

# III. Response

## A. MOC Organization

As with any incident, public health and medical operations should start at the local level until the scope of the incident overwhelms the capabilities of the medical operations center.

While not all inclusive, the basic tenets for each level of MOC are listed below. An area may or may not incorporate all levels of a MOC in a step-wise fashion.

1. **Jurisdictional MOC (Single or Multi-Jurisdictional): Serves as the ESF8 coordination point supporting a local EOC or multiple EOC's. This MOC supports emergency management below the DDC (state) level.**
  - **EXAMPLE 1: Responsibilities of a single-jurisdictional MOC could be performed by a local health department in support of their local EOC.**
  - **EXAMPLE 2: Multi-jurisdictional MOC's may function similar to a multi-agency coordination center (MACC ) for public health and medical resources within their specified/defined area.**
  - Supports one or more local EOC's
  - May or may not be co-located within the local EOC
  - If not co-located, provides a liaison position at the local EOC to the local MOC (if EOC is operational)
  - Has operational ~~control~~ coordination over ESF-8 resources responding to an incident in the local area
  - Coordinates the acquisition and management of local public health and medical resources for response, as well as mutual aid resources
  - Initiates resource requests through the emergency management process
  - Manages public health and medical resources assigned to that local area
  - Initiates mutual aid requests
  - Document financial costs, track resources, and perform activities as required during disaster response.
  
2. **Regional Health and Medical Operations Center (RHMOC): Serves as the ESF8 coordination point supporting the Disaster Districts. The RHMOC's geographical boundaries and numbering will match those of the existing Health Service Regions (HSRs). (i.e. RHMOC 1, 2, 4, 6, 7, 8, 9, and 11)**
  - Supports state public health and medical response activities within the HSR boundaries
  - Will support ~~more than one DDC~~ active DDC's.
  - May or may not be co-located within a DDC
  - Provides a public health and medical representative at each DDC being supported. (can be any selected representative from the RHMOC) If staffing levels prevent this, it is essential that a robust communications link be established (virtual liaison)
  - Coordinates state and regional public health and medical resources.
  - Initiates and/or processes resource requests through the emergency management process
  - May be delegated state level activities (i.e. base camp, staging, etc.) by the SMOC

- Facilitates regional mutual aid requests for public health and medical resources
  - Document financial costs, track resources, and perform activities as required during disaster response
3. **State-MOC (SMOC): Serves as the ESF8 coordination point supporting the State Operations Center (SOC). Provides operations support and coordination of state level ESF8 response activities.**
- Support state response activities
  - Supports the State Operations Center (SOC)
  - Not co-located with the SOC
  - Provides liaison positions in the SOC
  - Activates and assigns state level ESF8 response resources
  - Facilitates the acquisition and deployment of state public health and medical resources
  - Pushes state public health and medical assets to the DDC for further deployment to local or multi-jurisdictional EOCs
  - Responds to resource requests through the emergency management process
  - Coordinates with the appropriate Federal agencies as required.
  - Document financial costs, track resources, and perform activities as required during disaster response

Although each operational center is described separately above, there may be circumstances where a MOC would support multiple emergency operation centers. For example, the C-MOC in Houston may support the local EOC for Houston, multiple EOCs within Harris and surrounding counties, and also function as a DDC-MOC which supports multiple DDCs. When operations are combined in this manner, the responsibilities grow significantly and MOC leadership must be able to serve in multiple capacities at the same time without giving preference to one single area of responsibility.

The actual organizational structure of the MOC will depend on the jurisdiction, staffing capabilities, and the size and scope of the incident itself. Organization of local MOCs will be at the discretion of the local jurisdiction. Organization of the multi-jurisdictional MOC should be a collaborative agreement of all participating regional entities.

See Appendix F for some examples of MOC Organizational Charts.

## **B. Stages of Incident Response**

1. **Incident Recognition**  
Incident recognition is the point in time when a health and medical entity becomes aware of a significant event or potential event (i.e. hurricane) is imminent or occurring
  - Once recognized or notified by the local EOC, assemble appropriate experts to determine the level of threat and anticipated resource needs
  - If it is determined that ESF-8 entities can handle the incident independently, there is no need to activate the MOC
  - If it is determined that the incident and resources needs are beyond the capacity of individual ESF-8 entities, the MOC should be activated
2. **Notification/Activation**

Notification/Activation refers to the activities required to inform ESF-8 assets within the response system about the incident onset and potential needs

- Activate the MOC and notify appropriate ESF-8 response partners
- If it is anticipated the resource needs are beyond the capabilities of the jurisdictional area, multi-jurisdictional response partners should be notified

3. **Mobilization**

Mobilization is the transition from normal operations to a determined response level staffing for MOCs will require active support from all public health and medical entities across an area. Support partners should always include:

- Local and/or regional public health departments
- Local and/or regional public health authority
- Regional Advisory Council (RAC)
- Hospitals/Hospital systems
- EMS agencies