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I. Purpose

These procedures guide the Department of Health (Department) in providing responsibilities, and the administrative and operational framework, to implement emergency duty requirements and to activate staff, which may include the deployment of staff to alternate work locations, to fully address a public health emergency, incident, or event.

Note: All Department employees must abide by the procedures herein, as applicable, in performing their respective jobs, Florida Administrative Code, Rule [60L-36.005\(3\)2.e.](#)

II. Authority

[DOHP 310-2](#), Emergency Duty

III. Definitions

- A.** Activation: A temporary change from routine duties to support response efforts. When staff are activated, they move from day to day activities into a response mode and become part of the incident management structure. Activation may include deployment.
- B.** Charge Object: A code established by the Bureau of Personnel and Human Resource Management (BPHRM) in the People First system to track hours worked toward specific projects.
- C.** Delegated Authority: That position and associated authority outlined in the official delegation of authority on file with the Department's Agency Clerk.
- D.** Deployment: The movement of staff from their home base into an area of operations to provide direct support to a response. Emergency duty may require overnight travel for up to 14 consecutive calendar days to support the response. Deployment may include a location in-state or out-of-state. Upon demobilization, staff should be reviewed for readiness before being redeployed.
- E.** Disaster: Any natural, technological, or civil emergency, that causes damage of sufficient severity and magnitude to result in a declaration of a state of emergency by a county, the Governor, or the President of the United States.
- F.** Emergency: Any occurrence, or threat thereof, whether natural, technological, or man-made, in war or in peace, that results or may result in substantial injury or harm to the population or substantial damage to or loss of property.
- G.** Emergency Coordination Officer (ECO): The person delegated by the State Surgeon General, delegated authority, or designee, who is responsible for coordinating with the Division of Emergency Management on emergency preparedness issues.

- H. Emergency Duty: Performing work duties in support of a public health emergency, incident or event, which may include working extended hours, weekends, holidays, overnight shifts, hours in excess of an employee 's routine work schedule, or at a location other than their home base. Deployment is one type of emergency duty.
- I. Emergency Support Function 8 (ESF-8): One of the 18 Emergency Support Functions that comprise the State Emergency Response and Recovery Team (SERRT). ESF-8 is responsible for coordinating the public health and medical components of a state-level response.
- J. Employee: A person in a Career Service, Selected Exempt Service (SES), Senior Management Service (SMS), Other Personnel Services (OPS) or a contractual position within the Department.
- K. FLHealthDesk-HR: The electronic Human Resource (HR) system designed to ensure consistent and standardized Department HR practices are followed statewide.
- L. Health Alert Network (HAN): An online alerting and notification system capable of rapid distribution of messages to multiple jurisdictions using multiple devices to targeted audiences on issues related to public health.
- M. Public Health Emergency: Any occurrence, or threat thereof, whether natural or man-made, that results or may result in substantial injury or harm to the public health from infectious disease, chemical agents, nuclear agents, biological toxins, or situations involving mass casualties or natural disasters.
- N. Staff: Department employees and federal assignees.

IV. Procedures

A. Areas of Responsibilities

1. The Bureau of Preparedness and Response (BPR), in coordination with the BPHRM, is responsible for this policy. Questions regarding DOHP 310-2 or these procedures should be directed to the entity with responsibility for the area related to the question.
2. The BPHRM is responsible for:
 - a. Establishing charge objects codes in People First.
 - b. Maintaining applicable BPHRM policies directly associated with DOHP 310-2 or these procedures.
 - c. Preparing the Career Service Regular Compensatory Leave Payment Plan and the SES Extraordinary Payment Plan annually and coordinating the approval of both plans through the Department of Management Services.
 - d. Preparing appropriate correspondence and reporting the activation of the SES Extraordinary Payment Plan to required parties as necessary.

- e. Reviewing and making determinations regarding requests for medical exemption based on the Family and Medical Leave Act (FMLA) or Family Supportive Work Program (FSWP).
 - f. Advising employees and their office administrator of the status of the exemption request and the parameters of any approved exemption.
3. The Office of the General Counsel, Equal Opportunity Section is responsible for:
 - a. Reviewing and making determinations regarding requests for medical exemptions based on the Americans with Disabilities Act (ADA).
 - b. Advising employees and their office administrator of the status of the exemption request and the parameters of any approved exemption or accommodation that will be provided.
4. The BPR is responsible for:
 - a. Maintaining the Department's Health Alert Network (HAN), online alerting and notification system.
 - b. Providing reports, as requested, to senior management about staff registration in the system and counts of registered staff by Emergency Duty Group (EDG).
 - c. Establishing and managing processes for activating, deploying, and demobilizing staff for emergency duty on a statewide basis.
5. Each division, office, and county health department (CHD) is responsible for:
 - a. Designating the emergency duty group for staff as described in Section IV. E. of these procedures.
 - b. Notifying staff of their emergency duty group via a FLHealthDesk-HR ticket.
 - c. Ensuring that all staff, under their direction, register in the Department's HAN online alerting and notification system within 10 business days of initial employment or appointment to a new or different position. Registration in the system should be reviewed annually with staff by the division or bureau's HAN Group Manager.
 - d. Reviewing and making recommendations and decisions regarding requests for non-medical exemptions.
 - e. Signing off on deployment of staff under their direction who volunteer for an emergency duty assignment during an event or incident.

6. The Department's ECO or designee is responsible for:
 - a. Ensuring the timely and effective implementation of DOHP 310-2 and these procedures.
 - b. Ensuring that activated staff are being used to support activities defined in approved mission requests.
 - c. Ensuring that activated staff are supported, safe, and accounted for throughout the activation period.
 - d. Serving as the point of contact for information relating to the inappropriate or under-utilization of activated staff and ensuring that all reported issues are effectively addressed.
 - e. Requesting activation of the Disaster Pay Plan to the State Surgeon General through the Deputy Secretary for Operations.
 - f. Requesting activation of charge object codes from BPHRM.
7. Each staff member is responsible for:
 - a. Complying with the provisions of DOHP 310-2 unless an exemption from emergency duty has been received.
 - b. Annually reviewing their EDG assignment.
 - c. If applicable, submitting a request for temporary or limited exemption from emergency duty ticket as described in Section IV. C. of these procedures.
 - d. Making necessary arrangements for family members and personal obligations in order to be available for emergency duty.
 - e. Participating in training necessary to maintain roles and readiness for emergency duty.
 - f. Registering in the Department's HAN online alerting and notification system and updating profiles as necessary.
 - g. Obtaining a State of Florida Purchasing Card (P-Card) with travel and fuel provisions, if designated as an Emergency Duty Group 1 (EDG1) responder. Those in Emergency Duty Group 2 (EDG2) may also apply for a P-Card since, in many situations, they may also be able to volunteer for specific emergency duty.

B. Implementing Emergency Duty Requirements

1. All employees are automatically notified in writing that they are subject to mandatory emergency duty via an Emergency Duty Notification ticket in FLHealthDesk-HR.
 - a. Supervisors must designate each new employee's EDG assignment on the Emergency Duty Notification ticket.
 - b. Employees must acknowledge their EDG assignment upon appointment to a new position. Acknowledgment is done in FLHealthDesk-HR.

- c. Supervisors must review mandatory emergency duty responsibilities annually. To change an employee's EDG, supervisors or personnel liaisons must create an Emergency Duty Notification ticket in FLHealthDesk-HR and make sure their status is updated in personnel record and HAN profile.
2. All Department vacancy advertisements must include information regarding emergency duty and a screen-out qualifying question as specified in [DOHP 60-21](#), "Recruitment and Selection."
 - a. Written offers of employment for new employees must include an emergency duty statement and it must be provided to and acknowledged by the prospective employee as specified in [DOHP 60-21](#), "Recruitment and Selection."
3. Position descriptions must be provided to all employees and must include emergency duty statements as specified in [DOHP 60-7](#), "Classification."
4. If staff are not immediately needed or are sent home from emergency duty, they should be advised that they may be subject to call or, for Career Service employees, placed on-call, and may be required to report or return to emergency duty.
5. Offices should be prepared to address the issue of leave in the event of an emergency. Supervisors should notify employees upon approval of their leave that it is contingent upon an emergency or the need to activate the employee. If approved leave must be cancelled or they are called back to work because of an emergency or deployment, the employee may be eligible for reimbursement for non-refundable costs. These must be handled on a case-by-case basis in accordance with all applicable policies and procedures.
6. Career Service employees who have permanent status and are disciplined in accordance with [DOHP 60-8](#), "Discipline," may have grievance or appeal rights as indicated in [DOHP 60-13](#), "Grievances."

C. Exemptions from Emergency Duty

1. Staff may have medical or non-medical reasons for being unable to perform some or all emergency duty responsibilities. Staff can request an exemption from emergency duty for medical or legitimate non-medical reasons. Staff seeking a medical exemption should submit a Request for Exemption from Emergency Duty ticket in FLHealthDesk-HR. The State Surgeon General, delegated authority, or designee, may grant exemptions on a temporary basis, for a specific period of time, or for individual circumstances. For example, staff may not be able to work beyond their regularly scheduled hours. Staff may be able to perform emergency duty during their regularly scheduled hours or may be able to perform some emergency duty functions, such as working a

“telephone tree.” Requests for specific deployment will be considered on a case-by-case basis.

2. Requests for exemption from current staff must be resubmitted annually. Requests for exemptions may be submitted at any time for new hires or for staff experiencing an acute (not long-standing) reason for requesting an exemption.
3. The FMLA, the FSWP, the ADA, and other federal or state laws or statutes may impact mandatory emergency duty requirements.
 - a. Employees who have been approved, or who are applying, for FMLA or FSWP may request an exemption from emergency duty responsibilities with their county of employment or from deployment because of a condition of the employee or, in some situations, a family member as specified and described in [DOHP 60-39](#), “Family and Medical Leave Act (FMLA)/Family Supportive Work Program (FSWP).” If a health care practitioner certifies that the employee or a family member has a FMLA and/or FSWP qualifying condition that precludes them from performing emergency duty, the employee cannot be disciplined for failure to report for, or perform emergency duty, if the failure is a result of the serious health condition.
 - b. Employees may also be exempt from performing emergency duty because they have been determined to have an ADA-qualifying documented health condition. The employee must request a reasonable accommodation from the Office of the General Counsel, Equal Opportunity Section. If the employee's ADA-qualifying condition precludes them from performing emergency duty responsibilities in their county of employment or for the deployment, the employee cannot be disciplined for failure to report for or perform emergency duty, if the failure is a result of the documented health condition.
 - c. Employees who have a documented medical condition that affects their ability to respond to an emergency duty mandate must request an exemption as indicated above. Medical information submitted by the employee is confidential and the servicing human resource office will maintain this information in the employee's confidential medical file. Medical information submitted by the employee that is related to a disability is confidential and will be maintained in a confidential ADA file maintained by the Office of the General Counsel, Equal Opportunity Section.

4. Employees may have non-medical (non-qualifying FMLA, FSWP or ADA) reasons that impact their ability to perform emergency duty. Written supporting justification from the employee is required. The State Surgeon General, delegated authority, or designee, may make the determination that emergency duty or deployment could compromise the response or the individual's health and safety. Decisions will be made as indicated in Section C. 1.

Unacceptable reasons for an exemption from emergency duty include but are not limited to:

- a. Pet ownership or care
 - b. Residing in an evacuation zone
 - c. Out-of-county residency
 - d. Secondary employment or volunteer activities
5. During a real-world event or incident, individual extenuating circumstances may exempt an EDG1 or EDG2 responder from a specific assignment, at the recommendation of the division/office administrator or the ESF-8 Staffing Unit Leader, on a case-by-case basis.

D. Implementing the Emergency Duty Policy

1. Statewide Implementation
 - a. DOHP 310-2 is implemented department-wide upon the declaration of a state of emergency, when the Governor issues an executive order, or upon a declaration of a public health emergency.
 - b. The State Surgeon General, delegated authority, or designee, may implement provisions of the policy department-wide when additional staff is necessary to manage a public health incident or event that has overwhelmed a single division, office, or CHD. The State Surgeon General, delegated authority, or designee, can enact this with or without the existence of an executive order or public health emergency declaration.
2. County-Specific Implementation
 - a. DOHP 310-2 is implemented within a CHD when a local state of emergency or local public health emergency is declared in the county in which it is located.
 - b. In addition, a local CHD director/administrator or CMS medical director may implement emergency duty provisions within the office to manage a local public health incident or event with or without the existence of a local state of emergency or public health emergency declaration.

E. Emergency Duty Groups

1. Staff designated as EDG1 responders are persons determined to be a deployable resource, able to deploy out of their county of employment or out of state. EDG1 responders have specific, pre-determined emergency duty responsibilities within their county of employment and secondary duties, which may include deployment to provide assistance in a location other than their county (another county or out-of-state).
 - a. EDG1 responders serve as, or augment, the Department's primary response force and may be required to remain at work until released by a supervisor when a disaster or public health emergency occurs. Supervisors may call these staff to return to work during non-scheduled hours with little or no notice during an emergency.
 - b. Offices should pre-identify and designate staff as EDG1 responders for specific emergency duty including deployment roles.
 - c. Management may place Career Service employees designated as EDG1 responders in "on-call" or "subject-to-call" status per [DOHP 60-18](#), "On-Call Fees for Career Service Employees."
 - d. Staff designated as EDG1 responders are activated and deployed as specified in the [Responder Management Standard Operations Guidelines](#). Staff are required to report for emergency duty when called. When necessary, management may deploy EDG1 responders, up to 14 consecutive calendar days, for emergency duty to meet the objectives of an incident.
 - e. Unless exempted, or otherwise determined by the State Surgeon General, delegated authority, or designee, preparedness funded positions and frequently deployed positions or occupations as listed in Appendix A shall be included as EDG1 responders.
 - f. Divisions, offices, and CHDs are encouraged to designate five to ten percent of their staff as EDG1.
2. Staff designated as EDG2 have emergency duty responsibilities within their county of employment.
 - a. EDG2 responders augment the Department's response force and may be required to remain at work until released by a supervisor when a disaster or public health emergency occurs. Supervisors may call these staff after scheduled working hours for emergency duty. When feasible, supervisors should provide 24 hours advance notice.
 - b. The State Surgeon General, delegated authority, or designee, may elevate staff designated as EDG2 to EDG1, on a case-by-case basis, if necessary, to support the needs of the incident.

F. Tracking Emergency Duty and Deployment

1. The organizational unit responsible for managing the incident response shall track all staff assigned to the incident response, including dates, times, and roles.
2. All employees are required to track time for emergency duty in People First by coding work hours to the appropriate charge object code provided by BPHRM.

G. Compensation for Emergency Duty

Compensation for emergency duty must follow [DOHP 60-3](#), "Attendance and Leave" policy.

V. Training

Staff designated as EDG1 or EDG2 responders should take training courses identified for their designated emergency duty and deployment roles as specified in Responder Management Standard Operating Procedures.

VI. Supportive Data and References

- A. [DOHP 60-3](#), "Attendance and Leave"
- B. [DOHP 60-7](#), "Classification"
- C. [DOHP 60-8](#), "Discipline"
- D. [DOHP 60-13](#), "Grievances"
- E. [DOHP 60-18](#), "On-Call Fees for Career Service Employees"
- F. [DOHP 60-21](#), "Recruitment and Selection"
- G. [DOHP 30-32](#), "Americans with Disabilities Act Accommodations "
- H. [DOHP 60-39](#), "Family and Medical Leave Act (FMLA)/Family Supportive Work Program (FSWP)"
- I. [DOHP 310-1](#), "Emergency Alerting and Notification System"
- J. Collective bargaining agreements between the state and the Florida Nurses Association (FNA); American Federation of State, County, and Municipal Employees (AFSCME); and the Federation of Physicians and Dentists (FPD)
- K. [Emergency Support Function 8 Public Health and Medical Standard Operating Guidance](#)
- L. [Responder Management Standard Operating Guidelines](#)
- M. [Notice of Emergency Duty Responsibilities](#)
- N. [FLHealthDesk-HR User Guide](#)

VII. History Notes

These procedures replace and supersede IOP 310-2-18 "Emergency Duty Procedure," dated April 24, 2018, and its predecessor DOHP 60-40-13, "Emergency Duty Policy," dated June 24, 2013.

VIII. Signature and Effective Date



Cassandra Pasley, BSN, JD
Interim Chief of Staff



Date

IX. Appendices

Appendix A - Frequently Deployed Positions and Occupations

Response Positions:

- Staff designated in an ESF-8 response position on the Department's three deep roster
- CHD Augmentation Team
- Forward operating base information technology (IT) support
- Incident Management Team member
- Post-Impact ESF-8 Assessment Team member
- Public Information Officer
- Team Leader

Key Occupations:

- Advanced Registered Nurse Practitioner (ARNP)
- Clinical Social Worker (LCSW)
- Disease Intervention Specialist
- Emergency Medical Technician (EMT)
- Environmental Health Specialist
- Epidemiologist
- Laboratory Technician
- Licensed Practical Nurse (LPN)
- Registered Nurse (RN)
- Logistician
- Mental Health Counselor
- Paramedic
- Pharmacist
- Phlebotomist
- Physician