

EOC 101

When an emergency occurs, it's too late to start planning a response. How do you plan for the unexpected? The first 48 hours is critical, whether it's stopping a disease outbreak or preventing injury and death, you have to start to plan before the emergency occurs – and when it hits, act fast. The ability of your Emergency Response plan to sustain and succeed in any emergency is dependent on the strength and depth of its roots. A clearly defined chain of command and organizational structure, effective resource management, and advanced planning, are important aspects of an emergency response. An Incident Management System, or IMS, is an internationally recognized model based on these principles. IMS provides the root structure needed to grow your emergency response plan and make it strong enough to withstand natural disasters, disease outbreaks, or any hazard. An Emergency Operations Center, or EOC, is the place from which you run your incident management system. The EOC is where you collect information, make decisions about priorities, and coordinate action and communication. EOCs can expand as the response unfolds and scale down as the emergency is under control. EOC's can be big or small, complex or simple, implemented just as effectively in rural as in urban settings. EOC's are necessary and achievable. Simply put, an EOC and any function within it, is: People, Systems and things. And of the three, the people and systems are the most important elements. For example, you have some people doing contact tracing, others to analyze the data that's collected. You have systems that detail how and when contact tracing is conducted and how the information is shared during staff meetings. And, you have things such as the trucks or cars that contact tracing staff use to get around, the personal protective gear they may wear when talking to people within a home, and the printers used to transmit the data back to the EOC. Incident management systems implemented as part of an Emergency Operations Center follow an established structure. Following this structure, you can move quickly from planning to using your EOC which is the key to being effective in your response. There are five basic steps to help move get your EOC set up and ready to use. With that in mind, first, ensure that you have the laws and authorities in place to carry out public health emergency activities. Second, identify the personnel who represent the major functions for your area or across areas, including in particular Rapid Response Teams, which can be deployed as needed to particular areas. These teams can be comprised of epidemiologists or disease surveillance specialists, laboratorians, and others depending on the needs and scope of the mission. Third, identify a location, which may depend on the size of your response or the space you have available to you. And build out, whether it be from a warehouse or as simple as a storage cabinet whatever infrastructure is needed such as computer networks, and secure communication equipment as well as transportation.

Fourth, use existing training resources such as the World Health Organization's Framework for Public Health Emergency Operations Centers or trainers from CDC to develop standard operating procedures or systems to run your operation. Then, train on a routine basis, using exercises for various scenarios to keep skills and familiarity with systems routine, so that when the time comes to activate the EOC, staff can quickly move into action. Making use of the experiences and lessons learned to correct and customize plans and SOP's, filling gaps where needed. What an EOC does is make sure that all the various activities and stakeholders affected by outbreaks and emergencies work in sync, making sure that information and data are shared efficiently and quickly in a coordinated manner, communicating essential information to partners and stakeholders. Having an EOC structure in place as part of a country's Incident Management System provides an invaluable head start in heading off a public health disaster. For example, in Nigeria, the country was able to utilize resources devoted to another EOC, one focused on polio, and quickly bring together skilled public health personnel under an EOC devoted to the Ebola outbreak. This allowed teams and stakeholders to interface quickly and efficiently, preventing isolation of individual response elements. For example, staff conducting contact tracing upon identifying a symptomatic contact would call into the EOC and a case management team, ambulance, and decontamination team would be deployed, getting the patient quickly into isolation while the contact tracing team moved to list new and existing contacts of the affected individual. This type of rapid response and coordinated action played a critical role in containing Ebola's spread, even among the densely populated areas

of Nigeria. CDC is committed to providing training for those who want to establish an EOC. The investment can be minimal, the benefits are priceless.