



# ***State of California*** **Emergency Management Mutual Aid Plan**

## **ANNEX A: EMMA Coordinator Checklists and Forms**

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## **1 PURPOSE**

The purpose of this Annex is to outline the roles, responsibilities and procedures of the EMMA Coordinator under SEMS and the EMMA Plan. EMMA Coordinators operate at each SEMS level and are responsible for coordinating EMMA resources between jurisdictions, as well as their logistical needs prior to and during an EMMA deployment.

## **2 POSITION DESIGNATION**

The designation within each SEMS level normally given to the person that would act as the EMMA Coordinator when EOCs are not activated, or fully staffed, are commonly referred to as:

- Emergency Manager, or designee, at the Local & OA SEMS Level
- Region Duty Officer at Administrative Region SEMS level
- Deputy Director of Response, or designee, at State SEMS level

### **2.1 LOCAL JURISDICTION EMMA COORDINATOR**

The Local Jurisdiction EMMA Coordinator position will be designated as deemed appropriate by the jurisdiction. It is assumed this position may be assigned to the Emergency Manager, or their designee. Accordingly, this position will be established within the EOC organizational structure as per the local emergency management organization chart and structure.

### **2.2 OPERATIONAL AREA EMMA COORDINATOR**

The OA EMMA Coordinator position will be designated as deemed appropriate by the OA. It is assumed this position may be assigned to the OA Emergency Manager, or their designee. Accordingly, this position will be established within the EOC organizational structure, as per the OA emergency management organization chart and structure.

### **2.3 CAL OES ADMINISTRATIVE REGION EMMA COORDINATOR**

The Cal OES Region EMMA Coordinator will be the corresponding Region Duty Officer. If activated, this position will be assigned to the REOC Logistics Section.

### **2.4 CAL OES STATE EMMA COORDINATOR**

The Cal OES State EMMA Coordinator may be designated by the Cal OES Deputy Director of Response. This position will be assigned to the State Operations Center (SOC) Logistics Section.

### 3 TRAINING

EMMA coordinators are an integral part of the jurisdiction requesting EMMA resources and the jurisdictions providing them. Because the EMMA process relies so heavily on the coordinator position, individuals acting as EMMA coordinators are expected to meet state training requirements. This training includes the following courses:

- IS-100: *Introduction to the Incident Command System ICS-100\**
- IS-700: *National Incident Management System (NIMS) An Introduction\**
- G-606: *SEMS Introduction \**
- IS-230.d: *Fundamentals of Emergency Management*
- IS-200: *ICS for Single Resources and Initial Action Incidents\**
- G-626E: *Essential EOC Action Planning\**
- G-775: *EOC Management and Operations\**
- G-191: *ICS/EOC Interface Workshop\**
- IS-800: *National Response Framework, An Introduction\**
- IS-706: *NIMS Intrastate Mutual Aid – An Introduction\**
- G-611: *Essential EOC All Sections Positions Specific Training\**
- G-611-EMMA: *EOC EMMA Position Training*
- G-205: *Disaster Recovery*

\* Courses can be met with equivalent courses (*SEMS/NIMS Combo Course* for IS-100, IS-200, IS-700, IS-706, IS-800, and G-606; *Essential Emergency Management Concepts Course* for G-626E, G-775, G-191, and G-611)

EMMA Coordinators are encouraged to be credentialed as an EMMA Coordinator at all SEMS levels. The position will be included in the Cal OES Credentialing Program.

## 4 ROLES AND RESPONSIBILITIES

The roles and responsibilities for EMMA Coordinators will reflect the functions appropriate to the corresponding SEMS level. EMMA Coordinators at each level act as lead to establish and maintain the processes and procedures necessary to support EMMA Plan implementation. Responsibilities include, but are not limited to:

- Coordinating EMMA program outreach and training within their jurisdiction.
- Coordinating with other EMMA Coordinators at all levels to maintain and refine procedures for requesting and providing assistance.
- Promoting training in the use of CalEOC (or WebEOC), the system currently used to order and track EMMA resource requests.
- Coordinating periodic status updates of personnel with knowledge, skills, and abilities for responding as EMMA resources within jurisdiction.
- Facilitating development and use of existing notification and call out systems for EMMA resources deployment.

During emergencies:

- Acting as the primary point of contact for the EMMA Coordinators on each SEMS level.
- Determining and communicating the need for EMMA resources in a jurisdiction affected by a disaster.
- Making a good-faith effort to select and provide personnel with the knowledge, skills, and abilities to be EMMA resources from unaffected jurisdictions. Until the State credentialing program has matured, and a database is established and maintained, EMMA resources may be required to show proof of training and/or experience before being activated under the EMMA Plan.
- Providing EMMA resource availability information as required.
- Facilitating the activation, deployment, and demobilization of those EMMA resources.
- Acting as point of contact for EMMA resources deployed into or out of their jurisdiction.

During and after demobilization:

- Encouraging participation of Requesting Jurisdictions (Requestors) and Providing Jurisdictions (Providers) and all EMMA resources in the development of After-Action Reports.
- Coordinating or participating in the improvement planning cycle.
- Maintaining all records pertaining to the activation and demobilization of EMMA resources.

When using EMMA, steps must be taken to ensure successful use and continued integrity of the system. This is done from the time of activation through the demobilization process. The following table provides a summary of deployment support actions and the parties with primary responsibility for providing the support.

Table 1: Deployment Support

Phase	Support Action	Responsible Parties
Pre-Deploy	Assignment and situation briefing information	<ul style="list-style-type: none"> <li>• Providing EMMA Coordinator</li> </ul>
Pre-Deploy	Travel arrangements	<ul style="list-style-type: none"> <li>• Requesting EMMA Coordinator</li> <li>• Providing EMMA Coordinator</li> </ul>
Deploy	Emergency point of contact	<ul style="list-style-type: none"> <li>• Providing EMMA Coordinator</li> </ul>
Deploy	Assignment problem resolution	<ul style="list-style-type: none"> <li>• Assigned Supervisor</li> <li>• Requesting EMMA Coordinator</li> </ul>
Demob	Coordination of critical incident stress debriefings	<ul style="list-style-type: none"> <li>• EOC Director</li> <li>• EOC Safety Officer</li> </ul>
Home	Coordination of After-Action Report	<ul style="list-style-type: none"> <li>• Appropriate SEMS level EMMA Coordinator</li> </ul>

## 5 POSITION CHECKLISTS

The checklists below detail functions needed to adequately meet the EMMA Coordinator roles at each level of SEMS. These lists provide general guidance and each Coordinator may wish to add tasks and/or provide more implementation details as appropriate.

### 5.1 LOCAL JURISDICTION EMMA COORDINATOR

#### 5.1.1 Local Requesting Jurisdiction - Request Process

- Coordinate with EOC Logistics Section to activate EMMA Plan.
- Create a complete *EMMA Form 1A – EMMA Resource Request* in WebEOC/CalEOC, including all required sections to identify positions or tasks to be performed, special skills needed, reporting location, date and time, duration of assignment, logistics responsibility information, and two (2) contact names with phone numbers. Alert OA EMMA Coordinator.

- Confirm OA EMMA Coordinator reviews EMMA request submittal; discuss options.
- If the local jurisdiction does not have WebEOC/CalEOC access they may request the OA EMMA Coordinator create the EMMA request on behalf of local jurisdiction. The local jurisdiction must still complete the *EMMA Form 1A - Resource Request* and provide it to the OA EMMA Coordinator for input into WebEOC/CalEOC.
- Prior to an EMMA Resource being committed to an assignment, the requesting EMMA Coordinator will be advised of EMMA resource availability and shall approve or refusal the proposed resource for each assignment.
- Inform EOC Logistics Section of planned arrival of EMMA resources and coordinate logistical support.
- Upon check-in, confirm EMMA resource has deployed under the corresponding EMMA request number.
- Update EMMA resource status in WebEOC/CalEOC (or request that the OA EMMA Coordinator update WebEOC/CalEOC); notify Requestor and OA EMMA Coordinator of WebEOC/CalEOC update submittals.
- Confirm responding EMMA resources are properly briefed on sign-in and check-out processes, work area, work assignments, operational periods, expectations, and duration of assignments.
- Ensure responding EMMA resources have necessary equipment and supplies to perform assigned functions (i.e., timesheets, daily activity logs, travel claim forms, etc.).
- If the duration of the EMMA deployment is expected to exceed the time commitment described on the EMMA request, the Requesting EMMA Coordinator must make special arrangements to continue the duty assignment of an EMMA resource in coordination with the appropriate EMMA Coordinators and the EMMA resource or create a new EMMA request in WebEOC/CalEOC for replacement.

### 5.1.2 Local Requesting Jurisdiction - Demobilization Process

- Provide EMMA resource with copy of the *Demobilization Checklist*. (See Annex B: EMMA Resource Deployment and Demobilization Packet)
- Update EMMA resource status in WebEOC/CalEOC (or request that the OA EMMA Coordinator update WebEOC/CalEOC); notify Requestor and OA EMMA Coordinator of WebEOC/CalEOC update submittals.
- Ensure that all EMMA resources are provided the option of receiving an *EMMA Form 3 - Voluntary Performance Rating* and/or *Credentialing ICS-225 – Position Performance Rating* to enhance their training and credentialing records (Optional).

If an EMMA resource does request an *EMMA Form 3 - Voluntary Performance Rating* and/or *Credentialing ICS-225 – Position Performance Rating*, confirm the immediate supervisor completes the *EMMA Form 3 – Voluntary Performance Rating* and/or

*Credentialing ICS-225 – Position Performance Rating* prior to demobilization of the EMMA resource.

- Confirm copy of the completed *EMMA Form 3 - Voluntary Performance Rating* and/or *Credentialing ICS-225 – Position Performance Rating* is provided to the EMMA Resource and Requesting EMMA Coordinator.
- Confirm EMMA resource receives, completes, and returns an *EMMA Form 5 -Individual Demobilization Checkout* prior to demobilization. This form should be retained and used as part of the official incident record and confirmation of resource return.
- Confirm EMMA resource receives, completes, and returns an *EMMA Form 4 – Exit Survey* prior to demobilization. This form should be retained and used to develop the After-Action report and Improvement Plan for the EMMA program.
- At close of the Operation, the EMMA Coordinator will use all *EMMA Form 4 – Exit Surveys* (including their own) to identify information to be used in the After-Action Report process. They should provide a single consolidated document to the next level EMMA coordinator or, if appropriate, directly to Cal OES outlining considerations and recommendations for EMMA program improvement.
- Follow up on open or unresolved issues with EMMA resources and/or appropriate SEMS level EMMA Coordinators.

### **5.1.3 Local Providing Jurisdiction - Resource Activation Process**

- Receive notification of EMMA request via any number of media to include WebEOC/CalEOC, *EMMA Form 1A - Resource Request*, Fax, or Scan via Email.
- Confirm understanding of the resource needs and other relevant details by contacting the appropriate SEMS level EMMA Coordinator.
- Identify local EMMA resources with appropriate knowledge, skills, and abilities to fill the resource request.
- Confirm acceptance of EMMA resource with Requesting EMMA Coordinator.
- Confirm the EMMA request has an EMMA request number in WebEOC/CalEOC.
- Provide EMMA request number to the deploying EMMA resources to facilitate check-in process at Requesting Jurisdiction.
- Coordinate details of logistical support to be provided for the EMMA resource with appropriate EMMA Coordinators.

### **5.1.4 Local Requesting Jurisdiction - Demobilization Process**

- Collect from returning EMMA resource the following forms and information for review.
- EMMA resource documentation (i.e., timesheets, travel claims, daily activity logs, EOC Duty Log, etc.).
- At close of their activation, the EMMA Coordinator will complete an *EMMA Form 4 -Exit Survey* to identify information to be used in the After-Action Report process.



- Ensure the EMMA resource submits the survey to the Requesting EMMA Coordinator.
- Follow up on open or unresolved issues with EMMA resources and/or appropriate SEMS level EMMA Coordinators.

## 5.2 OPERATIONAL AREA (OA) EMMA COORDINATOR

### 5.2.1 Requesting OA - Request Process

#### 5.2.1.1 Local Jurisdiction as Requestor

- Coordinate with EOC Logistics Section to activate EMMA Plan.
- Review WebEOC/CalEOC and *EMMA Form 1A - Resource Request* submitted by the Requestor; confirm the request identifies positions or tasks to be performed, special skills needed, reporting location, date and time, duration of assignment, logistics responsibility information and two (2) contact names with phone numbers.
- Discuss EMMA resource options with Requesting EMMA Coordinator.
- If the Requestor does not have WebEOC/CalEOC access, create the WebEOC/CalEOC EMMA request on their behalf.
- Distribute *EMMA Form 1A – EMMA Resource Request* to local EMMA Coordinators within the OA to identify personnel with the appropriate knowledge, skills, and abilities.
- Once identified, discuss available EMMA resource options with potential Requesting EMMA Coordinators.
- Prior to committing an EMMA Resource, advise the Requesting EMMA Coordinator of the resource availability and record acceptance or refusal of proposed EMMA resource.
- Provide the WebEOC/CalEOC EMMA request number and planned arrival of EMMA Resources to Requesting EMMA Coordinator.
- If local Requestor does not have WebEOC/CalEOC access, update EMMA resource status in WebEOC/CalEOC; notify Requesting EMMA Coordinator of WebEOC/CalEOC update submittals.
- If EMMA resources are unavailable within the OA, forward *EMMA Form 1A – EMMA Resource Request* to the Cal OES Region Duty Officer.
- Discuss EMMA resource options with Cal OES Region Duty Officer.
- Prior to committing an EMMA resource, advise the Requesting EMMA Coordinator of the resource availability and record acceptance or refusal of proposed EMMA resource; advise Cal OES Region Duty Officer of resource acceptance or refusal.
- Provide the WebEOC/CalEOC EMMA request number to the local Requesting EMMA Coordinator.
- Review resource status WebEOC/CalEOC reports submitted by Requestor; update Cal OES Region Duty Officer of updates as appropriate.

- If the Requestor advises the duration of the EMMA deployment will exceed the time commitment described on the EMMA request, discuss extension with the appropriate EMMA Coordinators and affected EMMA resources. If the Requestor does not have WebEOC/CalEOC access, support process to create a new WebEOC/CalEOC EMMA request for replacement.
- If the Requestor does not have WebEOC/CalEOC access, update EMMA resource status in WebEOC/CalEOC and notify all involved SEMS level Coordinators of WebEOC/CalEOC update submittal.
- Track all requested EMMA resources.

#### 5.2.1.2 County as Requesting Jurisdiction

- Coordinate with EOC Logistics Section to activate EMMA Plan.
- Create a complete *EMMA Form 1A – EMMA Resource Request*, complete all required sections to identify positions or tasks to be performed, special skills needed, reporting location, date and time, duration of assignment, logistics responsibility information and two (2) contact names with phone numbers. Alert OA EMMA Coordinator.
- Distribute *EMMA Form 1A – EMMA Resource Request* to local EMMA Coordinators to identify personnel with the appropriate knowledge, skills, and abilities to fill the EMMA resource request within the OA; discuss options.
- Evaluate proposed EMMA resources available from local jurisdictions; accept or refuse proposed assignment.
- Inform County EOC Logistics Section of pending arrival of EMMA resources; confirm provision of logistical support.
- Coordinator; provide EMMA request number to Requesting EMMA Coordinator
- Upon check-in, confirm EMMA resource has deployed under the corresponding EMMA request number.
- Confirm County EOC tracks and documents EMMA resource arrival and release.
- If EMMA resources are unavailable within the Operational Area, forward *EMMA Form 1A – EMMA Resource Request* to the Cal OES Region Duty Officer.
- Discuss EMMA resource options; accept or refuse proposed EMMA assignments.  
If the duration of the EMMA deployment is expected to exceed the time commitment described on the EMMA request, the Requesting EMMA Coordinator must make special arrangements to continue the duty assignment of an EMMA resource in coordination with the appropriate EMMA Coordinators and affected EMMA resources or create a new WebEOC/CalEOC EMMA request for replacement.
- Confirm responding EMMA resources are properly briefed on sign-in and check-out processes, assignment area, work assignments, expectations, and duration of assignments.

- Ensure responding EMMA resources have necessary equipment and supplies to perform assigned functions (i.e., timesheets, daily activity logs, travel claim forms, etc.).
- Update EMMA resource status in WebEOC/CalEOC; notify Requestor and all involved SEMS level Coordinators of WebEOC/CalEOC update submittals.
- Track all requested EMMA resources.

## 5.2.2 Requesting OA - Demobilization Process

### 5.2.2.1 Local Jurisdiction as Requesting Jurisdiction

- Review WebEOC/CalEOC status updates input by Requesting EMMA Coordinator.
- At close of the operation, ensure the local jurisdiction EMMA Coordinator submits a completed *EMMA Form 4 - Exit Survey* to be used in the After-Action Report process. Consolidate all Operational Area level input and provide a single document to Cal OES outlining considerations and recommendations for EMMA program improvement.
- Follow up on open or unresolved issues with EMMA resources and/or appropriate SEMS level EMMA Coordinators.

### 5.2.2.2 County as Requesting Jurisdiction

- Provide EMMA resource with copy of the *Demobilization Checklist*. (See Annex B: EMMA Resource Deployment and Demobilization Packet.)
- Update EMMA resource status in WebEOC/CalEOC; notify all appropriate SEMS level EMMA Coordinators of WebEOC/CalEOC update submittals.
- Ensure that all EMMA resources are provided the option of receiving an *EMMA Form 3 - Voluntary Performance Rating* and/or *Credentialing ICS-225 – Position Performance Rating* to enhance their training and credentialing records (Optional).
- If an EMMA resource does request an *EMMA Form 3 - Voluntary Performance Rating* and/or *Credentialing ICS-225 – Position Performance Rating*, confirm the immediate supervisor completes *EMMA Form 3 – Voluntary Performance Rating* and/or *Credentialing ICS-225 – Position Performance Rating* prior to demobilization of the EMMA resource.
- Confirm copy of the *EMMA Form 3 - Voluntary Performance Rating* and/or *Credentialing ICS-225 – Position Performance Rating* is provided to the EMMA Resource and Providing EMMA Coordinator.
- Confirm EMMA resource receives, completes, and returns an *EMMA Form 5 - Individual Demobilization Checkout* prior to demobilization. This form should be retained and used as part of the official incident record and confirmation of resource return.
- Confirm EMMA resource receives, completes, and returns an *EMMA Form 4 – Exit Survey* prior to demobilization. This form should be retained and used to improve EMMA.
- At the close of the operation, complete an *EMMA Form 4 - Exit Survey*.

- At close of the operation, ensure the local jurisdiction EMMA Coordinator submits all completed *EMMA Form 4 - Exit Surveys* to be used in the After-Action Report process. Consolidate all OA level input and provide a single document to Cal OES outlining considerations and recommendations for EMMA program improvement.
- Follow up on open or unresolved issues with EMMA resources and/or appropriate SEMS level EMMA Coordinators.

### **5.2.3 Providing OA - Resource Activation Process**

#### **5.2.3.1 Local or County as Requesting Jurisdiction**

- Review WebEOC/CalEOC *EMMA Form 1A – EMMA Resource Request* submitted by the Requestor; request clarification as needed.
- Identify personnel with the appropriate knowledge, skills, and abilities to fill the EMMA resource request from the local jurisdiction and/or, distribute *EMMA Form 1A – EMMA Resource Request* to local EMMA Coordinators to identify such personnel from within the OA.
- Discuss available EMMA resource options with Requesting EMMA Coordinator.
- Confirm Requestor’s acceptance or refusal of proposed EMMA resource.
- Upon confirmation of acceptance of proposed EMMA resource from the local or county Requesting Jurisdiction, notify Requesting EMMA Coordinator to activate the EMMA resource.
- Provide EMMA request number to the deploying EMMA resource and appropriate EMMA Coordinators to facilitate check-in process at Requesting Jurisdiction.
- Coordinate details of logistical support to be provided for the EMMA resource with appropriate EMMA Coordinators.
- Track EMMA resources that deploy outside the OA.

*Note: Requestor may request authorization to deploy an EMMA Trainee in a shadow role in order to build local capability, but with no expectation of cost reimbursement.*

### **5.2.4 Providing OA - Demobilization Process**

#### **5.2.4.1 Local or County as Requesting Jurisdiction**

- Upon notification from appropriate SEMS Level EMMA Coordinator, review EMMA resource status updates input into WebEOC/CalEOC by Requesting EMMA Coordinator.
- For EMMA resources provided by local jurisdiction, at the completion of activation, collect *EMMA Form 4 - Exit Surveys* from Local Providing EMMA Coordinator; review and identify data appropriate for inclusion in the consolidated EMMA program After Action report and Improvement Plan.

- For EMMA resources provided by county jurisdiction, collect from deployed EMMA resource all appropriate documentation (i.e., timesheets, travel claims, copy of daily activity logs, etc.).
- Develop the EMMA Program After Action Report and Improvement Plan; submit to the Cal OES Region Duty Office.
- Follow up on open or unresolved issues with EMMA resources and/or appropriate SEMS level EMMA Coordinators.

### **5.3 CAL OES ADMINISTRATIVE REGION EMMA COORDINATOR**

#### **5.3.1 Requesting Administrative Region – Request Process**

##### 5.3.1.1 OA to OA within Administrative Region - Request Process

- The Region Duty Officer or REOC EMMA Coordinator is notified by OA EMMA Coordinators of EMMA requests in WebEOC/CalEOC; should also receive copy of the *EMMA Form 1A – EMMA Resource Request* from the Requestor if WebEOC/CalEOC is offline.
- Notify OA EMMA Coordinators of pending EMMA request in WebEOC/CalEOC following pre-established notification protocol.
- Ensure the Provider and Requestor engage in direct communication if there are questions, logistical needs, or other negotiations to be made.
- Review resource status WebEOC/CalEOC reports submitted by the Requestor; include this information in daily reports.
- Notify Requesting OA EMMA Coordinator when responses are received.
- Notify State EMMA Coordinator when EMMA requests cannot be filled locally and need to be filled by state or federal resources.

##### 5.3.1.2 Region to Region – Request Process

- The Region Duty Officer is notified by the Region Duty Officer or REOC EMMA Coordinator of the affected Region of EMMA requests in WebEOC/CalEOC; should also receive copy of the *EMMA Form 1A – EMMA Resource Request* from the Requestor if WebEOC/CalEOC is offline.
- Notify OA EMMA Coordinators of pending EMMA request in WebEOC/CalEOC following pre-established notification protocol.
- Ensure the Provider and Requestor engage in direct communication if there are questions, logistical needs, or other negotiations to be made.
- Review resource status WebEOC/CalEOC reports submitted by the Requestor; include this information in daily reports.
- Communicate with Requesting Administrative Region on the status of EMMA request responses.

### 5.3.2 Requesting Administrative Region – Demobilization Process

- Receive EMMA resource release notifications from Requesting OA EMMA Coordinator and disseminate to appropriate SEMS level EMMA Coordinators.
- Review EMMA resource status updates in WebEOC/CalEOC from the Requesting EMMA Coordinator.
- Collect *EMMA Form 4 - Exit Survey* from the Requesting EMMA Coordinator for review.
- Evaluate all forms collected to gather information that may be used in the After-Action Report process for EMMA program improvement and forward them to the EMMA SEMS Specialist Committee as appropriate.
- Follow up on open or unresolved issues with EMMA resources and/or appropriate SEMS level EMMA Coordinators.

### 5.3.3 Providing Administrative Region – Resource Activation Process

- Receive notification from other Region Duty Officers or REOC EMMA Coordinator of pending EMMA request in WebEOC/CalEOC; should also receive a copy of the *EMMA Form 1A – EMMA Resource Request* generated from the Requestor if WebEOC/CalEOC is offline.
- Notify OA EMMA Coordinators of pending EMMA request in WebEOC/CalEOC following pre-established notification protocol.
- Ensure the Provider and Requestor engage in direct communication if there are questions, logistical needs, or other negotiations to be made.
- Review resource status WebEOC/CalEOC reports submitted by the Requestor; include this information in daily reports.

Note: *Requestor may request authorization to deploy an EMMA Trainee in a shadow role in order to build local capability, but with no expectation of cost reimbursement.*

### 5.3.4 Providing Administrative Region – Demobilization Process

- Review EMMA resource status updates in WebEOC/CalEOC from the Requesting EMMA Coordinator.
- Collect *EMMA Form 4 - Exit Survey* from the requesting Region EMMA Coordinator for review.
- Evaluate all forms collected to gather information that may be used in the After-Action Report process for EMMA program improvement and forward them to the EMMA SEMS Specialist Committee as appropriate.
- Follow up on open or unresolved issues with EMMA resources and/or appropriate SEMS level EMMA Coordinators.

## 5.4 STATE EMMA COORDINATOR

### 5.4.1 Region to State or Federal – Resource Activation Process

- Receive notification from a Region EMMA Coordinator of pending EMMA requests in WebEOC/CalEOC; should also receive a copy of the *EMMA Form 1A –EMMA Resource Request* generated from the Requestor if WebEOC/CalEOC is offline.
- Review EMMA request in WebEOC/CalEOC and determine appropriate state or federal sources for filling the request. Ensure proper protocols for using state or federal personnel are followed.
- Ensure the Provider and Requestor engage in direct communication if there are questions, logistical needs, or other negotiations to be made.
- Notify Requesting Administrative Region EMMA Coordinator of state or federal resources assigned to fill an EMMA request.
- Review resource status WebEOC/CalEOC reports submitted by the Requestor; include this information in daily reports.

### 5.4.2 Region to State of Federal – Demobilization

- Receive EMMA resource release notifications from requesting Region EMMA Coordinator and disseminate to appropriate SEMS level EMMA Coordinators.
- Review EMMA resource status updates in WebEOC/CalEOC from the Requesting EMMA Coordinator.
- Collect *EMMA Form 4 - Exit Survey* from the requesting Region EMMA Coordinator for review.
- EMMA Form 4 - Exit Survey*
- Ensure documents (e.g., timesheets, travel claims, daily activity logs, EOC Modified ICS-221, etc.) necessary for processing state or federal resources are identified and collected.
- Evaluate all forms collected to gather information that may be used in the After-Action Report process for EMMA program improvement and forward to the EMMA SEMS Specialist Committee as appropriate.
- Follow up on open or unresolved issues with EMMA resources and/or appropriate SEMS level EMMA Coordinators.

# SAMPLE EMMA FORM 1A – EMMA RESOURCE REQUEST

<b>EMMA FORM 1A</b> <b>EMMA RESOURCE REQUEST</b> (REV. 9/2018)		EMMA #: _____ (Generated in WebEOC/CalEOC by Requesting Jurisdiction)	
		Incident Name: _____	
		Request Date/Time: _____ / _____	
<b>REQUESTING JURISDICTION INFORMATION</b>			
Requesting Jurisdiction Name: _____			
24 Hour Phone Number: (____) ____-____			
EMMA Coordinator / PRIMARY Point of Contact Name: _____			
Phone: (____) ____-____	Alternate Phone: (____) ____-____	Fax: (____) ____-____	
E-Mail: _____			
Alternate Point of Contact: _____			
Position / Title: _____		Phone: (____) ____-____	Alternate Phone: (____) ____-____
Fax: (____) ____-____	E-Mail: _____		
How is the EMMA Resource being ordered? <input type="checkbox"/> Mutual Aid <input type="checkbox"/> Post-Event MOU/MOA			
If Post-Event MOU/MOA, what costs will be reimbursed? <input type="checkbox"/> Salary <input type="checkbox"/> Overtime <input type="checkbox"/> Benefits <input type="checkbox"/> Travel <input type="checkbox"/> Lodging (If different than reasonable costs outlined in Section 4.2 of EMMA Plan)    Other: _____			
Request Authorized By: (The following signature is an <b>authorized official</b> of the Requesting Jurisdiction. By signing, the Requesting Jurisdiction understands that this form does not constitute a contract with potential Providing Jurisdictions. A formal MOU must be established pre/post event with those jurisdiction requesting reimbursement for their services.)			
_____		_____	_____
Print Name and Title		Signature	Date
<b>RESOURCE REQUESTED:</b>			
(One Specific EOC Function or Position per request form.)			
Position Requested (Functional Title): _____	Quantity _____	Start Date/Time _____	End Date/Time _____
		Shift <input type="checkbox"/> Day <input type="checkbox"/> Night	
		Security Clearance? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Tasks to be performed: _____			<input type="checkbox"/> Attach Job Description
Any special skills / certifications / licenses required? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, please explain: _____	
EMMA resource needs to bring the following equipment (Laptop, vehicle, PPE, etc.): _____			Must be Self-Contained? <input type="checkbox"/> Yes <input type="checkbox"/> No
Requesting Jurisdiction will provide the following: <input type="checkbox"/> Lodging <input type="checkbox"/> Meals <input type="checkbox"/> Computer/Laptop <input type="checkbox"/> Other: _____			
<b>CHECK-IN LOCATION INFORMATION:</b>			
Facility Name: _____		Address: _____	24 Hour Phone Number: _____
Directions: _____		<input type="checkbox"/> Attach Map	
Point of Contact Name: _____	Cell Phone: (____) ____-____	Alt Phone: (____) ____-____	Email: _____
<b>EXPECTED WORKING CONDITIONS</b>			
Special health or environmental concerns in the assignment area: _____			
Hardship living / housing conditions (Lack of power or potable water, no wraparound services, unusual accommodations, etc.): _____			
Current Situation (Or attach most current Situation Report): _____			<input type="checkbox"/> Attach Sit Rep



# SAMPLE EMMA FORM 1B – EMMA RESOURCE CANDIDATE(S)

<b>EMMA FORM 1B</b> <b>EMMA RESOURCE CANDIDATE(S)</b> (REV. 9/2018)	<b>EMMA #:</b> <small>(Generated in WebEOC/CalEOC by Requesting Jurisdiction)</small>
<b>Incident Name:</b>	
<b>Request Date/Time:</b>	
<b>PROVIDING JURISDICTION INFORMATION</b>	
County/Operational Area: _____	
Providing Jurisdiction Name: _____	
24 Hour Phone Number: (____) ____-____	
OA EMMA Coordinator / PRIMARY Point of Contact Name: _____	
Phone: (____) ____-____	Alternate Phone: (____) ____-____
Fax: (____) ____-____	
E-Mail: _____	
Providing Jurisdiction Point of Contact: _____	Position / Title: _____
Phone: (____) ____-____	Alternate Phone: (____) ____-____
Fax: (____) ____-____	
E-Mail: _____	
<p><b>Providing Jurisdiction Authorization:</b> (The following signature of the Providing Jurisdiction indicates a good-faith effort to ensure the EMMA resource(s) listed on this form is qualified to fulfill the request and is available for deployment. It is understood that this form does not constitute a contract with the Requesting Jurisdiction. Mutual aid extended under the EMMA Plan shall be without reimbursement unless otherwise established in a separate pre/post-event agreement between the Requesting and Providing Jurisdictions.)</p>	
_____ Print Name and Title	_____ Signature
<b>POTENTIAL EMMA RESOURCE INFORMATION (MAY LIST UP TO 4 PEOPLE PER POSITION):</b>	
<b>#1</b> <input type="checkbox"/> <i>(For Requesting Jurisdiction only: Check this box to select EMMA resource for assignment.)</i>	
Name: _____	Title: _____
Cell Phone: (____) ____-____	
Email: _____	Available for time as specified on Form A? <input type="checkbox"/> Yes <input type="checkbox"/> No
Able to perform tasks described in Form A? <input type="checkbox"/> Yes <input type="checkbox"/> No	Security Clearance (if applicable)? <input type="checkbox"/> Yes <input type="checkbox"/> No
Has required equipment per Form A? <small>(Personal Equipment Disclaimer HERE)</small> <input type="checkbox"/> Yes <input type="checkbox"/> No	Is aware of expected working conditions? <input type="checkbox"/> Yes <input type="checkbox"/> No
Self-Contained? <input type="checkbox"/> Yes <input type="checkbox"/> No	Comments/Other: _____
Experience / EOC Position _____	
Credentials: _____	
Special Skills / Licenses / Certifications: _____	
Originating City/County: _____	Estimated Travel Time: _____
Emergency Contact Name: _____	Relationship: _____
Cell Phone: (____) ____-____	Alt Phone: (____) ____-____
Special Pay/Compensation Considerations _____	

**SAMPLE EMMA FORM 1B – EMMA RESOURCE CANDIDATE(S) (PAGE 2)**

CONTINUED - POTENTIAL EMMA RESOURCE INFORMATION (MAY LIST UP TO 4 PEOPLE PER POSITION):			
#2 <input type="checkbox"/> (For Requesting Jurisdiction only: Check this box to select EMMA resource for assignment.)			
Name: [ ]	Title: [ ]	Cell Phone: ( ) [ ]-[ ]-[ ]	
Email: [ ]	Available for time as specified on Form A?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Able to perform tasks described in Form A? <input type="checkbox"/> Yes <input type="checkbox"/> No	Security Clearance (if applicable)? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Has required equipment per Form A? (Personal Equipment Disclaimer HERE) <input type="checkbox"/> Yes <input type="checkbox"/> No	Is aware of expected working conditions? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Self-Contained? <input type="checkbox"/> Yes <input type="checkbox"/> No	Comments: [ ]		
Experience / EOC Position [ ]			
Credentials: [ ]			
Special Skills / Licenses / Certifications: [ ]			
Originating City/County: [ ]		Estimated Travel Time: [ ]	
Emergency Contact Name: [ ]	Relationship: [ ]	Cell Phone: ( ) [ ]-[ ]-[ ]	Alt Phone: ( ) [ ]-[ ]-[ ]
Special Pay/Compensation Considerations [ ]			
#3 <input type="checkbox"/> (For Requesting Jurisdiction only: Check this box to select EMMA resource for assignment.)			
Name: [ ]	Title: [ ]	Cell Phone: ( ) [ ]-[ ]-[ ]	
Email: [ ]	Available for time as specified on Form A?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Able to perform tasks described in Form A? <input type="checkbox"/> Yes <input type="checkbox"/> No	Security Clearance (if applicable)? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Has required equipment per Form A? (Personal Equipment Disclaimer HERE) <input type="checkbox"/> Yes <input type="checkbox"/> No	Is aware of expected working conditions? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Self-Contained? <input type="checkbox"/> Yes <input type="checkbox"/> No	Comments: [ ]		
Experience / EOC Position [ ]			
Credentials: [ ]			
Special Skills / Licenses / Certifications: [ ]			
Originating City/County: [ ]		Estimated Travel Time: [ ]	
Emergency Contact Name: [ ]	Relationship: [ ]	Cell Phone: ( ) [ ]-[ ]-[ ]	Alt Phone: ( ) [ ]-[ ]-[ ]
Special Pay/Compensation Considerations [ ]			
#4 <input type="checkbox"/> (For Requesting Jurisdiction only: Check this box to select EMMA resource for assignment.)			
Name: [ ]	Title: [ ]	Cell Phone: ( ) [ ]-[ ]-[ ]	
Email: [ ]	Available for time as specified on Form A?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Able to perform tasks described in Form A? <input type="checkbox"/> Yes <input type="checkbox"/> No	Security Clearance (if applicable)? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Has required equipment per Form A? (Personal Equipment Disclaimer HERE) <input type="checkbox"/> Yes <input type="checkbox"/> No	Is aware of expected working conditions? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Self-Contained? <input type="checkbox"/> Yes <input type="checkbox"/> No	Comments: [ ]		
Experience / EOC Position [ ]			
Credentials: [ ]			
Special Skills / Licenses / Certifications: [ ]			
Originating City/County: [ ]		Estimated Travel Time: [ ]	
Emergency Contact Name: [ ]	Relationship: [ ]	Cell Phone: ( ) [ ]-[ ]-[ ]	Alt Phone: ( ) [ ]-[ ]-[ ]
Special Pay/Compensation Considerations [ ]			

# SAMPLE POST-EVENT MOU

## MEMORANDUM OF AGREEMENT (MOA) BETWEEN (Insert your agency/jurisdiction) AND THE (Requesting Jurisdiction) PERTAINING TO ASSISTANCE PROVIDED UNDER THE EMERGENCY MANAGEMENT MUTUAL AID (EMMA) PLAN

**WHEREAS**, this event and associated conditions will collectively be referred to as (Name of Incident); and

**WHEREAS**, on (Date), (proclaiming jurisdiction) proclaimed a (proclamation type) for the (Name of Incident) and

**WHEREAS**, as a result of (Name of Incident), (Incident Description).

**WHEREAS**, the Emergency Management Mutual Aid Plan delineates the current state policy concerning Emergency Management Mutual Aid; and

**WHEREAS**, the Emergency Management Mutual Aid Plan describes the standard procedures used to acquire emergency management mutual aid resources and the method to ensure coordination of emergency management mutual aid planning and readiness; and

**WHEREAS**, the (Title of Person) is the Operational Area Emergency Management Mutual Aid Coordinator; and

**WHEREAS**, Emergency Management Mutual Aid Plan provides, in pertinent part, “[w]hen an emergency develops or appears to be developing which cannot be resolved by emergency management resources within an Operational Area, it is the responsibility of the Operational Area Mutual Aid Coordinator to provide assistance and coordination to control the problem;” and

**WHEREAS**, the Emergency Management Mutual Aid Plan provides, in pertinent part, “[a] request for emergency management mutual aid requires the approval of an authorized official of the Requesting Jurisdiction;” and

**WHEREAS**, the County Emergency Manager of the (County/City of Name) requested the mutual aid assistance of (Providing Agency/Jurisdiction), pursuant to the Emergency Management Mutual Aid Plan to provide emergency management support in connection with the (Name of Incident); and

**WHEREAS**, (Providing Agency/Jurisdiction) provided emergency management mutual aid consisting of emergency management personnel, equipment, and/or materials during the period (Date through Date) to assist with emergency management services in connection with the (Name of Incident);

**Sample Post-Event MOU, continued**

**NOW, THEREFORE, IT IS HEREBY AGREED** by and between the **(Requesting Jurisdiction)** and **(Providing Agency/Jurisdiction)** that the **(Requesting Jurisdiction)** may reimburse reasonable costs associated with **(Providing Agency/Jurisdiction)** emergency management mutual aid assistance during the **(Name of Incident)**.

**Requesting Jurisdiction**

By \_\_\_\_\_  
(Signature)

Name:  
Title:  
County:  
Date:

**Providing Agency (If different from Requesting Jurisdiction)**

By \_\_\_\_\_  
(Signature)

Name:  
Title:  
Agency:  
Date:

**Requesting Jurisdiction**

By \_\_\_\_\_  
(Signature)

Name:  
Title:  
County:  
Date:

# **SAMPLE DELEGATION OF AUTHORITY**

TO: Name, Chief, ABC County Fire Department

FROM: Name, Director of Emergency Operations, XYZ County/Operational Area (OA)

SUBJECT: SAMPLE DELEGATION OF AUTHORITY – MARCH FLOOD 2017

[Insert Name] is hereby assigned as Incident Commander for the March Flood 2017 in XYZ County. The Incident Commander has the full authority and responsibility for managing incident operations within the framework of legal statute, current policy, and the broad direction provided in both oral and written briefing materials.

The Incident Commander is accountable to the XYZ County Director of Emergency Operations pursuant to XYZ Ord. Title 4 Division 3 Chapter 1 of the Ordinance Code of XYZ County 4-3005 C., XYZ County Flood Fight Policy of 2015, and the Operational Area responsibilities within AB156/Water Code 9650 Emergency Operations Plans. The scope of this Delegation of Authority includes preparedness, response, and initiation of recovery activities.

The success of this incident is dependent on maintaining Command of Operational Area preparedness and response activities and Coordination with local (levee) maintaining agencies (LMA). It is the XYZ County Director of Emergency Operations' expectation that the Incident Commander will enter/exit into Unified Command with affected jurisdictions. This includes local fire, law enforcement, public works, irrigation, water districts, and LMAs.

It is the XYZ County Director of Emergency Operations' intent to demonstrate a truly coordinated approach to the incident across the county at all levels, including Elected Officials.

## **Safety**

Accountability for safety is the Incident Commander's first and most important responsibility. Safety Comes First Every Time. Aviation safety is crucial and ensures coordinated Air Operations including appropriate Temporary Flight Restrictions (14 CFR 91.137 – Temporary flight restrictions). Water hazard safety during rescue and near levees shall follow personal protective equipment measures.

## **Financial Accountability**

Cost management is essential. It is expected that resources ordered are documented and justifiable. Implement a clear resource ordering process between the LMAs, local Emergency Operations Centers (EOC), and the Incident Commander's team. This includes costs borne by municipalities and LMAs. The intent is to facilitate cost recovery from those jurisdictions to XYZ County, and from state and federal assistance programs.

By 10:00 AM each morning, please provide the XYZ County Director of Emergency Operations with a response cost by category and jurisdiction for this incident. Coordination with municipalities is essential. Anticipate the need for cost sharing between jurisdictions.

## Sample Delegation of Authority, continued

### Public Information

Work closely with the lead OA EOC Public Information Officer (PIO) to understand the complex local issues including jurisdictional questions and cost apportionment, if necessary. Keep the OA EOC PIO informed and work closely in proactively dealing with controversial issues. One Voice messaging is critical.

Alert and Warning terminology shall comply with the XYZ County – FEMA IPAWS MO, and Local EAS Plan. This will avoid confusion of multiple jurisdictions using unauthorized terminology for issuing similar protective actions. Only the County issues IPAWS Event Codes EVI-Evacuation Immediately, or Civil Emergency Message.

### LMAs

The relationship with the LMAs is essential to the response. LMAs have legal jurisdiction over flood fight activities, whereas the Incident Commander's goals and objectives are public safety oriented. LMAs have designated XYZ County OES as their Deputy Incident Commander Representative to the Unified Command.

It is imperative that the Incident Commander's activities consider the long-term impacts of this response. Recovery can include public safety elements, flood water removal, and levee stabilizations. Debris removal may also include LMA and private property.

### Terminology

The Incident Command Post will be at XYZ County Fire Station. Utilize SEMS and NIMS ICS terminology while recognizing the potential for miscommunication on the response. SEMS compliance protects access to the State of California financial assistance, and NIMS protects access to federal assistance programs. SEMS is NIMS compliant.

### Incident Escalation

Develop a Contingency Plan in the event the incident should exceed the ability of the county to respond. The OA EOC can assist in developing an Advance Planning Issues-Field.

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Name

Director of Emergency Operations  
XYZ County

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Date