



MEMORANDUM

Date: April 10, 2020

To: The Honorable Chairman and Members
Pima County Board of Supervisors

From: C.H. Huckelberry
County Administrator

A handwritten signature in black ink, appearing to be "CHH", is written over the printed name "C.H. Huckelberry".

Re: **Virtual Emergency Operations Center Test**

During any emergency, including the current public health emergency regarding COVID-19, a functioning Emergency Operations Center (EOC) is essential to coordinating emergency response actions. Of concern in operating any EOC is continuation of activity should something occur to close an EOC. For this reason, staff conducted a test by virtually operating (all staff in a remote location). The test indicated all operations and functions performed normally within the virtual EOC.

The attached April 8, 2020 memorandum regarding this activity. The report describes the virtual test conducted on April 1, 2020 proved to be successful. Staff indicated the same level of productivity and accomplishments as if they were in the EOC. A number of technical issues were reported and can now be corrected.

Staff will continue to work in the EOC; however, we will develop a more flexible schedule with staff rotating shifts on-site to increase social distancing. Medical wellness checks are in place for staff entering the EOC.

CHH/anc

Attachment

c: Jan Leshar, Chief Deputy County Administrator
John Voorhees, Assistant County Administrator
Jeff Guthrie, Director, Office of Emergency Management
Dr. Bob England, Director, Health Department
Paula Mandel, Deputy Director, Health Department

Date: April 8, 2020

To: Chuck Huckleberry
County Administrator

From: Jeff Guthrie 
Director
Office of Emergency Management

Via: Dr. Francisco Garcia 
Deputy County Administrator

Dr. Bob England 
Director
Pima County Health Department


John Voorhees
Assistant County Administrator

Paula Mandel 
Deputy Director
Pima County Health Department

Re: 4/1/2020 Virtual Emergency Operations Center test summary

Introduction

On 4/1/2020, staff at the Emergency Operations Center tested its operational contingency plan by having all staff telecommute and work remotely from home. This was an opportunity for staff to test remote work and connectivity and functionality of equipment should an infection compromise the physical location of the center. The test began at 08:00 and ended at 17:00. All staff were asked to note any connectivity and technical issues so remote work can be enhanced for future opportunities. Provided below is a list of accomplishments, challenges, and positive conditions that were noted during the virtual test.

Accomplishments

Based on a review of ICS Form 214 Activity Logs prepared by staff, business was conducted as usual. The virtual test began with successful check-ins by all staff. At 08:00, all staff checked in with their supervisors to start their day. The day moved forward from there.

Staff held successful phone and video conference calls throughout the day. These calls included:

- Ambulatory Care meeting
- AzCHER South Steering Committee meeting
- Childcare Supply Needs Zoom call
- Community Health and Food Safety Skype call
- Daily AZ DEMA COVID-19 update
- Daily Homeless Shelters conference call
- Daily JIC meetings
- Daily Logistics Section meeting
- Daily Operational Period briefing
- Daily Pima County COVID-19 Hospital briefing

- Daily State conference call
- Daily State JIC conference call
- Daily State SNS conference call
- Daily Tactics/Planning meeting
- Daily Volunteer Task Force meeting
- Fatality Management meeting
- Hotel Capacity Acquisition conference call

Staff also continued to work on COVID-19 response documents. Documents that were drafted, reviewed, and/or worked on included:

- Behavioral Health Task Force on Housing documentation
- EOC floorplan with current employee seat assignments and telephone numbers
- Homeless shelters flowchart
- ICS Form 205A Contact List
- ICS Form 208 Safety Message
- Incident Action Plan for 4/2/2020
- PCHD guidance documents
- Restaurant/Business Stakeholders and Media tracking worksheets
- Spanish version of the Arizona Disaster Healthcare Volunteers handout
- Volunteer Training guidance
- Volunteer flowchart

Staff continued work on updating webpages and social media. The COVID-19 and Pima Works and webpages were reviewed and updated as well as promotional copy written for personal protective equipment donation flyers and social media. This included Spanish translation pages. Design continued on the Partner Resources website. News releases were drafted and sent, and social media pages were updated.

Additionally, staff researched mask making, speech to text options for meeting minutes, connecting resources to long-term care facilities, and coordinating behavioral health treatment beds to help with hospital strain. Staff also communicated with their stakeholders to continue providing current and accurate information and stakeholder management. Safety standards were reviewed for consistent practice at the warehouse, Abrams Public Health Center, and the Emergency Operations Center.

Challenges

Staff were asked to document challenges that they experienced during the Virtual Emergency Operations Center. One of the major challenges documented was connectivity issues. This ranged from poor or “crackling sounds” on conference calls, slower delivery of email, and slower access to the County servers. Some staff noted that they frequently got a “lost Microsoft connection” message and were not able to connect to email or County servers until the connection was restored.

A second challenge documented by staff was issues with software and technology, such as non-functional conference call lines and codes. Some staff reported that they were not able to connect to Microsoft Teams.

The third challenge documented by staff was home workspaces. Not all staff have a home office or area suitable for remote work. This includes lack of monitors and docking stations for County-owned laptops, call volume from cell phones, and background noise and disruptions from children, animals, and other household adults. Some staff noted that it would be helpful to have headsets for video conferencing and for high call volume.

A final challenge documented by staff was proximity to and solidarity among emergency operation staff. Staff noted there was a learning curve trying to get everyone on the same page. Communication was slightly hindered, it was more difficult to consult quickly with each other remotely, and there was less camaraderie due to remote work. Staff missed the opportunity to talk across their desks or walk across the room for immediate asks or needs.

Positive Conditions

A number of positive conditions were identified by staff. Staff indicated that the Emergency Operations Center is a fast-paced environment. Because of this, staff noted that they felt more comfortable working from home and experienced fewer distractions, leading to increased productivity. Most staff were appreciative of the opportunity to increase social distancing by working from home and enjoyed not having their daily commute.

Conclusion

The Virtual Emergency Operation Center test conducted on 4/1/2020 proved to be successful. Staff indicated the same level of productivity and accomplishments working remotely as on a similar day at the operations center. Even though a few connectivity and technical challenges were reported, these are challenges that can be corrected. While staff enjoyed the comfort of their homes, they missed the proximity and solidarity of their colleagues. However, this provided for opportunities to increase social distancing.

A successful test such as this shows that the Emergency Operation Center can stand virtually without loss of productivity or connectedness. This will allow for more flexible schedules such as a weekly virtual work day or rotating onsite days to allow staff opportunities to increase social distancing. Staff will continue to explore the feasibility of virtual shifts, with the possibility of moving toward split staffing models (half working on Emergency Operations Center premises, half working remotely), to mitigate infectious disease spread in the workplace.