

Appendix I.

Glossary -- Definition of Terms & Acronyms

A. Terms

All-Hazard: Covering all possible hazards whether natural, accidental, negligent, or intentional.

All-Hazards Preparedness: Preparedness for domestic terrorist attacks, major disasters, and other emergencies.

Bioterrorism (BT): The use of a biological agent in a terrorist incident; the intentional use of microorganism or toxins derived from living organisms to produce death or disease in humans, animals, or plants.

Chain of Command: A series of command, control, executive, or management positions in hierarchical order of authority.

Coronavirus Disease: A novel (new) virus such as COVID-19 emerged in 2019 and spread easily from person to person and quickly spread from country to country causing a pandemic. The virus was also known as SARS-CoV-2.

Counterterrorism: The full range of activities directed against terrorism, including preventive, deterrent, response and crisis management efforts.

Credential: A health volunteer's qualifications. Credentials are used with an ESAR-VHP (Emergency Services for Advanced Registration of Volunteer Health Professionals) System to determine a health volunteer's emergency credentialing level. According to JCAHO (Joint Commission on the Accreditation of Healthcare Organizations), credentials are the documented evidence of licensure, education, training experience or other qualifications.

Credentialing: The recognition of professional or technical competence. The credentialing process may include registration, certification, licensure, professional association membership, or the award of a degree in one or more fields. Certification and licensure affect the supply of health personnel by controlling entry into practice and influence the stability of the labor force by affecting geographic distribution, mobility, and retention of workers. Credentialing also determines the quality of personnel by providing standards for evaluating competence and by defining the scope of functions and how personnel may be used.

Disaster, Major (Federal): "Major disaster" means any natural catastrophe (including any hurricane, tornado, storm, high water, wind driven water, tidal wave, tsunami, earthquake, flood, or explosion, in any part of the United States, which in the determination of the President causes damage of sufficient severity and magnitude to warrant major disaster assistance under this [Stafford] Act to supplement the efforts and available resources of states, local governments, and disaster relief organizations in alleviating the damage, loss, hardship, or suffering caused thereby. (From: Robert T. Stafford Disaster Relief and Emergency Assistance Act, as amended).

Drills: Small-scale, internally conducted, activities aimed at providing a more "hands-on" teaching environment to familiarize staff with actual procedures necessary for emergency operations. They may be stopped and restarted to clarify a point, provide instruction, allow for observations from the evaluator and evaluate, or to permit a second chance to perform a procedure or activity. Also see Exercise.

ESAR-VHP System: Emergency System for Advance Registration of Volunteer Health Professionals. An electronic database of healthcare personnel who volunteer to provide aid in an emergency. An ESAR-VHP System must provide for (1) registration of health volunteers, (2) designation of emergency credentialing levels, and (3) the emergency verification of the identity, credentials, and qualifications of volunteers.

Emergency: Absent a Presidentially-declared emergency, any incidents(s), human-caused or natural, that requires responsive action to protect life or property.

Emergency Declaration: Refers to the state/territorial (or local) government's capacity to declare a general emergency or public health emergency, or disaster. Nearly every state/territory has developed a legal structure for declaring an emergency or disaster, and many have legal procedures for declaring public health emergencies.

Emergency, Federal: Any occasion or instance for which, in the determination of the President, federal assistance is needed to supplement state, territorial and local efforts and capabilities to save lives and to protect property and public health and safety, or to lessen or avert the threat of a catastrophe in any part of the United States (From: Robert T. Stafford Disaster Relief and Emergency Assistance Act, as amended by Public Law 106-390, October 30, 2000, Sec. 102.).

Emergency Management: A systematic program of activities a government and its partners undertake before, during, and after a disaster to save lives, prevent injury, and to protect property and the natural environment.

Emergency Management Assistance Compact (EMAC): An interstate mutual aid agreement that allows states and some territories who belong to assist one another in responding to all types of natural and man-made disasters.

Emergency Operations Centers (EOC): The physical location at which the coordination of information and resources to support domestic incident management activities normally takes place. An EOC may be a temporary facility or may be located in a more central or permanently established facility, perhaps at a higher level of organization within a jurisdiction. EOCs may be organized by major functional disciplines (e.g., federal, state, territorial, regional, county, city, tribal), or some combination thereof.

Emergency Response Provider: Includes federal, state, local, territorial and tribal emergency public safety, law enforcement, emergency response, emergency medical (including hospital emergency facilities), and related personnel, agencies, and authorities. Also known as Emergency Responder.

Epidemic: The occurrence in a community or region of cases of an illness (or outbreak) with a frequency clearly in excess of normal expectancy.

Exercise: Large-scale enactment of emergency situations to test the response system and plan. They are usually developed and evaluated by an external agency. An exercise is a test of knowledge and is not to be interrupted except for safety concerns or for a true emergency situation.

First Responder: Those individuals who in the early stages of an incident are responsible for the protection and preservation of life, property, evidence, and the environment, including emergency response providers.

Hospital Emergency Incident Command System (HEICS): An emergency management system that employs a logical management structure, defined responsibilities; clear reporting channels and a common nomenclature to help unify hospitals with other emergency responders.

Incident: An occurrence or event, natural or human-caused, that requires an emergency response to protect life or property. Incidents can, for example, include major disasters, emergencies, terrorist attacks, terrorist threats, wild land and urban fires, floods, hazardous materials spills, nuclear accidents, aircraft accidents, earthquakes, hurricanes, tornadoes, tropical storms, war-related disasters, public health and medical emergencies, and other occurrences requiring an emergency response.

Incident Command System (ICS): A standardized on-scene emergency management construct specifically designed to provide for the adoption of an integrated organizational structure that reflects the complexity and demands of single or multiple incidents, without being hindered by jurisdictional boundaries. ICS is the combination of facilities, equipment, personnel, procedures, and communications operating within a common organizational structure, designed to aid in the management of resources during incidents. ICS is used for all kinds of emergencies and is applicable to small as well as large and complex incidents. ICS is used by various jurisdictions and functional agencies, both public and private, to organize field-level incident management operations.

Incident Management: Referring to the totality of activities to be aware of, prevent, prepare for respond to, and recover from incidents. This term is emphasized in the National Response Plan and replaces the terms: Emergency Management, Disaster Management, Crisis Management, and Consequence Management.

Indemnity: Protection from, or compensation for, damage, loss, or injury.

Interoperability: The ability of software and hardware from multiple systems to communicate, share, and coordinate data.

Licensure: Affirmation by a duly constituted body, usually a state, that an individual has met certain prescribed qualifications and is, therefore, recognized under the laws of the state as a licensed professional.

Metropolitan Medical Response System (MMRS): A program intended to increase cities' ability to respond to a terrorist attack by coordinating the efforts of local law enforcement, fire, HAZMAT, EMS, hospital, public health and other personnel.

Mobilization: The process and procedures used by all organizations, federal, state, territorial, local and tribal, for activating, assembling, and transporting all resources that have been requested to respond to or support an incident.

Mutual-Aid Agreement: Written agreement between agencies and/or jurisdictions that they will assist one another on request, by furnishing personnel, equipment, and/or expertise in a specified manner.

National Disaster Medical System (NDMS): A cooperative, asset-sharing partnership between the Department of Health and Human Services, the Department of Veterans Affairs, the Department of Homeland Security, and the Department of Defense. NDMS provides resources for meeting the continuity of care and mental health services requirements of the Emergency Support Function 8 in the Federal Response Plan.

National Electronic Disease Surveillance System (NEDSS): A Centers for Disease Control and

Prevention initiative promoting the use of data and information system standards to improve disease surveillance systems at federal, state, and local levels.

National Incident Management System (NIMS): The single all-hazards incident management system required by Homeland Security Presidential Directive 5 that will govern the management of the National Response Plan. The National Incident Management System will replace the National Inter-Agency Incident Management System.

National Practitioner Data Bank (NPDB): A federal clearinghouse of information intended to assist in a comprehensive review of credentials by collecting a wide range of adverse actions taken against physicians, dentists and, in some cases, other health practitioners. Information that is collected and disseminated to eligible entities includes: medical malpractice payments, Medicare/Medicaid exclusions, and adverse actions against licensure, clinical privileges, and society membership.

Hospitals must query the NPDB before granting privileges to a physician. Other organizations that provide health care services that may query the NPDB include, state licensing boards, boards of medical examiners, certain professional societies and other health care entities such as HMOs, PPOs, group practices, nursing homes, and rehabilitation centers.

Pandemic: A pandemic is a global disease outbreak. It spans several countries and affects a large number of people. Pandemics are most often caused by viruses. An influenza pandemic occurs when a new influenza virus emerges for which there is little or no immunity in the human population; begins to cause serious illness; and then spreads easily person-to-person worldwide, such as Coronavirus Disease 2019 (COVID-19). It is hard to predict when or where a novel pandemic will emerge. A worldwide influenza pandemic could have a major effect on the global economy, including travel, trade, tourism, food, consumption and eventually, investment and financial markets. Planning for pandemic influenza by communities, business and industry is essential to minimize a pandemic's impact.

[Personal Protective Equipment](#) Personal protective equipment, commonly referred to as "PPE", is equipment worn to minimize exposure to hazards that cause serious workplace injuries and illnesses. These injuries and illnesses may result from contact with chemical, radiological, physical, electrical, mechanical, or other workplace hazards. Personal protective equipment may include items such as gloves, safety glasses and shoes, earplugs or muffs, hard hats, respirators, or coveralls, vests and full body suits.

Preparedness: Refers to the existence of plans, procedures, policies, training, and equipment necessary at the federal, state, territorial, tribal and local levels to maximize the ability to prevent, respond to, and recover from major events. "Readiness" is used interchangeably with "Preparedness." (HSPD-8).

Privileging: The authorization granted by the health care entity for a qualified health professional to provide patient care, treatment, and services with or without supervision. Privileging is performed on a case-by-case basis and the responsibility of assigning privileges resides with the entity that receives volunteers in response to an emergency.

Public Health: Organized efforts of society to protect, promote, and restore people's health. It is the combination of science, skills, and beliefs that is directed to the maintenance and improvement of the health of all people through collective or social actions. The programs, services and institutions involved emphasize the prevention of disease and the health needs of the population as a whole. Public health activities change with variations in technology and social values but the goals remain the same: to reduce the amount of disease, premature death, and disease-produced discomfort and

disability in the population. Public health is thus a social institution, a discipline, and a practice.

Public Health Emergency: Occurrence or imminent threat of exposure to an extremely dangerous condition or a highly infectious or toxic agent, including a communicable disease, that poses an imminent threat of substantial harm to the population, or any portion thereof. In general, a public health emergency is one that requires a population-based approach. Examples of public health emergencies may include a natural outbreak of an infectious disease (i.e., influenza, Hantavirus, meningitis, salmonella, etc.), intentionally caused biological threats such as smallpox or anthrax, and some accidents involving hazardous materials that threaten the health of the population. Public health emergencies can also be or evolve into medical emergencies. Likewise, medical emergencies can develop to an extent that they affect the population's health and, therefore, will be led by the Department of Health with assistance by local and State emergency management.

Public Health Information Network (PHIN): A framework providing the basis for information technology projects for CDC-funded programs including NEDSS, HAN, and others.

Recovery: The development, coordination, and execution of service and site restoration plans; the reconstitution of government operations and services; individual, private sector, nongovernmental, and public-assistance programs to provide housing and to promote restoration; long-term care and treatment of affected persons; additional measures for social, political, environmental, and economic restoration; evaluation of the incident to identify lessons learned; post-incident reporting; and development of initiatives to mitigate the effects of future incidents.

Recruitment: The identification and subsequent registration of volunteer health professionals in a State or territory-based ESAR-VHP registry. Thus, recruited health volunteers are distinguished from "spontaneous" volunteers, i.e., unregistered and uncoordinated health care professionals who may respond to an emergency or disaster situation and volunteer health services.

Response: Activities to address the immediate and short-term effects of an emergency or disaster. Response includes immediate actions to save lives, protect property, and meet basic human needs as well as executing the plan and resources created to preserve life, protect property and provide services.

Risk Communication: Exchange of information concerning the existence, nature, form, severity or acceptability of health or environmental risks. Effective risk communication involves determining the types of information that interested and affected parties need and want and presenting this information to them in a useful and meaningful way.

Situational Orientation: A subset of training. It is training given to a health volunteer that corresponds to a specific emergency deployment. Situational orientation, also referred to as "just in time" training, is provided to health volunteers to prepare them for the specific situation in which they will provide assistance, and typically is recorded in the ESAR-VHP System database after the emergency deployment has been completed.

Special Populations: People who might be more sensitive or susceptible to exposure to hazardous substances because of factors such as age, occupation, sex, or behaviors (for example, cigarette smoking). Populations with special needs for translations, special services or alternative channels of communication (such as those with hearing impairments). Populations with distinct cultural or community needs. Children, pregnant women, and frail elders are often considered special populations.

Spontaneous Volunteer: Volunteer who arrives to provide services in response to an incident without being solicited for help or being specifically requested by a sponsoring agency involved in the emergency response.

Staging Area: Location established where resources can be placed while awaiting a tactical assignment.

State/Territory: Refers to any state of the United States, the District of Columbia, the Commonwealth of Puerto Rico, the US Virgin Islands, Guam, American Samoa, the Commonwealth of the Northern Mariana Islands, Palau, the Federated States of Micronesia, and the Republic of the Marshall Islands.

Strategic National Stockpile (SNS): A national cache of drugs, vaccines, and supplies that can be deployed to areas struck by disasters, including bioterrorism.

Surge Capacity: The accommodation by the health system to a transient sudden rise in demand for health care following an incident with real or perceived adverse health effects. As neither the risk of surge nor the size of surge can be estimated, neither can surge capacity be estimated. The proper approach to surge is surge management planning rather than surge capacity planning.

Terrorism: The unlawful use of force or violence against persons or property to intimidate or coerce a government, the civilian population, or any segment thereof, in furtherance of political or social objectives.

Training: The formal activities and coursework taken by health volunteers to incrementally develop or enhance their ability to provide health services in a disaster scenario. Training must be specialized and acceptable to the community to prepare individuals to respond to a declared emergency. The training may be specific to different professional disciplines. Training, Disaster Training, and Disaster Preparedness Training are used interchangeably.

Unencumbered License: An active and unrestricted state-issued license.

Volunteer: A medical or healthcare professional who renders aid or performs health services, voluntarily, without pay or remuneration.

Weapon of Mass Destruction (WMD): A WMD is any device, material, or substance used with intent to cause death or serious injury to persons or significant damage to property.

(Adapted from Comprehensive Accreditation Manual for Hospitals, The Official Handbook. Joint Commission for the Accreditation of Healthcare Organization, 2005.)

B. ACRONYMS

ADA: American Dental Association

ADHA: American Dental Hygienists' Association

AHA: American Hospital Association

AHRQ: Agency for Healthcare Research and Quality

AMA: American Medical Association

ANA: American Nurses Association

APHA: American Public Health Association

ARC: American Red Cross

ASPR: Assistant Secretary for Preparedness and Response (Division of DHHS)

ASTDD: Association of State and Territorial Dental Directors

ASTHO: Association of State and Territorial Health Officials

BT: Bioterrorism

CARES: Coronavirus Aid Relief and Economic Security

CDC: Centers for Disease Control and Prevention (Division of DHHS)

CERC: Crisis and Emergency Risk Communication

CMS: Centers for Medicare and Medicaid Services (Division of DHHS)

COOP: Continuity of Operations Plan

COVID-19: Coronavirus of 2019

DDS: Doctor of Dental Surgery

DHHS: Department of Health and Human Services (U.S.)

DHS: Department of Homeland Security (U.S.)

DMAT: Disaster Medical Assistance Team

DMD: Doctor of Dental Medicine

DMORT: Disaster Mortuary Operational Response Team

ECS: Emergency Credentialing System

EHR: Electronic Health Records

EMA: Emergency Management Agency

EMAC: Emergency Management Assistance Compact

EMI: Emergency Management Institute

EOC: Emergency Operations Command Center

ESAR-VHP: Emergency System for Advance Registration of Volunteer Health Professionals

ESF: Emergency Support Functions

FDA: Food and Drug Administration

FEMA: Federal Emergency Management Agency (Division of DHHS)

GIS: Geographic Information System

HAN: Health Alert Network

HCP: Health Care Provider

HEICS: Hospital Emergency Incident Command System

HMGP: Hazard Mitigation Grant Program

HRSA: Health Resources and Services Administration (Division of DHHS)

HSPD: Homeland Security Presidential Directive

IC: Incident Commander

ICS: Incident Command System

ISP: Independent Study Program

JCAHO: Joint Commission on Accreditation of Healthcare Organizations

LEPC: Local Emergency Preparedness Committee

LHA: Local Health Authority

MMRS: Metropolitan Medical Response System

MRC: Medical Reserve Corps

MSDA: Medicaid | Medicare | CHIP Services Dental Association

NACCHO: National Association of County and City Health Officials

NBHP: National Bioterrorism Hospital Preparedness Program

NDMS: National Disaster Medical System

NEDSS: National Electronic Disease Surveillance System

NEMA: National Emergency Management Association

NGO: Non-governmental Organization

NIMS: National Incident Management System

NPDB: National Practitioner Data Base

NPS: National Pharmaceutical Stockpile

NRF: National Response Framework

OPEN: Oral Health Progress and Equity Network

OPHP: Office of Public Health Preparedness

OSHA: Occupational Safety and Health Administration

PAHPA: Pandemic and All Hazards Preparedness Act

PHEP: Public Health Emergency Preparedness

PHERA: Public Health Emergency Response Act

PHIN: Public Health Information Network

PPE: Personal Protective Equipment

RRF: Resource Request Form for Federal Assistance

SAMHSA: Substance Abuse and Mental Health Services Administration (Division of DHHS)

SMAT: State Medical Assistance Team

SNS: Strategic National Stockpile

SOC: Standard Occupational Classification

WMD: Weapon of Mass Destruction