



**THE TERRITORY OF GUAM
COMPREHENSIVE EMERGENCY
MANAGEMENT PLAN**

PANDEMIC RESPONSE ANNEX

PANDEMIC RESPONSE ANNEX

EXECUTIVE SUMMARY

This annex defines the program for the Government of Guam to prepare for, respond to and recover an epidemic or pandemic event. Epidemics, which are outbreaks of a disease that occur within a short period of time and in a defined region, have the potential to significantly affect Guam and its government's operations, as well as the health and safety of its personnel and the general public. Many diseases can result in an epidemic, which could lead to a pandemic or an epidemic that occurs on a worldwide scale. With recent outbreaks of various influenza strains in Asia, and growing number of tourists from that nearby region arriving on Guam, the potential for such an event is relatively high compared to many other locations in the continental United States.

Disasters such as typhoons, tsunamis, floods, and terrorism have relatively short or limited incident periods. Although they potentially have human safety consequences, it is their impacts to infrastructure, property, and equipment, and the effort needed to repair and restore those services that will prolong the overall time of the event. These types of emergencies can have either localized effects or island-wide impacts.

Epidemics and pandemic events, in contrast, may have very long incident periods, possibly followed by long recovery times depending on the pathogen and the extent of its transmission throughout the populace. Not only will their impacts be widespread, but the primary effects will be on people. The physical infrastructure and equipment will remain entirely unscathed by such an occurrence, but they will be rendered useless without operators and maintenance staff. The ability of Guam's government to provide services will not rest on the restoration of facilities and equipment, but on the recovery of its staff.

This is a hazard specific annex to the Guam Comprehensive Emergency Management Plan (GUAM CEMP). This Annex governs the plans, operational concepts, and policies used to prepare for and respond to any type of disease outbreak that has the potential to adversely impact Guam, its organizations and populations. The procedures and actions defined in this Annex are normally executed by Guam Homeland Security/Office of Civil Defense (GHS/OCD) through the direction of the Homeland Security Advisor or the Civil Defense Administrator following the issuance of an executive order by the Governor.

AUTHORITIES

The authority for the development, implementation, and maintenance of this Annex is derived in accordance with the provisions of the Guam Civil Defense Act of 1951.

SUPPORTING PLANS AND DOCUMENTS

- The Organic Act of Guam, as amended (48 USC Chapter 8A – Guam 1422) and related statutes;
- Guam Code Annotated Title 10 Chapter 65 § 65107;
- Executive order of the Governor 91-09 (dated March 25, 1991);
- Executive Order Number 2011-13
- Section 361 of the Public Health Service Act (42 USC 264)

DEFINITIONS

Epidemic - occurs when the incidence rate (i.e. new cases in a given human population, during a given period) of a certain disease substantially exceeds what is "expected," based on recent experience.

Pandemic - An epidemic of an infectious disease that spreads through human populations across a large region, like a continent.

Outbreak - the occurrence of more cases of disease than normally expected within a specific place or group of people over a given period of time.

Influenza - also known as the flu, is a disease that attacks the respiratory tract in humans and differs from a viral "cold" in that it usually comes on suddenly and includes fever, headache, tiredness, dry cough, sore throat, nasal congestion, and body aches.

Strategic National Stockpile (SNS) - A national repository of antibiotics, antivirals, chemical antidotes, life-support medications, IV administration and airway maintenance supplies, and medical/surgical items that is designed to re-supply state/territorial and local public health agencies in the event of any natural or technological anywhere, at any time within the United States.

CHAPTER I: INTRODUCTION

I. GENERAL

The Territory of Guam is possibly more vulnerable than most other communities in the United States to the effects of an epidemic or pandemic event. As an established hub for airline traffic in the Western Pacific, Guam's A.B. Won Pat International Airport sees many aircraft passing through from Asia, Micronesia and Oceania, as well as Hawaii and the continental United States. Furthermore, with 1.5 million tourists a year visiting its shores, a majority from Eastern Asia, Guam is a nexus of human interaction among people of different ethnic origins and countries. Additionally, in recent years, many of the diseases that have the potential to become pandemic events, such as H1N1 and other variants of the influenza virus, have originated in Asia. All these factors combine to increase the potential for a widespread outbreak of a disease.

This document is a hazard specific annex to the Guam Comprehensive Emergency Management Plan (GUAM CEMP). It defines the Government of Guam's program to prepare for and respond to all disease outbreaks that may threaten the continuity of government and the ability of its agencies to operate effectively. Therefore, this is not a procedure to address the medical, health and disease abatement issues associated with epidemics and pandemics; rather it is a guideline for dealing with the consequences of such an event. Guam's health agencies and organizations have already developed specialized policies and procedures to minimize the extent of transmission and deal with the medical needs of such an event. This annex will address the maintenance and sustainment of Government of Guam services during periods when personnel are dwindling because of associated medical issues.

II. PURPOSE AND SCOPE

The Pandemic Annex establishes the policies, programs, and procedures that will be used by government agencies and support organizations to prepare for, respond to, and recover from mass outbreaks of pathogens that have the potential to adversely impact a large portion of Guam's resident and tourist populations. Therefore, this is a plan to guide Government of Guam agencies in augmenting the efforts of public health officials and the medical community to address the biological issues of a disease outbreak, as well as to minimize its impact on continuity of their own operations.

Guam, as the United States' gateway to Asia and the Pacific, is vulnerable to an pandemic event. Across the territory, there are people, facilities, locations, and systems that could be severely harmed by a disease outbreak including, but not limited to:

- Densely developed, urbanized areas;
- Government personnel and services;
- Military operations;

- Banks and financial services;
- Medical and public health care capabilities and facilities;
- Educational centers and daycare facilities;
- Public safety and law enforcement;
- Fire suppression and rescue;
- Transportation nodes, such as the International Airport and the Port; and their transshipment activities; and
- General economic and social stability.

Unlike many natural and other emergencies and disasters, epidemics and pandemic events may have very long incident periods, possibly followed by long recovery times depending on the pathogen and the extent of its transmission throughout the populace. Whereas the onset of hazards in natural disasters and other types of emergency incidents usually occurs over a relatively short period of time (i.e., a few days), the activities that will prolong the response and recovery effort are repairing damage to infrastructure and replacing destroyed equipment/capabilities. Not only will the impacts of epidemics and pandemic diseases be widespread, but the primary effects will be on people. The physical infrastructure and equipment will remain entirely unscathed by such an occurrence, but they will be rendered useless without operators and maintenance staff. The ability of Guam's government to provide services will not rest on the restoration of facilities and equipment, but on the recovery of its staff.

III. ASSUMPTIONS

This section describes and sets forth the assumptions utilized to prepare this Annex and are as follows:

1. Susceptibility to the epidemic/pandemic pathogen will be universal.
2. The clinical disease attack rate will be 30 percent in the overall population. Illness rates will be highest among school-aged children (about 40 percent) and the elderly. Among working adults, an average of 20 percent could become ill during a community outbreak.
3. The overwhelming threat to the Government of Guam will not be damage to infrastructure and equipment, but the dwindling number of healthy personnel with which to provide normal services and conduct required activities.
4. As the event progresses, the Government of Guam may need to activate the Continuity of Government (COG) Plan and all agencies will need to activate and implement their Continuity of Operations Plans (COOP).
5. Risk groups for severe and fatal infections cannot be predicted with certainty. During annual fall and winter influenza seasons, infants and the elderly, persons with chronic illness and pregnant women are usually at higher risk of complications.

6. The typical incubation period is two to three days. It is assumed this would be the same for a novel strain transmitted between people by respiratory secretions.
7. Persons who become ill may shed virus and can transmit infection for one-half to one day before the onset of illness. Viral shedding and the risk for transmission will be greatest during the first two days of illness. Children will shed the greatest amount of virus, therefore are likely to pose the greatest risk for transmission.
8. In an affected community, an outbreak will typically last about 6 to 8 weeks. At least two pandemic disease waves are likely. Following the pandemic, the new viral subtype is likely to continue circulating and contribute to seasonal influenza.
9. The seasonality of a pandemic cannot be predicted with certainty. The largest waves in the United States during 20th-century pandemics occurred in fall and winter. Potential threats and potential threat elements (PTE) are known.
10. Specialized resources, as well as those normally utilized in disaster situations, may be needed to support a pandemic response. Such resources may not be located in the area or in the Territory of Guam.
11. Resources from governmental agencies (Government of Guam and federal) and private organizations will be made available upon request.
12. All response agencies and organizations will establish and participate in a unified command structure. The Guam Emergency Operations Center (EOC) will be activated and staffed if indicated by the size or scope of the incident.
13. Federal agencies with statutory authority for response to a epidemic/pandemic outbreak will participate in and cooperate with the unified command structure established by the responding local jurisdiction.
14. An pandemic event will result in the timely activation of the Guam CEMP and may require the Federal Emergency Management Agency to activate the National Response Framework (NRF). This NRF activation will probably occur after the Centers for Disease Control (CDC) and other federal health and medical related agencies have arrived on scene
15. This Annex assumes the resources and procedures for such related operations as hazardous material response, mass casualty incident management, law enforcement, search and rescue, etc., will be in place to be utilized when needed during an epidemic or pandemic incident.
16. Public health advisories, outbreaks at schools or facilities frequented by children and concentrations of tourists will create the need to establish specialized communications and necessitate significant media management operations.

17. In addition to operations normally associated with the medical response aspects of an epidemic/pandemic event, the Government of Guam will need to provide other unrelated services to augment and support those operations.
18. Extensive media interest in a potential or occurring pandemic outbreak will necessitate media management operations and resources beyond those needed for other types of emergency management operations.
19. Management of response operations for a comprehensive pandemic response will be guided by the following:
 - a) Preserving life or minimizing risk to health;
 - b) Maximizing the ability for Government of Guam agencies to deliver normal services and sustain required activities;
 - c) The implementation of GOG and COOP plans;
 - d) Providing logistical support to assist ESF 8 in medical response and containment operations;
 - e) Releasing emergency public information that ensures adequate and accurate communications with the public;

CHAPTER 2: THE RESPONSE ORGANIZATION

I. GENERAL

This chapter of the Annex describes the operational concepts and organization to be used in the management of a response to a pandemic event occurring in or impacting the Territory of Guam.

The concept of operations incorporated into this Annex is consistent with that utilized by the federal government. The U.S. Department of Health and Human Services (HHS) Pandemic Influenza Plan establishes a general concept of operations for a unified response between federal agencies and local governments with respect to the public health and medical aspects of that kind of an emergency. This Pandemic Response Annex is intended to be an adjunct to that plan in that it encapsulates the activities of non-medical entities to support those efforts and address the other implications a major disease outbreak can have on the rest of society.

This section first describes the response organization available to support the medical effort and maintain government services and operations, secondly, the concept of operations to be used by organizations for management of the response to the event.

II. FEDERAL RESPONSE

The Center for Disease Control and Prevention (CDC) is the lead federal government agency for epidemic/pandemic planning and the U.S. Department of Health and Human Services (HHS) is the primary response agency for federal response. The Federal Emergency Management Agency is the lead federal agency for activating the National Response Framework, if necessary.

III. OTHER PARTICIPANTS IN THE RESPONSE ORGANIZATION

It is possible that the nature of an event could necessitate other non-government participants in the emergency response organization. Examples that may need to be considered include the following:

1. Owners or operators of large vacant properties and facilities;
2. Non-government expert advisors or consultants, such as university scientists, physicians, or private contractors;
3. Volunteer Organizations Active in Disasters (VOAD) and other private, charitable organizations;
4. Rental agents or contractors providing vehicles, equipment, or supplies involved in the event;

5. Health and medical care facilities and mortuaries managing the survivors of the incident; and;

These organizations or officials may become participants in the Unified Command and/or have liaison personnel deployed to the Guam EOC.

CHAPTER 3: CONCEPT OF OPERATIONS

I. GENERAL

This chapter of the Annex describes the operational concepts to be used by the response organization.

II. PANDEMIC EVENT RESPONSE PROCESS

Two distinct sets of actions are required for this operational plan. One set of actions deal with the medical-response to the disease outbreak, as well as the public health aspects of controlling transmission and mitigating other medical support requirements. Another aspect of the response actions is the mitigation of the pandemic's impacts on the Government of Guam's service delivery capabilities and logistical support.

A. NOTIFICATION

The Co-lead agencies of ESF 8, the Department of Public Health and Social Services (DPHSS) and/or the Guam Memorial Hospital Authority (GMHA) will notify the Guam Homeland Security/Office of Civil Defense (GHS/OCD) of an impending or occurring outbreak of a highly infectious pathogen and will advise that the GUAM CEMP be activated in support of its ongoing medical intervention efforts.

B. THREAT CLASSIFICATION

The U.N. World Health Organization (WHO) and the U.S. Centers for Disease Control and Prevention (CDC) use six classifications to quantify the progress of a pandemic as part a pandemic preparedness plan. This plan is likely to be activated in Phase 6, when the WHO/CDC classifies the disease outbreak as increased and sustained transmission in the general population. Each pandemic phase and its corresponding recommended response measures are specified below.

1. Inter-pandemic Period
 - a. Phase 1 - Strengthen pandemic preparedness at territorial levels.
 - b. Phase 2 - Minimize the risk of transmission to humans; ensure rapid detection and reporting of the first occurrence of the novel virus in humans.
2. Pandemic Alert Period
 - a. Phase 3 - Ensure rapid characterization of the new virus subtype and early detection, notification and response to additional cases.

- b. Phase 4 - Contain the new virus within limited foci or delay spread to gain time to implement preparedness measures, including vaccine development.
 - c. Phase 5 - Maximize efforts to contain or delay spread, to possibly avert a pandemic, and to gain time to implement pandemic response measures.
 - d. Phase 6 - Minimize the impact of the pandemic, while striving to maintain routine provision of public health and healthcare delivery.
 3. Post-pandemic Period (Mitigation and Recovery) – Continue public health actions, evaluations and research, public communications, mental health activities, surveillance, and preparations for reoccurring or additional outbreaks

C. RESPONSE CLASSIFICATIONS

The pandemic response is divided into two basic types:

1. Medical – the activities undertaken by the health and medical community on Guam to treat the biological issues and impacts of the pathogen. This can include such operations as:
 - a. Medical transport, triage and treatment of persons with the disease;
 - b. Operating field hospitals;
 - c. Controlling patient loads at hospitals;
 - d. Importing medicines, medical professionals, or supplies;
 - e. Managing the delivery of medicines and vaccines;
 - f. Establishing quarantines and isolation zones;
 - g. Coordinating mortuary services and the disposition of remains;
 - h. Establishing, coordinating and operating temporary morgues;
 - i. Performing forensic examinations and completing victim identification; and
 - j. Offering crisis behavioral counseling and organizing disaster assistance teams.
2. Sustainment, Service and Support – the activities undertaken by the other agencies within the Guam EOC EST Team to maintain the services and activities of the Government of Guam and the logistical support and activities for the medical operations above. Measures in this category encompass, but are not limited to:

- a. Activating and supporting the Continuity of Government (COG) and agency Continuity of Operations Plans (COOP);
- b. Fulfilling logistical requests for medical support and requirements through interactions with federal agencies and other states;
- c. Establishing security at vaccination sites and other activities associated with the medical response;
- d. Interacting with the media and other means of public dissemination to transmit health advisories, medical information and government service notifications, as well as generally keep the citizens and tourist on Guam informed of the situation and pertinent issues.
- e. Collecting intelligence and information regarding all aspects of the situation to present a common operating picture for the Government of Guam agencies and their federal counterparts.
- f. Documenting all administrative, logistical and other cost associated with the entire pandemic response operation.

III. EMERGENCY RESPONSE OPERATIONS

A. ACTIVATION OF THE EMERGENCY OPERATIONS CENTER

The Guam EOC may be activated based on a recommendation from DPHSS and/or the GMHA. Upon receipt of an Executive Order, the Administrator of GHS/OCD will assume the role of Incident Commander for the conduct of the governmental and logistical support aspect of the medical response.

B. DEPLOYMENT OF GOVERNMENT OF GUAM PERSONNEL

Several emergency operations facilities may be established for management of the incident. GHS/OCD, through the EOC, may deploy liaison personnel to any or all of the following:

1. Agency-specific command posts and incident command posts (ICP);
2. The Guam Emergency Operations Center (EOC); and
3. The Joint Information Center (JIC).

C. MOBILIZATION OF OTHER GOVERNMENT OF GUAM RESOURCES

Other Government of Guam resources requested by the Unified Command through the emergency operations facilities will be mobilized through the EOC and/or the

appropriate Emergency Support Function (ESF) in accordance with the provisions of the Guam Comprehensive Emergency Management Plan.

D. LEAD GOVERNMENT OF GUAM AGENCIES FOR PANDEMIC RESPONSE

1. For all public health and medical response related requirements – ESF 8/ the Department of Public Health and Social Services (DPHSS) and/or the Guam Memorial Hospital Authority (GMHA);
2. For all other Government of Guam response and support requirements to the medical effort – GHS/OCD.

E. DEACTIVATION OF THE GOVERNMENT OF GUAM RESPONSE

Deactivation of the Government of Guam response and demobilization of deployed personnel will be at the direction of the EOC. Deactivation of specific assets, operations, or facilities may be staged as conditions warrant.

IV. REIMBURSEMENT/FINANCE

The current policy and procedures as outlined in the Comprehensive Emergency Management Plan will be followed.

CHAPTER 4: ROLES AND RESPONSIBILITIES

I. GENERAL

The intent of this chapter is to define the responsibilities of the ESFs, and GHS/OCD under the Guam Comprehensive Emergency Management Plan (GUAM CEMP) as they specifically relate to management of a pandemic event and especially its consequences. Other responsibilities not unique to this specific hazard and its response are addressed pursuant to the Guam CEMP and its implementing procedures. The effectiveness of the response to such an event will be contingent on the fulfillment of program and operational responsibilities of all involved organizations.

II. GOVERNMENT OF GUAM ROLES AND RESPONSIBILITIES

The Government of Guam has the principal responsibilities for development, implementation, and maintenance of a coordinated plan for a comprehensive pandemic response. This section describes responsibilities either by the individual agency or by the applicable ESF. The lead Government of Guam agency for each ESF has the responsibility to coordinate the required actions of all agencies and organizations involved within that ESF.

A. GUAM HOMELAND SECURITY / OFFICE OF CIVIL DEFENSE (GHS/OCD)

The GHS/OCD will have the following responsibilities, with respect to operations of this Annex:

1. As the lead agency for sustainment, service and support operations for the pandemic response plan, coordinates all non-medical and logistical support activities for the Government of Guam;
2. Develops and maintains this Annex and assure its consistency with the Guam CEMP;
3. Prepares and maintains planning guidance for ESF agencies on the development of procedures needed for implementation of this Annex;
4. Prepares and distributes guidance and review criteria for development of consistent COOP plans and any corresponding implementing procedures;
5. Prepares and maintains procedures for the DPHSS and GMHA regarding notifications for an impending or occurring outbreak of a known or suspected phase 5 or 6 pathogen, and subsequent activation of the EOC in support of medical and public health operations;
6. Prepares, maintains and implements the Continuity of Government (COG) Plan;

7. Coordinates with ESF 8 on the procurement and administration of required vaccines for Government of Guam personnel assigned to the EOC, first responders, as well as for any essential positions identified in agency COOPs.
8. Activates the EOC upon a recommendation from ESF 8 in response to an impending or known pathogenic outbreak, and authorization from the Office of the Governor.
9. Coordinates any requests for federal assistance relative to the medical or sustainment, service and support operations of the pandemic response.

B. ALL EOC ESF TEAM AGENCIES AND ORGANIZATIONS

All designated Government of Guam ESF primary agencies or organizations have the following responsibilities for implementation of this Annex:

1. Ensures development of any specialized procedures necessary to implement any applicable responsibilities of this Annex;
2. Evaluates the applicability and consistency of existing procedures under the Guam CEMP to the types of unique operations required of the ESF during the response to a pandemic event;
3. Identifies the type and number of resources likely to be needed by the ESF to support response to a pandemic event;
4. Coordinates training support as needed by government personnel for the procedures developed for implementation of this Annex and the related responsibilities of the ESFs;
5. Supports the continuous process to define the Government of Guam and local private sector capabilities to respond to such an incident;
6. Prepares, exercises and, if necessary, implements a COOP to sustain activities and fulfill the statutory requirements of the agency during the pandemic event;
7. Supports GHS/OCD in the maintenance and updating of this Annex and all corresponding implementing procedures; and
8. Provides regular personnel and status information to the EOC during the course of the pandemic according to agreed upon intervals; and

9. As requested or required by this annex, provides agency representation in the EOC to assume the duties of the emergency support functions (ESF) ESFs in support of pandemic response operations.
10. Coordinates with the EOC and ESF 8 regarding the inoculation of any key personnel identified in the agency's COOP.

C. ALL LEAD AGENCIES AND ORGANIZATIONS

All designated Government of Guam ESF primary agencies or organizations have the following responsibilities for implementation of this Annex:

1. Ensure development of any specialized procedures necessary to implement any applicable responsibilities of this Annex;
2. Evaluate the applicability and consistency of existing procedures under the Guam CEMP to the types of unique operations required of the ESF during the response to a pandemic outbreak;
3. Identify the type and number of resources likely to be needed by the ESF to support a pandemic response;
4. Coordinate training support as needed by government personnel for the procedures developed for implementation of this Annex and the related responsibilities of the ESFs;
5. Support the Government of Guam's continuous process to assess the territory's vulnerabilities to a pandemic event and to continuously define the public agency and private sector capabilities to respond to such an incident; and
6. Support GHS/OCD in the maintenance and updating of this Annex and all corresponding implementing procedures.

D. SUPPORT AGENCIES RESPONSIBILITIES

The responsibilities for the ESFs support agencies are as follows:

1. ESF 1 - Transportation
 - a. Coordinates the procurement of trucks, reefers and other types of transportation needed to respond to a pandemic emergency;
 - b. Provides stand-by contractor support for any transportation related requests relative to the pandemic response effort;

- c. Coordinates activities between the EOC and the operations at the A.B. Won Pat International Airport, relative to foreign flight/visitor processing, access management or detention; and
 - d. Provides EOC coordination with operations at the Port Facility relative to health related issues for arriving or departing shipments.
- 2. ESF 3 - Public Works and Engineering
 - a. As required, supports the assessment of the water and sewage treatment services relative to public health and welfare issues;
 - b. As required coordinates the procurement of any emergency generators or other key equipment relative to supporting medical operations and activities;
 - c. Ensures that key infrastructure and equipment is maintained and operating in support of normal and or exigent requirements; and
 - d. As required advises or manages any debris management issues associated with the pandemic response.
- 3. ESF 5 – Emergency Management
 - a. Collects situational and operational status information regarding the response so that a common operating picture is maintained among all Government of Guam agencies and response related organizations;
 - b. Monitors the personnel and status situation at all Government of Guam agencies to ensure that required government services and functions are still provided;
 - c. If staffing and other pandemic related shortcomings are anticipated or identified, initiates corrective actions to address the deficits; and
 - d. Develops and implements programs and procedures for the exchange of relevant operational information with appropriate federal counterparts.
- 4. ESF 6 - Mass Care, Housing and Human Services
 - a. Develops and implements plans or procedures to provide human needs assistance and services to quarantined populations and other populations displaced or impacted by the pandemic; and
 - b. Coordinates with the tourist industry to represent the needs of visitors and the tourism industry during the pandemic response.

5. ESF 7 - Resource Support
 - a. Coordinates the continuity of operations for administrative, finance and personnel issues and activities during a pandemic event; and
 - b. Prepares and executes procedures to obtain and deploy specialized resources needed for pandemic response from sources within and outside of Guam.

6. ESF 8 - Public Health and Medical Services
 - a. Assumes the role as the primary agencies for any medical related activities associated with this overall pandemic annex of the CEMP;
 - b. Ensures development of specialized procedures necessary to implement and manage its lead role for this type of operation;
 - c. Evaluates the applicability and consistency of existing procedures under the Guam CEMP to the types of unique operations required of the ESF during the response to a pandemic event;
 - d. Coordinates support for any specialized medical and public health training needed by response agencies and personnel in fulfilling their roles and responsibilities as described in this Annex;
 - e. Coordinates any requests for logistical support to the medical operation and related activities through the EOC during the course of the pandemic response;
 - f. Supports the Government of Guam's continuous process to assess the territory's vulnerabilities to a pandemic outbreak and to continuously define the public agency and private sector capabilities to respond to such an event;
 - g. Provides a liaison to the EOC and maintain continuous communications between it and the Public Health Incident Command Center (PHICC) at DPHSS;
 - h. Coordinates with the EOC on the procurement and administration of required vaccines for Government of Guam personnel assigned to the EOC, first responders, as well as for any essential positions identified in agency COOPs;
 - i. Provides a public affairs/information representative (PAO/PIO) once the Joint Information Center (JIC) is activated for this type of an operation.

7. ESF 11 – Agriculture and Natural Resources
 - a. Monitors the territory’s animal husbandry interests to ensure that zoonotic transmission of a pandemic disease does not occur or is minimized;
 - b. Develops response criteria, policies and procedures for confiscation, condemnation, and disposal of food and livestock infected by a potentially virulent virus or organism associated with a potential pandemic threat;
 - c. Coordinates mass animal care as required for quarantined households, and others persons displaced by pandemic response operations.

8. ESF 13 – Public Safety and Security
 - a. Assesses law enforcement response capabilities to continue sustaining normal law enforcement service;
 - b. Coordinates, through the EOC, the activation and deployment of other uniformed law enforcement entities to supplement any staffing deficits caused by the pandemic event;
 - c. Coordinates with ESF 8 and the EOC regarding any security and access control requirements relative to efforts to administer vaccines or dispense medicines to the general public, including the possible protection of the any bulk deliveries from the Strategic National Stockpile;
 - d. Coordinates with ESF 8 and the EOC regarding any security and access control requirements relative to quarantined areas and medically isolated populations;
 - e. Coordinates requests for deployment of the GUNG and other law enforcement assets (GIAA, GPA, etc.) for security missions;
 - f. Coordinates mutual aid and deployment relative to law enforcement and security augmentation missions; and
 - g. Initiates and manages any directed physical evacuation of populations for infection control or other medically related reasons, as warranted by the incident, or situation.

8. ESF 15 – External Affairs

- a. Prepares and maintains public information materials and background briefings for the media on the operations and capabilities of the responding medical community and Government of Guam to respond to the pandemic;
 - b. Develops procedures to rapidly prepare and release to the public authoritative information on pandemic safety and health measures related to containing and minimizing the effects of the disease; and
 - c. Coordinates with ESF 8 and the EOC on any public notices relative to inoculations and other medical measures required by the pandemic event.
9. ESF 16 - Military Support to Civil Authorities
- a. Supports assessment of the vulnerability of National Guard / US military facilities and operations to the impacts of a pandemic outbreak;
 - b. Defines criteria for team deployment and minimum response times to locations throughout Guam
 - c. Coordinate with ESF 13 for any security and law and order related requirements; and
 - d. As needed, coordinate with ESF 13 and deploy the Quick Reaction Force (QRF) to provide security and access control to augment law enforcement in maintaining law and order.

CHAPTER 5: TRAINING

I. GENERAL

This chapter defines the territory's training programs needed to implement this Annex. Response to a pandemic event will require both routine and specialized emergency operations, often in an area potentially contaminated by the disease. Therefore, it is vitally important to assure that response personnel are adequately trained to fulfill their responsibilities without medical treatment activities, or endangering their safety.

II. TRAINING PROGRAM DEVELOPMENT AND IMPLEMENTATION

A. DEVELOPMENT AND IMPLEMENTATION CONCEPTS

The training program for management of pandemic incidents is to accomplish the following objectives:

1. Provide medical and disease awareness, response-level training to Government of Guam and supporting private sector personnel;
2. Incorporate the operational concepts utilized in this Annex; and
3. Coordinate with other emergency preparedness training programs currently offered or coordinated by the GHS/OCD.

B. TRAINING PROGRAM DIRECTION AND MANAGEMENT

1. ESF 8 and GHS/OCD will serve as the Government of Guam coordinator of the training programs needed to support for consequence management and the GPD will serve as the coordinator for crisis management. In this role, GHS/OCD is responsible for the following actions:
 - a. Cooperate with other Government of Guam agencies in establishing criteria and performance standards for training all pertinent personnel in personal disease protection and safety;
 - b. Review all applicable training programs for their relevance to the management of a pandemic event; and
 - c. Make available any pandemic/medical preparedness and response training programs for all Government of Guam agencies;
2. Under the coordination of the GHS/OCD, the following agencies are responsible for the indicated components of the Government of Guam pandemic preparedness and response-training program:

- a. ESF 8 is responsible for direction and coordination of the Government of Guam and local training curricula for public health, disease and other medically related operations; and
- b. The Guam National Guard is responsible for direction and coordination of the training of guardsmen and the QRF that may be deployed for security or other augmentation purposes.