

## H. APPENDIX VIII: EMERGENCY SUPPORT FUNCTION 8 - HEALTH AND MEDICAL SERVICES

**PRIMARY AGENCY:** Department of Health

**SUPPORT AGENCIES:** Department of Agriculture and Consumer Services, Agency for Health Care Administration, American Red Cross, Salvation Army, Department of Business and Professional Regulation, Department of Elder Affairs, Department of Environmental Protection, Department of Military Affairs, Department of Law Enforcement, Florida Funeral Directors Association, Department of Children and Families, U.S. Department of Transportation, Florida Wing Civil Air Patrol, State Fire Marshal, Florida Fire Chiefs' Association

### I. INTRODUCTION

The purpose of Emergency Support Function 8 is to coordinate the State's health and medical in case of an emergency/disaster situation. To accomplish this goal, Emergency Support Function 8 oversees the emergency management functions of preparedness, recovery, mitigation, and response with all agencies and organizations that carry out health or medical services. The Department's Emergency Coordination Officer, located in the Office of the Deputy Secretary of Health, Office of Emergency Operations Section, directs all aspects of emergency management. Emergency Support Function 8 resources are used when local, county and regional agencies are overwhelmed and the State Emergency Response Team Chief requests additional assistance. Emergency Support Function 8 provides the means for a public health response, triage, treatment and transportation of victims of a disaster; assistance in the evacuation of victims out of the disaster area after the event; immediate support to hospitals and nursing homes; provision of emergency mental health crisis counseling for disaster responders and the re-establishment of all health and medical systems. Assistance in pre-event evacuation may also be provided whenever patients or clients of the State and the Department of Health are affected, or pre-established plans for any health care institutions have failed.

### II. CONCEPT OF OPERATIONS

#### A. GENERAL

1. Emergency Support Function 8 is organized in a manner similar to the Incident Command System in order to provide incident assessment, planning, procurement, deployment and support operations to the State Emergency Response Team, area coordinators, and local management to assure a timely and appropriate response to an emergency/disaster situation.
2. Procedural protocols and plans for disaster response activities are developed to govern staff operation at the State Emergency Operations Center and in the field. Periodic training is also conducted to enhance effectiveness.

3. In a large event requiring federal or mutual aid assistance, Emergency Support Function 8 will work with counterparts from such entities to seek, plan and direct use of those assets.
4. Throughout the response and recovery periods, Emergency Support Function 8 will evaluate and analyze information regarding medical, health and public health assistance requests for response, develop and update assessments of medical and public health status in the impact area and do contingency planning to meet anticipated demands.
5. When an event is focused in scope to a specific type or response mode (e.g., hospital evacuation or radiological problem), the position and functions of the operations officer will be assumed by an appropriate person from a supporting agency with expertise pertinent to the event.

## **B. ORGANIZATION**

1. State
  - a. During an activation of the State Emergency Operations Center, support agency staff is integrated with the Department of Health staff to provide support that will allow for an appropriate and timely response.
  - b. During an emergency or disaster, the primary and support agencies of Emergency Support Function 8 will respond directly to the Emergency Services Branch Chief who reports to the Operations Section Chief (**see Section IV. A. 2. Figure 3 of the Basic Plan**).
  - c. During the response phase, Emergency Support Function 8 will evaluate and analyze information regarding medical and public health assistance requests. Also, Emergency Support Function 8 will develop and update assessments of medical and public health status in the impact area and do contingency planning to meet anticipated demands.
  - d. During an event that is focused in scope to a specific type or response mode, e.g., hospital evacuation or radiological problem, then the position of the operations officer will be assumed by an appropriate person from a supporting agency with expertise pertinent to the event.
  - e. The Department of Health develops and maintains an Emergency Operations Plan that governs internal response actions related to emergencies.
2. Area
  - a. The Office of Emergency Operations, Department of Health, has established a regional disaster response coordinator position in each of the seven (7) Domestic Security Task Force (DSTF)

regions of the state. These coordinators have been trained to carry out responsibilities under Emergency Support Function 8 and function as coordinators, assessors, and operational personnel in support of regional or field activities.

- b. Regional staff are involved with Emergency Support Function 8 by providing informational assistance whenever an event is so small that a county emergency operations center is not activated. If more than one county emergency operation center is activated, then area staff assumes a more involved role and coordinates the event with regional resources or requests resources from the State Emergency Operations Center.

### 3. County

- a. Each county has an Emergency Support Function 8 focal point and a County Public Health Department Emergency Coordinator, usually the county Emergency Support Function 8 representative.
- b. Each county health department develops an Emergency Operations Plan that is submitted annually to the Office of Emergency Operations. Plans govern internal response actions related to emergencies.
- c. Low impact events not activating the county emergency operations center will be handled by the State Emergency Operations Center Emergency Support Function 8 directly with the county Emergency Support Function 8 representative and informational contact made with regional coordinators.
- d. High impact events requiring the activation of a county emergency operations center or multiple county emergency operations centers require closer coordination between county and regional Emergency Support Function 8 coordinators, which may require the commitment of area resources.
- e. Extremely high impact events require close coordination between county, area and State Emergency Support Function 8 coordinators and will require the commitment of State or other resources.

## C. NOTIFICATIONS

1. Regional coordinators and county health department personnel will notify the State Warning Point when information comes to their attention indicating that an emergency or disaster situation is developing. They will provide summary level information as required and available.
2. The State Warning Point, will notify the on call Emergency Duty Officer for the Department of Health when the State or an area of the State has

been threatened or impacted by an emergency or disaster situation as provided in State Warning Point procedure.

3. Regional coordinators will evaluate the situation, based on information at hand and provide additional local notifications as required.
4. The Office of Emergency Operations will gather relevant information on the emergency incident, assemble key response staff and jointly develop an initial action plan for the event. This plan will guide operations for the first day of SEOC activation.
5. The Regional Office of the United States Public Health Service, known as Federal Regional Emergency Support Function 8, will be notified of the event status and briefed on any anticipated need for federal assistance. If federal assistance is anticipated, the Regional Emergency Support Function 8 representative will maintain coordination with the State Emergency Support Function 8 desk and serve as liaison with the Federal Emergency Management Agency lead representative present at the State Emergency Operations Center. The Federal Emergency Support Function 8 representative shall respond to requests from the State Emergency Support Function 8 desk to ensure that all requested federal assistance possible is made available to the State.

#### **D. ACTIONS**

Actions carried out by Emergency Support Function 8 are grouped into the four phases of emergency management: preparedness, response, recovery, and mitigation. Each phase requires specific skills and knowledge to accomplish and requires significant cooperation and collaboration between all supporting agencies and the intended recipients of service. This Emergency Support Function encompasses a full range of activities from training to the provision of field services. It also functions as a coordinator and, at times, assumes direct operational control of provided services. The following services provide the framework upon which actions will occur:

- Assessment of health and medical needs.
- Disease control/epidemiology.
- Health/medical care personnel.
- Health/medical equipment and supplies.
- Patient evacuation.
- Coordinated in-hospital and nursing home care.
- Food and drug safety and availability of drugs and certain foods.
- Emergency responder health and safety.
- Radiological/chemical/biological hazards.
- Mental health and crisis counseling for responders
- Public health information.
- Vector control/monitoring.
- Portable water, disposal of wastewater and solid waste.
- Victim identification/mortuary services.
- Management, Command and Control of assets.

- Emergency Medical Services (pre-hospital).
- Health and medical activities related to terrorist threats and/or events.
- Overall coordination or interagency Health and Medical Services for a commercial nuclear power plant emergency through the Bureau of Radiation Control, the Deputy Secretary of Health, the Assistant Health Officer for Environmental Health, the Department of Agriculture and Consumer Services, and the Department of Environmental Protection.

1. Preparedness Actions

- a. Actions and activities that develop health and medical response capabilities may include planning, training, orientation sessions, and exercises for all Emergency Support Function 8 personnel (i.e., Federal, State, Area, and County) and other emergency support functions that will respond with Emergency Support Function 8.
- b. Conduct planning with Emergency Support Functions 8 support agencies, Regional Domestic Security Task Forces, and Emergency Support Functions 4 and 9 to refine Medical Support Unit operations.
- c. Conduct training for Rapid Impact Assessment Team members.
- d. Develop and refine procedures to be used in the following field surveys: Rapid Impact Assessment, Health Assessment Teams, environmental health assessment survey, and epidemiological surveys.
- e. Develop and present training courses for Emergency Support Function 8 personnel, provide information on critical facilities to the Division of Emergency Management and develop automated protocols for frequently provided services.
- f. Maintain liaison with health and medical volunteer organizations, Disaster Medical Assistance Teams and Disaster Mortuary Response Teams
- g. Develop rapid response mechanism for crisis mental health counseling for responders and assist in the development of public health nursing disaster protocols.

2. Response Actions

- a. Coordinate operations at the Emergency Support Function 8 office in the State Emergency Operations Center.
- b. Provide team members for the State Emergency Response Team field deployment; procure health and medical resources for a Forward State Emergency Response Team deployment; provide communications for deployed health and medical personnel. In

addition, agencies of Emergency Support Function 8 may serve the State Emergency Response Team in other areas of Field Operations such as providing technical assistance, securing resources, command and response to the incident scene as requested. (i.e., Impact Assessment Teams: Rapid Response Team, Preliminary Damage Assessment Team, Disaster Field Office Operations, Disaster Medical Assistance Team, MMRS, MSU, Recovery Center operations, intrastate and/or interstate mutual aid assistance, etc.).

- c. Conduct field assessments and surveys; provide nursing staff for Special Needs Shelters; provide staff and services for monitoring public health conditions; conduct rapid assessments for immediate response objectives; determine needs for health surveillance programs in communities and regions.
- d. Manage all field deployed asset; deploy a Management Support Unit (MSU) to provide command, communications and logistical support to medical field operations, and verify actual need for requested health and medical resources.
- e. Arrange for the provision of medical personnel, equipment, and supplies as needed to health and medical facilities; assist with patient evacuation and relocation (post-event); identify hospital and nursing home bed vacancies statewide; operate the Department of Health Emergency Operations Support Center. Consider credentialing and verifying EMTs, paramedics, and other health professionals during extended operations.
- e. Assist in hazardous materials response or a weapons of mass destruction event through consultation, technical supports or staff deployment; perform water, food and drug safety analysis and inspection.
- f. Support response personnel with critical incident stress debriefing resources; arrange for Disaster Mortuary Response Team or victim identification services; provide assistance as requested to the Disaster Field Office; provide port-o-lets and dumpsters to comfort stations/other locations; provide public health nursing staff as needed at special needs shelters; respond to radiological incidents and weapons of mass destruction incidents as necessary, including staffing the Emergency Operations Facility.

### 3. Recovery Actions

- a. Maintain support of the Disaster Field Office.
- b. Restore essential health and medical components of delivery systems, permanent medical facilities to operational status; restore pharmacy services to operational status; monitor

- environmental and epidemiological systems; and initiate grants for environmental and epidemiological surveillance.
- c. Support emergency services staff and operations until the local system is self-sustaining maintain provision of long-term emergency environmental activities; identify populations requiring event-driven health, medical or social services post-event; and provide emergency pharmacy/ laboratory services.
  - e. Initiate financial reimbursement process for these activities when such support is available.
4. Mitigation Actions
- a. Increase use of geographical information systems to identify location of all vulnerable sites or populations.
  - b. Identify and seek funds for hurricane proofing critical facilities.
  - c. Provide computerized access statewide to regional and county coordinators for management communications and Geographical Information Systems data use.
  - d. Stockpile critical medical supplies in strategic locations throughout the State; develop Disaster Medical Assistance Team readiness levels to category I capability; identify and seek auxiliary power for critical health and medical facilities.

#### **E. DIRECTION AND CONTROL**

1. Emergency Support Function 8 uses the Incident Command System or concepts to manage its emergency/disaster responsibilities. Key to this system is the Office of Emergency Operations Unit, which functions as the official disaster response, preparedness, recovery, and mitigation organization within the Department of Health. This Unit also serves as the focal point for statewide Emergency Support Function 8 activities. It is responsible for ensuring that all appropriate program offices of the Department, support agencies, other Emergency Support Functions and other private voluntary agencies have knowledge about the system and Emergency Support Function 8's expectations during an event.
2. The Emergency Support Function 8 system operates in three arenas; 1) the State Emergency Operations Center; 2) local health and medical incidents which do not require deployments, and; 3) Field locations.
3. During emergency activations, all management decisions regarding State or regional responses are made at the State Emergency Operations Center by the Emergency Support Function 8 commander (either the Department of Health Emergency Coordination Officer, the Emergency Duty Officer or the Emergency Support Function 8 Section Chief).

Planning, logistics, administration, and operations positions at the State Emergency Operations Center assist the incident commander in carrying out the mission.

4. A staffing directory (Department of Health Emergency Call Lists) and Emergency Support Function 8 procedural manuals are maintained by the appropriate Department of Health staff with status updated at least quarterly.
5. All Department of Health field personnel or units are subordinate to the Emergency Support Function 8 at the State Emergency Operations Center.
6. In accordance with a mission assignment from Emergency Support Function 8, and further mission tasking by a Local primary agency, each support organization assisting Emergency Support Function 8 assignment will retain administrative control over its own resources and personnel but will be under the operation control of Emergency Support Function 8. Delegation of mission operational control may be delegated to a Management Support Unit or Local entity.
7. Appropriate information on casualties/patients will be provided to the State Emergency Operations Center operations officer and the American Red Cross for inclusion in the Disaster Welfare Information System.
8. Radiological Events
  - a. The Executive Order shall ensure that all aspects of the response to a radiological event are planned for and that designated organizations within the Department of Health are prepared to carry out appropriate actions.
  - b. In case of a radiological emergency, Chapter 404, Florida Statutes, designates, Department of Health, Bureau of Radiation Control, as the primary point of contact for assessment of health hazards during peacetime radiological emergencies regardless of their severity. The Bureau of Radiation Control will have a representative in the State Emergency Operations Center and the Emergency Operations Facility. The representative at the State Emergency Operations Center will assume the function of Emergency Support Function 8 Operations Officer for the event.
  - c. Impact assessments of offsite radiological emergencies will be performed by the Department of Health, Bureau of Radiation Control, in accordance with Bureau of Radiation Control's standard operating procedures number 1 through number 19 (refer to the Authorities and Reference Section of this Plan).
9. Policies, programs, and procedures that will be utilized by Emergency Support Function 8 in response to a radiological emergency, terrorist/ weapons of mass destruction event, wildland fire, or repatriation will be in

accordance with Annex A, the State of Florida Radiological emergency Management Plan, Annex B, Terrorist Incident Response Plan, Annex C, the State of Florida Emergency Response Team Guidelines for Wildfire Operations, Annex D, the State of Florida Emergency Repatriation Plan of the State of Florida Comprehensive Emergency Management Plan 2002, and the Florida Field Operations Guide.

### III. RESPONSIBILITIES

#### A. PRIMARY AGENCY - DEPARTMENT OF HEALTH

1. Provide leadership in directing, coordinating and integrating overall State efforts to provide medical and public health ~~and some social services~~ assistance to the affected area.
2. Staff and operate a command and control structure to assure that services and staff are provided to areas of need.
3. Coordinate and direct the activation and deployment of State agencies volunteer health/medical personnel, supplies, and equipment and provide certain direct resources that are under the control of the Department of Health. Also, the Department of Health will assure that the following personnel or services are available for responding to the consequences generated by the hazards that may impact the State (i.e., severe weather, tropical cyclones, environmental biological, terrorism, technological, and mass migration, etc.):
  - Advance Life Support/Basic Life Support vehicles.
  - Emergency Medical Technicians.
  - Paramedics.
  - Mass casualty incident response supplies/equipment.
  - Medical equipment and supplies.
  - Nurses/RNs/LPNs.
  - Health administrators.
  - Pharmacy services/Pharmacists.
  - Physicians.
  - Environmental health specialists.
  - Laboratories and laboratory personnel
  - Nutritional services, including WIC.
  - Epidemiology.
  - Radiation monitoring.
  - Disaster response expertise.
  - Dental services and personnel.
  - Dietitians.
  - Immunizations.
  - Case management.
  - Outreach capability.
  - Aircraft (fixed wing/rotary wing/medical evacuation).

- Public information and education.
  - Public sanitation equipment (porta-potties, etc.)
1. Initiate the following activities regarding a radiological emergency incident:
    - a. Develop comprehensive policies and programs for decontamination and mitigation of hazards associated with sources of ionizing radiation.
    - b. Encourage, participate in, and conduct studies, public hearings, training, and research relating to the control of sources of ionizing radiation.
    - c. Respond to any emergency that involves possible or actual release of radiological materials in order to protect health, safety, and property.
    - d. Coordinate with the Department of Environmental Protection in the chemical analysis of water obtained from public water supplies. The Department of Health will make the actual radiological analysis of water obtained from public water supplies. Support Emergency Support Function 6 (Mass Care) in the coordination of overall reception and care responsibilities.
    - e. Provide technical consultation and support regarding radiation and radiological health (e.g., determine levels of radiation, health hazards, and radiological decontamination) as the principal radiological assessment agency.
    - f. Coordinate distribution of radiological data to the State and county response organizations.
    - g. Determine the severity of radiological emergencies when an actual release of radioactive materials occurs and make recommendations as the primary radiological assessment agency based on a technical analysis of the situation.
    - h. Respond to nuclear power plant emergencies by proceeding to the licensees' Emergency Operations Facilities.
    - i. Maintain liaison with State agencies, local governments, and nuclear power plants for planning and operational purposes.
    - j. Contingent upon available staff provides assistance in the risk county emergency operation center(s) to interpret technical data and evaluate protective action recommendations.
    - k. Provide criteria and technical support for the decision to relax protective actions and allow for recovery and reentry into the affected area.

- l. Coordinate planning and operational support for the decision to relax protective actions and allow for recovery and reentry into the affected area.
- m. Prepare and maintain a list of medical facilities that have the capability to treat radiological contaminated individuals.
- n. Develop a policy for the use and distribution of potassium iodide.
- o. Coordinate planning with county health departments and provide support in supplying sanitary facilities for evacuees at reception centers and shelters.
- p. Collect samples from public and surface water supplies for radiological analysis by the Bureau of Radiation Control in the event a radiological release occurs.
- q. Coordinate with the Department of Environmental Protection in collecting and analyzing air and water samples.

## **B. SUPPORT AGENCIES**

Support agencies will provide assistance to the Emergency Support Function with services, staff, equipment, and supplies that complement the entire emergency response effort as the State Emergency Response Team addresses the consequences generated by the hazards that may impact the State (i.e., severe weather, tropical cyclones, environmental biological, terrorism, technological, and mass migration, etc.). Because services and resources are subject to change from time to time, emergency coordinators are responsible for frequently updating their resource capabilities with the Department of Health.

- 1. Department of Agriculture and Consumer Services
  - a. Provide veterinarian/food inspection/animal care.
  - b. Transport vehicles (ground and air).
  - c. Security personnel.
  - d. Operation of staging area.
  - e. Food service/response personnel.
  - f. Initiate the following activities regarding a radiological emergency incident:
    - 1) Determine the needs of the agricultural industry during a radiological emergency.
    - 2) Declare an agricultural emergency as guided by the Department of Health when a radiological hazard is detected.

- 3) Draft and promulgate agricultural procedures that will be effective during nuclear power plant emergencies.
2. Agency for Health Care Administration
    - a. Coordinate need for initiating any waiver of rules and regulations regarding licensed professional personnel.
    - b. Maintain and provide a listing of hospitals, nursing homes, adult congregate living facilities, etc., which should include Chief Executive Officer names and 24-hour telephone numbers.
    - c. Provide bed availability status of all hospitals outside the watch area.
    - d. Contact all hospitals, nursing homes, and adult congregate living facilities in watch/warning areas prior to land fall and determine who to call and at what numbers after storm.
    - e. Mobilize/alert Agency for Health Care Administration personnel.
    - f. Determine status of hospitals, nursing homes and Adult Living Facilities in impact area after storm clears.
    - g. Provide the Agency for Health Care Administration nursing personnel to assist in shelters, tent cities, public health clinics, etc.
    - h. Provide engineering and architectural staff to evaluate structural integrity of hospitals.
  3. Salvation Army
    - a. Provide base camp support when needed for field Emergency Support Function 8 medical teams.
    - b. Feed response personnel
  4. Department of Business & Professional Regulation
    - a. Provide food inspectors to assist in inspection of restaurants, mass feeding sites, and food distribution centers.
    - b. Verify licensure of medical/health care personnel within the State and from other states.
  5. Department of Elder Affairs

Coordinate the relocation of displaced elderly.
  6. Department of Environmental Protection

- a. Assistance in obtaining potable water, portable toilets and assessing hazardous material incidents.
  - b. Restrict consumption of surface water supplies in the event of a release of significant concentrations of radioactive material into those supplies.
  - c. Coordinate with other state and county agencies to provide safe water supplies at reception shelter facilities.
7. Department of Military Affairs
- a. Identify possible medical resources for deployment.
  - b. Support transportation-logistics requests (ground and air).
  - c. Provide food service/response personnel.
  - d. Provide patient evacuation support (ground and air).
  - e. Provide security personnel.
  - f. Assist in communications support.
8. Florida Department of Law Enforcement
- a. Provide general security for evacuation and site control.
  - b. Provide assistance in the rapid transportation of samples for analysis as necessary.
  - c. Conduct warnings and evacuation of all waterways, State parks, and recreational areas in and around nuclear power plants and coordinate such on-going activities with United States Coast Guard representatives.
  - d. Supply supporting agency watercraft to the Department of Health as needed for the collection of bio samples
9. Florida Funeral Directors Association
- Provide victim identification and mortuary services.
10. Department of Children & Families
- Provide mental health services to the affected populations and coordination of critical incident stress personnel to support responders.
11. U.S. Department of Energy
- See Direction and Control: Radiation Events

12. Department of Transportation  
Provide support to the Department of Health Command & Control Unit when deployed to the field.
13. Florida Wing Civil Air Patrol  
Provide support to the Department of Health Command & Control Unit when deployed to the field.
14. Other Assets: Although specific assets have been identified within each supporting agency, it is clearly understood that we will initially coordinate requests and approval of support with each appropriate Emergency Support Function.

#### **IV. FINANCIAL MANAGEMENT**

Emergency Support Function 8 will be responsible for managing financial matters related to resources that are procured during the event. During a response, each agency/department is responsible for recording and tracking its own expenditures and seeking reimbursement from the appropriate resource after the event. If a federally declared disaster exists, then a reimbursement formula is established by the Federal Emergency Management Agency that may be as much as 100 percent, but usually does not exceed 75 percent. When the reimbursement is less than 100 percent, the Governor's Office, together with legislative leadership, may decide to reimburse agencies/departments for the difference. In some instances, the agencies/departments may be required to assume this financial responsibility from their regular budgets.

##### **Guidelines for the Department of Health**

The representative from the Department of Health Administrative Services is notified when the State Emergency Operations Center is activated. This precipitates the establishment of an external program code. A different external program code is established for each storm/disaster. Administrative Services will ensure that the external program code is broadcast to the Department of Health district fiscal officers. These codes are then available for everyone in the Department of Health that may have an expenditure associated with the current storm/disaster.

All requests for disaster response products and services that come to Emergency Support Function 8 will be processed at the desk in accordance with existing policies contained in the Department of Health emergency policy handbook. Executive Order staff will be responsible for ensuring that these procedures are carried out so that reimbursement to vendors and the Department can occur with minimal delays. Upon activation, the Department Emergency Coordination Officer will ensure that an Executive Order fiscal officer is designated who will work the Emergency Support Function 8 desk during the entire time the desk is active.

The Executive Order fiscal officer maintains on-going contact with each vendor and is available by pager to all vendors 24 hours a day, seven days a week throughout the

duration of the emergency event. This officer shall also be responsible for following up all financial issues after response has ceased by coordinating with the Department of Health fiscal and personnel management, the Division of Emergency Management and the Federal Emergency Management Agency fiscal agents and directly with vendors as necessary.

Expenditures by other departmental entities, i.e., county public health units, are documented by those entities and submitted directly to the Administrative Services disaster fiscal officer without any involvement of the Executive Order fiscal officer.

### **Other Support Agencies**

The Department of Health Emergency Coordinating Office shall encourage all supporting agencies to establish effective financial disaster response systems internally and share with them all directives received from the Division of Emergency Management, the Federal Emergency Management Agency or other sources.

## **V. REFERENCES AND AUTHORITIES**

- a. Florida Statutes 1993, Emergency Management, Chap. 252 (252.31-52.61).
- b. Florida SS 911 (May 93).
- c. The Department of Health Refugee Response Plan (1993).
- d. Florida State Health Office Disaster Response Plan (1993).
- e. The Federal Response Plan for P.L. 93-288 (April 1992).
- f. The Radiological Emergency Management Annex to the State of Florida Comprehensive Emergency Management Plan (February 2004).
- g. Regional Domestic Security Task Forces, Section 943.0312, F.S.
- h. Medical Telecommunications and Transportation, Section 401.273, F.S.
- i. Florida Field Operations Guide (FFOG)