



Occupational Safety and Health Support Annex

I. Introduction

A. Purpose

This annex provides guidelines to minimize the risk of injury or illness to federally deployed personnel who are involved in disaster response, recovery, or mitigation operations.

B. Scope

1. This annex applies to all personnel, regardless of agency affiliation, who are deployed to the field or any other location in response to or in anticipation of either a Federal disaster declaration or a Federal disaster exercise, whether on or off duty, and whether on or off federally controlled premises. For the purposes of this annex, “federally deployed personnel” means full-time and part-time Federal employees, Disaster Assistance Employees, reservists, local hires, and any other federally controlled personnel, whether staff, managers, or executives, who are working in response, recovery, or mitigation in support of a federally declared disaster or Federal disaster exercise. These personnel may be deployed at disaster sites, at interim staging points, or in support functions at headquarters (HQ) (Emergency Support Team), regional offices (Regional Support Team), or other locations. In some cases, deployed personnel will include employees and volunteers with recognized voluntary organizations who have been deployed under the Federal Response Plan (FRP).
2. The goal of this annex is to ensure deployed personnel work and reside in as safe and healthful an environment as possible. This annex:
 - a. Provides a point of reference for identifying and addressing the safety and health hazards that may threaten personnel involved in disaster response, recovery, or mitigation, whether in an actual disaster or a disaster exercise;
 - b. Delineates responsibilities for protecting personnel from these hazards and for providing prompt and effective remedial actions if and when a disaster-related illness or injury takes place;
 - c. Develops and implements a standard reporting system to centrally document the occurrence of disaster-related illnesses and injuries; and
 - d. Ensures the signatory agencies of the FRP take all reasonable steps to protect deployed personnel from disaster-related hazards, including, but not limited to, compliance with safety and health standards established by the Occupational Safety and Health Administration (OSHA) and other regulatory bodies.

II. *Policies*

- A. In accordance with applicable OSHA and other agency regulations, all signatory agencies to the FRP are responsible for protecting the safety and health of their personnel deployed to a disaster or disaster exercise. This includes, for example, allocating sufficient resources for safety and health protection, training staff, purchasing protective clothing and equipment as needed, and correcting unsafe or unsanitary conditions.
- B. The Department of Homeland Security (DHS) will carry out safety and health activities applicable to a disaster or exercise to include the following:
 - 1. Consistent with the Incident Command System (ICS) organizational structure, inclusion of a qualified Disaster Safety Officer (DSO) as a member of the Federal Coordinating Officer's (FCO's) Command Staff;
 - 2. Identification and coordination of abatement of hazards that may be encountered at a disaster or exercise site; and
 - 3. Provision of basic safety and health training and information for all deployed personnel.
- C. Tasked agencies will provide personal protective equipment (PPE) for all their staff needing such equipment. Agencies will ensure these individuals are fitted and trained in the use of their PPE prior to using the equipment.
- D. The DSO will implement a system to report, investigate, and recommend remediation for accidents, injuries, and illnesses related to the disaster or the exercise. This system should include centralized collection and maintenance of safety- and health-related documentation and records. Workers' compensation reports may contribute to the reporting system but should not be construed as sole fulfillment of this requirement.
- E. The DSO will provide written evaluations, after-action reports, and exit reports on the disaster safety and health activities. The DSO will include input from other agency safety personnel as appropriate.

III. *Situation*

A. **Disaster Conditions**

The requirement for rapid response to a disaster increases the risk that personnel may be deployed with inadequate information about the safety and health hazards that they may face. Initial hazard assessments may be revised after a more comprehensive assessment. Immediate access to survey instrumentation and proper PPE may be required to protect the safety and health of deployed personnel. Some safety and health problems that might be encountered in a disaster include the following:

- 1. **Safety Problems.** Wet or uneven floors or carpets, broken walkways, or unlit parking lots; sharp edges on equipment in crowded work areas; falling objects from unsecured or improperly stacked cabinets in office work areas; blocked fire doors or emergency

escape routes; lack of emergency lighting; electrical cables strung across floors or hanging from ceilings; unprotected or ungrounded electrical circuits; traffic safety issues such as driver fatigue, unfamiliar roads, or disaster-related road hazards; hazards relating to construction equipment and operations; hazards encountered by field inspectors in and around damaged or unsafe structures; and fire or other hazards created by poor housekeeping.

2. Health Problems. Ergonomic issues related to lifting and carrying, seating, or video display terminals; repetitive motion injury from using power tools, computers, or other equipment; reactions to particulate matter, chemicals, radioactive materials, or microbial contaminants such as fungi from mildewed carpets; exposure to asbestos or other contaminants that cause delayed or long-term health effects; infectious diseases (including vector-borne illnesses) that may be aggravated by crowded work spaces, poor ventilation, or poor air quality; exposure to weather extremes without adequate protective gear or time to become acclimated to the conditions; damage to eyes, hearing, or respiratory system as a result of failure to wear protective goggles, earplugs, or breathing apparatus; fatigue, stress, or hypoglycemia from poor nutrition or inadequate rest breaks; and exposure to diseases indigenous to the disaster area.

B. Planning Assumptions

1. The FCO is responsible for protection of the health and safety of deployed personnel. The FCO is represented in this regard on a day-to-day basis by the DSO.
2. The DSO will coordinate occupational safety and health-related activities overall. As indicated in Emergency Support Function #8 — Health and Medical Services, the Centers for Disease Control and Prevention (CDC) of the Department of Health and Human Services (HHS) assists in monitoring emergency worker health and safety. The DSO will request mission assignments as needed for CDC, as well as for other agencies, such as OSHA.
3. All signatory agencies participating in disaster activity will:
 - a. Ensure their deployed staff observes all normal safety and health practices of their respective agencies;
 - b. Provide safety staff, equipment, and training for specialized field responders such as firefighters, Urban Search and Rescue task forces, Disaster Medical Assistance Teams, etc.; and
 - c. Cooperate with the DSO in implementing disaster occupational safety and health activities.
4. Commensurate with the length and nature of the disaster, participating agency safety officers will form an Interagency Health and Safety Coordinating Committee coordinated by the DSO to meet as required to enhance the overall safety and health of deployed personnel.

IV. *Concept of Operations*

For the purposes of this annex, emergency operations have been divided into three phases: (1) the readiness phase, during which a disaster declaration is considered imminent; (2) the operations phase, during which response actions are under way; and (3) the stand-down phase, during which operations are being significantly reduced and ultimately terminated.

A. Phase I: Readiness

1. Readiness phase activities will include:
 - a. Collecting relevant information on the situation;
 - b. Alerting required staff; and
 - c. Deploying to, or near, the potential disaster location as appropriate.
2. Upon imminent or actual declaration of a disaster, a DSO will be designated, along with a roster of replacement DSOs to rotate throughout disaster operations if necessary.
3. The DSO, as part of the Advance Element of the Emergency Response Team (ERT-A), will inspect and approve field facilities prior to leasing to ensure compliance with all applicable safety, health, and fire criteria. In addition, the DSO will identify any other probable safety and health hazards that could be expected to be found on initiation of on-site disaster response operations. The DSO will establish liaison with safety and health personnel of CDC, OSHA, and other agencies as needed. No personnel should be deployed to the scene of an emergency that may involve a response to hazardous materials until the DSO has coordinated PPE with those agencies leading a response under another plan.
4. Prior to Federal deployment, the DSO will:
 - a. Obtain information on probable disaster-related safety and health hazards;
 - b. Provide procedures and coordinate the acquisition of equipment to mitigate the effects of the anticipated hazards to the greatest degree possible; and
 - c. Ensure all deployed personnel are informed about potential hazards and mitigation measures that may be employed.

B. Phase II: Operations

During operations, the DSO will:

1. Ensure a safe and healthful working and living environment is maintained for staff during the disaster;
2. Establish a system for accomplishing required follow-up activity after the disaster;

3. Establish and maintain a visible safety and health presence at the disaster site and at all support sites, including mobilization centers, the Disaster Field Office warehouse, and Disaster Recovery Centers;
4. Integrate safety and health activity into the operating routine of the FCO command structure;
5. Identify, investigate, and coordinate abatement of safety and health problems;
6. Mobilize resources in fields such as radiological safety, industrial hygiene, safety engineering, and other specialties as needed;
7. Ensure deployed personnel are aware of anticipated hazards, their potential impacts, and possible prevention or countermeasures;
8. Establish and maintain liaison among Federal, State, and local officials concerned with safety and health; and
9. Collect and review information for required reports.

C. Phase III: Stand Down

1. The DSO, upon approval by the DHS Designated Agency Safety and Health Official (DASHO), will ensure the disaster safety operation has a smooth closeout or transition to a successor responsible authority by:
 - a. Concluding DSO functions and activities;
 - b. Providing follow-up information to deployed personnel; and
 - c. Evaluating and documenting the effectiveness of the disaster safety and health effort:
 - (1) Debrief deployed personnel on safety and health issues applicable to the disaster;
 - (2) Produce a written evaluation of the safety and health initiative, including accomplishments, concerns and issues, lessons learned, and recommendations, for inclusion in the disaster after-action report;
 - (3) Complete all required reports; and
 - (4) Forward all safety and health documentation to the DHS DASHO.
2. The DHS DASHO will:
 - a. Provide follow-up recommendations to the Secretary, DHS and, as required, to FRP signatory agencies; and
 - b. Monitor follow-up actions.
3. The FCO will provide written safety and health recommendations for future FCOs to the DASHO and to the Secretary, DHS.

V. Responsibilities

All signatory agencies, managers, and supervisors will, to the best of their ability, provide and maintain a safe and healthful workplace for all deployed personnel at all times and follow prescribed safety and health criteria. Following are the responsibilities of FRP signatory agencies in ensuring safety and health protection for disaster personnel:

A. Department of Homeland Security

1. Establish disaster-specific safety and health guidance and policies for deployed personnel in cooperation with HHS, OSHA, and other agencies.
2. Establish a Federal Interagency Occupational Safety and Health Committee comprised of safety staff of deploying agencies to monitor and coordinate disaster safety and health operations.

B. Department of Labor, Occupational Safety and Health Administration

Make available safety and health specialists to provide safety-specific assistance to affected disaster response agencies as required by the FCO. Requirements may include safety consultation and training programs, air contaminant sampling and analysis, and other safety services preparatory to, during, and/or following disaster operations under the FRP.

C. Department of Health and Human Services

Coordinate a wide range of clinical, medical, and health-specific assistance, as required by the FCO. Requirements may include the following:

1. Identify endemic or other potential disease-causing entities that may be present at the disaster site. Advise deployed personnel of the hazards and the appropriate counter-measures;
2. Provide health inspections of disaster workplaces as required;
3. Establish and staff emergency-care clinic facilities to be used by personnel on site. These clinics should be able to triage, treat, and arrange for transportation to off-site centers for severe medical emergencies;
4. Perform environmental surveillance to detect and counteract infectious diseases;
5. Inspect and ensure food safety;
6. Develop and issue disease alerts to personnel, as needed, before, during, and after the disaster;
7. Provide technical assistance to DHS's Stress Management Program; and
8. Provide other health assistance and/or other services as specified by the FCO preparatory to, during, and/or following disaster operations under the FRP.

D. General Services Administration

Obtain and maintain suitable, safe, and healthful working facilities for deployed personnel. These facilities must meet all applicable safety, health, and fire criteria.

E. Other Signatory Agencies

Appoint representatives as needed to provide safety and health service oversight for requirements unique to their specific operations.

VI. *References*

- A. Federal Emergency Management Agency (FEMA) Instruction 6900.5, FEMA Safety and Occupational Health Program Authorities and Responsibilities, January 30, 1996.
- B. FEMA Manual 6900.3, FEMA Occupational Safety and Health Program Manual, March 1997.

VII. *Terms and Definitions*

A. After-Action Report

Following Federal response to a disaster under the FRP, DHS will coordinate an after-action report documenting the Federal response effort. Each Federal agency involved in the response will keep records of its activity to assist in preparing the after-action report.

B. Designated Agency Safety and Health Official

The DASHO is responsible for the management of the occupational safety and health program within an agency, and is so designated or appointed by the head of the agency. The DASHO is the agency's policy-level advocate for the safety and health of its personnel.

C. Disaster Safety Officer

The DSO is appointed by the DHS DASHO and represents the DHS DASHO in all occupational safety and health matters within the context of the disaster or the exercise. Serves on the staff of, and reports to, the FCO, but also provides ongoing safety and health status reports to the DHS DASHO.