

NORTH CAROLINA DIVISION OF PUBLIC HEALTH  
 EPIDEMIOLOGY SECTION  
 OFFICE OF PUBLIC HEALTH PREPAREDNESS AND RESPONSE

**PUBLIC HEALTH COMMAND CENTER (PHCC)**

**Abridged Version**

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<b>SUBJECT:</b>	<b>The Public Health Command Center (PHCC)</b>	
<b>REVIEW DATE:</b>		
<b>APPROVAL SIGNATURE:</b>		

The PHCC is the operational command center for the North Carolina Division of Public Health (NCDPH). It is consistent and compatible with the Incident Command System that will be used by state and local responders in a unified command structure (UCS).

**1.0 PURPOSE:**

- 1.1 Public health emergency events may occur in North Carolina requiring assistance to local public health operations from the NCDPH as well as communications and coordination with other state agencies, the CDC, and other Federal agencies.
- 1.2 The operational command center for NCDPH is called the Public Health Command Center (PHCC).
- 1.3 Communications, operations, and logistical needs of local public health operations as well as communications and coordination with other state agencies, the CDC, and other Federal agencies are coordinated through the PHCC.
- 1.4 The PHCC can operate independently during certain public health emergencies.
- 1.5 Depending on the nature, scale and scope of the event, the PHCC can also operate in conjunction with the State Emergency Operations Center (EOC).
- 1.6 When the EOC is activated, PHCC’s liaison is to the Division of Public Health (DPH) desk at the EM EOC.

**2.0 LOCATION and SECURITY:**

- 2.1 Location information removed for web version.
- 2.2 This is a secured site with a back-up generator to maintain electrical power in the event of utility power failure.
  
- 2.3 All public health staff must have photo identification for access into the PHCC (see appendix H).

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- 2.4 All other organization/agency representatives must be credentialed appropriately for access into the PHCC.
- 2.5 The workstation computers will require a secured password to logon. The LAN Coordinator will change this password monthly.
- 2.6 The PHCC e-mail address and secured password will be available to those that operate the PHCC.

### 3.0 STAFFING:

- 3.1 Appropriate personnel from the NCDPH Epidemiology Section and its branches will staff the PHCC.
- 3.2 The DPH desk at the EOC will be staffed utilizing NCDPH personnel outside of the Epidemiology Section.
- 3.3 Public Health Preparedness & Response (PHP&R) personnel that could be deployed to the PHCC include the:
  - Public Health Physician/Bioterrorism Coordinator
  - Public Health Program Administrator
  - Human Services Planner/Evaluator II
  - Industrial Hygiene Coordinator (IH)
  - Public Health Clinical Pharmacist (BT Pharmacist)
  - Communication Coordinator
  - BT Telecommunications Engineer
  - Health Alert Network/Information Technology (HAN) Coordinator
  - Bioterrorism Education and Training Coordinator
  - Administrative Assistant to the BT Coordinator
  - Administrative Assistant to the Education and Training Coordinator
- 3.4 Additional public health staff that could join PHP&R personnel includes but is not limited to the:
  - State Health Director
  - Chief of the Epidemiology Section
  - State Epidemiologist
  - Staff from the General Communicable Disease Control Branch (GCDC)
  - State Laboratory Director
  - Staff from the State Laboratory of Public Health
  - Director of the HIV/STD Branch
  - Staff from the HIV/STD Branch
  - Director, Occupational and Environmental Epidemiology Branch
  - Staff from Occupational and Environmental Epidemiology Branch
  - Women and Children's Health Coordinator (WCH)
  - Information Technologies and Computer Support LAN Coordinator
  - Public Health Program Administrator
  - Food Borne Disease Epidemiologist
  - Regional Surveillance Team Nurse Epidemiologist
  - Public Health Regional Surveillance Teams (PHRST)
  - Public Health Physician/Medical Epidemiologist

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- 3.5 Names and contact information will be available for each of the above areas for staffing purposes. Shift rotations will be scheduled according to the level of response.
- 3.6 Additional staff may include but not be limited to personnel from the:
  - North Carolina Department of Agriculture and Consumer Services (NCDA&CS)
  - United States Department of Agriculture (USDA)
  - State Bureau of Investigation (SBI)
  - Federal Bureau of Investigation (FBI)
  - Center for Disease Control (CDC)
  - United States Department of Health and Human Services (USDHHS) Immunization Branch
  - NC Office of Emergency Medical Services (OEMS)
  - Federal Emergency Management Agency (FEMA)
  - State and/or federal law enforcement
  - Other public or private subject experts
- 3.7 NCDPH information technology personnel will support the setup and operations of the PHCC.
- 3.8 Additional volunteers and temporary staff may be included in the PHCC as available and required. Credentialing of volunteers and temporary personnel would be required.

#### **4.0 WORK STATION ROLES AND LAYOUT:**

- 4.1 The following dedicated workstations will be available at the PHCC:
  - Local Health/Emergency Management Liaison
  - Shift Leader
  - EM 2000 - Administrative Assistant
  - Epidemiology Investigation
  - Public Information
  - State Laboratory & Environmental Health
  - Mass Care & SNS
- 4.2 See Appendix G for workstation summaries
- 4.3 Dedicated laptops shall be available for the following individuals:
  - Chief of Epidemiology Section
  - Public Health Physician/Bioterrorism Coordinator
  - State Epidemiologist
  - Head of Epidemiologic Investigation and Surveillance Branch
- 4.4 See Appendix I for schematic of the PHCC.
- 4.5 See Appendix A for telephone numbers of workstations and telephones at laptop locations.
- 4.6 All workstation computers are networked to share folders and programs.

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## 5.0 ACTIVATION AUTHORITY:

- 5.1 Activation of the PHCC may occur during a period of heightened threat, during a health emergency, post-event, and, if still required, during recovery from the health emergency.
- 5.2 Any one of the following, or their designee, may activate the PHCC:
  - North Carolina State Health Director
  - Chief of Epidemiology Section
  - State Epidemiologist (General Communicable Disease Control)
  - Public Health Physician/Bioterrorism Coordinator
  - Director of the State Laboratory of Public Health
- 5.3 In the absence of all of the above, the General Communicable Disease Control Consultant on-call may activate the PHCC.
- 5.4 Whenever possible, consultation between the above individuals will occur before the PHCC is activated.
- 5.5 The official who activates the PHCC will assume the role of Incident Commander and remain in command until the senior NCDPH official available appoints an Incident Commander.
- 5.6 The following agencies will be notified as soon as possible when the PHCC has been activated:
  - Division of Public Health
  - NC Emergency Management

## 6.0 ACTIVATION LEVELS OF RESPONSE:

- 6.1 When the decision is made to activate the PHCC, the activation level of response appropriate for the emergency event will be determined. This determination will be based on known or projected health risks and on the anticipated response required to the event.
- 6.2 The activation level of response may change as a result of changing conditions. The decision to change the activation level of response will be made by the PHCC incident commander.
- 6.3 The numbering of activation levels is problematic. FEMA uses a system where 4 is situation normal and counts down to 1 – full activation of all response entities. The CDC historically uses an activation system where 1 indicates situation normal and the numbers increase as the situation escalates. DHHS coordinates its response activities with both organizations, so both activation numbers are listed.
- 6.4 For consistency and clarity, the levels of activation of the PHCC will be referred to as:
  - Readiness**
  - Minimal**
  - Extended**
  - Maximal**

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CDC/NCDHHS Levels	PHCC Activation Level Activities	FEMA/NCEM Levels
1	<ul style="list-style-type: none"> <li>PHCC is maintained in a state of <b>readiness</b> but is not activated.</li> </ul>	4
2	<ul style="list-style-type: none"> <li>This is a <b>minimal</b> degree of PHCC activation.</li> <li>Operation hours of the PHCC will be from 7:30 am until 5:00 pm, Monday through Friday.</li> <li>Communication after these hours will be directed to the on-call GCDC designee.</li> <li>Workstations appropriate for the emergency event will be opened; not all workstations may necessarily be activated.</li> </ul>	3
3	<ul style="list-style-type: none"> <li>This is an <b>extended</b> degree of PHCC activation.</li> <li>Operation hours of the PHCC will be from 7:00 am to 7:00 pm or as specified by the PHCC Incident Commander.</li> <li>Operation days may include Saturday and Sunday.</li> <li>Communication after extended hours will be directed to the on-call GCDC designee.</li> <li>Workstations appropriate for the emergency event will be opened; not all workstations may necessarily be activated.</li> </ul>	2
4	<ul style="list-style-type: none"> <li>This is a <b>maximal</b> degree of PHCC activation.</li> <li>Operation hours of the PHCC will be 24 hours daily</li> <li>Operation days will include all days of the week.</li> <li>All workstations will be opened; additional work areas may be added as appropriate.</li> </ul>	1

**7.0 ACTIVATION TRIGGERS:**

7.1 Notifications may come through the Health Alert Network (HAN), or by direct communication to NCDPH or PHP&R. Activation of the PHCC may occur as a result of any of the following:

Activation of the State Emergency Response Team (SERT) in response to an event that involves/results in a threat to the public health.

Identification of a potential or actual case resulting from exposure to Category A biological agents identified by the CDC.

Identification of a potential or actual disease outbreak that exceeds the ability of the local health department(s) involved to effectively respond.

Identification of a potential or actual disease outbreak that threatens to expand across multiple counties, multiple regions or multiple states.

In response to a request by the CDC to assist other locations in response

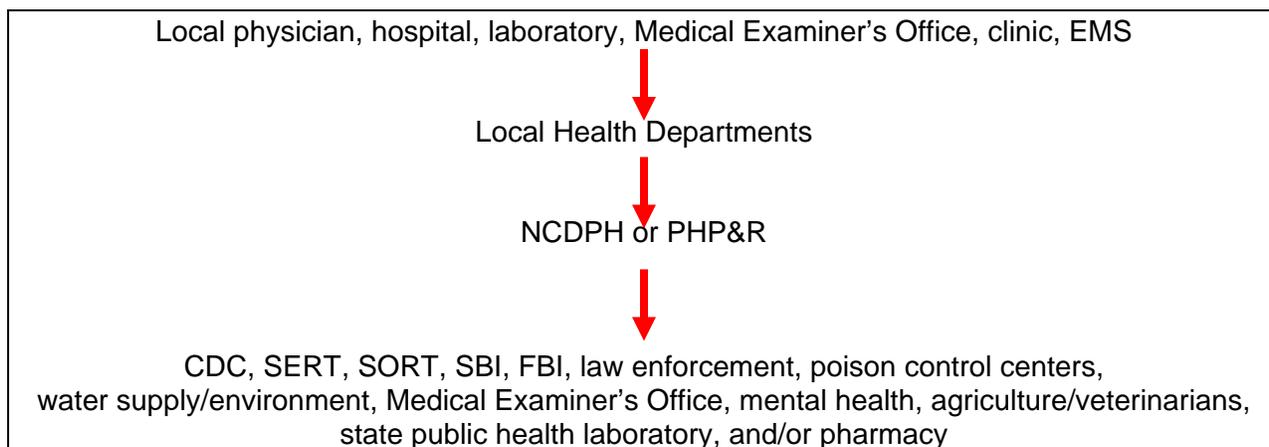
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to a health emergency.

Other circumstances that, in the opinion of a person authorized to make such a determination, may require a coordinated public health response.

**8.0 ACTIVATION SEQUENCE:**

- 8.1 A public health emergency event may be an unannounced event that is detected through rigorous surveillance mechanisms or it may be an event that involves an announced or proximately identified threat.
- 8.2 The normal method of alerting in the event of a public health emergency is the North Carolina Health Alert Network (NCHAN).
- 8.3 Notification can be made to the NCDPH or PHP&R by any of the following local, state, or federal organizations/agencies:



- 8.4 The PHCC will be activated when an authorized individual listed in 5.2 or 5.3 suspects an outbreak may be an act of bioterrorism or when a health crisis exceeds local and/or state's public health response capabilities or when one or more triggers listed above are detected.
- 8.5 PHP&R personnel will be deployed to the PHCC in preparation of activating workstations and other operational tasks.
- 8.6 Appropriate public health staff will be contacted and deployed to the PHCC to man the workstations.
- 8.7 An appropriate computer Call Log database will be initiated for each activation.

**9.0 TERMINATION/DOWNGRADE AUTHORITY:**

- 9.1 Termination/downgrade of the PHCC will be determined after the period of heightened threat or health emergency has lessened or ended, or when the PHCC is clearly not needed to complete measures to protect public

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health and safety and provide public health and emergency resources to local communities to restore normal public health operations.

- 9.2 Normally, the Incident Commander will determine the appropriate time to inactivate or downgrade the activation of the PHCC. In his/her absence, any one of the following, or their designee, may terminate the PHCC:
- North Carolina State Health Director
  - Chief of Epidemiology Section
  - State Epidemiologist (General Communicable Disease Control)
  - Public Health Physician/Bioterrorism Coordinator
  - Director of the State Laboratory of Public Health
- 9.3 Whenever possible, consultation between the above individuals will occur before the PHCC is terminated/downgraded.

## 10.0 OPERATIONAL RHYTHM

- 10.1 At **minimal** activation level, the following operational rhythm/daily schedule will be followed:
- 0730 PHCC opens
  - 0900 AM briefing
  - 1200 Conference call
  - 1600 PM briefing
  - 1700 PHCC closes
- 10.2 At **extended** activation level, the following operational rhythm/daily schedule will be followed:
- 0700 PHCC opens
  - 0900 AM briefing
  - 1200 Conference call
  - 1300 Shift change
  - 1700 PM briefing
  - 1900 PHCC closes
- 10.3 At **maximal** activation level, the following operational rhythm/daily schedule will be followed:
- 0700 Shift change
  - 0900 AM briefing
  - 1200 Conference call
  - 1300 Shift change
  - 1700 PM briefing
  - 2300 Shift change

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## 11.0 OPERATIONAL SHIFT TASKS

- 11.1 First shift at the beginning of each day:
- Overhead lights are turned on (both sets)
  - Appropriate monitors are turned on
  - Appropriate computers are turned on with passwords entered to log-in
  - FAX machines and copy machine are turned on
  - PHCC telephone voicemail messages are checked
  - E-mail messages are checked
- Paper is added to the copy machine and FAX machines as necessary  
A new daily PHCC sign-in log sheet is available on a clipboard (see appendix H)  
Call forward of the main PHCC telephone number is turned off (see appendix E)
- 11.2 Last shift at the end of each day:
- Call forward of the main PHCC telephone number is turned on (see appendix E)
  - Trash is emptied into a large container located outside the PHCC
  - The fan is unplugged from the wall outlet
  - The environmental control equipment is turned off
  - All computer data has been saved to the file server as appropriate
  - Monitors are turned off
  - Computers are turned off
  - Chairs are arranged neatly
  - Workspaces and tables are cleared and cleaned
  - Overhead lights are turned off (both sets)
  - Both doors to the PHCC are closed and locked
- 11.3 If the PHCC is operational 24 hours a day, periodical checks will be done:
- Appropriate computers are available
  - FAX machines and copy machines have available paper
  - E-mail messages are checked
  - The room temperature is comfortable
  - Workspaces and tables are cleared and clean
- 11.4 The Shift Leader
- Delegates the above tasks to others or completes them him/herself (See Appendix G for more responsibilities)
  - Completes a PHCC Shift Change Report as needed (see appendix D)
- 11.5 The Incident Commander
- Provides leadership for the operations of the PHCC

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**Appendix G**

**PHCC DESIGNATED WORK STATIONS AND ROLES**

Work Station	Brief description of the station	Special knowledge or training needed to function at the station	Specific Information that needs to be located at the station to function there
LHD/EM/PHRST Liaison	<ul style="list-style-type: none"> <li>• Communicate with local health departments</li> <li>• Communicate with emergency management offices</li> <li>• Communicate with PHRSTs</li> <li>• Disseminate information and tasks between the local health departments and emergency management offices (Ex., EM 2000)</li> <li>• Monitor and communicate with Anti-Terrorism Information Exchange (ATIX)</li> </ul>	<ul style="list-style-type: none"> <li>• Local health departments contact information</li> <li>• Emergency management offices contact information</li> <li>• PHRST contact information</li> <li>• Alert procedures</li> <li>• Standard MS Office Suite</li> <li>• PHCC Call Log</li> <li>• Understand function of ATIX</li> </ul>	<ul style="list-style-type: none"> <li>• LHD contact with specific emphasis on cell and alternate means of contact other than “regular business phones”</li> <li>• Maintain key disk, user ID and password for ATIX</li> </ul>
Shift Leader	<ul style="list-style-type: none"> <li>• Remain aware of operational flow in the PHCC</li> <li>• Delegate workload tasks and resolve operational problems as appropriate</li> <li>• Keep informed of status and changes at each workstation</li> <li>• Assist in developing periodic debriefings</li> <li>• Prepare shift reports for oncoming staff</li> <li>• Assist the Incident Commander as needed</li> </ul>	<ul style="list-style-type: none"> <li>• Extensive knowledge of emergency operations as well as public health disaster response</li> <li>• Communication skills</li> <li>• Standard MS Office Suite</li> <li>• PHCC Call Log</li> </ul>	<ul style="list-style-type: none"> <li>• Contact information</li> </ul>
Epi Investigator	<ul style="list-style-type: none"> <li>• Disease investigation</li> <li>• Epidemiologic studies</li> <li>• Epidemiologic reports</li> <li>• Liaison with CDC and LHD epidemiologic staff</li> </ul>	<ul style="list-style-type: none"> <li>• Familiarity with call log on computer.</li> <li>• EM2000</li> <li>• EpiInfo 2002</li> <li>• Standard MS Office Suite</li> <li>• PHCC Call Log</li> </ul>	<ul style="list-style-type: none"> <li>• Contact notebook</li> <li>• Instructions for using call log and managing phones</li> </ul>

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Work Station	Brief description of the station	Special knowledge or training needed to function at the station	Specific Information needed to be available at the station to function at the station
<p>Public Information</p>	<p>The PIO monitors media coverage and coordinates public information activities with the DHHS Public Affairs Office, the EOC Joint Information Center (JIC) if activated, the NC Dept. of Ag and the CDC's Office of Communications (during major events).</p> <p>The PIO provides support via information and materials to the EOC JIC during times of state emergencies. Such information and materials will be used by the governor or other state officials for media briefings and public information efforts.</p> <p>PIO, supported by telecommunications engineer, maintains contact lists and generates new email or other address groups as required.</p>	<ul style="list-style-type: none"> <li>• Execute BT/Outbreak communication plans;</li> <li>• Respond to media queries;</li> <li>• Monitor news reports for content and trends;</li> <li>• Prepare news releases relating to the crisis, route to DHHS Public Affairs for approval, distribute to media (if the PAO is unable to);</li> <li>• Draft the designated spokesperson's talking points for media briefings;</li> <li>• Advise lead staff as to media concerns related to the crisis;</li> <li>• Coordinate with the state EOC JIC (when activated);</li> <li>• Regularly update CDC Public Affairs Office (if disease related);</li> <li>• Provide DHHS Office of Citizen Services (Care-Line) staff with information specific to the situation to answer citizen queries and instructions on who, where and when calls should be referred;</li> <li>• Evaluate Care-Line reports to help develop public information needs</li> <li>• Standard MS Office Suite</li> <li>• PHCC Call Log</li> </ul>	<p>Emergency contact information for State Health Director and other key state and local public health officials.</p> <p>CDC, JIC, and NC Dept. of Ag PIO contact information.</p> <p>DHHS Crisis Communication policy.</p>
<p>State Lab / Environmental Health</p>	<ul style="list-style-type: none"> <li>• Answer incoming lab-related or environmental health-related calls</li> <li>• Address lab-related or environmental health-related issues</li> <li>• Keep shift leader and/or incident commander informed of current relative status and changes</li> </ul>	<ul style="list-style-type: none"> <li>• Ability to access computer functions</li> <li>• Ability to access email</li> <li>• Ability to access incident folder</li> <li>• Standard MS Office Suite</li> <li>• PHCC Call Log</li> </ul>	<ul style="list-style-type: none"> <li>• Passwords</li> <li>• Schedule of who is working which shift</li> <li>• Special instructions for specific events</li> <li>• Contact notebook</li> </ul>

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Work Station	Brief description of the station	Special knowledge or training needed to function at the station	Specific Information needed to be available at the station to function at the station
Mass Care / SNS	<ul style="list-style-type: none"> <li>• Handles requests from local agencies during a disaster for prophylactic or treatment medications/antidotes</li> <li>• Contacts sources for the above and coordinates transport to and within the state</li> <li>• Handles requests for available beds or specialized equipment from local agencies and hospitals</li> <li>• Sets up appropriate numbers of dispensing sites</li> </ul>	<ul style="list-style-type: none"> <li>• Knowledge of NC SNS and Local SNS plans</li> <li>• Dispensing site plans</li> <li>• Knowledge of EM2000</li> <li>• Cardinal or other drug vendor info including account numbers</li> <li>• Standard MS Office Suite</li> <li>• PHCC Call Log</li> </ul>	<ul style="list-style-type: none"> <li>• State SNS Plan</li> <li>• Local SNS Plan</li> <li>• Dispensing site info</li> <li>• CDC SNS Program contact info and protocols</li> <li>• Hospital RAC and local hospital telephone contacts</li> </ul>
Administrative Assistant	<ul style="list-style-type: none"> <li>• Answer incoming PHCC calls</li> <li>• Gives telephone messages to shift leader or appropriate workstation person to respond to message</li> </ul>	<ul style="list-style-type: none"> <li>• Familiar with the EM 2000 program – how to receive and send messages and how to enter info into the call log (see appendix F)</li> <li>• Have an understanding of each workstation functions to distribute incoming calls appropriately</li> <li>• Standard MS Office Suite</li> <li>• PHCC Call Log</li> </ul>	<ul style="list-style-type: none"> <li>• Type of emergency event</li> <li>• Names of individuals at each station</li> <li>• Any special information to be given via phone or EM 2000</li> </ul>

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**Appendix I**

**NC Pandemic Influenza Plan  
Public Health Command Center Organizational Chart**

