

Process for Development, Review and Testing of the Emergency Operations Plan  
North Dakota Department of Health

### **Plan Development**

NDDoH emergency response uses a set of response components to respond to a disaster. These elements are common to many types of disasters (e.g., medical surge, evacuation, community containment) and the specific components needed are selected according to the needs of the particular response. Some of these components have been tested repeatedly by real events (e.g., evacuation) while others have never been tested by real events. The development of new parts of the emergency operations plan are ongoing. New planning areas are primarily event specific plans looking for new elements not covered by existing components, and addition of new elements or revisions to existing plan when gaps are revealed by review, exercising, or real events. For instance, no Ebola plan existed prior to 2014, but aspects of Ebola response were unique and required modification to response components and implementation of response components never tested before (e.g., modification of PSAP protocols for screening 911 calls).

The process of elective new plan development (as opposed to disaster driven) usually follows this pattern:

- 1) Identification of a priority planning area
- 2) Tabletop exercise to explore the event type
- 3) Development of a plan development outline in fine detail
- 4) Drafting the plan
- 5) Review of the plan
- 6) Exercising the plan (see exercise schedule for additional information about exercise planning)

### **Plan Review**

The Emergency Preparedness Section completed a full plan review in 2013. This required over 40 hours of meeting time over more than a year. Ongoing review is scheduled at a manageable rate with new plan review taking precedence of re-review of existing plans. The plan review process involves detailed abstraction of the plan to PowerPoint slides and presentation of the plan in a staff meeting which includes the regional staff and sometimes others partners. This is done in the presence of the Emergency Preparedness Director if at all possible. Changes to the plan are then made based on the review, and gaps are identified which will require more complex problem solving (e.g., material acquisition, new plan development). More selective plan reviews are periodically completed with partners (e.g., hospital preparedness coordinators). Selective component review may also be conducted before an expected disaster (review of procedures for health care facility evacuation and transport in the late winter before spring flood season).

### **Plan Testing**

Plan testing is part of the review process. This is usually done through tabletops of varying complexity depending on the status of planning. Tabletop review of plans, although not a complete substitute for review of the written plan, is often more productive, faster and not substantially more difficult to

prepare. Very well developed plans such as flooding will use exercises that explore unusual or complex aspects of response. Less well developed plans (e.g., radiation response) are tested in a tabletop at a lower level of detail. Some plans also requires drills (e.g., tactical communications) which are schedule on a recurring basis. Functional exercises are usually done for skill building rather than plan testing. Full scale exercises may be done for either reason.

#### Plan Evolution

Plans tend to evolve as they are reviewed and tested. Early plans tend to be heavy on information with less precise procedural and policy content. Exercises and real events help with the creation of new elements in the written plans including assumptions, protocols and procedures, policy decisions, technical specifications, gaps and barriers, resources, documents, roles, consequences, recovery.