



March 11, 2015
Program



Division of Public Health Services

Public Health Preparedness

150 N. 18th Ave., Suite 520
Phoenix, Arizona 85007
(602) 542-1023
(602) 542-0883 FAX

DOUGLAS A. DUCEY, GOVERNOR
WILL HUMBLE, DIRECTOR

March 11, 2015

Dear Workshop Participant:

Thank you for registering and participating in the ADHS “Getting Prepared—A Mass Fatality Response” Workshop and Tabletop Exercise held on this Wednesday March 11, 2015, at Black Canyon Conference Center, Phoenix.

This workshop is aimed at introducing participants to a mass fatality response, understanding of a mass fatality incident and preparing for a coordinated response focusing on Mass Fatality Planning and Education. Among other topics we will be discussing the challenges, roles and responsibilities of governmental and non-governmental agencies, family assistance operations and public information. This workshop and tabletop will help test your current plans as well as assist in future planning and preparedness activities.

Special thanks to our partner agencies-Arizona Division of Emergency Management, County Medical Examiners’ Offices, and the ADHS Electronic Vital Record System for their involvement, collaboration and assistance in planning this workshop.

Thank you again, for attending this workshop. We very much look forward to your participation in similar workshops in the future. If you have questions, please feel free to call Antonio Hernandez, Partner Integration Chief at 602-763-1774 or email at partner.integration@azdhs.gov.

Teresa Ehnert, Bureau Chief
Public Health Emergency Preparedness
Arizona Department of Health Services

TABLE OF CONTENTS

Agenda.....	1
Workshop Overview	3
Exercise Objectives, Capabilities and Functions	5
Presentations.....	7
Tabletop Exercise	11
Acronyms.....	17
Resource Links	19
Presenters and Contributors	21

March 11, 2015

This page is intentionally blank.

Getting Prepared—A Mass Fatality Response Workshop & Tabletop

March 11, 2015

AGENDA

Mass Fatality Response—Workshop & Tabletop

Black Canyon Conference Center

9440 N. 25th Avenue

Phoenix, AZ 85021

Arizona Department of Health Services, Bureau of Public Health Emergency Preparedness

March 11, 2015

8:00-9:00	REGISTRATION- Networking with partners (continental breakfast provided)	
9:00-9:15	Welcome	Don Herrington, Assistant Director, ADHS
9:15-9:30	Introduction and Background of a Mass Fatality Incident (MFI)	Teresa Ehnert, BPHEP Bureau Chief, ADHS
9:30-9:50	Introduction to SERRP and Catastrophic Annexes (Primary and Support Agencies, Concept of Operations and Command and Control during MFI)	Will Shultz, Deputy Director, ADEMA
9:50-10:20	Mortuary Affairs and Current Status	Dr. Laura Fulginiti and Melanie Rouse, Maricopa County OME
10:20-10:35	Audience Response System-Mini Survey on Mass Fatality Planning	Antonio Hernandez, BPHEP, ADHS
10:35-10:55	BREAK	
11:00-11:20	The Role of Vital Records During a Mass Fatality Incident	Krystal Colburn, Vital Records, ADHS
11:30-1:00	WORKING LUNCH Yarnell Lessons Learned	
1:00-2:30	TABLETOP SESSION <ul style="list-style-type: none"> • Triggers - Mass Fatality Plan • Command, Control, Coordination and Communication during a MFI • Family Assistance Operations • Public Information • Personal Protective Equipment (PPE) Policy and Guidance to First Responders during a MFI • Behavioral Health Support and Services to Survivors, Families and First Responders • Ante-mortem data Management 	Teresa Ehnert, ADHS
2:30-3:00	CLOSING PLENARY	
	<ul style="list-style-type: none"> • Tabletop Hotwash and Closing Remarks 	Teresa Ehnert, ADHS

March 11, 2015

This page is intentionally blank.

March 11, 2015

WORKSHOP OVERVIEW

Name	Getting Prepared - A Mass Fatality Response Workshop and Tabletop
Date	March 11, 2015
Scope	The workshop includes participation from public health, healthcare system and emergency management stakeholders.
Threat/Hazard	Mass Fatality Incident
PHEP/HPP Capabilities	PHEP Capability 1: Community Preparedness PHEP Capability 4: Emergency Public Information and Warning PHEP/HPP Capability 3: Emergency Operations Coordination PHEP/HPP Capability 5: Fatality Management PHEP/HPP Capability 6: Information Sharing PHEP/HPP Capability 10: Medical Surge PHEP/HPP Capability 14: Responder Safety and Health
Scenario	A semi-truck crosses the center line of the highway and crashes into two tour buses carrying school children and their teachers on their way back from a Snow Bowl ski trip.
Sponsor	Arizona Department of Health Services <ul style="list-style-type: none">• Public Health Emergency Program (PHEP)• Hospital Preparedness Program (HPP)
Points of Contact	Teresa Ehnert, Bureau Chief Bureau of Public Health Emergency Preparedness Arizona Department of Health Services teresa.ehnert@azdhs.gov Jennifer Cunico, Deputy Bureau Chief Bureau of Public Health Emergency Preparedness Arizona Department of Health Services jennifer.cunico@azdhs.gov Antonio Hernandez, Section Chief Bureau of Public Health Emergency Preparedness Arizona Department of Health Services antonio.hernandez@azdhs.gov

March 11, 2015

This page is intentionally blank.

EXERCISE OBJECTIVES, CAPABILITIES AND FUNCTIONS

This tabletop was developed to evaluate coordination and communication between the healthcare system, public health emergency preparedness agencies and responding agencies in the context of a mass fatality response. Participants include all individuals who may be involved in a mass fatality response such as first responders, medical examiners/medico-legal, public health professionals, and emergency response staff.

The tabletop covers the expected outcomes for the event and are aligned with the Healthcare Preparedness Capabilities contained in the Office of the Assistant Secretary for Preparedness and Response Guidance of January 2012; as well as the Public Health Preparedness Capabilities of March 2011 of the Office of Public Health Preparedness and Response of the Centers for Disease Control and Prevention.

OBJECTIVE	PHEP/HPP CAPABILITY	FUNCTION(S)
1. Identify the threshold to activate the mass fatality plan.	Fatality Management (PHEP-5)	F2: Activate the public health fatality management operations
	Fatality Management (HPP-5)	F1: Coordinate surges of deaths and human remains at healthcare organizations with community fatality management operations
2. Identify method of command, control, coordination and communication that enhances agency operations when responding to a disaster event.	Fatality Management (PHEP-5)	F1: Determine role for public health in fatality management
	Emergency Operation Coordination (PHEP-3)	F5: Demobilize and evaluate public health emergency operations
	Emergency Operation Coordination (HPP-3)	F1: Healthcare organization multi-agency representation and coordination with emergency operations F3: Support healthcare response efforts through coordination of resources
3. Identify methods for delivering public information during a mass fatality event.	Emergency Public Information and Warning (PHEP-4)	F1: Activate the emergency public information system

Getting Prepared—A Mass Fatality Response Workshop & Tabletop

March 11, 2015

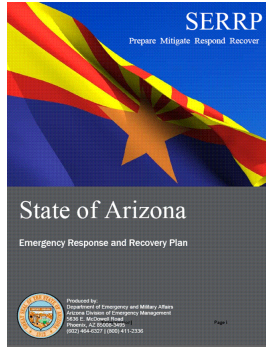
OBJECTIVE	PHEP/HPP CAPABILITY	FUNCTION(S)
4. Identify safety and personal protective needs and facilitate just in time training for responders.	Responder Safety and Health (PHEP-14)	F1: Identify responder safety and health risks F2: Identify safety and personal protective needs F4: Monitor responders safety and health action
	Responder Safety and Health (HPP-14)	F1: Assist healthcare organizations with additional pharmaceutical protection for healthcare workers F2: Provide assistance to healthcare organizations with access to additional Personal Protective Equipment (PPE) for healthcare workers during response
5. Establish and coordinate Family Assistance Center operations.	Community Preparedness (PHEP-1)	F2: Build community partnerships to support health preparedness
	Fatality Management (PHEP-5)	F4: Participate in survivor mental/behavioral health services
	Fatality Management (HPP-5)	F2: Coordinate surges of concerned citizens with community agencies responsible for family assistance
6. Obtain reliable ante-mortem data.	Information Sharing (PHEP-6)	F1: Identify stakeholders to be incorporated into information flow F3: Exchange information to determine a common operating picture
	Fatality Management (PHEP-5)	F3: Assist in the collection and dissemination of ante mortem data
	Information Sharing (HPP-6)	F1: Provide healthcare situational awareness that contributes to the incident common operating picture F2: Develop, refine, and sustain redundant, interoperable communication systems

March 11, 2015

PRESENTATIONS

INTRODUCTION TO SERRP AND CATASTROPHIC ANNEXES

Will Schulz, Deputy Director, Grant Administration, ADEMA



Notes: _____

March 11, 2015

MORTUARY AFFAIRS AND CURRENT STATUS

Dr. Laura Fulginiti and Melanie Rouse, Maricopa County Office of the Medical Examiner



Notes: _____

March 11, 2015

THE ROLE OF VITAL RECORDS DURING A MASS FATALITY INCIDENT

Krystal Colburn, Assistant State Registrar, Deputy Bureau Chief, Vital Records, ADHS



Notes: _____

March 11, 2015

WORKING LUNCH DISCUSSION YARNELL LESSONS LEARNED

Melanie Rouse, Maricopa County Office of the Medical Examiner



Notes: _____

March 11, 2015

TABLETOP EXERCISE

WORKSHOP/TABLETOP GUIDELINES

- This workshop is designed to be held in an open, low-stress, no-fault environment. Varying viewpoints are expected.
- Participants should respond to the scenario using knowledge of current plans and capabilities, as well as insights derived from training and professional experience.
- Decisions are not precedent setting and may not reflect an organization's final position on a given issue. This event is an opportunity to discuss and present multiple options and possible solutions.
- Issue identification is not as valuable as suggestions and recommended actions that could improve protective measures, information coordination, and response/recovery efforts. Problem-solving should be the focus of discussions and feedback.

ASSUMPTIONS AND ARTIFICIALITIES

Participants should accept that assumptions and artificialities are inherent in any hypothetical response, and should not allow these considerations to negatively impact their participation.

During the discussions, the following apply:

- The forum is conducted in a no-fault learning environment wherein capabilities, plans, systems, and processes will be evaluated.
- The scenario is plausible, and events occur as they are presented.

EXERCISE EVALUATION

Evaluators will be reporting discussions based on questions targeting the exercise objectives and aligned capabilities, capability targets, and critical tasks. Additionally, players will be asked to complete an online participant feedback survey. These documents, coupled with facilitator observations and notes, will be used to evaluate the exercise and compile the After-Action Report (AAR).

SCENARIO

On March 10, 2015, three tour buses carrying 150 school children and teachers were traveling to Phoenix, on their way back from a ski trip in Flagstaff, AZ. Normally, the tour buses would take State Route I-17, but it was closed due to snow, and the buses were diverted onto Highway I-40.

A semi-tractor trailer travelling north bound, crossed the center line into the oncoming path of the tour buses, and crashed into the first and second buses.

The crash took place at approximately 7:00 p.m. It was already dark, very cold, and raining.

The driver of the third bus called 9-1-1; however, the connection was poor and was ultimately lost before the dispatcher could obtain any information other than that there had been a crash. Another 9-1-1 call was successfully completed around 8:30 p.m. by a passerby.

March 11, 2015

KEY ISSUES:

- Emergency information sharing and warning
- A mass fatality incident (MFI)
- Injured victims
- Adverse weather conditions

SITUATION REPORT:

- Total number of fatalities: 69 people
- Total number of injured: 30 seriously injured, 11 with minor injuries

QUESTIONS

Based on the information provided, participate in the discussion concerning the issues raised, and identify any critical issues, decisions, requirements, or questions that should be addressed at this time. While discussing the questions addressed in the tabletop exercise, please base your inputs on how your organization would respond to an event of this magnitude in your county or jurisdiction.

The following questions are provided as suggested subjects that you may wish to address as the discussion progresses. These questions are not meant to constitute a definitive list of concerns to be addressed. Note takers will record your discussion.

OBJECTIVE 1: Identify the threshold to activate mass fatality operations.

CAPABILITY: Fatality Management (PHEP-5, F2), (HPP-5, F1)

QUESTIONS:

1. Identify the jurisdictional, regional, private, and health/medical support resource partners you will reach out to during the following phases of human remains disposition:
 - a. Processing (decontamination, infection control, and other mitigation measures)
 - b. Storing
 - c. Disposition
 - d. Recovery
2. Describe how you access systems to maintain situational awareness of the fatality incident. How does this information guide the resources needed for the response?
3. Describe how your organization coordinates incident details among public health/health systems.
4. Timely information is important for your organizations mass fatality response. Describe who provides this information. By what mode is this information received (e.g., fax, phone, email, alert, etc.)?
5. Which indicator or threshold will typically initiate a MFI response for your organization?

March 11, 2015

OBJECTIVE 2: Identify command, control, communication and coordination that enhances Mass Fatality Incident.

CAPABILITY: Fatality Management (PHEP-5, F1); Emergency Operations Coordination (PHEP-3, F5) (HPP-3, F1 F3)

QUESTIONS:

1. Describe your jurisdiction's risk assessment summary of potential impacts from a mass fatality incident. Does this scenario relate to pre-characterized or pre-planned circumstances?
2. Describe the planning partners/subject matter experts you have coordinated with prior to this incident for Mass Fatality Planning to help clarify your agency's role (e.g. epidemiologists, laboratory services, hospitals, mortuaries, community/cultural burial service providers, emergency management, chemical, biological, radiological, nuclear, and high yield explosives (CBRNE) leads, public health, environmental health, behavioral health, volunteer organizations active in disaster, legal/law enforcement).
3. Which subject matter experts does your agency utilize to determine public health's role in a fatality incident like this (e.g. epidemiology, laboratory, surveillance, community cultural/religious beliefs or burial practices, CBRNE and emergency operations leads)?
4. Describe the State Emergency Support Functions (ESFs) you have coordinated with prior to this incident, and the Annexes you have referenced regarding Mass Fatality Planning to inform your organizations response plan (e.g. ESF #6 Mass Care, ESF #8 Health/Medical, ESF #9 Urban Search and Rescue, SERRP Catastrophic Incident Annex – Mass Fatality/Mass Casualty).
5. In this current scenario, describe any partners or State Plans you would coordinate with that have not been involved in planning prior (gap assessment). Describe how to integrate these partners into future plans and mitigation processes.
6. Should all key partners be in place, please describe the ideal command, control and communication flow. Using the poster board available, sketch a draft flow chart of the partners represented in your tabletop group, how they are linked to communication flow, and how they relate to command and control of the MFI.

OBJECTIVE 3: Identify methods for delivering public information during a Mass Fatality Incident.

CAPABILITY: Emergency Public Information and Warning (PHEP-4, F1)

QUESTIONS:

1. Describe the Public Information Officers and subject matter experts/spokespersons you have identified prior to this incident for disaster that may involve, mass fatalities according to your jurisdiction's risk assessment.
2. Describe the structure you have established prior to this incident to support alerting of the public. Describe any gaps in staff/training that may impact the ability of identified personnel to fulfill emergency public information and warning tasks.

Getting Prepared—A Mass Fatality Response Workshop & Tabletop

March 11, 2015

3. In this current scenario, describe how you assemble public information staff, debrief them on the incident and assign duties. What types of tasks or objectives will your PIO team work to address?
4. Describe how your organization can provide assistance if local public health systems face challenges in implementing emergency communication. What type of resources can be provided and how do you prefer the resource be requested?
5. Describe methods your TTX group has identified for delivering public information.

OBJECTIVE 4: Identify safety and personal protective needs and how just in time training for responders will be facilitated.

CAPABILITY: Responder Safety and Health (PHEP-14, F1 F2 F4) (HPP-14, F1 F2)

QUESTIONS:

1. In an all hazard situation, describe how first responders will be provided information on potential health conditions (acute/chronic) that may develop during or after an incident (relevant to the hazard or exposure circumstance). How do you work with subject matter experts to participate in the formulation of recommendations for risks to be addressed?
2. Describe how “just in time training” for responders is facilitated and monitored. How is this information coordinated with incident management?
3. Describe the pre-determined or recommended risk-specific training offered prior to an incident to response personnel (both protective actions as well as training for response to exposure or injury).
4. In this scenario, what guidance would you provide to partner organizations to help conduct monitoring of any responder staff for medical/mental/behavioral incident-related health outcomes? Describe the type of support resources typically provided to responders in this scenario.

OBJECTIVE 5: Establish and coordinate Family Assistance Center operations.

CAPABILITY: Community Preparedness (PHEP-1, F2), Fatality Management (PHEP-5, F4) (HPP-14, F1 F2)

QUESTIONS:

1. For this scenario, please describe how your partners (inside and outside of the jurisdiction) typically educate their constituents on any applicable health interventions being recommended by public health. Fatality Management partners may include but are not limited to the following: public health, medical, mental/behavioral health professionals, social networks, faith-based or volunteer organizations, support groups, and professional organizations.
2. Describe how you coordinate with partners to support the provision of non-intrusive, culturally sensitive mental/behavioral health support services to family members of the deceased, incident survivors, and responders, if requested/needed.

March 11, 2015

OBJECTIVE 6: Obtain reliable ante-mortem data.

CAPABILITY: Information Sharing (PHEP-6, F1 F3) (HPP-6, F1, F2), Fatality Management (PHEP-5, F3)

QUESTIONS:

1. Describe the process/criteria for identifying/selecting stakeholders across public health medical, law enforcement, and other disciplines within the jurisdiction that should be included in the collection/dissemination methods of ante-mortem data.
2. Determine the levels of security clearance needed for accessing information from a central repository/database for the collection, recording, and storage of ante-mortem and postmortem data.
3. Describe who is involved with and how ante-mortem (pre death determination) information is coordinated and bridged between Family Assistance Centers and individual families and relayed to Medical Examiners.

March 11, 2015

This page is intentionally blank.

March 11, 2015

ACRONYMS

Acronym	Term
AAR	After Action Report
ADEMA	Arizona Department of Emergency and Military Affairs
ADHS	Arizona Department of Health Services
DMORT	Disaster Mortuary Operational Response Team
DOT	Department of Transportation
DPS	Department of Public Safety
EM	Emergency Management
EMS	Emergency Medical Services
EOC	Emergency Operations Center
HPP	Hospital Preparedness Program
IC	Incident Command
MFI	Mass Fatality Incident
NPDS	National Poison Data System
PCC	Poison Control Center
PHEP	Public Health Emergency Preparedness
PPE	Personal Protective Equipment

March 11, 2015

This page is intentionally blank.

RESOURCE LINKS

Arizona Department of Health Services— Bureau of Public Health Emergency Preparedness Conference Presentations	HTTP://1.USA.GOV/1zVg6KR
Arizona Department of Health Services – Vital Records Department	http://www.azdhs.gov/vital-records/
Managing Mass Fatalities – A Tool Kit for Planning	http://bit.ly/1EKxIOZ
Maricopa County Office of the Medical Examiner	https://www.maricopa.gov/medex/
Pima County Office of the Medical Examiner-Forensic Science Center	http://webcms.pima.gov/government/medical_examiner/
State Emergency Response and Recovery Plan (SERRP)	http://www.dem.azdema.gov/preparedness/planning.html

March 11, 2015

This page is intentionally blank.

PRESENTERS AND CONTRIBUTORS

KRYSTAL COLBURN - BUREAU CHIEF, ARIZONA DEPARTMENT OF HEALTH SERVICES, VITAL RECORDS



Krystal Colburn is the Assistant State Registrar and Deputy Bureau Chief at the Arizona Department of Health Services Office of Vital Records. The Birth and Death Registry Section within vital records registered approximately 100,000 births per year, 50,000 deaths and 650 fetal deaths, along with other special birth and death registrations. Krystal led the state transition to electronic birth certificate system and implemented key interventions that improve outcomes and bridge hospitals and county health departments to retrieve information more efficiently and quickly.

She received her B.S. in Community Health Education from Northern Arizona University before eventually coming to ADHS in 2007. Over the last 8 years Krystal has held various roles within the agency including the Smoke-Free Arizona Program Manager. In 2013, Krystal accepted the role as Assistant State Registrar and Deputy Bureau Chief. Currently, Krystal oversees the operation of the State Vital Records System as well as the Office of Medical Marijuana Patient Registry.

TERESA EHNERT, MS - BUREAU CHIEF, ARIZONA DEPARTMENT OF HEALTH SERVICES, PUBLIC HEALTH EMERGENCY PREPAREDNESS



Teresa was born in Fargo, North Dakota and relocated to Arizona in 2005. Teresa has a Master Degree in Management from the University of Mary, Fargo, ND. Prior to her role at the Department of Health Services, Teresa was a Chief Master Sergeant in the Air Force completing a career of almost 27 years.

Teresa joined the Department of Health Services in August of 2005. Her primary responsibility as Bureau Chief of Public Health Emergency Preparedness is to direct the overall planning, development, implementation, coordination, response and evaluation of the programs for Public Health Emergency Preparedness. Teresa is responsible for facilitating the coordination of state planning and regional committees on preparedness activities with emergency response partners. She facilitates programs designed to enhance planning and response to public health emergencies. Teresa also provides oversight and leadership for two public health preparedness grants exceeding \$20 million dollars.

March 11, 2015

DR. LAURA C. FULGINITI, PHD, D-ABFA - FORENSIC ANTHROPOLOGIST AT THE MARICOPA COUNTY OFFICE OF THE MEDICAL EXAMINER



Dr. Laura C Fulginiti, PhD, D-ABFA is a board-certified forensic anthropologist at the Maricopa County Office of the Medical Examiner. Her specialties include providing expertise in crime scene processing, analysis of unknown human remains, interpretation of traumata in bone and as a subject matter expert in mass fatality response. She has qualified as an expert in both State and Federal courts. She provides training for the law enforcement communities in Arizona, Nevada, Ohio, Colorado, and at FLETC in Georgia. She is an adjunct professor at Arizona State University, and a Clinical Associate Professor in the Pathology Department of The U of A College of Medicine. Dr. Fulginiti is a member of DMORT, Region VIII, a federal disaster response team. She has responded to multiple mass fatality events including airline crashes in Colorado, Guam, California and Pennsylvania (9/11), the tri-state crematory incident in Georgia and Hurricanes Katrina and Rita. She also participates in lectures to local community groups, high school, middle and elementary schools. She is married with one son.

ANTONIO HERNANDEZ, BS - SECTION CHIEF, PARTNER INTEGRATION, ARIZONA DEPARTMENT OF HEALTH SERVICES



Antonio Hernandez, currently serves as the Partner Integration Chief for the Bureau of Public Health Emergency Preparedness at the Arizona Department of Health Services. His program addresses Public Health emergency preparedness plans, training and exercises that support capability development statewide. He also serves as the current Chair for the Arizona State Citizen Corps Council and sits on the Governors Council for Homeland Security Senior Advisory addressing key strategic initiatives to foster preparedness collaboration across disciplines, the private sector, non-profit organizations, faith-based, community, and all levels of government, including local, State, Tribal and Federal. As former Co-Chairman of the Arizona Public Health Association Indigenous Health Section, and member of the national planning workgroup developed preparedness planning guidance for the Emergency System for Advanced Registration of Volunteer Health Professionals and plan educational conferences and trainings on community resiliency and preparedness planning. Antonio is a graduate of Grand Canyon University with a degree in Human Biology.

March 11, 2015

**DON HERRINGTON — ASSISTANT DIRECTOR, PUBLIC HEALTH PREPAREDNESS SERVICES,
ARIZONA DEPARTMENT OF HEALTH SERVICES**



Don has been at the Arizona Department of Health Services since 2000. While there, he has served as the State’s Food Safety Manager, the Office Chief of Environmental Health, Bureau Chief of Epidemiology and Disease Control Services and presently as the Assistant Director for Public Health Preparedness. In his present capacity Don oversees four Bureaus including the Bureau of Epidemiology and Disease Control Services, The Bureau of Public Health Emergency Preparedness, the Bureau of Emergency Medical Services, the Arizona State Public Health Laboratory and the Arizona Biomedical Commission. The Commission and Bureaus have a combined total of approximately 300 employees.

**MELANIE ROUSE, MA - CHIEF MEDICAL INVESTIGATOR FOR THE MARICOPA COUNTY
MEDICAL EXAMINER’S OFFICE**



Melanie Rouse has a Bachelor of Science degree in Microbiology and Psychology from Colorado State University and a Masters of Arts degree in Psychology/Criminal Justice Studies from University of the Rockies. She is a certified Medicolegal Death Investigator by American Board; and also certified as a HAZMAT operational level responder for Weapons of Mass Destruction.

Ms. Rouse is the Chief Medical Investigator for the Maricopa County Medical Examiner’s Office. Prior to this, she has experience working as supervisors for the Investigations division, Mass Fatality Coordinator and the Emergency Management Specialist.

Currently she the Mass Fatality Organizer for Maricopa County responsible for planning for and responding to Mass Fatality and Surge Fatality events. Ms. Rouse is responsible for the oversight of continuity planning, emergency management and the development and implementation of training and exercises.

Ms. Rouse is also a member of DMORT-WMD (Disaster Mortuary Response Team-Weapons of Mass Destruction).

March 11, 2015

WILL SCHULZ, MA - DEPUTY DIRECTOR OF THE ARIZONA DEPARTMENT OF EMERGENCY AND MILITARY AFFAIRS' DIVISION OF EMERGENCY MANAGEMENT



Will Schulz currently serves as the Deputy Director of the Arizona Department of Emergency & Military Affairs Division of Emergency Management. He is also dual-hatted as the Assistant Director of Grant Administration. These roles have him overseeing the day-to-day operations of the Division, as well as the administration of numerous Federal and State grant programs. Prior to this role, he served as the Assistant Director for Recovery, playing a key role in coordinating state and federal actions with local jurisdictions to assist impacted communities in recovering from disasters. He began his career at DEMA in 2009 as the Infrastructure Branch Manager, primarily administering the Public Assistance Program, a Federal and State grant program that helps jurisdictions pay for disaster-related damages.

Mr. Schulz has worked for the State's Department of Homeland Security as a Strategic Planner, as well as at the local level in City Emergency Management. He holds a Bachelor's Degree in Business from Cal Poly San Luis Obispo, a Master's in Organizational Leadership from Azusa Pacific University, and a second Master's in Security Studies from the Naval Postgraduate School's Center for Homeland Defense and Security.

