)

ARTICLE 4. Medical Disasters [1797.150 - 1797.153] (Article 4 added by Stats. 1980, Ch. 1260.)

1797.150. In cooperation with the Office of Emergency Services, the authority shall respond to any medical disaster by mobilizing and coordinating emergency medical services mutual aid resources to mitigate health problems.

(Amended by Stats. 2013, Ch. 352, Sec. 333. (AB 1317) Effective September 26, 2013. Operative July 1, 2013, by Sec. 543 of Ch. 352.)

<u>1797.151.</u> The authority shall coordinate, through local EMS agencies, medical and hospital disaster preparedness with other local, state, and federal agencies and departments having a responsibility relating to disaster response, and shall assist the Office of Emergency Services in the preparation of the emergency medical services component of the State Emergency Plan as defined in Section 8560 of the Government Code.

(Amended by Stats. 2013, Ch. 352, Sec. 334. (AB 1317) Effective September 26, 2013. Operative July 1, 2013, by Sec. 543 of Ch. 352.)

- 1797.152. (a) The director and the State Public Health Officer may jointly appoint a regional disaster medical and health coordinator for each mutual aid region of the state. A regional disaster medical and health coordinator shall be either a county health officer, a county coordinator of emergency services, an administrator of a local EMS agency, or a medical director of a local EMS agency. Appointees shall be chosen from among persons nominated by a majority vote of the local health officers in a mutual aid region.
- (b) In the event of a major disaster which results in a proclamation of emergency by the Governor, and in the need to deliver medical or public and environmental health mutual aid to the area affected by the disaster, at the request of the authority, the State Department of Public Health, or the Office of Emergency Services, a regional disaster medical and health coordinator in a region unaffected by the disaster may coordinate the acquisition of requested mutual aid resources from the jurisdictions in the region.
- (c) A regional disaster medical and health coordinator may develop plans for the provision of medical or public health mutual aid among the counties in the region.
- (d) No person may be required to serve as a regional disaster medical and health coordinator. No state compensation shall be paid for a regional disaster medical and health coordinator position, except as determined appropriate by the state, if funds become available.

(Amended by Stats. 2013, Ch. 352, Sec. 335. (AB 1317) Effective September 26, 2013. Operative July 1, 2013, by Sec. 543 of Ch. 352.)

- 1797.153. (a) In each operational area the county health officer and the local EMS agency administrator may act jointly as the medical health operational area coordinator (MHOAC). If the county health officer and the local EMS agency administrator are unable to fulfill the duties of the MHOAC they may jointly appoint another individual to fulfill these responsibilities. If an operational area has a MHOAC, the MHOAC in cooperation with the county office of emergency services, local public health department, the local office of environmental health, the local department of mental health, the local EMS agency, the local fire department, the regional disaster and medical health coordinator (RDMHC), and the regional office of the Office of Emergency Services, shall be responsible for ensuring the development of a medical and health disaster plan for the operational area. The medical and disaster plans shall follow the Standard Emergency Management System and National Incident Management System. The MHOAC shall recommend to the operational area coordinator of the Office of Emergency Services a medical and health disaster plan for the provision of medical and health mutual aid within the operational area.
- (b) For purposes of this section, "operational area" has the same meaning as that term is defined in subdivision (b) of Section 8559 of the Government Code.
- (c) The medical and health disaster plan shall include preparedness, response, recovery, and mitigation functions consistent with the State Emergency Plan, as established under Sections 8559 and 8560 of the Government Code, and, at a minimum, the medical and

health disaster plan, policy, and procedures shall include all of the following:

- (1) Assessment of immediate medical needs.
- (2) Coordination of disaster medical and health resources.
- (3) Coordination of patient distribution and medical evaluations.
- (4) Coordination with inpatient and emergency care providers.
- (5) Coordination of out-of-hospital medical care providers.
- (6) Coordination and integration with fire agencies personnel, resources, and emergency fire prehospital medical services.
- (7) Coordination of providers of nonfire based prehospital emergency medical services.
- (8) Coordination of the establishment of temporary field treatment sites.
- (9) Health surveillance and epidemiological analyses of community health status.
- (10) Assurance of food safety.
- (11) Management of exposure to hazardous agents.
- (12) Provision or coordination of mental health services.
- (13) Provision of medical and health public information protective action recommendations.
- (14) Provision or coordination of vector control services.
- (15) Assurance of drinking water safety.
- (16) Assurance of the safe management of liquid, solid, and hazardous wastes.
- (17) Investigation and control of communicable disease.
- (d) In the event of a local, state, or federal declaration of emergency, the MHOAC shall assist the agency operational area coordinator in the coordination of medical and health disaster resources within the operational area, and be the point of contact in that operational area, for coordination with the RDMHC, the agency, the regional office of the agency, the State Department of Public Health, and the authority.
- (e) Nothing in this section shall be construed to revoke or alter the current authority for disaster management provided under either of the following:
  - (1) The State Emergency Plan established pursuant to Section 8560 of the Government Code.
  - (2) The California standardized emergency management system established pursuant to Section 8607 of the Government Code.

(Amended by Stats. 2013, Ch. 352, Sec. 336. (AB 1317) Effective September 26, 2013. Operative July 1, 2013, by Sec. 543 of Ch. 352.)