

- | |
|---|
| 2. Ethical issues will begin to surface as decisions are made about vaccine, antiviral medications, and medical interventions, deceased |
|---|

Figure 4 Assumptions during Novel influenza virus with sustained human-to-human transmission

6.0 Responsibilities

6.1. State Government

General

1. Develop a statewide influenza preparedness and response plan.
2. Include public and private, health and non-health, agencies in influenza pandemic planning.
3. Integrate public and private, health and non-health capabilities and requirements into the influenza pandemic plan.
4. Establish state pharmaceutical and pandemic health support stockpiles with distribution chains able to augment existing public and private logistical chains.
5. Develop a comprehensive pre-pandemic crisis communication and public information plan for statewide distribution and implementation.
6. Develop Continuity of Government plans that address a pandemic situation.

Office of the Governor

1. Direct and ensure the development, completion and implementation of the New Jersey State Pandemic Influenza Plan.
2. Determine essential state governmental functions during periods of reduced staffing and pandemic outbreak.
3. Determine state government workforce policies to include leave and pay, alternate worksite authorizations, mandatory sick leave, and decisions to implement social distancing in the governmental workplace.
4. Authorize statewide social distancing policies to include cessation of public gathering and school closure.
5. Approve for activation of select New Jersey Pandemic Influenza Plan components.
6. Convene Cabinet Level meetings as required.
7. Approve of essential service priorities.
8. Approve of mass prophylaxis, vaccination, and treatment priorities.
9. Engage professional and labor organizations in advance of a pandemic to coordinate acceptable and feasible response activities.

New Jersey Office of Homeland Security Preparedness (OHSP)

1. Coordinate state agency efforts in the development of a New Jersey State Pandemic Influenza Plan.

2. Coordinate plan development with the public and private sector.
3. Assure development of COOP/COG and encourage us of the plan with the public sectors who deliver essential services.
4. Assuring the development and completion of the New Jersey State Pandemic Influenza Plan.
5. Deliver of training plans in support of this Plan.
6. Coordinate the development and dissemination of public information for all levels of government, the private sector and the residents of the State of New Jersey, and through NJDHSS, coordinate the development and dissemination of public health information.
7. Direct State exercise of the Plan and After Action Review.
8. Convene the Domestic Security Preparedness Task Force as required.
9. Coordinate the development of recommended essential services priorities for presentation to the Office of the Governor.
10. Coordinate the development of recommended priorities for mass prophylaxis and treatment prior and during an influenza pandemic for recommendation to the Office of the Governor.

New Jersey State Police (NJSP)

New Jersey Office of Emergency Management (OEM)

1. Incorporate this Plan into the State's Emergency Operations Plan.
2. Ensure periodic Plan review and TTX.
3. Direct and implement the Plan.
4. Ensure the Plan is consistent with New Jersey Emergency Management protocols and harmonious with expected federal response.
5. Coordinate all Emergency Response activities in the name of the Governor.

New Jersey Department of Health and Senior Services

1. Serve as the Lead Agency for Pandemic Influenza preparedness and response.
2. Provide Subject Matter Expertise (SME) during plan development and implementation.
3. Ensure the accuracy of medical and health information related to pandemic influenza as guided by CDC.
4. Coordinate public health department activities.
5. Designate and instruct LINCIS authorities.
6. Serve as Liaison with the US Department of Health and Human Services during planning and response activities.
7. Develop a statewide mass vaccination plan.
8. Maintain a State Strategic Stockpile of pharmaceuticals, antivirals, and other medical supplies.

9. Coordinate statewide preparedness and response activities with OHSP and OEM.
10. Develop an operations plan for the health response to an Influenza Pandemic (Annex 1).
11. Convene a panel to provide recommendations to the Commissioner of Health and Senior Services on the ethical issues surrounding mass prophylaxis and treatment issues as related to an influenza pandemic.
12. Provide pharmaceutical and non-pharmaceutical intervention recommendations to the Office of the Governor.
13. Coordinate the provision of healthcare services.
14. Provide health planning and operational guidance to state agencies and the private sector prior to and during a pandemic.
15. Develop and disseminate the public information for all levels of government, the private sector and the residents of New Jersey.

Commissioner, New Jersey Department of Health and Senior Services

State Epidemiologist

1. Provide consultation to LHDs and healthcare providers, as needed, on suspect novel influenza cases including those suspected to be attributed to animal to human transmitted influenza.
2. Investigate influenza outbreaks in conjunction with LHDs.
3. Work with LHDs and State Laboratories to coordinate influenza testing.
4. Continue work with LHDs to recruit medical providers to create and participate in a New Jersey influenza physician network.
5. Develop materials and help educate healthcare providers about novel and pandemic influenza.
6. Develop protocols for using surge capacity epidemiology staff for surveillance activities.
7. Work with external partners (USHHS, USDA) to remain informed of coordination efforts related to non- human animal disease control.
8. Develop materials and help educate healthcare providers, veterinarians and animal disease responders about pandemic influenza strains.
9. Aggregate and interpret animal disease exposure case-report forms to determine need for modified infection control guidelines.
10. Identify and enumerate communication groups, and communicate regularly with key response partners.
11. Monitor local and state and national syndromic surveillance systems for respiratory and influenza like illness.
12. Monitor mortality surveillance trends, as reported by NJ LINCS agencies forwarding data from 21 counties.
13. Determine and report on a weekly basis the state influenza-activity level to the CDC and disseminate to LINCS agencies and LHDs.

14. Implement system enhancements developed for electronically reporting laboratory influenza surveillance data to LHDs.
15. Maintain updated pandemic influenza screening protocol and screening criteria on State Health Department website.
16. Implement Metropolitan Medical Response System (MMRS) Reporting System, and analyze excess deaths attributable to pneumonia and influenza.
17. Continue to provide updated case definition, protocols or algorithms for case findings, inclusive of clinical data and travel or exposure history.
18. Enhance surveillance to include monitoring of following groups:
 - Perform outreach/monitoring of persons involved in culling birds or animals infected with influenza (single cases and/or clusters).
 - Other persons exposed to birds or animals infected with influenza, e.g., farmers and veterinarians (single cases and/or clusters). Work with NJDA and NJDEP regarding poultry and wild bird population issues.
19. Develop protocols for using surge capacity epidemiology staff for surveillance activities.
20. Work with vaccine preventable diseases to establish system for:
 - Monitor vaccine usage for routine and pandemic strain influenza vaccines, if available.
 - Monitoring adverse vaccine events attributed to pandemic strain vaccine, if available.
 - Collect data for later use in calculation of vaccine effectiveness for the pandemic strain vaccine.
 - Monitoring pneumococcal vaccine use and adverse events associated with its use, if this vaccine is available and being used.
21. Establish system for monitoring antiviral use and adverse events that may be attributed to antiviral use, if applicable.
22. Establish system for monitoring hospital admissions for suspected or confirmed cases of pandemic strain influenza, available for use by LHDs staff.
23. Establish criteria to indicate when to move from one level of surveillance to higher or lower level, and indicators for movement from case-based control measures to community-based control measures.
24. Establish system for revising pandemic case definition, given availability of additional clinical information (WHO will recommend global case definitions according to different global phases).
25. Consider how recovered cases, presumably immune to new virus, can be identified by occupation (e.g., healthcare workers or workers in designated essential services), to facilitate development of resource of workers presumed to be immune.
26. Establish mechanism for data aggregation and interpretation for decision-making.
27. Facilitate dissemination of pandemic influenza surveillance reports to LHDs, partner agencies and public.

28. Ensure mechanism for daily reporting of cases to national authorities, including information on possible source of infection.

Senior Assistant Commissioner for Health Infrastructure Preparedness and Emergency Response

As designated by the Commissioner, DHSS and the New Jersey State Deputy Director for Emergency Management, and in coordination with the NJSP Office of Emergency Management, direct the State operational response to an Influenza Pandemic.

New Jersey Department of Agriculture

1. Serve as the Lead Agency for Avian Influenza preparedness and response as per the NJDA Avian Influenza Plan.
2. Provide Subject Matter Expertise (SME) during Avian Influenza plan development and implementation.
3. Ensure the accuracy of veterinary information as related to novel influenza viruses of animal origin, in consultation with NJDHSS and DEP.
4. Liaise with the US Department of Agriculture, the NJ Department of Environmental Protection (DEP) and NJDHSS during planning and response activities.
5. Coordinate Avian Influenza statewide preparedness and response activities with OHSP and OEM.

New Jersey Department of Human Services

1. Provide command and control of Emergency Support Function #6, Mass Care, Housing and Human Service.
2. Coordinate Non-Governmental Organization support activities for ESF#6.

Division of Mental Health Services

1. Coordinate mental health services.
2. Activate phase specific crisis counseling services as outlined in the NJDHSS influenza pandemic flu plan.
3. Provide crisis counseling services and psychological education for individuals, groups, and the community.
4. Provide Subject Matter Expertise to State PIO for communications to public through press releases, brochures, web based forums and hotlines.

New Jersey Department of Environmental Protection

1. Support the Department of Agriculture as lead State agency for Avian Influenza contingency planning for packaging, containerization, transport, disposal and decontamination associated with depopulated birds.
2. Assist the Department of Agriculture in bird surveillance and testing for Avian Influenza of wild bird populations.

3. Store and dispatch stockpiled Personal Protective Equipment (PPE) in response to Avian Influenza outbreaks through the DEP Warehouse.
4. Assist the Departments of Health and Senior Services and Agriculture as needed as the State's lead emergency response agency.
5. Assist with coordination of the Mass Fatality Appendix to the State Emergency Operations Plan in conjunction with the Department of Health and Senior Services and the State Medical Examiner.
6. Serve in a coordinating roll to enlist the support of County Environmental Health Act agencies in response to an Avian Influenza or Pandemic Flu outbreak.
7. Support the Departments of Health and Senior Services and Agriculture in managing emergency response calls through the DEP Communications Center Hotline.
8. Provide Subject Matter Expertise (SME) on environmental protection matters.
9. Maintain communications and liaison relationships with the Chemical, Petroleum, Nuclear, Water, Wastewater, Dams, Pharmaceutical and Biotechnology infrastructure sectors during planning and response.

New Jersey Department of Military and Veterans Affairs

1. Assist in the Receipt, Staging and Storage of the Strategic National Stockpile at the USP&FO Warehouse.
2. Provide assistance to law enforcement personnel in providing security at Points of Dispensing (PODs).
3. Provide assistance to law enforcement personnel by providing Military support to Civil Disturbances (MACDIS).
4. Employ force protection measures to inoculate soldiers and their families.
5. ESF#1: Transportation – Assist civilian authorities with public safety and security; move supplies and equipment, vehicles and other hazards to allow passage of emergency, postal and defense vehicles.
6. ESF#2: Communications – Support the NJSP OEM with communications personnel and equipment to augment existing communications networks and/or establish secondary/redundant systems during response and recovery of disasters or other emergency situations if required
7. ESF#3: Public Works and Engineering –emergency power generation; supply & transportation of potable water
8. ESF#5: Resource and Recovery Planning –emergency power generation; supply and transportation of potable water; food service support; search and rescue; assist law enforcement agencies with traffic control and security; and transportation.
9. ESF #9: Law enforcement – Assist law enforcement personnel with staff and equipment to aid with maintaining law and public order and provide response services following a catastrophic event or other civil emergency or natural disaster. Assist with traffic control; area, disaster site or facility security, infrastructure security, Military Assistance for Civil

Disturbances (MACDIS); transportation of law enforcement personnel; and medical or disaster victim evacuation.

10. ESF#10: Support the NJ Department of Environmental Protection with personnel and equipment to assist with cleanup operations, traffic control, transportation of potable water, evacuation and shelter support and liaison with federal military organizations.
11. ESF#11: Support the NJ Department of Agriculture with personnel and equipment to assist with potential quarantine missions of infected poultry farms with the Avian Influenza.
12. Develop MOA with NJDHSS to add National Guard personnel to the inoculation priority list and coordination for the care of military families located on NJ military facilities.
13. When requested, assist NJDHSS in delivery of vaccines and antivirals to PODs and other locations for administration to priority groups.
14. Identify, procure, pre-position and stockpile personal protective equipment (rubber gloves, N95 Surgical face masks, gowns, and personal hygiene supplies).
15. Identify, procure, pre-position and stockpile approved vaccines and approved antiviral drugs for distribution/administration to Guards members and their families.
16. Provide Mass Burial Support as required at the DMAVA William C. Doyle Cemetery.

Division of Fire Safety

1. Assist county fire coordinators in developing response and contingency plans when the fire service is affected by the pandemic.
2. Collect weekly (at a minimum) available staffing reports and analyze this information to ensure adequate fire protection is available.
3. Coordinate with other state agencies to provide for inoculation of firefighters and their families.
4. Develop procedures for responding to quarantined locations and identify actions to be taken in the event of an emergency.
5. Provide regional briefings to the fire service on pandemic influenza planning.

New Jersey Department of Education

Policy Process for School Closure and the Communication Plan for this Decision

One-page summary of the status of current State activities with respect to this priority, including description of recent accomplishments

The New Jersey Department of Education has taken a proactive approach in attempting to plan and prepare for a potential pandemic. The department has implemented three key strategies in preparing public and nonpublic schools for communicating and responding before, during and after a pandemic. First, officials from the department met with all 21 County Superintendents of Schools and the Nonpublic Advisory Council to discuss and disseminated the department's

emergency communication plan. Second, the department created and disseminated an emergency communication survey to collect information on county and local emergency communication procedures across the state. Third, the department hosted several regional trainings concentrating on crisis and emergency management planning. A key module of these trainings, *Preparing Schools for a Pandemic*, included statewide, county and local communication protocols and procedures. During this module, chief school administrators, charter school lead persons and nonpublic school administrators were reminded of their responsibilities for closing and opening schools during a pandemic. The training stressed the importance for school administrators to make these decisions in consultation with their county superintendent, local health department and office of emergency management.

Pertinent part(s) of the State’s operational plan for pandemic influenza preparedness. This portion of the plan should address the following item(s):

Criteria determining when/if school closure will occur;

- Schools will be closed if ordered by the Governor.
- If the Governor has not ordered school closures, but the New Jersey Pandemic Influenza Response Task Force (PIRT) or the Department of Health and Senior Services (DHSS) recommends closure, the Commissioner of Education will convene the department’s essential staff (see below) to assess and make recommendations about the needed response. The department in consultation with the governor’s office, PIRT and DHSS will determine if all or some school districts should be directed to close and implement their continuity plans.

List of individuals with the authorities, roles and responsibilities to officially declare schools closed and authorize their reopening; and,

- The Governor may order the Commissioner of Education to close some or all schools.
- The Commissioner of Education will convene the department’s essential staff to assess the situation and make recommendations about the needed response to the Governor. According to the Department of Education’s Governmental Operations Continuity Plan, essential staff include:
 - Chief of Staff
 - Assistant Commissioner, Division of Field Services
 - Assistant Commissioner, Division of Student Services
 - Special Assistant to the Commissioner
 - Director of Administration & Human Resources
 - Director of Information Technology
 - Director of Public Information
 - Manager of Criminal History Review
 - Department of Education Emergency Management Coordinator
- Districts and schools may also be contacted by emergency responders dealing with immediate health related threats. Agencies making such contact include, but are not limited to, local police, State Police, the Office of Emergency Management, and county or local

health departments. CSA/CSLP responds to these contacts consistent with their safety and security plans.

- In the event that the State and/or department has not made a decision on school closures, chief school administrators, charter school lead persons and nonpublic school administrators have the authority to close schools. However, it is expected that this decision will be made in consultation with their County Superintendent of Schools, local Health Department and Office of Emergency Management.

Policy and action steps regarding stakeholder notification prior to and during an influenza pandemic that local jurisdictions might incorporate into their own plans.

- In the event that district/school closures are necessary, the Commissioner of Education will implement the following communication plan to notify the appropriate personnel to begin closure procedures.

NJDOE Pandemic Communication Protocol:

1. The department is ordered by the Governor to close some or all schools and districts.
 2. The department informs the essential staff and begins to implement its business continuity plan if the closure affects NJDOE services.
 3. The department notifies county superintendents (CSs) by e-mail and/or phone of the emergency and directs them to notify chief school administrators (CSAs), charter school lead persons (CSLPs) and nonpublic school administrators (NPSAs) of the schools and districts identified for closure. In consultation with the Governor's office and the Office of Emergency Management announcements will be made via television, radio and email.
 4. County Superintendents inform CSAs/CSLPs/NPSAs of the emergency using their emergency notification system and directs them to close the schools and districts targeted for closure.
 5. CSAs/CSLPs/NPSAs follow the districts'/schools' communication procedures closing schools and districts targeted for closure.
 6. Local districts and schools begin their normal process of closing schools and informing students, parents and the community of the closures and other information about the situation.
 7. CSAs/CSLPs/NPSAs begin to implement their continuity of educational services plan (5, 10, 15, 30 day and long term).
 8. NJDOE awaits word from the Governor's office of when schools may be reopened.
- Throughout a pandemic, the State and NJDOE will use their websites, email, phone, radio, television and the emergency broadcast system to update the school community on the status of the pandemic and school closures.

- The department has emphasized with school districts the importance of communicating during a critical incident. In preparation for a potential pandemic, local school districts have been advised to implement three key phases of communication which includes pre-event, event and post-event. Listed below is guidance for these phases.

Local Pandemic Communication Protocol:

Recognizing that all districts/schools have varying resources, the NJDOE supports local planning and communication systems. Some districts have sophisticated reverse 911 systems to communicate in an emergency and others use radio announcements. In all cases, the school staff and community should be informed about the communication system.

The NJDOE has advised districts/schools and provided training and guidance on the following recommendations:

- Prior to a pandemic:
 - Schools/districts should assess, update and test their plan for communication and dissemination of information to staff, students, families and key stakeholders.
 - A lead spokesperson for Pandemic information should be identified.
 - Educational material and resources on the pandemic should be identified that can be distributed to staff, students and families.
 - Communication templates should be developed (i.e. letters to parents, ‘dark pages’ for website, template script for phone lines, etc.).
 - The schools’/districts’ pandemic plan should be shared with staff and families.
 - Staff and families should be provided with a “Disaster Supplies Kit” Checklist / Family Emergency Communication Plan document to prepare them for a pandemic.
 - Communication within schools should:
 - Emphasize preventing the spread of communicable diseases.
 - Stress infection control and post guidance (hand hygiene, ‘respiratory etiquette’, student spacing, etc.) throughout the school building.
 - Support staff and students’ decisions to stay home, if they are sick.
- During a pandemic:
 - Address the current status of the pandemic.
 - Schools/districts should take guidance from NJDHSS, OHSP, NJDOE via County or Local Health Dept. and/or County Superintendent.
 - Keep records of the current absentee rates (internally and externally).
 - Share with key constituents the following information:
 - Infection control policies and procedures.
 - Information about the disease and how to care for ill family members.
 - Guidance about community mental health and social services resources.
 - Information on the current status of the pandemic must be updated regularly.
 - Information must be culturally and literacy appropriate for community.
- In-between waves or after a pandemic:
 - Stress the importance of resuming ‘new normal’ activities.
 - Emphasize the mental health of staff, students, families and the community.

- Continue to communication with staff, students, parents and the community the status of the pandemic and stress that is it safe to return to schools.
- Evaluate the pandemic plan and procedures to prepare for a second/third wave.
- Provide expertise to the State EOC on incorporation of educational facilities and personnel into the Statewide Mass Care plans and procedures.
- Participate with the volunteer service organizations in ongoing programs to identify and certify educational facilities as Mass Care facilities.
- Coordinate with the NJOEM, the N.J. Department of Agriculture, county and municipal schools, and volunteer service agencies on matters pertaining to the use of school emergency inventories of Federally-donated surplus food commodities, to be deployed in mass feeding operations.
- Coordinate school bus transportation in the event of a evacuation.

LINCS Agencies have instituted a surveillance mechanism for reporting a substantial increase in absenteeism among students and faculty.

Each school should identify a chain of command and establish back ups to include an appropriate spokesperson including contact information.

Consider and prepare for how/if the school may function with 30% of the workforce absent.

Consider establishing policies and procedures for implementing containment measures (social distancing, canceling sports events and other mass gatherings).

Consider developing alternative procedures to assure continuity of instruction, distance learning methods.

School cleaning and personal hygiene education.

Educating Students/Staff/Parents to help to eliminate concern.

6.2. Hospitals

Inter-pandemic and Pandemic Alert Responsibilities

- Prepare to treat significantly increased patient numbers during a pandemic influenza.
- Coordinate with NJDHSS during inter-pandemic periods to expand their capabilities for treatment of patients through their internal surge plans and the activation of the EOC.

Pandemic Responsibilities

- Activate internal surge capacity plans.
- Treat patients in existing facilities within capabilities.
- Coordinate with HCC and long-term care facilities to move non-affected patients to long-term care facilities.

- Coordinate with HCC to activate and operate MCC's.
- Vaccinate staff and their families.
- Provide appropriate personal protective equipment (PPE) to personnel.

Individual New Jersey State Agencies

1. Serve as Supporting Agencies to NJ Departments of Agriculture, Health and Senior Services for New Jersey's Avian Influenza and Influenza Pandemic Plans as noted in this document.
2. Serve as lead and supporting agencies for ESFs and ensuring update of agency ESF, COOP and COG plans as they relate to pandemic and avian influenza planning and response.
3. Serve as Supporting Agencies for OHSP and DSPTF in the development, planning, training and exercise of the Plan.
4. Serve as Supporting Agencies in the State Emergency Operations Center during a State response to a novel influenza virus.
5. Maintain communications and liaison relationships with associated infrastructure sectors during planning and response.
6. Provide sector Subject Matter Expertise (SME) as appropriate.
7. Develop agency Influenza Pandemic response plans in support of this document, and training and exercising to these plans.
8. Implement actions required under the State EOP in response to conditions created by the pandemic.
9. Establish Alternate Worksite Locations and Social Contact guidance and procedures.
10. Prepare for mental health issues associated with mass morbidity and mortality.

6.3. Private Sector/Critical Infrastructure:

As a key element in the preparedness and response to an influenza pandemic, the private sector must be included in this plan and their effort coordinated with state operations. Supported by the state, key responsibilities of the private sector include:

1. Establish workplace infection control protocols.
2. Establish continuity of operation plans and contingency systems to maintain delivery of essential goods and services during times of significant and sustained worker absenteeism.
3. Develop information packages to assist workers in dealing with the environment of a pandemic.
4. Establish partnerships with like sector members for mutual support and maintenance of essential services during a pandemic.
5. Establish Employee Flu Awareness and Prevention Programs.

6. Define Personal Protection Equipment (PPE) requirements based on mission and training
7. Engage professional and labor organizations in advance to coordinate acceptable and feasible response activities.
8. Establish of Alternate Worksite Locations and Social Contact guidance and procedures.
9. Prepare for mental health issues associated with mass morbidity and mortality.

Components of a Private Sector/Critical Infrastructure plan should include:

1. Definition of Essential Services Provided
2. Identification of first, second and third tier Essential Services Required
3. Reduced Staffing Plans
4. Contact Phone Trees
5. Social Distancing Plans (workplace separations, shutdown of common areas etc)
6. Infection Control Policies and Procedures
7. Employee Support (pay, modifications to vacation/sick leave, family support, mental health support)

6.4. Critical Infrastructure Inter-dependencies

Section 6.3 focuses on the individual organization COOP/COG and pandemic specific planning and will play a significant role in ensuring the safety and resiliency of New Jersey during a pandemic. Of equal significance is the coordination of effort and address of inter-dependencies within and across sectors and communities. Planning must compensate for a pandemic's effect on first tier resources (defined as those resources directly required for a process) and second and third tier (defined as those resources that enable first tier processes). This plan identifies four areas of focus in support of inter-dependency continuity of operations: governmental, regional, business sector, and community.

6.4.1. Inter-Government: (municipal, county and State, Federal). The New Jersey Office of Emergency Management is responsible for ensuring the linkage of governmental operations and requirements. During a Pandemic, DHSS, as the lead agency for the Pandemic response operation will, in coordination with OEM, link municipal, county, state and federal agencies through: local Offices of Emergency Management, NJ State Emergency Operations Center (EOC) representatives, Joint Field Office (JFO) and Joint Information Center (JIC) liaisons, and state official's meetings.

6.4.2. Regional: Inter-state governmental linkages including coordination between New Jersey, New York State, New York City, Pennsylvania, Philadelphia and Regional Authorities (Port Authority of New York and New Jersey and the South Jersey Port) are through direct agency-to-agency contact with overarching coordination through the State EOC. During a Pandemic, DHSS is responsible for direct interstate and regional health system efforts and

responsible for ensuring these efforts are coordinated with State EOC operations. When federal agencies are coordinating regional efforts, NJ JFO and JIC liaisons are responsible for linkages to the State EOC.

6.4.3. Business Interdependencies of regional and state critical infrastructure sectors are the responsibility of Infrastructure Advisory Committee through state sector lead agencies.

6.5. Critical Infrastructure Status of Operations

6.5.1. Critical Infrastructure Status Matrix (figure 3)

6.5.1.1. Each Critical Infrastructure Sector shall establish and maintain a matrix of sector key components and functions.

6.5.1.2. OEM will display the Status Matrix on the State EOC information board during pandemic operations.

6.5.1.3. State agency sector leads are responsible for updating status of the Matrix.

6.5.1.4. The Status Matrix will be a chart with color coded circles in each chart cell.

6.5.1.5. Colored circles will indicate the status of the sector component of function with:













Health Sector	Facilities	Staff	Transportation	Operations
Hospitals				
EMS				
Mass prophylaxis				

Figure 5 Example Matrixes for Health Sector

- Green = fully functional (70-100%),
- Yellow = partially functional (40-70%),
- Red = marginally functional (0-40%)
- Black= non-functional.