



# DEPARTMENT OPERATIONS CENTER — PLANNING GUIDANCE & RESOURCES —

August 2019

**HAWAII EMERGENCY MANAGEMENT AGENCY**

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# Department Operations Center (DOC)

## RECOMMENDED SUPPLY, EQUIPMENT AND PROCEDURE LIST

	ITEM	QUANTITY	EXPIRATION OR VERSION DATE (Or 'N/A')	LOCATION (If not kept in DOC)	POSITION RESPONSIBLE FOR SUPPLYING WHEN ACTIVATED	NOTES
	<b>PAPERWORK</b>					
<input type="checkbox"/>	Emergency Sign-In Rosters					
<input type="checkbox"/>	Emergency Expenditure Logs					
<input type="checkbox"/>	Phone Log					
<input type="checkbox"/>	Shift Scheduling Worksheet					
	<b>PLANS</b>					
<input type="checkbox"/>	Hawaii Emergency Operations Plan					
<input type="checkbox"/>	Department Emergency Operations Plan					
<input type="checkbox"/>	Department Continuity of Operations Plan					
<input type="checkbox"/>	Standard Operating Guides/Checklists/Job Aids					
<input type="checkbox"/>	WebEOC Manual					
<input type="checkbox"/>	DOC Setup Checklist					
<input type="checkbox"/>	DOC Setup Floorplan & Seating Chart					
	<b>PHONE LISTS</b>					
<input type="checkbox"/>	Department/Agency Staff					
<input type="checkbox"/>	Vendors/Contractors					
<input type="checkbox"/>	HI-EMA Contact Numbers					
<input type="checkbox"/>	Emergency Management Partners (State Emergency Support Function agencies; NGOs; etc.)					

	ITEM	QUANTITY	EXPIRATION OR VERSION DATE (Or 'N/A')	LOCATION (If not kept in DOC)	POSITION RESPONSIBLE FOR SUPPLYING WHEN ACTIVATED	NOTES
	SIGNAGE					
<input type="checkbox"/>	DOC Activation Door Sign					
<input type="checkbox"/>	Table Tents for Seat Assignments/Workstations					
<input type="checkbox"/>	Other Instructional/ Informational Signs					
	OFFICE SUPPLIES					
<input type="checkbox"/>	Copy/Printer Paper		N/A			
<input type="checkbox"/>	Toner for Printer/Copier		N/A			
<input type="checkbox"/>	First Aid Kit		N/A			
<input type="checkbox"/>	Flashlights		N/A			
<input type="checkbox"/>	Batteries		N/A			
<input type="checkbox"/>	Pens (black and blue ink)		N/A			
<input type="checkbox"/>	Pencils		N/A			
<input type="checkbox"/>	Highlighters		N/A			
<input type="checkbox"/>	Markers		N/A			
<input type="checkbox"/>	Dry Erase Markers		N/A			
<input type="checkbox"/>	Notebooks		N/A			
<input type="checkbox"/>	Post-It-Notes		N/A			
<input type="checkbox"/>	Stapler		N/A			
<input type="checkbox"/>	Staplers		N/A			
<input type="checkbox"/>	Scissors		N/A			
<input type="checkbox"/>	Painters Tape		N/A			
<input type="checkbox"/>	Scotch Tape		N/A			
<input type="checkbox"/>	Clipboards		N/A			
<input type="checkbox"/>	Thumbtacks		N/A			

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<input type="checkbox"/>	3-Ring Binders		N/A			
<input type="checkbox"/>	Easel		N/A			
<input type="checkbox"/>	Newsprint Tablet		N/A			
<input type="checkbox"/>	Whiteboard		N/A			
<input type="checkbox"/>	Bulletin Board or Display Area		N/A			
<input type="checkbox"/>	Maps or Diagrams for Display (Large format, hard copy)					
	<b>EMERGENCY SUPPLIES</b>					
<input type="checkbox"/>	First Aid Kit					
<input type="checkbox"/>	Automatic Defibrillator					
<input type="checkbox"/>	Flashlights		N/A			
<input type="checkbox"/>	Batteries					
<input type="checkbox"/>	Weather Radio		N/A			
<input type="checkbox"/>	Humanitarian Daily Rations (HDRs) or Meals Ready to Eat (MREs)					
<input type="checkbox"/>	Canned or Bottled Water					
	<b>HYGIENE SUPPLIES</b>					
<input type="checkbox"/>	Hand Sanitizer					
<input type="checkbox"/>	Trashcans		N/A			
<input type="checkbox"/>	Trash Bags		N/A			
<input type="checkbox"/>	Paper Towels		N/A			
<input type="checkbox"/>	Toilet Paper		N/A			
<input type="checkbox"/>	All Purpose Cleaner		N/A			
<input type="checkbox"/>	Plastic Wrap or Tinfoil		N/A			
<input type="checkbox"/>	Paper Plates		N/A			
<input type="checkbox"/>	Plastic Forks/Spoons/Knives		N/A			

	ITEM	QUANTITY	EXPIRATION OR VERSION DATE (Or 'N/A')	LOCATION (If not kept in DOC)	POSITION RESPONSIBLE FOR SUPPLYING WHEN ACTIVATED	NOTES
	BACK-UP COMMUNICATIONS EQUIPMENT					
<input type="checkbox"/>	Backup cellular 4G LTE WAN modem					<i>It is recommended that all 4G LTE WAN be Wireless Priority Service (WPS) enabled</i>
<input type="checkbox"/>	Auxiliary Fail-over WiMAX, 4G LTE, or VSAT internet services					
<input type="checkbox"/>	Portable or Land Mobile Radios (LMRs) programmed to operate on the State 700/800 MHz digital radio system (HIWIN).					
	BACK-UP POWER					
<input type="checkbox"/>	Generator					
<input type="checkbox"/>	Fuel Storage					
	OFFICE EQUIPMENT					
<input type="checkbox"/>	Workstations (tables and chairs)		N/A			
<input type="checkbox"/>	Computers (preferably laptops) equipped with wired (RJ-45) and wireless Local Area Network (LAN) cards					*Requires Microsoft Chrome web browser (32-bit or 64-bit) installed and tested with ability to login to WebEOC 8.2 <a href="https://webeoc1.scd.hawaii.gov/eoc7/">https://webeoc1.scd.hawaii.gov/eoc7/</a>
<input type="checkbox"/>	Local Power-over-Ethernet (PoE) Local Area Network (LAN) router equipped with:  <input type="checkbox"/> Two (2) Wide Area Network (WAN) ports. <input type="checkbox"/> Four (4) DHCP LAN ports consisting of a minimum of one (1) wired RJ- 45 PoE Ethernet port. <input type="checkbox"/> One secured wireless (Wifi) Access Point.					



	ITEM	QUANTITY	EXPIRATION OR VERSION DATE (Or 'N/A')	LOCATION (If not kept in DOC)	POSITION RESPONSIBLE FOR SUPPLYING WHEN ACTIVATED	NOTES
<input type="checkbox"/>	Printer - connected to the Local Area Network (LAN)					
<input type="checkbox"/>	Scanner					
<input type="checkbox"/>	Copier					
<input type="checkbox"/>	Fax Machine with Fax Line					
<input type="checkbox"/>	Power Strips/Surge Protectors		N/A			
<input type="checkbox"/>	Display Screen or Large Screen TV		N/A			
<input type="checkbox"/>	Projector		N/A			<i>If required for display.</i>
<input type="checkbox"/>	Clock		N/A			
<input type="checkbox"/>	VOID or POTS (Plain Old Telephone) Phone Line					
<input type="checkbox"/>	VOIP or POTS Phones for Workstations					
<input type="checkbox"/>	Network and Phone Cables		N/A			
<input type="checkbox"/>	Extra Chargers (Cell Phone; Laptops)		N/A			
<input type="checkbox"/>	Extension Cords		N/A			

## RECOMMENDED DOC PROCEDURES

IT IS RECOMMENDED THAT DEPARTMENTS HAVE THE FOLLOWING PROCEDURES IN PLACE RELATED TO DEPARTMENT OPERATIONS CENTER (DOC) OPERATIONS.

<input type="checkbox"/>	Access Control (who can access the room and how can they access it)
<input type="checkbox"/>	After Hours Access and Security Needs
<input type="checkbox"/>	Personnel Accountability (sign-in, sign-out processes)
<input type="checkbox"/>	Responsibilities for Room Setup and Supplies
<input type="checkbox"/>	Staff Roles and Responsibilities During Emergency Operations

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## OVERVIEW OF COMMON BACK-UP COMMUNICATIONS OPTIONS

	Cellular Wireless Priority Service (WPS)	HIWIN State Land Mobile Radio (LMR)	Iridium Satellite Phone	BGAN Satellite Terminal	EXEDE Very Small Aperture Terminal (VSAT)	Amateur Radio
Description	WPS Provides priority access to the wireless network during periods of high traffic and congestion using existing cell phones	HIWIN LMR provides robust State-wide Push-to-talk voice communications	Iridium Satellite phones are hand-held mobile phones that use multiple satellites to pass voice, text, and limited data	Broadband Global Access Network (BGAN) are highly portable fixed satellite terminals.	Broadband High Throughput Satellite (HTS) Service	Employs commercially available amateur radio technology to provide voice and radio data communications
Use For	When cell system is available but subject to high traffic. Good for pre-event coordination	Pre-event and post-event voice communications. Interoperable with County LMR networks	Emergency and remote communications when other modes are not available.	Providing limited WebEOC, voice, text, and email to isolated and or remote semi-fixed locations.	Providing broadband Internet service in addition to WebEOC, voice, text, and email to fixed locations.	Catastrophic infrastructure failure requires stand-alone communications systems.
Voice	YES	YES	YES	YES	YES	YES
Email and Text	YES	NO	YES	YES	YES	YES
Data Speeds	20-50 Mbps	NO	NO	30 to 300 Kbps	1-3 Mbps	1200-9600 Baud
Portability	Hand Carried	Hand Carried	Hand Carried	Briefcase Size or Fixed 20 lbs	Large Cases 60 to 100 lbs	Hand Carried, Transportable, and Semi-Fixed
Electrical Power	Typical smartphones have 24-48 hours of power. Requires daily recharging	Handheld radios with current batteries have 24-48 hours of power. Requires daily recharging	Iridium phones have limited battery life of 24 hours. Requires daily recharging	Battery life of 6-12 hours depending on utilization.	Full-time UPS power required.	12-24 hours of battery life. Requires recharging thereafter.
Staffing	Universal	Some training required	Requires trained staff with knowledge of International dialing procedures. Ability to correctly orient antenna.	Requires trained staff with knowledge of International dialing procedures. Ability to correctly orient antenna.	Required trained staff with IT experience. Ability to correctly orient antenna.	Requires licensed operator.
User Training	None	1-2 hours	1-2 hours	1-2 hours	2-4 hours	Extensive

	Cellular Wireless Priority Service (WPS)	HIWIN State Land Mobile Radio (LMR)	Iridium Satellite Phone	BGAN Satellite Terminal	EXEDE Very Small Aperture Terminal (VSAT)	Amateur Radio
Estimated Costs	\$120 Annually	No charge if available from HIEMA State Radio Cache. \$1,000 per unit if purchased but no monthly charge.	Iridium 9505a Phones are available starting at \$795. Monthly airtime rates \$50/month \$1.29/minute and text at \$0.60/message	BGAN 500 Terminals starting at \$2,900. Monthly airtime rates \$64/month at \$6.25/MB. Voice \$0.80/minute and text at \$0.50/message	EXEDE fixed terminals starting at \$799. Month airtime rates at \$70/month for 1 Mbps.	No charge
Considerations	WPS is assigned through the GETS/WPS program to a designated cell phone	Network may be subject to temporary service outages due to network infrastructure damage from event. Strong state-wide coverage and is good tool for coordinating multiple workgroups/teams across multiple islands. Can be connected to county radio systems to provide inter-agency communications interoperability.	Using a constellation of constantly moving satellites, Iridium can experience high numbers of dropped calls making it frustrating for voice communications. Can be very useful as an email and text message terminal. Can be called via US gateway.	Using Geosynchronous satellites, BGAN is much more reliable than Iridium. Suitable to portable quick response requiring limited broadband service. Can be very useful as a text message terminal. Requires that calling phone be enable for International dialing.	Primary use is to provide broadband access to WebEOC, state email. Capable of serving as a VOIP voice/data terminal when equipped. Fixed antenna may require replacement and or re-alignment after high-winds.	Requires licensed operator. Requires path to antenna site. If volunteer available mode is well suited for quick response. Capable of on-island VHF/UHF and inter-island HF communications.

# EMERGENCY SIGN-IN ROSTER

Department Name:				
Worksite:				
Emergency/Disaster Name:				
Shift Supervisor Name:		Title:	Phone:	Email:

First Name	Last Name	Position	Authorized Time In	Authorized Time Out	Actual Time In	Actual Time Out	Employee Signature	Supervisor's Initials
			<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> AM <input type="checkbox"/> PM		
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## EMERGENCY EXPENDITURE LOG

FOR USE IN DOCUMENTING EXPENDITURES RELATED TO AN EMERGENCY ACTIVATION. A RECEIPT OR PROOF OF DEPARTMENT EXPENDITURE IS REQUIRED FOR ALL EMERGENCY PURCHASES.

Department Name:							
Worksite:							
Emergency/Disaster Name:							
Contact for Purchasing:		Title:		Phone:		Email:	

Item Purchased	Reason for Purchase	Quantity Purchased	Purchase Date	Vendor Name	Total Cost	Payment Method	Purchaser Name	Authorized By (Name & Title)

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# DEPARTMENT EMERGENCY SHIFT SCHEDULING WORKSHEET

CAN BE USED TO DOCUMENT KEY WORK ASSIGNMENTS AND LOCATIONS FOR DEPARTMENT PERSONNEL DURING AN EMERGENCY ACTIVATION.

Department Name:				
Emergency/Disaster Name:				
Contact for Scheduling Questions:		Title:	Phone:	Email:

Emergency Response Position	Work Location <i>E.g. DOC; State EOC; Other (specify); On-Call</i>	Name	Cell Phone	Alt. Phone	Email	Shift Start Date	Shift Start Time	Shift End Date	Shift End Time
Department Incident Commander							<input type="checkbox"/> AM <input type="checkbox"/> PM		<input type="checkbox"/> AM <input type="checkbox"/> PM
Emergency Management Officer							<input type="checkbox"/> AM <input type="checkbox"/> PM		<input type="checkbox"/> AM <input type="checkbox"/> PM
Emergency Support Function Rep. <i>[Insert ESF #]</i>							<input type="checkbox"/> AM <input type="checkbox"/> PM		<input type="checkbox"/> AM <input type="checkbox"/> PM
							<input type="checkbox"/> AM <input type="checkbox"/> PM		<input type="checkbox"/> AM <input type="checkbox"/> PM
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[INSERT DEPARTMENT/AGENCY  
NAME]

DEPARTMENT OPERATIONS  
CENTER

**- EMERGENCY ACTIVATION IN PROGRESS -**

**- AUTHORIZED PERSONNEL ONLY -**