BEHAVIORAL HEALTH

I. PURPOSE

The purpose of this Annex is to describe the process for implementing behavioral health services for the general public and first responders throughout Summit County in the event of a major emergency/disaster.

II. SITUATION AND ASSUMPTIONS

A. Situation

1. Many types of emergencies may occur in Summit County which would cause individuals and families to experience distress and anxiety about their safety, health and recovery.

2. Behavioral health services are necessary to facilitate the resiliency and recovery of those involved in a major emergency/disaster.

3. Consultation, collaboration, and planning among behavioral health organizations, whose skills and services would be needed in the event of a major emergency/disaster (local, state, federal, government, private and non-profit), is necessary to ensure an adequate and appropriate behavioral health response.

4. Consultation and collaboration with spiritual care professionals is necessary to ensure both the psychological and spiritual needs of citizens and first responders are addressed.

5. Research shows a link between exposure to trauma and the onset of other healthcare needs immediately following an emergency event, and often for many years after.

B. Assumptions

1. Common symptoms and reactions to major emergency/disasters are¹:

   a. Emotional Symptoms – irritability or excessive sadness

b. Cognitive Dysfunctions – difficulty making decisions or following directions

c. Physical Symptoms – headaches, stomach pains or difficulty breathing

d. Behavioral Reactions – consuming more alcohol or interpersonal conflict

e. Failure to adhere to needed physical or psychiatric medication needs.

2. Previous exposure to large scale events, such as severe weather or flooding, or traumatic events may place residents and responders who experience a new disaster at a greater risk for adverse stress reactions.

3. Responding behavioral health agencies will comply with all state and federal rules and regulations.

4. Local governmental agencies should have Standard Operating Guidelines (SOGs) for providing first responders with access to behavioral health services.

III. CONCEPT OF OPERATIONS

A. Phases of Emergency Management

1. Mitigation

   a. Establish response guidelines to behavioral health service needs.

   b. Develop public resources to distribute information about behavioral health service types and locations of organizations offering services (refer to Annex D – Emergency Public Information).

   c. Consultation, collaboration and planning among behavioral health organizations.

2. Preparedness

   a. Maintain SOGs.

   b. Educate and train response personnel.

   c. Develop a public education program.
3. Response
   a. Identify and prioritize behavioral health service needs to coordinate an effective response.
   b. Coordinate behavioral health response.
   c. Coordinate with Public Information Officers (PIO) to distribute assistance information.
   d. If immediate assistance is not needed, provide referrals to appropriate medical, psychological or tangible services.

4. Recovery
   a. Provide behavioral health services as long as necessary.
   b. Identify and address long-term community needs.

IV. ORGANIZATION AND ASSIGNMENT OF RESPONSIBILITIES

A. Organization

A Behavioral Health Coordinator will report to the Emergency Operations Center (EOC) upon its activation. This person will serve as the liaison in the EOC and coordinate behavioral health services.

B. Assignment of Responsibilities

1. Summit County Emergency Management Agency
   a. Facilitate a Behavioral Health Subcommittee.
   b. Partner with organizations who can provide assessment of mental health needs, including but not limited to, emotional, psychological, psychological first-aid, behavioral or cognitive limitations requiring assistance or supervision.
   c. Assess the long-term and unmet needs of the public. Coordinate the response of services and monitor recovery efforts.

2. Summit County Public Health
   a. Collaborate with behavioral health organizations and medical authorities on issues of differential diagnosis of physical and psychological symptoms and appropriate treatment of both.
3. Hospitals
   a. Mental health support for patients and their families may be provided by hospital/emergency care facility mental health staff.
   b. Collaborate with behavior health organizations and medical authorities on issues of differential diagnosis of physical and psychological symptoms and appropriate treatment of both.
   c. Upon patient release, provide information for continual behavioral health services.

4. The Victim Assistance Program in Summit County
   a. Will respond to the scene within 30 minutes to provide psychological support and crisis intervention for the public anywhere in Summit County

5. Behavioral Health Service Organizations
   a. Coordinate activities to provide staff, supplies and resources to treat victims psychologically impacted from the incident.
   b. Provide public resource information to the Joint Information Center (JIC) for review and distribution to the public.
   c. Develop and implement public education programs on psychological aspects of recovery, coping with stress and behavioral health resources.
   d. Provide Critical Incident Stress Management (CISM) to victims.
   e. Provide CISM training for first responders and behavioral health response professionals.

V. DIRECTION AND CONTROL
   A. The Victim Assistances Program in Summit County will respond within 30 minutes to provide psychological support and crisis intervention for public anywhere in Summit County.
   B. The Behavioral Health Coordinator will report to the EOC, as directed.
   C. Additional support for psychological support and crisis intervention may be coordinated by the American Red Cross of Summit, Portage and Medina Counties and the Summit County Alcohol, Drug Addition and Mental Health Services Board (ADM).
   D. Peer support will be coordinated by the Safety Forces Chaplaincy Center.
   E. Mental health support for patients and their families may be provided by hospital/emergency care facility mental health staff.
   F. If local resources are not sufficient, the Ohio Crisis Response Team will be activated.
G. Internal resources of all operating departments will be managed by individual departmental guidelines and policies.

VI. CONTINUITY OF GOVERNMENT

A. The line of succession for the Behavioral Health Coordinator shall be as follows:

1. Behavioral Health Subcommittee Representative

VII. ADMINISTRATION AND LOGISTICS

A. Administration

If the EOC is not activated, requests will be made to the Summit County Emergency Management Agency (SCEMA).

B. Logistics

1. Logistical support for behavioral health service points (locations and types of services being offered) will be provided by the EOC.

2. All responding organization will provide regular reports to the Behavioral Health Coordinator in the EOC.

VIII. PLAN DEVELOPMENT AND MAINTENANCE

A. The Behavioral Health Subcommittee is responsible for reviewing this Annex and submitting changes to the SCEMA based upon deficiencies identified through exercises, emergencies and/or changes in structure.

B. The SCEMA will publish and distribute all changes to this Annex and forward revisions to all responsible organizations listed in this Annex.

IX. AUTHORITIES AND REFERENCES

A. Authorities

Not used, see Section IX. of the Basic Plan.

Summit County Victims Assistance and Assist 77 services are privileged communications under ORC 2317.02 K 3 “Crisis response services” as members of a critical incident stress management team that hold membership in the Ohio critical incident stress management network.

B. References


X. ADDENDUMS

Supplemental 1 –Behavioral Health Service Organizations in Summit County
SUPPLEMENTAL 1 TO ANNEX P

BEHAVIORAL HEALTH SERVICE ORGANIZATIONS
IN SUMMIT COUNTY

American Red Cross of Summit, Portage and Medina Counties
501 W. Market Street
Akron, OH 44303
330-535-6131

Community Support Services
150 Cross Street
Akron, OH 44311
330-253-9388

County of Summit Alcohol, Drug Addiction and Mental Health Services Board (ADM)
1867 W. Market Street, Suite B2
Akron, OH 44313
330-762-3500

Greenleaf Family Center
580 Grant Street
Akron, OH 44311
330-376-9494

Portage Path Behavioral Health
340 S. Broadway Street
Akron, OH 44308
330-253-3100

Summit County Safety Forces Chaplaincy Center
150 Furnace Street
Akron, OH 44304
330-329-4588

Summit County Victim Assistance Program
150 Furnace Street
Akron, OH 44304
330-376-0040

*This list is not inclusive of all agencies in Summit County. Any agency listed does not constitute or imply its endorsement.

ANX P (Behavioral Health) to the Summit County Basic Plan 2018

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