

NCOEMS EMERGENCY OPERATIONS PLAN (NCOEMS – EOP)
APPENDIX 1: SHIFT DUTY OFFICER STANDARD OPERATING GUIDELINE
OCTOBER 2023

Table of Contents

Purpose.....2
Scope2
Operating Guideline2
 General Duty Responsibilities.....2
 Staffing.....3
 Shift Times & Shift Change3
 Situational Awareness and Reporting3
 Notification and Initial Actions4

Purpose

To ensure the efficient provision of emergency medical support and direction in response to emergent events with the potential for affecting the health and medical welfare of North Carolina residents and visitors.

Scope

This SOG identifies the primary on-call staff, defines on-call duty, and outlines the initial actions of these individuals upon notification of an incident in which NCOEMS is a lead or supporting agency.

Operating Guideline

The Shift Duty Officer (SDO) will be available 24/7 to provide support, as requested, for emergency activations or responses across the state and to acknowledge and respond to requests for information.

The SDO will be available via phone and email:

- Phone: 919-855-4687
- E-Mail: DHSR.NCOEMS.SDO@dhhs.nc.gov

The Admin on Call (AOC) is a leadership position to provide internal direction, advice, support, and backup for the SDO in a 24/7 capacity.

General Duty Responsibilities

- The expected response time to messages is within 15 minutes. Greeting messages on phones utilized during SDO duty and which may be received by callers contacting the SDO for assistance must, at a minimum, confirm that the caller has reached an HPP staff member and that their call will be returned as soon as possible.
- Staff scheduled for duty must be able to maintain availability to meet response time expectations. For this reason:
 - Staff scheduled to be out of state during their rotation cannot serve as SDO.
 - Staff that are committed to activities that may temporarily cause them to be unable to meet the expected response time (e.g., training, conference presentations, etc.) must coordinate with other HPP SDO staff to temporarily cover the duty and notify the AOC.
- SDO will contact the AOC if assistance is needed in responding to a request for support or if there may be an unforeseen break in coverage of the SDO phone.
- When the response to ongoing incidents results in the activation of the State EOC, the SDO may be responsible for the initial opening of the ESF8 Desk:
 - During major activations (24/7 operations), the SDO, should be integrated into the regular NCOEMS staffing plan for the SEOC and the SDO line transferred to the ESF8 Desk with all responsibilities for the SDO integrated into the ESF8 role.
 - During minor activations (daytime operations) or during planned activities (exercises, etc.), the SDO should not be integrated into the staffing plan for the SEOC, when possible, and should expect to maintain their responsibilities as SDO outside the State EOC
 - If due to low staffing it is not possible for the SDO to maintain their role separate from the SEOC the staffing plan should consider rotation of the ESF8 desk and SDO

responsibilities to ensure that staff receive adequate time away from being in response mode

Staffing

1. SDO duty will rotate between identified staff every week on a schedule maintained by the HPP Program Manager or their designee. All changes to the established shift schedule due to illness, previous commitments, or other reasons will be coordinated through the AOC and are the responsibility of the SDO to coordinate coverage.
2. AOC duty will rotate between the HPP Program Manager and the HPP Operations Manager every four (4) weeks on a schedule maintained by the HPP Program Manager or their designee.

Shift Times & Shift Change

SDO shifts will run over a one-week period and AOC shifts will run over a four-week period. Shift changes will take place every Monday at 0900. At that time, the SDO coming off shift is responsible to:

- Provide an informal briefing to the oncoming SDO. At a minimum this briefing should outline any ongoing responses that required SDO action and include:
 - Emergency medical resources alerted/activated (organization, type, and quantity)
 - Date/time of activation/response, SDO actions, and resolution
 - Current situation and any required follow-up actions for the oncoming SDO
- Provide any documents, maps, etc. to the oncoming SDO that are pertinent to current activities.

The SDO coming on shift is responsible to:

- Forward the SDO phone - (919) 855-4687 – to their NCOEMS-issued mobile phone. The SDO phone is in the Wright Building. Test the SDO line to ensure that it is working appropriately after the transfer.

Situational Awareness and Reporting

During the duty period the SDO is expected to maintain situational awareness through the active monitoring of:

- All phone calls and email to the SDO contact number and email address. Overnight (1700-0800) the SDO can shift to phone only monitoring.
- The SDO is also expected to always maintain access to the VIPER 800MHz radio system.
- ReadyOp will be utilized for formal situation reporting purposes. Situation reporting forms (i.e., SDO Notification forms) are specific for each Healthcare Coalition (HCC) and found under the Forms tab of each HCC's ReadyOp page.
- Situation reporting will be coordinated between the SDO and the affected Healthcare Preparedness Coordinator (HPC) or their designee. In general, when notification of an incident or request for support originates with the SDO, the SDO will be expected to initiate and update situation reporting. When an incident notification or support request originates with an HPC, they will be expected to initiate and update situation reporting.

Resources: The SDO should be provided/have access to and may utilize the following equipment and supplies in performance of their duties.

Communication:

- Portable VIPER 800mhz radio with charger and extra battery
- NCOEMS-issued smart phone with car and wall chargers.
- GETS card.

Transportation:

- NCOEMS staff vehicle with portable VIPER capable radios and plug-in power inverter (for running laptop, etc. off vehicle battery)

Operation:

- NCOEMS-issued laptop with appropriate emergency management programs and applications and chargers.
- NCOEMS-issued Wi-Fi-enabled hotspot or smart phone with chargers.
- Plans/access to plans, paper, pens, calculator, and other supplies necessary for planning and reporting

Notification and Initial Actions

Notification for emergent or potential incidents involving emergency response may be via:

1. NCEM 24-Hour Operations Center/Warning Point – (Usually a notification of a potential incident and delivered via e-mail)
2. NCEM Emergency Services Group Supervisor of the State Emergency Response Team (SERT) – (Usually a notification of an emergent incident and delivered via phone call or text)
3. Regional Healthcare Preparedness Coordinators – (Usually a phone/email/ReadyOp notification of an issue that the HPC is already involved with and foresees the need for additional support)

Upon receiving notification of a potential or actual incident or request for support through one of these routes, the SDO is expected to assess the need and determine what type of action is necessary, if any.

- If no state resources are requested and there are no expected changes to the situation (i.e., train struck a pedestrian and the situation has ended) acknowledge that the notification has been received and take no further action.
- If no state resources are requested but there is a potential for a change in the situation thereby necessitating resources in the future (i.e., A skilled nursing home has lost power and county emergency management is investigating the need for HVAC/Generators), acknowledge that the notification has been received and:
 - Forward the notification and information to the Healthcare Preparedness Coordinator (HPC) responsible for the affected facility/jurisdiction for their awareness (Note: If a hospital system is involved, similar notification should be made to the HPC associated with that hospital system. The SDO may ask the regional HPC to make this additional notification.)
 - Submit an initial situation report in ReadyOp for the affected HCC.
- If the notification is for the coordination of health and medical resource support, acknowledge that the notification has been received and:
 - Contact the Healthcare Preparedness Coordinator (HPC) responsible for the affected facility/jurisdiction and/or utilize the on-call number for the HCC found in ReadyOp.
 - Ensure the HCC is willing and able to handle the request for assistance. If they are unwilling/unable, then contact the HPP Program Manager or designee for additional support.

- Forward the notification and information to the HPC or their designee responsible for the response and request that they:
 - Verify the reported information with local partner organizations to confirm what is needed,
 - Utilize HCC resources to meet the requested need (this includes resources from other HCCs)
 - Provide initial situation report back to the SDO within 30-60 minutes or when reasonably able to do so via ReadyOp, Text, Phone or Email.
 - Post situation reports in ReadyOp utilizing their HCC-specific SDO Notification form every 8-12 hours depending on the situation. For quickly evolving situations the need may be more frequent and may be provided via ReadyOp, Text, Phone or Email.
- Maintain contact with HCC designee, monitor email for ReadyOp situation updates, and be available to expand/support HCC requests.
- Submit initial situation report/update in ReadyOp for the affected HCC within first 60-90 minutes based on the information provided by the HCC designee and other official sources to, at minimum the:
 - Activated HPCs, and
 - Regional NCOEMS Manager for the affected location
 - Ongoing Situation Reports should be sent out every 8-12 hours based on the situation. For quickly evolving situations the need may be more frequent.
- If the notification is for the coordination of health and medical resource support, and the HCC designee has determined that the need is greater than what the HCC of the affected facility/jurisdiction is capable of handling with the resources available:
 - Notify the HPP Program Manager, or their designee, to provide a brief situation report, discuss the situation, and coordinate further action including, if necessary:
 - Activating additional HPP/HCC staff and assets
 - Activating the NCOEMS-HPP EOP or other plans
 - Request posting a separate event in NCSPARTA WebEOC