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**THE UNIVERSITY OF SOUTHERN MAINE
PANDEMIC/PUBLIC HEALTH THREAT EMERGENCY PLAN**

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1. Introduction

This plan is written with information and guidance from the World Health Organization (WHO) Global Influenza Preparedness Plan, the U.S. Government Department of Homeland Security National Strategy for Pandemic Influenza, and the U.S. Government Department of Health and Human Services Pandemic Plan, Centers for Disease Control and Prevention (CDC), State of Maine Center for Disease Control and Prevention (Maine CDC). This plan outlines the assumptions, strategies, and procedures that the University of Southern Maine will follow to respond to a Pandemic or Public Health Emergency.

Detailed Continuity of Operations Plans (COOP) have been developed and maintained by each unit/department/ college. The University of Southern Maine continues to use the NIMS (National Incident Management System) model to manage a Pandemic. Specific trigger points and actions are included in the USM EOC Pandemic Response Plan (Appendix - A)

Response to a pandemic or other public health outbreak will also rely on several existing USM emergency related plans:

- USM Emergency Response Plan
- USM EOC Pandemic/Public Health Outbreak Response Plan (See Appendix - A)
- College/Department - Continuity of Operations Plans (COOP) (See Appendix - B)
- Family and Individual Plans (home plans for each student and employee)
- Policy on Study, Travel, and Research in Foreign Countries
- Centers for Disease Control Travel Warnings
- USM Health & Counseling Services Infections Disease Response Plan (See Appendix C)
- System policy of tracking faculty and staff on trips
- Athletics policy of tracking students and staff off campus

2. University of Southern Maine Objectives

- Educate and communicate to student, staff and faculty the pandemic plan
- Manage the impact of pandemic or other public health outbreak to students, faculty and staff and their families
- Support students who remain at USM
- Continue USM essential operations during a outbreak
- Preserve the infrastructure of the University of Southern Maine
- Support CDC / Community / USM needs
- After the pandemic, quickly resuming normal teaching, research and service operations.

3. Planning Assumptions

- WHO, CDC and USM will impose travel restrictions. USM may call some people back and cancel some planned travel. As with SARS, international travelers will be subject to restrictions and screening.
- USM assumes that - in the United States - a pandemic influenza wave will last approximately ten weeks, during which multiple community outbreaks will occur across the country.
- There may be multiple waves of pandemic outbreaks.
- For planning purposes, USM will assume that the wave will occur during the fall or winter semester.
- On their own initiative, USM students may begin to leave campus when the first outbreaks occur.
- We assume that an outbreak at USM will last approximately seven to ten weeks.
- Our worst case is an easily transmissible health threats in residence halls living in close proximity and sharing facilities. Caring for this large number of ill students would severely strain resources of Health & Counseling Services, Student Affairs and the local healthcare systems. We need to assume that up to 40% of the staff will be unavailable due to illness or caring for an ill person.
- If a severe outbreak were to occur, we should expect to suspend on-campus classes for seven to ten weeks. The President's Cabinet may make the class suspension decision early in the period of contagion (wave) to allow residential students to go to the less risky home environment.
- If a on-campus class suspension decision has been made, we estimate that it will take no longer than 48 hours for students at USM residence halls to vacate the campus.
- If on-campus classes are suspended, we assume that 350 students and student families will remain at USM because of international travel restrictions, other travel difficulties, or because they do not have a suitable alternative living options. These include:
 - 50 students (international & others who cannot travel) remaining in residence halls.
- Of those 350 students and families who will remain at USM while classes are suspended, an unknown number of people will seek outpatient care at MMC & Mercy hospitals or other medical facilities.
- In addition, there may be 120 or more staff on-campus to serve the remaining students and maintain vital processes. These people will also need food, shelter, and health care.
- The estimated total of number of people on-campus would be 520.

4. Monitoring Outbreak Stages

The Director of Public Safety, the Director of Health Services, and staff, will monitor the worldwide activity of influenza, other outbreaks, and its stages, by tracking the information provided by the

Maine CDC, the Center for Disease Control and Prevention, and the World Health Organization. As any phase changes, the Director(s) will notify the President's Cabinet and other appropriate departments and units.

Some factors to be considered:

- Transmissibility
- Morbidity
- Mortality
- Geographic spread
- Proximity of confirmed cases
- Maine & Federal CDC recommendations
- Closing of K-12 public schools
- Falling class attendance
- Rising employee absenteeism
- Assessment of stake holder's risk perception

For more detailed information see Appendix A: Emergency Operation Center (EOC) Pandemic Response Guide

5. Essential Functions and Departments

In an outbreak, a variety of functions will be needed to provide support for the safety and security of students, staff, faculty, and research. Some of these functions are listed below with the responsible (lead) departments in parentheses. Additional functions will be identified as department level Continuity of Operations Plans (COOPs) have been developed. See Appendix B: Continuity of Operations Plan Sample.

- Provide healthcare and psychological services for students. (*Off Site Locations/Health Center / Counseling Center*)
- Provide psychological services for Employees and their families. (*Employee Assistance Program*)
- Provide food for remaining students and emergency employees on-campus. (*Dining Services*)
- Provide utility services and maintain the infrastructure of the campus (*Facilities Management*)
- Provide technical guidance to affected departments and the removal and storage of chemical, biological and radioactive waste. Liaison with off-campus emergency services (*Facilities Management w/ UMS SMO*)
- Provide housing, housekeeping and laundry services for students and "Public Health Emergency Employees." (*Housing & Residential Life/Facilities Management*)
- Provide maintenance and repair for critical facilities and preservation of infrastructure. (*Facilities Management*)
- Provide monitoring and support for remaining students on-campus. (*Student Affairs*)

- Provide staffing support for essential departments and maintain communications with all employees. (*Human Resources/Information Technology / Marketing and Communications*)
- Maintain the technology and communication services. (*Information Technology / Marketing and Communications / Public Safety*)
- Provide acquisition of goods, operate central supply and provide remunerations to vendors. (*Procurement / Finance & Administration*)
- Provide accounting services, university receivables; payroll management, benefits and general HR related activities. (*Finance & Administration / Human Resources*)
- Provide security and safety for the remaining student's on-campus, research laboratories and the campus. (*Public Safety / Facilities Management*)
- Provide continuity of critical research, safety of laboratory animals and infrastructure. (*Academic Departments*)
- Support remaining students on-campus and provide continuing contact and communications with students and parents. (*Student Affairs / Marketing and Communications*)
- Provide support and communications to overseas students. (*International Programs / Marketing and Communications*)
- Provide communications to all internal and external groups. (*Marketing and Communications / Information Technology*)

6. Continuity of Operations Planning (COOP)

Continuity of Operations Plans should include following: (Sample Plan - See Appendix - B)
Departmental COOPs should respond to all hazards.

- Objectives of the Department or Unit
- Essential Functions
- Identification of "Public Health Emergency Employees"
- Key Internal Dependencies
- Key External Dependencies
- Emergency Access to Information & Systems
- Emergency Communication Systems
- Leadership Succession
- Mitigation Strategies
- Recovery of Operations Plans

7. Public Health Emergency Employees

Public Health Emergency Employees are those employees needed to provide essential services during a large scale Public Health Emergency. The respective departments or units are developing COOP's that will identify and list these employees and their missions.

Designated "Public Health Emergency Employees" may be required to fulfill their missions and may:

- Report to the workplace; or
- Work at home; or
- Work at an alternate site; or
- May need to stay on campus for an extended time.

8. Personal Protective Equipment (PPE)

OSHA released "Guidance on Preparing Workplaces for an Influenza Pandemic" (see Appendix D), updated in 2009. This or superseding guidance will be used to assess the need for PPE, engineering, or administrative controls, until more specific guidance has been developed for other outbreak scenarios. Central supply has increased their stocks of masks and gloves and other personal protective equipment in order to mitigate the effects of any disruption of supply.

9. Mass Vaccination / Prophylaxis

UMS campuses have been designated by the Maine CDC as a site for mass vaccination/prophylaxis in the event of a large-scale public health emergency. A Memorandum of Understanding (MOU) between UMS and the Maine CDC has been developed that details the responsibilities of both parties in the event such a site becomes necessary.

10. Ongoing Pandemic/Outbreak Preparedness Planning

USM will utilize the existing Emergency Response Group/Emergency Operations Center team review and maintain preparedness objectives. The following objectives had been identified:

1. National Incident Management System Adoption
2. International Travel Oversight
3. Targeted Vaccine Distribution
4. Essential Personnel, Operations, and Services
5. Surveillance and Case Investigation
6. Healthcare Needs
7. Student Housing Needs
8. Communications
9. Internal Coordination
10. External Coordination
11. Providing Service to the Broader Community

Pandemic Influenza Preparedness Status Summary

1. National Incident Management System (NIMS)

USM has implemented the NIMS system and is continuing to train staff in the Incident Command System. Additionally we have created an EOC Mission Policy and EOC activation guide for response to influenza outbreak.

2. International Programs:

USM will work with the system office to develop and implement international policies and procedures.

3. Targeted Vaccine Distribution

USM has signed a Memorandum of Understanding (MOU) with the Maine CDC for the distribution of services on campuses.

4. Identify Essential Personnel, Operations, and Services

USM has established a system to identify essential personnel, operations, and services relative to the University's mission. The Continuity of Operations Plans (COOP) is the tool we are requiring at the unit/department level to ensure the continuation of the University services.

5. Surveillance and Case Investigation

USM is participating in state and local case surveillance and investigation activities, and coordinates with our partners, to ensure that animal and human cases on-campus are identified quickly and properly addressed. Additionally key employees are registered with and receive Health Alerts from the CDC and the Maine CDC.

6. Healthcare Needs

USM will utilize all available resources to meet the outpatient healthcare needs of students, staff, and faculty as appropriate during a pandemic/public health outbreak.

7. Provide Dining, Housekeeping and related services on the Campus.

COOP plans have been developed by the appropriate offices/entities to ensure that services will continue.

8. Communications

USM will ensure that all stakeholders have access to accurate and timely information regarding our efforts to respond to pandemic or public health outbreak. USM has implemented a multi-media alerting and communications system consisting of text paging,

emails, web sites, and phone systems. Additionally the COOPs that individual departments are creating shall include specific communication systems for each department.

9. Internal Coordination

The University's pandemic/public health outbreak response efforts will be coordinated internally through the Emergency Operations Center (EOC) and the President's Cabinet using the NIMS system.

10. External Coordination

The University's pandemic/public health break response efforts will be coordinated externally with all relevant partners including state/local health departments and state/local emergency managers. The implementation of the NIMS system and recent exercises with state and local responders has helped us test and expand our capabilities.

11. Providing Service to the Broader Community

To the extent possible, USM will assist in local, state, and federal pandemic influenza response efforts.

Note: The UMaine Cooperative Extension Service has developed a number of guides for the avian influenza and emergency actions during disasters. They are a good resources for developing and disseminating information.

Appendix A Emergency Operation Center (EOC) Pandemic Response Guide

Due to the nature of the potential event, the University of Southern Maine Emergency Response Group (ERG) & the President’s Cabinet will utilize the NIMS Incident Command Structure to provide oversight for the response levels outlined in this EOC plan. Other components of the Incident Command System will be activated as needed.

Preparation: Activities that should be undertaken as soon as possible to prepare for any Pandemic as outlined at the Centers for Disease Control (CDC):

- Stage 0 New domestic animal outbreak in at risk country.
- Stage 1 Suspected human outbreak overseas
- Stage 2 Confirmed human outbreak overseas.
- Stage 3 Widespread human outbreaks in multiple overseas.
- Stage 4 First human case in North America
- Stage 5 Spread throughout United States
- Stage 6 Recovery and preparation for subsequent waves.

Unified Incident Command System Incident Command & Senior Management Team

Team Membership and Activation Procedures
Incident Command and Emergency Operations Center (EOC)
In a small-scale emergency, the EOC Incident Commander has the authority to activate the USM EOC. If the Incident Commander is not available the highest ranking trained person shall assume the role of IC.
In a large-scale emergency, the EOC works in conjunction with the Fire Department/Hazmat Team and serves as support using the NIMS Incident Command System to provide specialized expertise in situation. A variety of university employees may be utilized through the EOC working hand in hand with outside agency personnel. The University of Maine System provides additional operational support when requested.
Activation of the EOC:
When activation of the EOC is necessary, the person requesting the EOC activation shall contact the EOC Team members and request the EOC be activated.

<u>EOC Role</u> <u>(Primary/Alternate)</u>	<u>Work</u> <u>Phone</u>	<u>Cell</u> <u>Phone</u>	<u>Home</u> <u>Phone</u>	<u>E-mail</u>
Incident Commander				
Ronald Saindon, Chief of Police & Dir. of Public Safety	207-780-5211	207-939-2599	207-353-7380	saindon@maine.edu
Timothy Farwell, Police Captain	207-780-5211	207-572-8388	207-572-8388	timothy.farwell@maine.edu
Planning – Academics				
Jeannine Diddle-Uzzi, Provost	207-780-4485			usm.provost@maine.edu
Planning – HR				
Natalie Jones, VP of HR	207-780-5113	207-712-1326	207-712-1326	natalie.jones@maine.edu
M.A. Watson, AVP of HR	207-780-5279	207-252-8719	207-252-8719	maryann.watson@maine.edu
Operations – FM				
John Souther, Dir of Facilities Mgt.	207-780-4585	207-805-4107	207-805-4107	john.souther@maine.edu
Bob Adams, (Alt) Dir. of Maintenance Grounds & Utilities	207-780-5443	207-209-0650	207-209-0650	robert.g.adams@maine.edu
Logistics				
Rodney Mondor, Dean of Students	207-780-4035	207-400-1066	207-749-6835	rmondor@maine.edu
David Roussel VP of Student Affairs	207-780-5242	207-400-0194	207-400-0194	david.roussel@maine.edu
Nancy Griffin, Chief Operating Officer	207-780-4021	207-459-6171	207-459-6171	nancy.d.griffin@maine.edu
Public Information Officer				
Jared Cash, VP of Enrollment Management & Marketing	207-780-4740	207-890-3800	207-890-3800	jcash@maine.edu
IT /Communications Support				
Kim Tran, Campus IT Officer	207-780-4897	207-485-7146	207-485-7146	kimtran@maine.edu
Sue Robinson, Mgr. Card & Cellular Services	207-780-4445			susanrob@maine.edu
President's Cabinet / Liaison				
Nancy Griffin, Chief Operating Officer	207-780-4021	207-459-6171	207-459-6171	nancy.d.griffin@maine.edu
* If not available, the Public Information Officer will assume role				
Finance				

Alec Porteous, Chief Business Officer	207-780-4497	207-650-3508	207-650-3508	alexander.porteous@maine.edu
Amy Blaisdell (Alt) Finance Office & Training Specialist	207-228-8306	207-251-2412	207-251-2412	amypm@maine.edu
Dining				
Rodney Mondor, Dean of Students	207-780-5242	207-400-1066	207-400-1066	rmondor@maine.edu
Tadd Stone (dining contractor)	207-780-5421	802-782-9886	802-782-9886	tadd.stone@sodexo.com
Health & Counseling Services				
Lisa Belanger, Dir. of Health Services	207-780-5160	207-615-7524	207-657-2299	lisa.belanger@maine.edu
Liza Little, Dir. of Counseling Services	603-498-8328	603-498-8328	603-498-8328	liza.little@maine.edu
Athletics				
Al Bean, Dir. Of Athletics	207-780-5588	207-671-2502	207-671-2502	albean@maine.edu
Kim Turner, Asst. Dir. Of Athletics	207-780-5997	207-253-9665	207-253-9665	kmturner@maine.edu
Safety Officer				
Kris Pound, Safety Specialist	207-347-1553	207-347-1553	207-347-1553	kris.pound@maine.edu
Scribe/Tech Support				
Assigned as necessary				
Campus Police or Security Department				
Ron Saindon, Chief of Police	207-780-5211	207-939-2599	207-353-7380	saindon@maine.edu
Tim Farwell, Police Captain	207-780-5211	207-572-8388	207-222-2194	timothy.farwell@maine.edu
Mass Care, Housing and Human Services Support				
Christina Smith, Dir. of Housing & Res Life	207-780-5240	207-615-8244	207-615-8244	christina.smith1@maine.edu
Erica Leighton, Asst. Dir. of Housing & Res Life	207-780-5240	207-807-7304	207-807-7304	erica.e.leighton@maine.edu
International Travel Support				
Kimberly Sinclair, Dir. of International Programs	207-780-4959			ksinc@maine.edu
Kaoru Watanabe Phillips, Assist. Dir. of International Programs	207-780-4958			kphill50@maine.edu

Distribution cc:

Note: Opening of the EOC also requires the notification of the President or their designee and the UMS Office Emergency Support contact. This notification will be made by the EOC Incident Commander or designee.

When the Emergency Operations Center is used, a variety of designated university officials are notified to report to the appropriate location to assist with their assigned functions.

University of Southern Maine Pandemic Influenza Emergency Operations Center Guide

EOC Teams	Stage 0	Stage 1 – 2	Stage 3	Stage 4 – 6
EOC Structure: - Incident Commander - General Staff - Section - Branch - Group	Establish a Planning Committee that will develop an action plan and monitor national situation.	Facility Emergency Coordinator (FEC) to review manuals & procedures as established for Pandemic Response. Alert all EOC staff. May activate EOC for updates.	Activate all the Emergency Operations Center.. (IC/Senior Management Team)	Maintain the Emergency Operations Center. (IC/Senior Management Team)
Incident Commander (IC) and Safety Officer	Review ERCP Develop a list of essential personnel. Provide NIMS training to key stakeholders. Review EOC Plan Presidents Cabinet Review Sample Department Continuity of Operations Plan (COOP).	FEC to notify President’s Cabinet to request EOC Update. Alert all EOC staff. May activate EOC for updates.	IC - Coordinate all EOC actions.	IC - Coordinate all EOC actions.
Operations Section Chief	Provide oversight & coordination	Provide oversight & coordination	Provide oversight & coordination	Provide oversight & coordination

<p>Operations Section Medical Branch Branch Director</p>	<p>Review/Revise Cutler Health Center Response Plan for outbreak verifications and alerts.</p> <p>Review system for vaccines at Health Services and establish backup locations.</p> <p>Establish responsibility for monitoring recommendations from WHO, CDC, State and local public health departments.</p>	<p>Review plans and procedures with key staff.</p>	<p>Implement plans and establish communication with EOC.</p> <p>Essential personnel to receive respirators and respirator protection training.</p>	<p>Implement long term response plans</p> <p>Review communications</p> <p>Plan for recovery</p>
<p>Operations Section FM & Engineering Branch Director</p>	<p>Review plan.</p>	<p>Review plans and procedures with key staff.</p>	<p>Implement plans and establish communication with EOC</p>	<p>Implement long term response plans</p> <p>Review communications</p> <p>Plan for recovery</p>
<p>Operations Section Security & Transportation Branch Director</p>	<p>Review a plan.</p>	<p>Review plans and procedures with key staff.</p>	<p>Implement plans and establish communication with EOC</p>	<p>Implement long term response plans</p> <p>Review communications</p> <p>Plan for recovery</p>
<p>Logistics Section Chief</p>	<p>Provide oversight & coordination</p>	<p>Provide oversight & coordination</p>	<p>Provide oversight & coordination</p>	<p>Provide oversight & coordination</p>
<p>Logistics Section Mass Care, Housing & Human Services Branch Branch Director</p>	<p>Review Housing and Related Services plans</p> <p>Review Dining Services COOP.</p>	<p>Review plans and procedures with key staff.</p>	<p>Implement plans and establish communication with EOC</p>	<p>Implement long term response plans</p> <p>Review communications</p> <p>Plan for recovery</p>

Logistics Section Public Information Branch Director	Review Marketing and Communications COOP Establish media strategies.	Review plans and procedures with key staff. Finalize media strategies. Test communications systems.	Implement plans and establish communication with EOC	Implement long term response plans Review communications Plan for recovery
Logistics Section Communication Branch Director	Review existing crisis communications plan for relevance, revise where necessary.	Review plans and procedures with key staff Test communications systems.	Implement plans and establish communication with EOC	Implement long term response plans Review communications Plan for recovery
Finance Section Chief	Review Budget and Business Services COOP	Review plans and procedures with key staff Test communications systems.	Implement plans and establish communication with EOC	Implement long term response plans Review communications Plan for recovery
Planning Section Human Resources Branch Director	Review Human Resources COOP. Review work leave policies. And be prepared to distribute.	Review plans and procedures with key staff Test systems. Communicate with UMS	Implement plans and establish communication with EOC	Implement long term response plans Review communications Plan for recovery
Planning Section Academic Planning Branch Director	Review Department COOP's Develop departmental response plan model	Review plans and procedures with key staff Test systems.	Implement plans and establish communication with EOC	Implement long term response plans Review communications Plan for recovery

<p>International Travel Branch Director</p>	<p>Review International Programs COOP</p> <p>Review current written policies and notification procedures for international travel.</p>	<p>Review plans and procedures with key staff</p> <p>Test communications systems.</p>	<p>Implement plans and establish communication with EOC</p>	<p>Implement long term response plans</p> <p>Review communications</p> <p>Plan for recovery</p>
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Appendix B Continuity of Operations Plan (COOP) Sample

Purpose (*Essentially same for everyone*)

This document outlines the steps required to operate the [DEPARTMENT NAME] in the event of an unanticipated interruption of normal operations. The plan identifies potential hazards, critical functions, and critical resources necessary to carry out our mission. This plan includes mitigation strategies and outlines **procedures** to be used during an emergency.

Risk Assessment (*These hazards should be considered when designing your plan*)

- Geological hazards
 - Earthquake
 - Landslide, mudslide, subsidence
 - Meteorological hazards
 - Flood, flash flood
 - Drought
 - Fire (forest, range, urban)
 - Snow, ice, hail, sleet
 - Windstorm, hurricane, tornado, water spout,
 - Extreme temperatures (heat, cold)
 - Lightning strikes
 - Famine
- Biological hazards
 - Diseases that impact humans and animals (plague, smallpox, anthrax, West Nile virus, foot and mouth disease)
 - Animal or insect infestation
- Human-caused events (*Accidental*)
 - Hazardous material (chemical, radiological, biological) spill or release
 - Explosion/fire
 - Transportation accident
 - Building/structure collapse
 - Energy/power/utility failure
 - Fuel/resource shortage
 - Air/water pollution, contamination
 - Water control structure failure (sprinkler malfunction, water pipe break)
 - Financial issues, economic depression, inflation, financial system collapse
 - Communications systems interruptions

- Manmade hazards (Intentional)
 - Terrorism / **Active Shooter**
 - Sabotage
 - Civil disturbance, public unrest, mass hysteria, riot
 - Enemy attack, war
 - Strike
 - Misinformation
 - Crime
 - Arson
 - Technology failure (virus attack, etc.)

- Duration of disruption: Consider the following periods, a day, a week, a month.

Mission (Department Specific)

The [DEPARTMENT NAME] supports the University's mission by

Major Functions by Position or Subgroup

(Department Specific – not all functions may be critical for every incident and may depend on the length of the incident)

- Director
 - Accident Reporting
 - Campus Liaison
 - Chair of Safety Committee

- Associate Director
 - Safety Policies

- Safety Coordinator
 - Waste Management
 - Exposure Monitoring and Reporting

- Administration Contact Person
 - Billing
 - Purchases and Payroll
 - Web Page Coordinator

Organization Chart

INSERT HERE

Chain of Command and Contact Information

The department specific list of the people who can make operational decisions and their contact information. The list should contain at least two back-up people.

	Name	Work #	Cell #	Home #	E-mail
Chair/ Director					
Back - up #1.					
Back - up #2					

This information could be supplied as an appendix and referenced here. If your department already has a list, you don't need to maintain two separate lists.

Contact Information

[CAMPUS] Name	E-mail	Work #	Cell #	Home #

Outline of Internal Plan Priorities

- Provide support to Incident Commander and EOC.
- Consider safety priorities of the campus as a whole.
- Review internal departmental priorities based on current situation.
- Assess resources and personnel and assign priorities.

Department Critical Operations

The following is a prioritized list of our critical functions, needed to respond and recover from a disaster: note: the priority will vary with the nature of the emergency.

(Considering your department's unique mission, describe your teaching, research and service functions)

#	Department Critical Functions:	Responsible Person(s)
1	Maintain active role in the Emergency Operations Center.	Director
2	Act as support staff for the EOC.	Backup
3	Liaison with incident command	
4	Maintain operations of essential functions	

Critical Suppliers and Contractors

All [CAMPUS] departments rely on Electricity and other Utilities, Information Technology, Payroll/Purchasing/Finance, Public Safety and Facilities Management. List below the other products and services upon which your department depends and the internal campus departments or units that provide them.

#	Product or Service	Contractor	Provider	Required Services Times
1	People with knowledge, training and experience to accomplish the functions			Daily
2	Data on the server and personal computers			Less than daily
3	Use of specialized equipment for testing		Rental Company	When Needed

Primary Suppliers and Contractors Information

List below the external products, services, suppliers and providers upon which your department depends.

#	Main Supplier or Contractor Name	Address	Phone Number	Required Services Times
1				
2				
3				
4				
5				

Backup Suppliers and Contractors Information

#	Main Supplier or Contractor Name	Address	Phone Number	Required Services Times
1				
2				
3				

Mitigation Strategies

Considering your objectives, dependencies and essential functions, describe below the steps you can take now to minimize the impact of an emergency on your operations. For example, you may wish to stock up on your critical supplies or develop contingency work-at-home procedures. This may be the most important step of your emergency planning process.

#	Mitigation Strategies	Responsible Person
1	Set up work stations to allow access to computers from home.	
2	Develop staff work rotation schedule for essential employees	
3	Written guidelines for critical tasks	

Pre-Disaster Planning Activities

List the tasks that are required on an ongoing basis, to keep the plan current and viable and indicate the person assigned to complete that task.

#	Pre-Disaster Planning Activities:	Responsible Person
1	Emergency Response Manuals and Procedures - In the event all electronic systems are down, distribute up to date hard copies to each critical department.	
2	University Planning Committees - Provide support and guidance for Pandemic Planning Committee (PPC) and the University-Wide Safety Committee.	
3		
4		
5		

Training Activities

Review plan with your staff. (Staff needs to be involved in the development of the plan). Conduct exercises to test the plan and maintain awareness. Note below the type of exercises you will use and their scheduled dates. For assistance in exercising your Plan, contact UMS Safety Management at 581-4055.

Some suggestions for testing department plans are: call tree drill, test off-site access, quizzes, tabletop exercises, call the phone numbers for you external suppliers and see if they are correct. Remember to document all training and exercises.

#	Training Activities:	Responsible Person
1	Annual review of COOP at department staff meeting.	
2	Exercise phone tree annually.	
3	Contact primary and secondary supplier to review and update information	

Current Training *(give yourself credit for the good things your already accomplishing)*

#	Cross Training: Function	People Trained
1	Safety Training	
2		
3		
4		

#	Other skills not listed in Job description	Responsible Person
1		
2		
3		
4		

Communications

During an emergency [CAMPUS] employees can remain informed of emergencies by monitoring news media reports, [CAMPUS] home page, emergency text messaging, phone tree, and calling XXX-XXXX (as appropriate).

To rapidly communicate with employees in an emergency, we encourage all departments to prepare and maintain a call tree. See the example of a **(DEVELOP)** call tree in below.

Some communication systems you might use for your call tree are: Telephones, cell phones, email, text messaging, instant messaging, posting on your department’s web site.

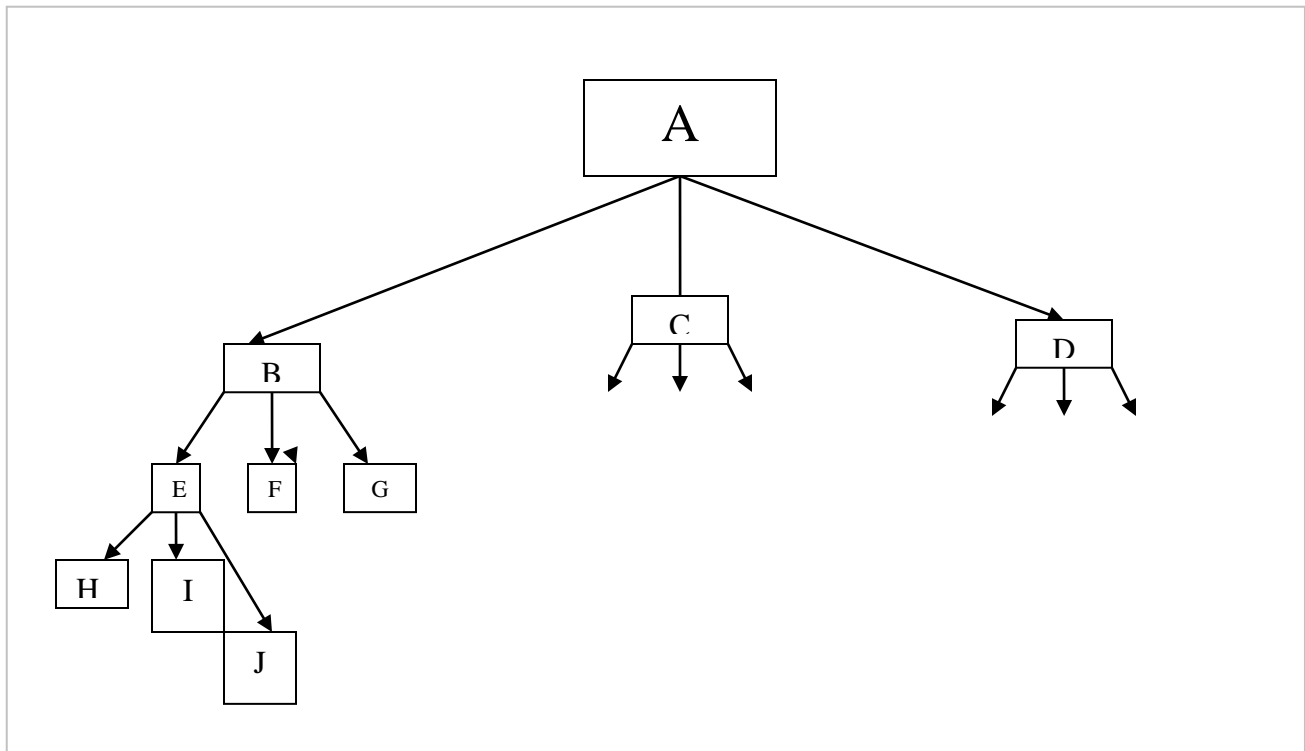
Emergency Access to Information and Systems

If access to your department’s information and systems is essential in an emergency, describe your emergency access plan below. This may include remote access (or authorization to allow remote access), contacting IT support, Blackboard, off-site data backup, backup files on flash drives, hard copies, or use of alternate email systems.

#	Communication Methods
1	
2	
3	
4	
5	

Employee Emergency Contact Phone Tree

INSERT HERE



Note : Continue to call the individuals on the list until you reach them.

Emergency Damage Assessment / Evaluation

List the tasks that required assessment of the damage caused by an emergency.

#	Task	Assignment
1	Assess the well being of the employees	

2	Assess the safety and suitability of the work spaces for use	
3	Assess status of the utilities: power, heat, water, network connection	
4	Asses the status of the server.	

Returning To Normal Operations

Identify the people that are authorized to activate plans for returning to normal operations. Describe your plan to fully resume operations as soon as possible. Identify and address resumption/scheduling of normal activities and services, work backlog, review supply inventories, address continued absenteeism, review use of earned time off, and provide services emotional needs, etc.

Steps to Return to Normal Operation

List the tasks to be performed to return to normal operations. (The plan for the return will be developed with assistance from UMS Safety Management and FM staff as required.)

#	Task	Assignment
1	Maintain operations to support the university	
2	Access to the special areas	
3		

Plan Update Procedures

Plan Review and Update Process: This plan will be reviewed on an annual basis and upon activation of any emergency trigger point.

Plan Distribution Procedures: This plan will be distributed to the personnel identified in the plan. A copy will be included in the ERCP and training will occur on an annual basis.

Plan Approval

This document describes the anticipated activities that will be needed to resume or continue business functions in the event of disruption to normal business activities.

Director/Department Head/Dean

Date

Appendix C

University of Southern Maine

Health & Counseling Services

Infectious Disease Preparedness & Response Plan

I. Introduction

The following plan has been developed in the event of a reportable infectious disease outbreak occurring at the University of Southern Maine. Whether it is an isolated occurrence or wide-spread epidemic, steps will be taken by a variety of personnel on campus to mitigate and minimize the spread of the infectious disease. This plan is not intended to address specific courses of action or treatment plans for a wide variety of infectious diseases but rather to develop a broad foundation from which information can be processed, decisions formulated and a strategy of action implemented.

II. Prevention

- USM recognizes the importance of mitigation through compliance with state pre-matriculation laws related to vaccine-preventable disease for all matriculated students.
- Health & Counseling Services (UHCS) offers a wide variety of immunizations, screening labs and titers.
- Health information and health promotion activities related to infectious diseases are made available to students via The Well and UHCS as well as other departments on campus.

III. Diagnosis/Treatment

- In the event of a suspected case of a reportable infectious disease on campus, the Director of Health Services or a designee is to be notified. This applies to any staff, faculty or student having knowledge of a suspected reportable disease.
- The Director of Health Services or designated Health & Counseling Services staff, as appropriate, will notify the Medical Consultant and the Maine Centers for Disease Control (MCDC) to begin steps in a coordinated response
- Prompt intervention of suspected cases will follow the recommended treatment course and isolation requirements specific to the disease.
- Once a case is confirmed, the Director of Health Services or designated Health & Counseling Services staff will notify the Maine CDC and the Chief Student Affairs Officer (CSAO) who will mobilize the Critical Incident Response Team (CIRT) on campus.
- If UHCS is directly involved with diagnosis and treatment of the patient and hospitalization is deemed necessary, consent will be obtained from the patient to enable written and oral communication between UHCS and the hospital.
- In the event that the patient has been diagnosed and treated outside UHCS, confirmation of the reportable disease shall be sought. This may be achieved by obtaining a signed release from the patient to permit records release and/or oral communication from the

medical provider or via the Maine CDC if the case has already been reported. In this situation, the identity of the patient may remain unknown/confidential.

- Throughout the course of the diagnosis, treatment and case investigation, the patient's identity will be held confidential to the extent possible and according to HIPAA guidelines. Consent will be sought from the patient to share their identity and health information with members of the CIRT.
- In situations where the Maine CDC has exercised their legal authority and declared a public health threat, emergency or extreme emergency, normal confidentiality procedures are superseded by state law. Court-ordered disease control measures may be taken to compel individuals to comply with containment and treatment recommendations when needed.
- In the event of a widespread outbreak or epidemic, the determination of who is eligible to be evaluated at UHCS for a reportable infectious disease is decided by CIRT in consultation with the Health Services Director, Medical Consultant and Maine CDC. At times it may be prudent to extend UHCS services beyond students to USM faculty, staff and members of the community at large.

IV. Case Investigation/Surveillance

- The Maine CDC will guide the case investigation, which, in addition to UHCS including the Medical Consultant and CIRT, may involve coordination with other campus departments including Registrar's Office, Student and University Life, Administration, faculty and other staff.
- Case investigation will lead to a determination of close contacts that may include roommates, teammates, family, friends, partners, classmates, faculty members, etc. Disease surveillance specialists from the Maine CDC or UHCS staff will counsel those individuals regarding a recommended course of action or treatment.
- Prophylactic treatment of close contacts may be required. The payment of these prophylactic medications is the responsibility of the individual or his/her family.
- UHCS will conduct on-going surveillance after the initial outbreak to determine the development of any new cases on campus and take appropriate steps as outlined above.

V. Outbreak Containment

- Outbreak containment begins with the immediate isolation of the affected patient(s) as clinically appropriate. If hospitalization is deemed unnecessary, a suitable place either on or off campus must be identified for the patient to self-isolate and recuperate for a designated period of time. UHCS may ask patients to sign a written agreement that outlines their understanding and willingness to self-isolate for the protection of themselves and others.
- In the case of an outbreak of a vaccine-preventable disease outlined in state pre-matriculation laws, those students not in full compliance with the law shall be identified, contacted and asked to vacate campus. UHCS may ask these students to sign a written agreement that outlines their understanding and willingness to abide by this law for the protection of themselves and others.

- In the event that a campus-wide immunization or screening program is deemed necessary due to a widespread outbreak or epidemic, the Maine CDC will act as the lead agency to guide the activities of UHCS, CIRT and multiple other departments on campus in curbing the spread of the disease.
- See USM Pandemic Influenza Preparedness Plan 2007 and/or Maine CDC's Pandemic Influenza Operations Plan 2013 for comprehensive guides to management of an epidemic/pandemic.

VI. Communication Plan

- UHCS with the Medical Consultant will remain in close contact with representatives from the Maine CDC to stay on top of developments as they unfold. The Director of Health Services or her designee will share all pertinent information with the CIRT. In some situations, a representative from the Maine CDC may join a CIRT meeting either by phone or in person.
- Dissemination and sharing of timely and accurate information is crucial to managing the outbreak and diffusing the potential for widespread panic. Controlling the flow of information to the campus community as well as to the media is the responsibility of the Office of Public Affairs in conjunction with CIRT. The Office of Public Affairs may also establish a hotline to provide USM community members with on-going information.
- See [CDC Flu Toolkit](#) for a comprehensive guide to crisis communication management in institutions of higher education.



WHITEPAPER

**OSHA Guidance on Preparing Workplaces
for an Influenza Breakout & H1N1 Virus
Updated: June 2009**

Summary – OSHA Guidance on Preparing Workplaces for an Influenza Breakout

The bulletin is a summary prepared by Sperian Respiratory Protection USA of the OSHA Guidance on Preparing Workplaces for an Influenza Breakout as stated by OSHA. The information contained in this brief is meant to be a summary and is not intended to be comprehensive or take the place of the OSHA guidance document. Please read the Pandemic Influenza Preparedness Guide guidance document for a complete understanding. This document can be found at – <http://www.osha.gov/Publications/OSHA3327pandemic.pdf>

Introduction

A pandemic is a global disease outbreak. An influenza pandemic occurs when a new influenza virus emerges for which there is little or no immunity in the human population, begins to cause serious illness and then spreads easily person-to-person worldwide; such as the H1N1 Virus and/or Avian Flu. A worldwide influenza pandemic could have a major effect on the global economy, including travel, trade, tourism, food, consumption and eventually, investment and financial markets. Planning for pandemic influenza by business and industry is essential to minimize a pandemic’s impact. As with any catastrophe, having a contingency plan is essential.

Employers and employees should use the OSHA guidance on preparing workplaces for an influenza breakout to help identify risk levels in workplace settings and appropriate control measures. Up-to-date information and guidance is available to the public through the www.pandemicflu.gov website.

How a Severe Pandemic Influenza Could Affect Workplaces

An influenza pandemic will be widespread, affecting multiple areas of the United States and other countries at the same time. A pandemic will also be an extended event, with multiple waves of outbreaks in the same geographic area; each outbreak could last from 6 to 8 weeks. Waves of outbreaks may occur over a year or more. Your workplace will likely experience:

- **Absenteeism** – A pandemic could affect as many as 40 % of the workforce during periods of peak influenza illness.
- **Change in patterns of commerce** – During a pandemic, consumer demand for items related to infection control is likely to increase dramatically, while consumer interest in other goods may decline. Consumers may also change the ways in which they shop as a result of the pandemic.
- **Interrupted supply/delivery** – Shipments of items from those geographic areas severely affected by the pandemic may be delayed or cancelled.

More information on the effect of pandemic influenza in a workplace can be found in the Guidance on Preparing Workplaces for an Influenza Breakout (pg. 7)

Classifying Employee Exposure to Pandemic Influenza at Work

Employee risks of occupational exposure to influenza during a pandemic may vary from very high to high, medium, or lower (caution) risk. The level of risk depends in part on whether or not jobs require close proximity to people potentially infected with the pandemic influenza virus, or whether they are required to have either repeated or extended contact with known or suspected sources of pandemic influenza.

Very high exposure risk – those with exposure to high concentrations of known or suspected sources of pandemic influenza during specific medical or laboratory procedures.

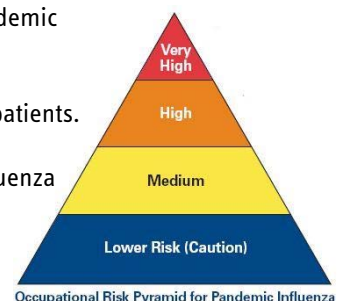
- Healthcare employees (for example, doctors, nurses, dentists) performing aerosol-generating procedures.
- Healthcare or laboratory personnel collecting or handling specimens from known or suspected pandemic patients.

High exposure risk – those with high potential for exposure to known or suspected sources of pandemic influenza virus.

- Healthcare delivery and support staff exposed to known or suspected pandemic patients.
- Medical transport of known or suspected pandemic patients in enclosed vehicles.
- Performing autopsies on known or suspected pandemic.

Medium exposure risk – include jobs that require frequent, close contact (within 6 feet) exposures to known or suspected sources of pandemic influenza virus.

- Employees with high-frequency contact with the general population (such as schools, airline attendants and high population density work environments)



Lower exposure risk (caution) – those that do not require contact with people known to be infected with the pandemic virus, nor frequent close contact (within 6 feet) with the public.

- Employees who have minimal occupational contact with the general public and other coworkers (for example, office employees).

Which classification of workers needs to wear a respirator?

- Very High Risk and High Exposure Risk Workers
- Other workers whose work may not normally put them at Very High or High Risk but who, during a pandemic, are performing high-risk tasks such as isolating and quarantining people who are ill.

More information on classifying employee exposure to pandemic influenza at work can be found in the Guidance on Preparing Workplaces for an Influenza Breakout (pg. 10-11 and pg.28-34)

How to Maintain Operations During a Pandemic

As an employer, you have an important role in protecting employee health and safety, and limiting the impact of an influenza pandemic.

Develop a Disaster Plan

- Prepare and plan for operations with a reduced workforce.
- Work with your suppliers to ensure that you can continue to operate and provide services.
- Develop a sick leave policy that does not penalize sick employees.
- Identify possible exposure and health risks to your employees.
- Minimize exposure to fellow employees or the public.
- Identify business-essential positions and people required to sustain business functions and operations.
- Stockpile items such as soap, tissue, hand sanitizer, cleaning supplies and recommended personal protective equipment.
- Develop policies and practices that distance employees from each other, customers and the general public.
- Organize and identify a central team of people to serve as a communication source so that your employees and customers can have accurate information during the crisis.
- Provide your employees and customers in your workplace with easy access to infection control supplies and personal protective equipment.

More information on how to maintain operations during a pandemic can be found in the Guidance on Preparing Workplaces for an Influenza Breakout (pg. 12-15)

How Organizations Can Protect Their Employees

The types of measures that may be used to protect yourself, your employees and your customers are engineering controls, administrative controls, and personal protective equipment (PPE). Most employers will use a combination of control methods.

Here is a description of each type of control:

Engineering Controls – Engineering controls involve making changes to the work environment to reduce work-related hazards.

Work Practice – Work practice controls are procedures for safe and proper work that are used to reduce the duration, frequency or intensity of exposure to a hazard

Administrative Controls – Administrative controls include controlling employees' exposure by scheduling their work tasks in ways that minimize their exposure levels.

Personal Protective Equipment (PPE) – While administrative and engineering controls and proper work practices are considered to be more effective in minimizing exposure to the influenza virus, the use of PPE may also be indicated during certain exposures. Examples of personal protective equipment are gloves, goggles, face shields, surgical masks, and respirators (for example, N-95).

It is important that PPE be:

- Selected based upon the hazard of the worker
- Properly fitted and worn
- Regularly maintained and replaced in accordance with manufacture's specifications
- Properly removed and disposed of to avoid contamination of self, others or the environment
- If reusable, properly removed, cleaned, disinfected and stored

More information on how organizations can protect their employees can be found in the Guidance on Preparing Workplaces for an Influenza Breakout (pg.16-20)

The Difference Between a Surgical Mask and a Respirator

It is important that employers and employees understand the significant differences between these types of personal protective equipment.

Surgical Masks – Surgical masks are used as a physical barrier to protect employees from hazards such as splashes of large droplets of blood or body fluids. Surgical masks are not designed or certified to prevent the inhalation of small airborne contaminants. Surgical/procedure masks are not designed to seal tightly against the user’s face. During inhalation, much of the potentially contaminated air passes through gaps between the face and the surgical mask, thus avoiding being pulled through the material of the mask and losing any filtration that it may provide.

Respirators – Respirators are designed to reduce an employee’s exposure to airborne contaminants. Respirators are designed to fit the face and to provide a tight seal between the respirator’s edge and the face. A proper seal between the user’s face and the respirator forces inhaled air to be pulled through the respirator’s filter material and not through gaps between the face and respirator.

Surgical N95 Respirator – Surgical N95 Respirators offers the combined protective properties of a surgical mask and a N95 respirator.

Types of Respirators

Respirators can be air supplying or air purifying. Most employees affected by pandemic influenza who are deemed to need a respirator to minimize the likelihood of exposure to the pandemic influenza virus will use some type of air purifying respirator. They are also known as “particulate respirators” because they protect by filtering particles out of the air as you breathe.

Air purifying respirators can be divided into several types:

- **Disposable or filtering facepiece respirators** – the entire respirator facepiece is comprised of filter material. This type of respirator is also commonly referred to as an “N95” respirator.
- **Reusable or elastomeric** respirators – where the facepiece can be cleaned, repaired and reused, but the filter cartridges are discarded and replaced when they become unsuitable for further use.
- **Powered air purifying respirators, (PAPRs)** – a battery powered blower pulls contaminated air through filters, then moves the filtered air to the wearer’s facepiece.

When choosing between disposable and reusable respirators, employers should consider their work environment, the nature of pandemics, and the potential for supply chain disruptions.

Classifying Particulate Respirators and Particulate Filters

Respirator filters that remove at least 95 percent of airborne particles during “worst case” testing using the “most-penetrating” size of particle are given a 95 rating. Those that filter out at least 99 percent of the particles under the same conditions receive a 99 rating, and those that filter at least 99.97 percent (essentially 100 percent) receive a 100 rating. In addition, filters in this family are given a designation of N, R, or P to convey their ability to function in the presence of oils that are found in some work environments.

- “N” if they are Not resistant to oil. (e.g., N95, N99, N100)
- “R” if they are somewhat Resistant to oil. (e.g., R95, R99, R100)
- “P” if they are strongly resistant (i.e., oil Proof). (e.g., P95, P99, P100)

Replacing Disposable Respirators

Disposable respirators are designed to be used once and are then to be properly disposed of. Once worn in the presence of an infectious patient, the respirator should be considered potentially contaminated with infectious material, and touching the outside of the device should be avoided to prevent self-inoculation (touching the contaminated respirator and then touching one’s eyes, nose, or mouth).

Dust or Comfort Masks

Employers and employees should be aware that there are “dust” or “comfort” masks sold at home improvement stores that look very similar to respirators. Nuisance dust masks are not NIOSH approved respirators.

More information on the difference between a surgical mask and a respirator can be found in the Guidance on Preparing Workplaces for an Influenza Breakout (pg.20-26)

This document is not a standard or regulation, and it creates no new legal obligations. Likewise, it cannot and does not diminish any obligations established by Federal or state statute, rule or standard. The document is advisory in nature, informational in content, and is intended to assist employers in providing a safe and healthful workplace. The Occupational Safety and Health Act requires employers to comply with hazard-specific safety and health standards. In addition, pursuant to Section 5(a)(1), the General Duty Clause of the Act, employers must provide their employees with a workplace free from recognized hazards likely to cause death or serious physical harm. Employers can be cited for violating the General Duty Clause if there is a recognized hazard and they do not take reasonable steps to prevent or abate the hazard.

For a respiratory program that will comply with OSHA standards and with your business, contact your Sperian sales representative.

Appendix E

Maine Center for Disease Control and Prevention Coronavirus Contact List

Public Health Emergency Preparedness Staff

Boucouvalas, Steven	Planning and Emergency Operations Coordinator	steven.boucouvalas@maine.gov	(207) 446-0251
Furey, Patrick	Training and Exercise Coordinator	patrick.j.furey@maine.gov	(207) 441-2638
Hernandez, John	Medical Countermeasures Manager	john.hernandez@maine.gov	(207) 557-1069
Jenkins, Bill	Public Health Emergency Preparedness Program Manager	william.jenkins@maine.gov	(207) 557-1133
Molleso, Edward	Medical Volunteer Coordinator	edward.f.molleso@maine.gov	(207) 441-0786
Riethmann, Nathaniel	Emergency Communication Systems Coordinator	nathaniel.riethmann@maine.gov	(207) 592-2287
Wescott, Kathleen	Disaster Behavioral Health Coordinator	kathleen.wescott@maine.gov	(207) 441-5466

Public Health District Liaisons *(for general coronavirus information, updates, and specific questions)*

Boucher, Stacy	Aroostook District Liaison	stacy.boucher@maine.gov	(207) 493-4087
Fogg, Jessica	Penquis District (Penobscot, Piscataquis) Liaison	jessica.fogg@maine.gov	(207) 561-4421
Hartwig, Adam	York District Liaison	adam.hartwig@maine.gov	(207) 592-6243
Jenkins, Kristine	Cumberland District Liaison	kristine.l.jenkins@maine.gov	(207) 485-0541
May, Alfred	Midcoast District (Waldo, Lincoln, Knox, Sagadahoc) Liaison	alfred.may@maine.gov	(207) 255-2017
Paul, Jamie	Western District (Androscoggin, Franklin, Oxford) Liaison	jamie.l.paul@maine.gov	(207) 215-6812
Thomson, Paula	Central District (Somerset, Kennebec) Liaison	paula.thomson@maine.gov	(207) 592-3516
White, Drexell	Downeast District (Washington, Hancock) Liaison	drexell.r.white@maine.gov	(207) 441-2890

Health Care Coalition Coordinators *(for medical supplies and connections to hospitals and health care facilities)*

Caron, Allyssa	Southern Health Care Coalition Coordinator	allyssac@allclearmg.com	(207) 747-9546
Hatch, Michael	Central Health Care Coalition Coordinator	mikeh@allclearmg.com	(207) 890-3157
James, Hannah	Health Care Coalition Support	hannahj@allclearmg.com	(207) 747-9318
Melville, Megan	Northern Health Care Coalition Coordinator	meganm@allclearmg.com	(207) 747-9139

Emergency Support Function Annex #5: Emergency Management

Primary Department:

USM Emergency Response Group (ERG)

Secondary Departments:

President's Cabinet

USM Public Safety/Police Department

Environmental Health and Safety

Department of Facilities Management

Telecommunications

Office of Public Affairs

1. Introduction

A. Purpose

The University of Southern Maine (USM) Emergency Operations Plan (EOP) describes how the university responds to emergencies, addresses hazards and establishes policies, methodology, responsibilities and operations designed to effectively and efficiently address the needs of USM during an incident. The primary objectives of the EOP are to:

- Contribute to the safety of students, faculty, staff and visitors
- Effectively manage the response operations to an emergency affecting USM
- Contribute to the protection of life, property and the environment
- Minimize disruption of university operations and activities
- Effectively work with internal resources and external partners during emergency operations
- Restore the university to normal operations

This Emergency Support Function #5 lists internal and external departments responsible for the coordination of emergency management actions that may take place during an incident.

B. Scope

ESF-5 includes the development and maintenance of University emergency plans and incident action planning.

2. Organizational Structure During Operations

A. General

The University of Southern Maine may experience emergency and disaster incidents that will require the activation of the Emergency Response Group. USM's Emergency Operations Plan provides overall guidance for emergency planning. This ESF is drafted to

provide basic information to include points of contact in case additional resources are needed at the Emergency Operations Center or incident scene.

B. Organization

This Emergency Support Function Annex #5 is composed by the Emergency Response Group (ERG). ERG and the President's Cabinet (PC) are the two organizations that make up USM's Critical Incident Response Team (CIRT). Once the ESF is operational it will function under the direction and control of the Incident Commander or his/her designee.

The Incident Command System (ICS) is used by USM personnel to respond to emergencies and disasters. During the emergency response phase, all responders will report to the designated Incident Commander (IC) at the Emergency Operations Center (EOC)

C. Notification

There are several on campus emergency call boxes which connect directly to USM Public Safety Dispatch Center at the Portland and Gorham campuses. Call boxes on the USM Lewiston campus (LAC) connect directly to the Regional Emergency Operations Center that dispatches emergency calls generated from that area.

Notification of an emergency from the Portland and Gorham campuses can be made by calling 911 from any campus land line telephone; which will be automatically connected to the USM Public Safety/Police Department Dispatch Center. Notification of an emergency from LAC can be made by calling 9-911 from any campus land line; which will be automatically directed to the Regional Emergency Operations Center that dispatches emergency calls generated from that area.

Dialing 911 from a cell phone will be answered by the regional Emergency Communications Center established for the location in which the call was made. Once initial contact is made with the regional Emergency Communications Center, the call will be immediately transferred to the USM Public Safety/Police Department.

Upon notification of the emergency under this ESF, the University Public Safety/Police Department (UPD) will alert the Emergency Response Group through the UPD Dispatch Center's call list who will assist in the coordination of the emergency response to the incident.

The ERG will make a rapid initial assessment of the situation and, as appropriate, notify and activate one or more support agencies. Deployment of personnel and resources will take place within the framework of the Emergency Operations Center (EOC).

If appropriate, the Incident ERG will activate the Emergency Alert System which includes, but is not limited to, E2 Campus Emergency Alert System and social media messages to the university community.

D. Emergency Response Actions

1. No one will self-employ to the incident scene. Support personnel will wait to be contacted or try to contact the Emergency Operations Center for guidance and direction. No support personnel will contact the USM Public Safety Dispatch Center unless they have critical information in reference to the incident.
2. When contacted by the Incident Commander or the Facilities Emergency Coordinator, the Emergency Response Group and support personnel will report directly to the Emergency Operations Center.
3. The Incident Commander or designee will work with the Emergency Response Group's Public Information Office (PIO) for a public release of information through the Emergency Operations Center.

E. Recovery Actions

1. Coordinate assistance as needed by the Incident Commander, EOC Director, or the Critical Incident Response Team as appropriate.
2. Ensure that this Emergency Support Function departments maintain appropriate records of resources used and costs incurred during the incident.

F. Deactivation

1. Partial deactivation would occur based on the extent of the current response and recovery actions and at the discretion of the Incident Commander.
2. Deactivation of this ESF would occur when the Incident Commander declares the emergency has been contained and University activities are restored to normal operations.
3. If the nature of the incident requires an extension of certain emergency services (i.e. Health and Counseling services) the Emergency Response Group (ERG) will then employ special task groups to coordinate these continuing activities.

G. Responsibilities

Primary Department/Group: Emergency Response Group

1. Serve as the lead agency for ESF #5, supporting the response and recovery operations after activation of the Emergency Operations Center.
2. Identify, train and assign personnel to staff ESF #5 when USM Emergency Operations Center is activated.
3. At a minimum, the National Incident Management System ICS-100, ICS-200, IS-700 and IS-800 on line classes should be completed by assigned personnel. In addition ICS-300 and ICS-400 in residence training must be completed by designated leadership positions.
4. Maintain plans and procedures for providing timely information and guidance to the public in time of emergency.

5. Test and exercise plans and procedures.

3. Phone Contacts

Primary Department	Support Department(s)	External Agencies
Emergency Response Group Members: Chief of Police, Co-chair Phone: 207-780-5211 Regulatory Compliance Admin. Co-chair Phone: 207-228-8279 Director Environmental Health & Safety (FEC) Phone: Phone: 207-780-5338 Director of Facilities Management Phone: 207-780-4160 Phone: 207-753-6514 Lewiston Dean 207-753-6594 Dean of Students Phone: 207-780-5242 Executive Director of Public Affairs Phone: 207-780-4444	Vice President of Enrollment Management and Student Affairs Phone: 207-780-4770 Chief Financial Officer 207-780-4484 Chief of Staff to the Provost Phone: 207-228-8231 Director of Counseling Services Phone: 207-780-4050 President's Office Phone: 207:780-4480	Gorham Police Department Phone: 911 Phone: 207-839-5581 Portland Police Department Phone: 911 Phone: 207-874-8575 Lewiston Police Department Phone: 911 Phone: 207-784-6421 Red Cross Phone: 207-874-1192 Gorham School District Superintendent's Office Phone: 207-222-1012 City of Portland Emergency Management Coordinator Phone: 207-756-8053

Emergency Support Function Annex #6: Mass Care, Emergency Assistance, Housing, and Human Services

Primary Department:

Campus Life

Secondary Departments:

Office of Enrollment Management and Student Affairs

Dean of Students

USM Public Safety/Police Department

Dining Services

Health & Counseling

Department of Facilities Management

Environmental Health and Safety

1. Introduction

A. Purpose

The University of Southern Maine (USM) Emergency Operations Plan (EOP) describes how the university responds to emergencies, addresses hazards and establishes policies, methodology, responsibilities and operations designed to effectively and efficiently address the needs of USM during an incident. The primary objectives of the EOP are to:

- Contribute to the safety of students, faculty, staff and visitors
- Effectively manage the response operations to an emergency affecting USM
- Contribute to the protection of life, property and the environment
- Minimize disruption of university operations and activities
- Effectively work with internal resources and external partners during emergency operations
- Restore the university to normal operations

The purpose of this Emergency Support Function Annex is to describe the internal and external departments responsible for mass care of the university employees, students and support personnel during an emergency.

B. Scope

The scope includes mass care, temporary shelters, emergency mass feeding, disaster housing, food safety & security and other human services.

2. Organizational Structure During Operations

A. General

The University of Southern Maine may experience emergency and disaster incidents that will require the implementation for mass care and human services. USM's Emergency Operations Plan provides overall guidance for emergency planning. This ESF is drafted to provide basic information to include points of contact in case additional resources are needed at the Emergency Operations Center or incident scene.

B. Organization

This Emergency Support Function #6 will be composed of the Office of Campus Life, as well as supervisory departments and university organizations within the command and control of the USM Office of Campus Life. Once the ESF is operational it will function under the direction and control of the Incident Commander or his/her designee.

The Incident Command System (ICS) is used by USM personnel to respond to emergencies and disasters. During the emergency response phase, all responders will report to the designated Incident Commander (IC) at the Emergency Operations Center (EOC)

C. Notification

There are several on campus emergency call boxes which connect directly to USM Public Safety Dispatch Center at the Portland and Gorham campuses. Call boxes on the USM Lewiston campus (LAC) connect directly to the Regional Emergency Operations Center that dispatches emergency calls generated from that area.

Notification of an emergency from the Portland and Gorham campuses can be made by calling 911 from any campus land line telephone; which will be automatically connected to the USM Public Safety/Police Department Dispatch Center. Notification of an emergency from LAC can be made by calling 9-911 from any campus land line; which will be automatically directed to the Regional Emergency Operations Center that dispatches emergency calls generated from that area.

Dialing 911 from a cell phone will be answered by the regional Emergency Communications Center established for the location in which the call was made. Once initial contact is made with the regional Emergency Communications Center, the call will be immediately transferred to the USM Public Safety/Police Department.

Upon notification of the emergency under this ESF, the University Public Safety/Police Department (UPD) will alert the Office of the Dean of Students through the UPD Dispatch Center's call list who will assist in the coordination of the emergency response to the incident. Upon notification of the emergency, Campus Life will contact the Dean of Students and the Vice President of Enrollment Management and Student Affairs.

The Office of Campus Life will make a rapid initial assessment of the situation and, as appropriate, notify and activate one or more support agencies. Deployment of personnel and resources will take place within the framework of the Emergency Operations Center (EOC).

If appropriate, the Incident Commander or Facilities Emergency Coordinator will activate the Critical Incident Response Team (CIRT) and the USM Emergency Alert System which includes, but is not limited to, E2 Campus Emergency Alert System and social media messages to the university community.

D. Emergency Response Actions

1. No one will self-employ to the incident scene. Support personnel will wait to be contacted or try to contact the Emergency Operations Center for guidance and

direction. No support personnel will contact the USM Public Safety Dispatch Center unless they have critical information in reference to the incident.

2. When contacted by the Incident Commander or the Facilities Emergency Coordinator, the Emergency Response Group and support personnel will report directly to the Emergency Operations Center.
3. If an evacuation of the campus is necessary, ERG will contact our community partner for that area for assistance and use of its facilities.
4. If mass care, evacuation or temporary housing is needed, a triage center will be activated at the Gorham campus field house or the Sullivan Gym in Portland. If necessary to evacuate the campuses the Gorham High School gym will be used as an evacuation site. USM has Memorandums of Understanding with the Gorham School District. The Portland campus will evacuate to a site offered by the City of Portland. USM has a community partnership with the City of Portland's Emergency Management Office. The Director of Campus Life, the Dean of Students, and USM's Police Department/Public Safety will coordinate the transportation of the faculty, staff and students to the above referenced locations.
5. If food services are needed, the Director of Campus Life will contact dining services to provide the necessary supplies to the evacuation or mass care centers.
6. The Incident Commander or designee will work with the Emergency Response Group's Public Information Office (PIO) for a public release of information through the Emergency Operations Center.
7. Depending on the nature of the emergency (mass fatality, public health emergency, etc.) health and counseling services may be required. The Director of Campus Life and Office Dean of Students will follow up with University Health and Counseling to ensure faculty, staff and students have the appropriate resources available to them during and after a campus or community emergency.

E. Recovery Actions

1. Coordinate assistance as needed by the Incident Commander, EOC Director, or the Critical Incident Response Team as appropriate.
2. Ensure that this Emergency Support Function members or their agencies maintain appropriate records of resources used and costs incurred during the incident.

F. Deactivation

1. Partial deactivation would occur based on the extent of the current response and recovery actions and at the discretion of the Incident Commander.
2. Deactivation of this ESF would occur when the Incident Commander declares the emergency has been contained and University activities are restored to normal operations.

3. If the nature of the incident requires an extension of certain emergency services (i.e. Health and Counseling services) the Emergency Response Group (ERG) will employ special task groups to coordinate these continuing activities.

G. Responsibilities

Primary Department – Director of Campus Life

1. Serve as the lead department for this ESF by supporting the response and recovery actions.
2. Identify, train and assign personnel to staff this ESF when the USM Emergency Operations Center is activated.
3. Maintain a list of personnel that can be called to the EOC as needed.

3. Phone Contacts

Primary Department	Support Department(s)	External Agencies
Campus Life Phone: 207-228-8466	Office of Enrollment Management & Student Affairs Phone: 207-7804770 Office of the Dean of Students Phone: 207-780-5242 Health and Counseling Phone: 207-780-4050 Dining Services Gorham Campus: 207-780-5420 Portland Campus: 207-780-4039 USM Public Safety/Police Dept. Phone: 207-780-5211 Environmental Health and Safety Phone: 207-780-5338 Facilities Management Phone: 207-780-4160 P&G Phone: 207-753-6514 Lewiston Dean of Lewiston Campus Phone: 207-753-6594 Public Relations Phone: 207-780-4444	Red Cross Phone: 207-874-1192 Gorham School District Superintendent’s Office Phone: 207-222-1012 Gorham Police Department Phone: 911 Phone: 207-839-5581 Portland Police Department Phone: 911 Phone: 207-874-8575 Lewiston Police Department Phone: 911 Phone: 207-784-6421 City of Portland Emergency Management Phone: 207-756-8053