

# Emergency Operations Center (EOC) Activations

Element	Data Entry Guidance	Significance
<p><b>EOC1</b> Name of exercise, event, or incident.</p>	<p><b>EOC1</b> Enter a unique exercise, event, or incident name. Enter all EOC activations for the jurisdiction. At least one EOC activation submission is required annually.</p>	<p>For an effective response, it is critical that the health department defines:</p> <ul style="list-style-type: none"> <li>• Criteria for EOC activation and demobilization,</li> <li>• Specifics for operations during all phases of the response, and</li> <li>• Staffing criteria, whether in the lead or supporting a response, to facilitate an optimal organizational structure.</li> </ul>
Reviewer Guidance	Documentation	Submission Frequency
<p><b>EOC1</b> Evidence must indicate EOC activation occurred.</p>	<p>If an after-action report (AAR) is available for the incident, provide as evidence. Data collection call sheet, if available, should include EOC site call-down completion time, acknowledgement completion time, and percentage of staff and EOC site availability.</p> <p><u>Examples of Acceptable Evidence</u></p> <ul style="list-style-type: none"> <li>• AARs.</li> <li>• Incident corrective actions.</li> <li>• Training plans with incident participation included.</li> </ul>	<p>At a minimum, submit annually; every EOC activation involving public health must be entered. Real-time entry is highly encouraged.</p>

Element	Data Entry Guidance	Significance
<p><b>EOC2</b> Start date and time for exercise, incident, or event..</p>	<p><b>EOC2</b> Indicate the start date and time. A start time must be documented for the exercise, incident, or event.</p>	<p>For an effective response, it is critical that the health department defines:</p> <ul style="list-style-type: none"> <li>• Criteria for EOC activation and demobilization,</li> <li>• Specifics for operations during all phases of the response, and</li> <li>• Staffing criteria, whether in the lead or supporting a response, to facilitate an optimal organizational structure.</li> <li>• Submission Frequency</li> </ul>
Reviewer Guidance	Documentation	Submission Frequency
<p><b>EOC2</b> Evidence must indicate EOC activation occurred. At least one area of improvement must be included.</p>	<p>If an after-action report (AAR) is available for the incident, provide as evidence. Data collection call sheet, if available, should include EOC site call-down completion time, acknowledgement completion time, and percentage of staff and EOC site availability.</p> <p><u>Examples of Acceptable Evidence</u></p> <ul style="list-style-type: none"> <li>• AARs.</li> <li>• Incident corrective actions.</li> <li>• Training plans with incident participation included.</li> </ul>	<p>At a minimum, review annually and update as necessary.</p>

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<p><b>EOC3</b> End date and time of exercise, incident, or event.</p>	<p><b>EOC3</b> Indicate the end date and time. If activity is submitted prior to the conclusion of the incident, leave this question blank until the activity concludes. An end time must be documented for incidents.</p>	<p>For an effective response, it is critical that the health department defines:</p> <ul style="list-style-type: none"> <li>• Criteria for EOC activation and demobilization,</li> <li>• Specifics for operations during all phases of the response, and</li> <li>• Staffing criteria, whether in the lead or supporting a response, to facilitate an optimal organizational structure.</li> </ul>
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<p><b>EOC3</b> Evidence must indicate exercise, incident, or event occurred.</p>	<p>If an AAR is available for the incident, provide as evidence. Data collection call sheet, if available, should include EOC site call-down completion time, acknowledgement completion time, and percentage of staff and EOC site availability.</p> <p><u>Examples of Acceptable Evidence</u></p> <ul style="list-style-type: none"> <li>• AARs.</li> <li>• Incident corrective actions.</li> <li>• Training plans with incident participation included.</li> </ul>	<p>At a minimum, submit annually; every EOC activation involving public health must be entered. Real-time entry is highly encouraged.</p>

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<p><b>EOC4</b> Category of response.</p>	<p><b>EOC4</b> Select all options that apply: Biological; Community resources or Utility Failures; Environmental; Mass Gathering; Natural Disaster; Occupational Safety or Industrial Hygiene; Structural Failure; Technological; Terrorism or Violence Threats; Transportation; or other, specify.</p>	<p>For an effective response, it is critical that the health department defines:</p> <ul style="list-style-type: none"> <li>• Criteria for EOC activation and demobilization,</li> <li>• Specifics for operations during all phases of the response, and</li> <li>• Staffing criteria, whether in the lead or supporting a response, to facilitate an optimal organizational structure.</li> </ul>
Reviewer Guidance	Documentation	Submission Frequency
<p><b>EOC4</b> Evidence must indicate EOC activation occurred. At least one area of improvement must be included.</p>	<p>If an AAR is available for the incident, provide as evidence. Data collection call sheet, if available, should include EOC site call-down completion time, acknowledgement completion time, and percentage of staff and EOC site availability.</p> <p><u>Examples of Acceptable Evidence</u></p> <ul style="list-style-type: none"> <li>• AARs.</li> <li>• Incident corrective actions.</li> <li>• Training plans with incident participation included.</li> </ul>	<p>At a minimum, submit annually; every EOC activation involving public health must be entered. Real-time entry is highly encouraged.</p>

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<p><b>EOC5</b> Capabilities applied.</p>	<p><b>EOC5</b> Indicate what capabilities were practiced. Ideally, over the course of the cooperative agreement performance period, all capabilities will be exercised to some degree.</p>	<p>For an effective response, it is critical that the health department defines:</p> <ul style="list-style-type: none"> <li>• Criteria for EOC activation and demobilization,</li> <li>• Specifics for operations during all phases of the response, and</li> <li>• Staffing criteria, whether in the lead or supporting a response, to facilitate an optimal organizational structure.</li> </ul>
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<p><b>EOC5</b> Review incident for application of capabilities across activities. Documenting the capabilities included for each activity provides a record of progress.</p>	<p>If an AAR is available for the incident, provide as evidence. Data collection call sheet, if available, should include EOC site call-down completion time, acknowledgement completion time, and percentage of staff and EOC site availability.</p> <p><u>Examples of Acceptable Evidence</u></p> <ul style="list-style-type: none"> <li>• AARs.</li> <li>• Incident corrective actions.</li> <li>• Training plans with incident participation included.</li> </ul>	<p>At a minimum, submit annually; every EOC activation involving public health must be entered. Real-time entry is highly encouraged.</p>

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<p><b>EOC6</b> Level of activation.</p>	<p>Select level of EOC activation. EOC activation can be physical, virtual, or hybrid where a portion of the site is physical and others are notional or a combination.</p>	<p>For an effective response, it is critical that the health department defines:</p> <ul style="list-style-type: none"> <li>• Criteria for EOC activation and demobilization,</li> <li>• Specifics for operations during all phases of the response, and</li> <li>• Staffing criteria, whether in the lead or supporting a response, to facilitate an optimal organizational structure.</li> </ul>
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<p><b>EOC6</b> EOC activations can be physical, virtual, or hybrid where a portion of the site is physical, and others are notional or a combination. Review the activation history to assure physical type of EOC availability is practiced for key sites during the performance period.</p>	<p>If an AAR is available for the incident, provide as evidence. Data collection call sheet, if available, should include EOC site call-down completion time, acknowledgement completion time, and percentage of staff and EOC site availability.</p> <p><u>Examples of Acceptable Evidence</u></p> <ul style="list-style-type: none"> <li>• AARs.</li> <li>• Incident corrective actions.</li> <li>• Training plans with incident participation included.</li> </ul>	<p>At a minimum, submit annually; every EOC activation involving public health must be entered. Real-time entry is highly encouraged.</p>