TUSCARAWAS COUNTY HEALTH DEPARTMENT

ATTACHMENT IV TO THE ERP: **DEPARTMENT OPERATIONS CENTER (DOC) ACTIVATION STANDARD OPERATING PROCEDURE**

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STATEMENT OF PROMULGATION

The Tuscarawas County Health Department (TCHD) **DEPARTMENT OPERATIONS CENTER (DOC) ACTIVATION STANDARD OPERATING PROCEDURE** establishes guidelines to ensure the Tuscarawas County Health Department's (TCHD) Department Operations Center (DOC) is functional and operational at all times, including equipment, staffing, activation, de-activation and maintenance procedures.

Program areas are directed to implement training efforts and exercise these plans in order to maintain the overall preparedness and response capabilities of the TCHD.

TCHD will maintain this plan, reviewing it and reauthorizing it at least annually; findings from its utilization in exercises or real incidents will inform updates.

This **DEPARTMENT OPERATIONS CENTER (DOC) ACTIVATION STANDARD OPERATING PROCEDURE** is hereby adopted, and all program areas are directed to implement it. All previous versions of **TCHD ERF #1 - Direction and Control Guidelines** are hereby rescinded.

Katie Seward, Health Commissioner, Tuscarawas County General Health District	10/10/18 Date
Board of Health President, Tuscarawas County General Health District	10/10/18 Date
Vickie Ionno, Health Commissioner, New Philadelphia City Health Department	11/27/17 Date
Board of Health President, New Philadelphia City Health Department	11/27/17 Date

RECORD OF CHANGES

The Health Commissioner for the Tuscarawas County Health Department authorizes all changes to the TCHD **DEPARTMENT OPERATIONS CENTER (DOC) ACTIVATION STANDARD OPERATING PROCEDURE.** Change notifications are sent to those on the distribution list. To annotate changes:

- Add new pages and destroy obsolete pages.
- Make minor pen and ink changes as identified by letter.
- Record changes on this page.
- File copies of change notifications behind the last page of this Plan.

Change Number	Date of Change	Print Name & Signature	Title
N/A	7/18/17	Paul R. Westlake	PHEP Coordinator
Version Number: 2017.9	Created SOP by renaming and editing **ERF #1 – Direction and Control Procedures**		
Change Number	Date of Change	Print Name & Signature	Title
2017.12.29	12/29/2017	Paul R. Westlake	PHEP Coordinator
Version Number: 2017.12	[DESCRIPTION OF CHANGE] Added Communications Section (Phone Numbers, Wi-Fi, etc)		
Change Number	Date of Change	Print Name & Signature	Title
2	9/17/2018	Paul R. Westlake	PHEP Coordinator
Version Number: 2018.09	Pages 13-16: Updated staffing responsibilities and Leader checklists. Defined the DOC Management Team Added a DOC layout floorplan		
Change Number	Date of Change	Print Name & Signature	Title
Version Number:	[DESCRIPTION OF CHANGE]		

RECORD OF DISTRIBUTION

A single copy of this Tuscarawas County Health Department (TCHD) **DEPARTMENT OPERATIONS CENTER (DOC) ACTIVATION STANDARD OPERATING PROCEDURE** is distributed to each person in the positions listed below.

Date Received	Program Area	Title	Name
	Administration	Health Commissioner, TCHD	Katie Seward
	NPCHD	Health Commissioner, NPCHD	Vickie Ionno

This plan is available to all Tuscarawas County Health Department and New Philadelphia Health Department employees on their respective agency websites. Two copies can also be found in the Department Operations Center (DOC) in hard copy format. Additionally, each Director and the Public Health Emergency Preparedness Coordinator possess an individual copy.

DOCUMENT DESCRIPTION

The purpose of this Standard Operating Procedure (SOP) is to establish guidelines to ensure the Tuscarawas County Health Department (TCHD) Department Operations Center (DOC) is functional and operational at all times, including equipment, staffing, activation, de-activation and maintenance procedures.

DOC (HEALTH DEPARTMENT OPERATIONS CENTER)

The Health District Operations Center (DOC or simply DOC) is specific to TCHD, not other agencies within Tuscarawas County. It is a centralized point for coordination and supervision of public health emergency response operations that involve TCHD.

If additional support beyond TCHD's capabilities is required for response, the Tuscarawas County Emergency Operations Center (EOC) will open. Depending on the incident, the EOC and DOC may be open at the same time. Even if both are open, TCHD must still provide a representative to the EOC.

Anytime the DOC is activated, the Incident Command System is to be utilized. See **ATTACHMENT XIII – INCIDENT COMMAND SYSTEM (ICS) STANDARD OPERATING PROCEDURES.**

DOC LEVELS

DOC LEVEL I:

- This is the first level of DOC activation in which TCHD will begin response operations.
- This level involves a relatively minor incident. DOC Level I may be the sole activation for a minor incident, or may serve as the planning or initial response stage to an escalating incident.
- In DOC Level I, TCHD will begin active information collection as related to the incident.
- At this time, only individuals with a direct role in response will be involved. This should include one or more representatives from one or more of the TCHD divisions.

DOC LEVEL II:

- DOC Level II is characterized by activation of ICS Command Staff and Section Chiefs.
- The Command Staff and Section Chiefs open the physical DOC location and begin developing the Incident Action Plan (IAP) for response to the incident.
- The rest of the General Health District staff is notified of the incident and of the potential for mobilization if the incident escalates.
- At this level, TCHD is utilizing only its own staff and resources. In terms of staff, this may involve partial mobilization (up to 50% of staff), full mobilization (50%-75% of staff), or total activation (more than 75% of staff).
- At this level, any relevant partnering agencies are notified of the TCHD's response. If the possibility exists that TCHD will end up needing assistance from any of these agencies, they should be notified of that possibility as well.

DOC LEVEL III:

- This is the highest level of DOC activation, and is characterized by the need for assistance from outside agencies.
- All possible TCHD staff and resources should be activated before requesting outside assistance. This assistance will be coordinated though the Tuscarawas County Emergency Management Agency (TCEMA).

CRITERIA FOR ESCALATION:

The following escalation criteria are located in flowchart form in Table II, DOC Decision Algorithm.

ESCALATION TO DOC LEVEL I:

- ❒ Does the event require coordination between two or more TCHD staff or programs?
- ❒ If yes, does the event meet one of the following four criteria?
  - o The event is expected to attract significant media attention.
  - o The event is expected to require standardized public messaging.
- ❒ This is an abnormal event.
- ❒ An event has not yet occurred, but there is reason to expect a serious incident to occur.
- ❒ If yes, DOC Level I activation is warranted at this time.

ESCALATION TO DOC LEVEL II:

- ❒ Are the demands of the incident escalating?
- ❒ If yes, does the incident require coordinated ICS response involving planning, operations, finance, and logistics?
- ❒ If yes, has the incident reached a degree that justifies diverting some TCHD personnel and resources from their normal functions?
- ❒ If yes, is a field response (such as opening a POD) required?
- ❒ If yes, DOC level II activation is warranted at this time.
- ❒ If no, does the incident meet one of the following criteria?:
  - o The incident requires a more intensive response using additional TCHD personnel and resources.
  - o It is necessary to manage significant amounts of personnel and resources differently than how they would be managed in day-to-day operations.
- ❒ If yes, DOC Level II activation is warranted at this time.

ESCALATION TO DOC LEVEL III:

- ❒ Are the demands of the incident escalating?
- ❒ If yes, does TCHD require that additional personnel and/or resources be provided by outside agencies in order to respond to the incident?
- ❒ If yes, DOC Level III activation is warranted at this time.

DE-ESCALATION OF DOC LEVELS:

When an incident begins to resolve and therefore requires a less intensive response, DOC levels will de-activate in a descending sequence back to normal operations.

De-escalation will involve the activation of **ERF #10: Recovery Operations**. This characterizes a shift from the response phase to the recovery phase of emergency management.

De-escalation involves moving from the highest DOC level reached in a response effort, back down to normal operations. This may be a gradual step-down process that goes through each activation level before returning to normal. However, if the incident resolves quickly, de-escalation can skip DOC levels (i.e. moving from DOC Level III to DOC Level I).

DE-ESCALATION:

- ❒ Have conditions become consistent with an DOC level lower than what is currently activated?
  - o If yes, are conditions not expected to re-escalate?
  - o If yes, de-escalation to a lower DOC level is warranted at this time.

DETERMINING IF AN AFTER-ACTION REPORT (AAR) IS NECESSARY:

If any DOC level is activated, an AAR will be necessary.

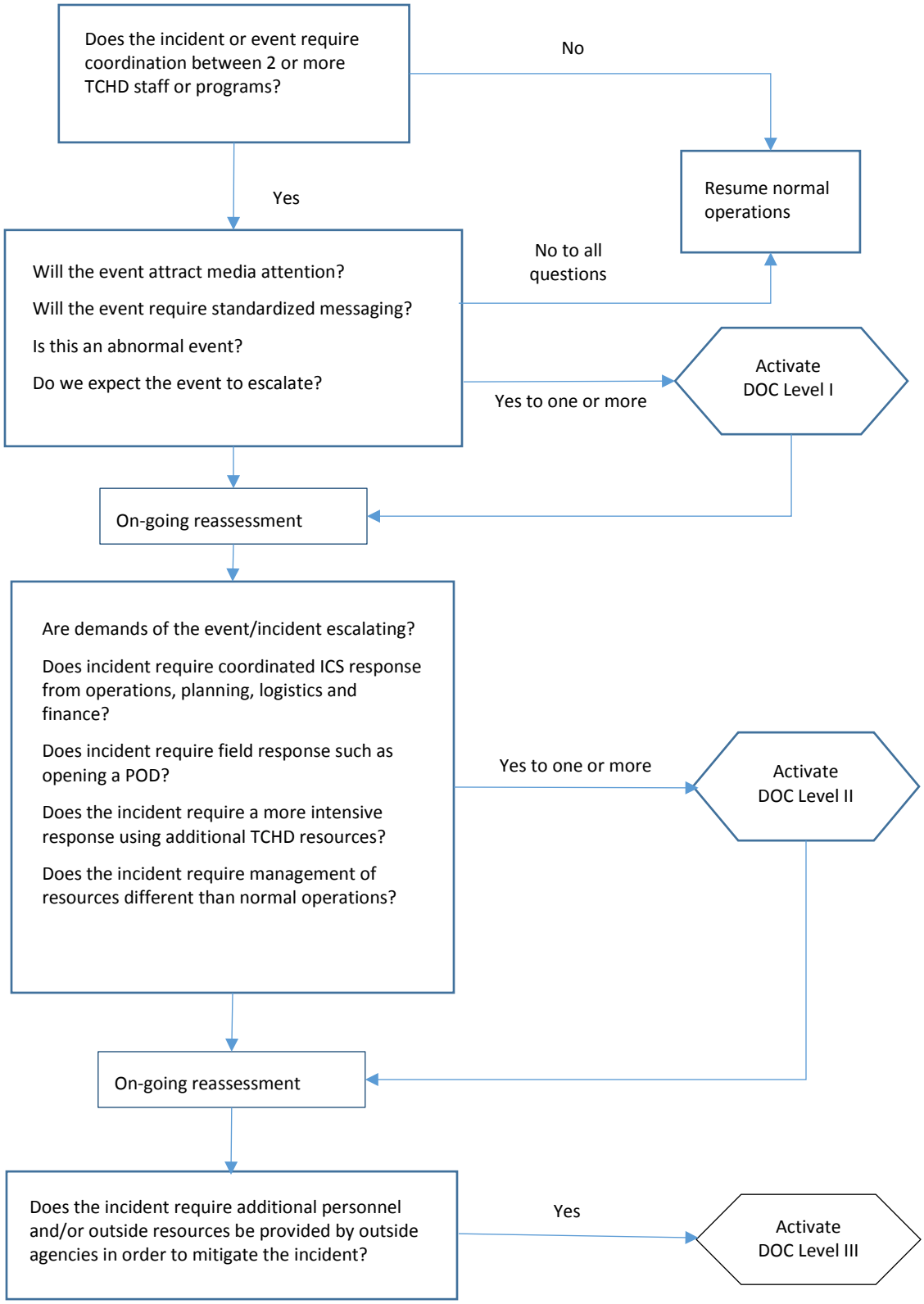
AAR template should be used (see **ATTACHMENT X: AFTER-ACTION REPORT/IMPROVEMENT PLAN).**

Example DOC Escalation Scenarios for Different Event Types

DOC Level	Infectious Disease Outbreak	Environmental Event	Other Health Event Cluster
I	Infectious disease outbreak in neighboring counties that has not yet affected Tuscarawas County directly, but there is anticipation of possible cases within the County.	Decreased water pressure has led to a boil water alert for one jurisdiction within the County. TCHD is receiving calls about the issue, and other parts of the County may become affected in coming days.	Community report of a cluster of a mysterious illness in the County. No connections between cases have been confirmed, but the incident is attracting media attention and questions from the public.
II	Enough additional cases have appeared in the county for opening a point of dispensing (POD) clinic.	The boil water alert now includes the entire County and some areas neighboring counties. Staff are being deployed to distribute boil instructions to residents.	The source of radiation exposure has been determined, and a POD is being opened to distribute Prussian blue as treatment for those who were exposed.
III	The demand at the special clinic or POD has become high enough that additional vaccine or manpower must be requested from agencies other than TCHD.	Bottled water is going to be distributed to residents. This will involve collaboration between TCHD, the Red Cross, and other agencies.	Shelters need to be opened for those living near the exposure source. TCHD must request assistance from the Red Cross.

Table 1 – DOC Escalation

Table 2 – DOC Decision Tree



- At DOC Levels I – II, it is ideal that TCEMA be notified of the incident status. However, at this point, they will likely not be directly involved in TCHD's response operations.
- At DOC Level III, assistance from outside agencies will be coordinated through the TCEMA.
- If DOC Level III is declared, the Health Commissioner (or designee) will report to the Tuscarawas County EOC for inter-agency response coordination as needed.

TCHD SUPPORTING RESPONSE BY PARTNER AGENCIES AND PARTICIPATION IN MACC

At the request for support from partner agencies, TCHD will provide support for emergency response or to participate in a multi-agency coordination center (MACC).

The Health Commissioner (or designee) will report to the Tuscarawas County EOC to assume the role of the TCHD Department Coordinator (DC) within that agency's Incident Command System. This person must have the authority to make decisions regarding TCHD operations.

DOC FACILITY LOCATION

- The primary TCHD DOC is located at:

  Tuscarawas County Health Department
  897 East Iron Ave
  Dover, Ohio 44622

- Back-up electricity is available at the primary DOC for the large conference room, the Health Commissioner's office, the lab and medication refrigerators, and the phone and alarm systems
- In the event that the primary facility is damaged, inaccessible, unsafe, or must be evacuated, an alternative DOC will be established and located at a location outlined in the ***TCHD Continuity of Operations Plan (COOP).***
- Backup/Secondary DOC

  Pioneer Programming
  1451 4th St. NW
  New Philadelphia, OH 44663

DEPARTMENT OPERATIONS CENTER SETUP PROTOCOL

COMMON RESPONSIBILITIES CHECKLIST

In addition to position specific responsibilities, the following checklist indicates minimum common responsibilities and requirements. Some tasks are one-time, while others are ongoing for the duration of the incident. Tasks may be delegated to appropriate staff as necessary. This does not relieve the primary department or director from performing the roles and responsibilities identified in Tuscarawas County Health Department (TCHD) plans.

INITIAL/BEGINNING OF OPERATIONAL PERIOD ACTIONS

- ❒ Receive assignment from TCHD and activation instructions.
- ❒ Obtain information on reporting location, time, and travel instructions.
- ❒ Assess personal preparedness and equipment readiness (e.g. personal medications, computer, etc.).
- ❒ Start ICS 214 – Unit/Activity Log.
- ❒ Upon arrival, check in at the designated reporting location. If reporting to your normal work location, make contact with your section chief.
- ❒ Obtain any special communication equipment needed to perform assigned tasks.
- ❒ If applicable, log onto computers and/or programs necessary for the performance of your duties.

OPERATIONAL READINESS

- The PHEP Coordinator is responsible for keeping the Department Operations Center (DOC) operationally ready at all times, including equipment, activation and deactivation procedures, and plan maintenance as well as trained staff.
- The DOC facility can be operational within 30-minutes of notification during normal business hours (Monday-Friday from 8:00 a.m. to 4:00 p.m.).
- During non-business hours, the DOC facility can be operational within 30-minutes of a person arriving at TCHD following notification (Monday-Friday from 4:00 p.m. to 8:00 a.m., weekends and holidays).
- All Directors will be trained on all the equipment, software, policy, and procedures of the DOC and be capable of standing up and activating the DOC.
- Specific Job Action and Incident Command System (ICS) folders will be prepared, supplied and available in the DOC containing explanation of duties, responsibilities, implementing instructions, associated documentation, activity log, and note pad for designated DOC positions.

STAFFING AND RESPONSIBILITIES

- The Health Commissioner will be responsible to pre-designate a DOC Management Team. TCHD will also maintain a list for DOC staffing, including alternate staff for back-up.
- Staffing levels will be expanded, or reduced, as needed to support TCHD operational needs.
- Two (2) positions required to maintain the DOC during an event are:
  - DOC Manager
  - Communication Unit Leader
- The PHEP Coordinator shall ensure that all staff that is designated as having an assigned role within the DOC during an incident is trained in DOC operations. Personnel shall receive training in the equipment and procedures needed during activation on an as needed basis.
- PHEP Director and PHEP Coordinator Responsibilities
  - Maintain a list of primary and alternate staff for DOC assignments.
  - Provides TCHD Directors, or their designated back-up, who will be available to open and maintain the DOC until a DOC Manager is assigned.

DOC Manager

- ❒ Ensures the TCHD DOC remains in an operational state for immediate activation.
- ❒ In conjunction with the IC, determines and recommends staffing levels in accordance with the incident-level to ensure that activities are supported by reviewing activation and demobilization requests.
- ❒ Responsible for supporting the activation, operation and deactivation of the DOC.
- ❒ Provides service and support of the DOC facility, by referring all requests for equipment procurement, repairs, food, water, utilities, and personal accommodations for the DOC staff to the Logistic Section.
- ❒ Maintains the Sign-In/Sign-Out Log. See ICS Form 211.
- ❒ Coordinates DOC needs (e.g., computers, copiers, fax) with the Information Technology Unit Leader (if activated).
- ❒ Coordinates clerical support for the DOC.
- ❒ Maintains DOC records (e.g., DOC Sign-In/Sign-Out Log) and creates the AAR upon DOC deactivation.
- ❒ Provides orientation on DOC equipment (e.g., computers, copiers, fax, projectors)
- ❒ Supports the operations of display equipment and software.
- ❒ Operates video switching and video monitor equipment in support of DOC operations.
- ❒ Ensures that there are adequate and functional computers, software, and associated equipment.
- ❒ Supports WebEOC training and orientation in conjunction with the State and County EMA.

Communications Leader

- ❒ Prepares telephones.
- ❒ Prepares computer network cable hookups.
- ❒ Completes, copies and distributes the DOC Phone Extensions Form. See DOC Phone Extensions Form.
- ❒ Post the call center numbers (if activated) and the Wi-Fi password on the white-board.
- ❒ Gathers MARCS radios and charger from PHEP Office if requested by DOC Manager.

Information Technology Unit Leader

- ❒ Representative from TCHD's IT supplier (Pioneer Programming)
- ❒ Provides input to the DOC Manager.
- ❒ Provides orientation on DOC technology equipment/programs as needed.
- ❒ Supports video, telephone, radio and other communication systems in the DOC; in conjunction with the DOC Manager.
- ❒ Ensures the internet is accessible via wi-fi or hardwired T1 lines.
- ❒ Identifies and recommends additional IT needs to the IC or DC.

Physical Set-Up Team

- ❒ Sets tables and chairs according to the DOC Layout floorplan.
- ❒ Sets telephones and laptops at appropriate stations.
- ❒ Makes sure that office supplies (i.e., paper, pens, dry erase markers and erasers are available.
- ❒ Assists the DOC Manager with other set-up tasks as needed,

OPERATIONAL PERIODS

- Operational periods should be flexible and scalable to meet the incident's need(s). The DOC may operate in two 12-hour or three 8-hour operational periods during a disaster for 24-hour operational coverage; if needed. Additionally, DOC operations may require staffing only during normal business hours; with coverage designated by the IC/DC or Health Commissioner. Staffing of the DOC is incident need specific and flexible by nature.
- Staff will be briefed at the start of each shift concerning the situation status and debriefed prior to being released from duty in the DOC. Staff is responsible for briefing their replacement of current situation, duties and procedures related to the DOC position.

FORMS AND DOCUMENTATION

- Documentation within the DOC must be timely, accurate and complete. The DOC will maintain and store all Job Action Sheet hard copies. All documentation, information, completed forms, logs, updated status boards and appropriate briefing reports will be given to the Planning Section/Documentation Unit to be catalogued and preserved.

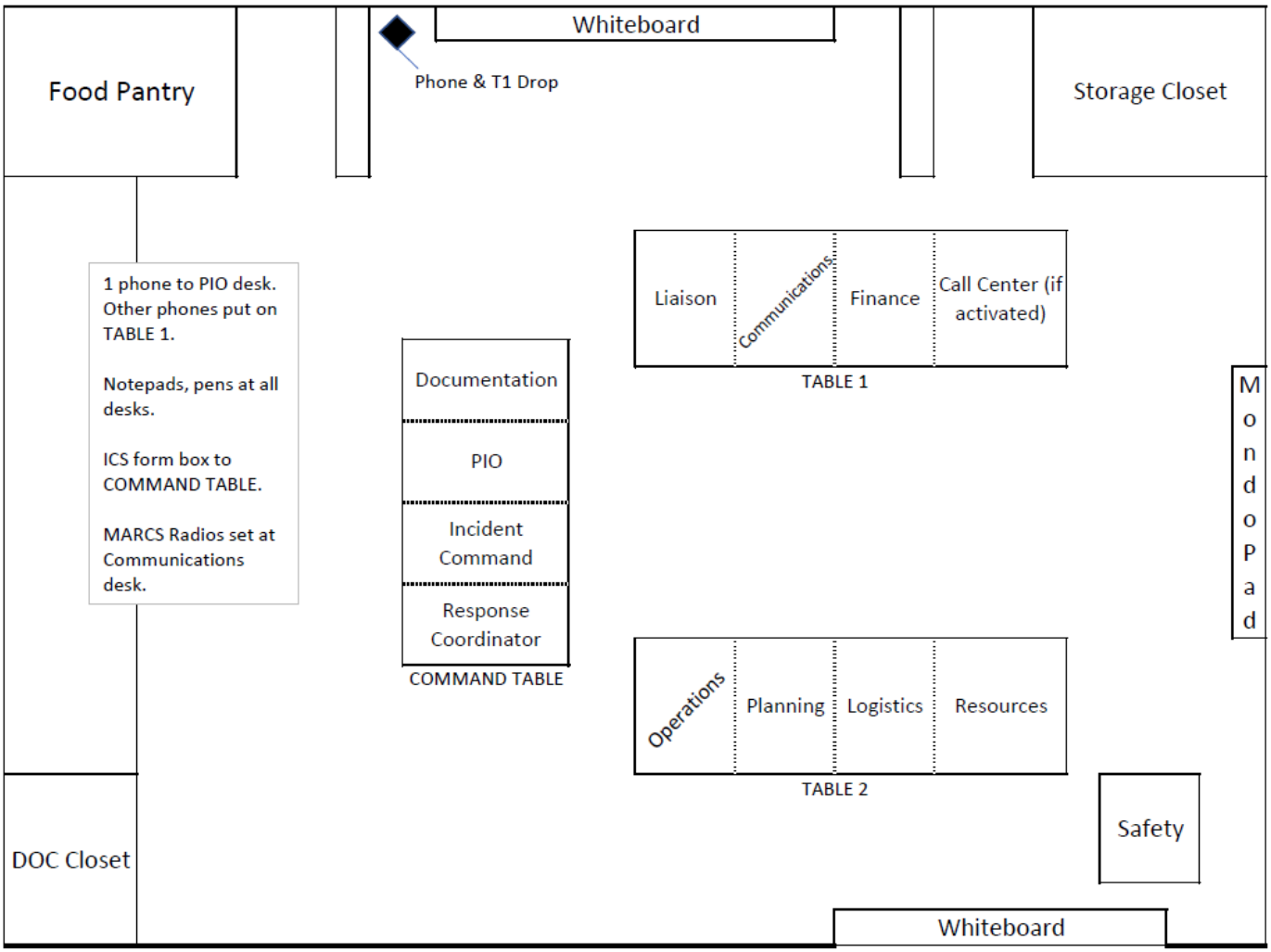
- If needed, hardcopies of all the TCHD ICS forms are present in the DOC. The ICS forms are stored a wheeled catalog case.
- TCHD DOC ICS Sign-In/Sign-Out Logs
  - Every staff member upon arrival at the DOC will sign-in and will sign-out of the DOC upon departure using the ICS-211 form.
  - Every staff member will report to the DOC Manager or to the designated person and receive a status briefing.

DOC MANAGEMENT TEAM

Position	Primary	Backup
DOC Manager	PHEP Coordinator	Facilities Director
Communications Leader	Facilities Director	PHEP Coordinator
Physical Setup Team	Directors	Environmental Health Staff
Incident Commander	Health Commissioner	PHEP Director, DON, EH Director (Depending on the type of incident response).
Information Technology (If Activated)	Pioneer 360 Staff	

DOC SETUP & LAYOUT

TCHD DOC Layout



DOC COMMUNICATIONS

PHONE NUMBERS

- Phone line drop above ceiling panel in corner above whiteboard.
- After hours contact number: 614-462-8825
- Call Center number: 330-365-3758
- Phone extensions: 300 – 309
- Fax number (Administrative Assistant's Office): 330-364-8946

WI-FI

- Password: tchd/4261/ppinc
- Guest password: TCHDGuest!

NETWORK

- T1 jacks around room

MULTI-AGENCY RADIO COMMUNICATION SYSTEM (MARCS)

- Base station in Environmental Health office
- Portable radios:
  - PHEP Office
  - Front desk
- See MARCS SOP for more information.

NECO CONFERENCE CALL

For internal use only:

- Website: https://global.gotomeeting.com/
- UserName: cbarker@schd.org
- Password: necoregion5

NECO Communicable Disease & Epidemiology Coordination Conference Call Line

Website: https://global.gotomeeting.com/join/754095109
United States: +1 (224) 501-3212
Access Code: 754095109

BLAST FAX

1. On the main menu press fax option on screen
2. Press device address book
3. In the left-hand corner touch drop down box and select fax groups
4. Under names, select what groups you want to send fax to and press add
5. Then touch OK
6. Next screen will give faxing options. If everything is ok to send hit green start button on copier.
7. Depending on how many contacts were sent fax, it will take a while for the confirmation pages to print.