



Emergency Preparedness Planning (EPP) Guidelines

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Introduction

These Guidelines are designed to assist CARE International Country Offices (COs) in carrying out ongoing emergency preparedness planning processes. The guidelines are an integral part of the CARE Emergency Toolkit (CET) and build upon various chapters of the CET in order to provide comprehensive guidance on CARE CO emergency preparedness.

Emergency response is core business for CARE. CARE's Mission Statement defines delivering relief in emergencies as a way to facilitate lasting change in achieving CARE's Vision. CARE's Humanitarian Mandate statement recognizes that emergencies are both a cause and an effect of poverty and injustice and that emergency response plays an integral role in supporting successful long-term development.

CARE's Program Approach is a commitment to align CARE's operations with long-term programs that seek to achieve significant and lasting impact on global poverty and social injustice, especially through empowering women and girls, over a 10-15 year period. Emergencies inevitably occur during the course of these long-term programs; CARE has a responsibility to be prepared with quality responses that address the needs of the most vulnerable and strengthen community resilience.

The Emergency Preparedness Plan is a scenario-based tool for planning response to potential emergencies and to ensure that adequate arrangements are made in anticipation of a crisis. The goal of the EPP is to facilitate an appropriate, timely and effective response. The EPP relies on historical data and informed assumptions and helps to determine in several key decisions in advance of an emergency (e.g. what activities will be carried out, which organizations will be partnered with, who will lead the response and what support will be needed).

A Contingency Plan is a tool used in planning a response to a currently unfolding emergency. When the actual crisis occurs and specific information becomes available, the Emergency Response Strategy section of the EPP can be quickly adapted into a Contingency Plan.

Disaster Risk Reduction (DRR) is an approach that addresses disaster risk through activities that reduce vulnerabilities and increase the resilience of the community. These activities span the relief-to-development spectrum and include actions that prevent disasters from happening (prevention), reduce the impact disasters have (mitigation) and prepare societies to deal with the effects of a disaster when they happen (preparedness). The EPP is thus an integral component of DRR. However, for the purposes of these guidelines, the EPP focuses on increasing internal and organisational (CARE and partner) capacities to respond to emergencies when they occur.

Emergency preparedness is much more than having a documented plan. It involves many aspects: a functioning emergency response management structure; a well articulated and widely shared response plan that is informed by and is also used to inform the overall CO strategic plan and program approach; a review mechanism in place to perform frequent reviews of preparedness actions; a reflection process to allow long-term programming efforts to adapt as necessary to address potential risks and disasters; and staff who understand the plan and their roles in it. The Emergency Preparedness Plan is intended to be a functional, living document that informs overall Country Office operations and programs. It is essential that the plan is reviewed and updated at least once per year in order for it to be a useful tool when disaster strikes. Similarly, the capacity-building action plan should be reviewed once per quarter.

Measuring performance in emergency response

CARE has developed a Humanitarian Accountability Framework (HAF) that guides emergency responses and defines accountability to key stakeholders, particularly communities and individuals directly affected by disasters. All CARE staff are responsible for implementing work in accordance with this accountability framework, including when working with and through partners. CARE managers have a specific responsibility to ensure that roles and responsibilities are clear within and between teams.

The HAF includes humanitarian accountability benchmarks, response targets, and a compliance system.

The response targets and indicators contribute to an effective emergency response and monitor performance at a global level. The response targets include

1. Timeliness of response
2. Quality and accountability of response
3. Competency in CARE core areas (Food Security, WASH, Shelter)
4. Fundraising by CARE members for response
5. Financing of global emergency capacities

The benchmarks define CARE's key quality and accountability commitments for an emergency response. The benchmarks include

1. Leadership on accountability
2. Impartial assessment
3. Design and monitoring
4. Participation
5. Feedback and complaints
6. Information sharing
7. Evaluation and learning
8. Capacity of CARE staff and human resource management

Detailed information and guidance on CARE International Humanitarian Accountability Framework is available in the attached [HAF policy statement and guiding note](#), Annex 2. For additional resources and support requirements, including deployments prior or during emergency, refer to the Quality and Accountability Standing Team wiki at <http://qualityandaccountabilitynetwork.care2share.wikispaces.net/Standing+Team>

Measuring Preparedness

In order to ensure that CARE COs are adequately prepared to respond to humanitarian emergencies all COs must have 1) a functioning Emergency Response Team (ERT) that meets at least quarterly and 2) an updated EPP document that is submitted with the draft CO Annual Operating Plan (AOP). The EPP document needs to be reviewed by the Regional Emergency Coordinator (REC) and endorsed by the Country Director (CD), the CD line manager, and the Lead Member Emergency Director. The EPP document at a minimum should

- Define the composition of ERT
- Identify the three highest-risk disaster scenarios
- Complete the CO's Emergency Response Strategies for the three scenarios
- Develop a capacity-building action plan

In addition, all CARE USA Country Offices are required to update the EPP Dashboard (as part of UBORA requirements) twice per year in every January and July. For non-USA COs, it is an optional but advisable step. More information on the EPP Dashboard is available on the website: <http://usago.care.org/emergency> (*username: wsscure\care, password: abc!123*)

Key steps in the EPP Process

Orientation to Basic Concepts and Policies

There are several resources available to assist the group developing the EPP. The primary guide is the CARE Emergency Toolkit (CET), which is a comprehensive collection of policies, guidelines and tools to support effective emergency response work that meets quality and accountability standards. **All ERT members and senior management should be familiar with the CET.** The CET is available on CD ROM as well as online at <http://www.careemergencytoolkit.org> (*username: cet@care.org, password: staff*). It can be downloaded from the site to the computer so that an internet connection is not necessary every time it is viewed.

The following chart indicates who needs to know CET's particular sections:

CET Division	Policy, Concept, Protocol, or Skill	Staff that need to have knowledge				
		CD	ACD	ERT Co-ordinator	ERT Members	Appropriate Sector/Technical Specialists
Policy and Management Framework	Humanitarian Policy Framework	√	√	√	√	√
	Basic Guide to Emergency Response	√	√	√		
	Emergency Management Protocols	√	√	√		
	Key Policy Issues	√	√	√		
	Quality and Accountability	√	√	√	√	√
Programming Guidelines	Program Strategy		√	√	√	
	Sector Guidelines		√	√	√	√
	Cross-cutting Issues		√	√	√	√
	Gender	√	√	√	√	√
	Advocacy	√	√			
Program Management Guidelines	Emergency Preparedness Planning		√	√		
	Early Warning			√		√
	Assessment			√	√	√
	Funds Mobilization	√	√	√		
	Proposal Writing	√	√	√		
	Donor Contract Management		√	√		
	Partnerships and Sub-Granting		√	√		
	Monitoring and Evaluation			√		√
Operational Guidelines	Closure or Transition of Programs	√	√	√		
	Information Management		√	√		
	Media	√	√	√		
	Human Resources			√		√
	Finance					√
	Logistics			√		√
	Distribution			√		√
	Procurement			√		√
	Administration			√		√
IT and Telecommunication			√		√	
Safety and Security Management	√	√	√	√	√	

Developing an Agenda

The EPP can be developed several different ways. Many COs choose to conduct a workshop with some or all of the ERT and key staff. The advantage of the workshop is that it can be used to deliver some orientation and training on basic concepts for the ERT as well as allowing participatory planning. If using the workshop methodology, it is essential to develop a detailed agenda before it begins in order to specify the type of activities as well as the participants. The Lead Member Emergency Unit and Regional Emergency Coordinators (REC) are also resources for facilitation and guidance.

Gathering Information

Emergency Response Team (ERT)¹ members can be assigned to collect CARE-internal and external data prior to the development or update of the EPP. This information will inform the process (especially risk analysis and capacity assessment) and is very helpful to have on hand before starting, but gathering it should not be overly time-consuming. Some useful information to have is

¹ Refer to the next paragraph for the details on Emergency Response Team

- Historical disasters in the country, their impact and main types of responses
- Top ten disasters in the country, in terms of number of people killed, number of people affected and total economic damage caused
- Last disaster to which the CO responded and the main response activities/areas of intervention
- Final evaluations, AARs or recommendation reports from previous emergencies
- Country maps --in both hard copies and electronic formats
- Country statistical data Sex and Age Disaggregated Data (SADD) - population per province, region, district, city, village, etc.
- Basic CARE program data SADD – total population in villages where CARE is working, and project beneficiary numbers
- Key vulnerability data SADD - per province, region, district, city, village, etc.
- Previous gender analyses - interagency assessments, gender information from gender experts or women organisations, exercises on Underlying Causes of Poverty and LRSP, etc.
- EPPs or similar documents from the Government, UN, international or local NGOs
- Country Office organization chart
- List of Country Office personnel
- Country Office physical inventories - offices, guesthouses, vehicles, and equipment (including telecommunications) per each office and location
- Contact information for key CO staff - Record of Emergency Data form, home and mobile phone numbers
- Contact information for CARE International Emergency Group, Lead Member, and Sector Specialists
- Mapping of existing coordination mechanisms - UN, Interagency, ECB, NGO consortium, Government etc. and humanitarian networks
- The Consolidated Appeal Process (CAP) information if applicable

Developing the Emergency Preparedness Plan (EPP)

All of the following steps have a corresponding space in the EPP Workbook (Annex 1), where the results of the analysis and decisions should be reflected. The completed workbook will become your Emergency Preparedness Plan.

1. Executive summary

This section will be written at the very end of the EPP process and will provide a brief overview of the key decisions made. However, in the workbook document it appears first and in chart form. It is meant to be very brief and accessible. If any narrative is added, it should not exceed a half page and it should be free of jargon and excessive acronyms.

2. Emergency Response Team (ERT)

Every CO is required to have a functioning Emergency Response Team. The ERT is usually led by the CD or ACD. The team is responsible for coordinating Country Office activities for emergency preparedness and response for the benefit of vulnerable populations in times of emergency. The ERT is usually composed of already existing staff that will likely have to take up a 'shadow' role during an emergency. For example, if the CO does not have a dedicated emergency coordinator, the ACD/PQ is usually designated as the ERT Coordinator.

Objectives of ERT

- Coordinate the CO's emergency preparedness and response
- Raise awareness about the cross-cutting nature of emergency preparedness and response among all units of the CO
- Allocate responsibilities among staff
- Identify areas where gaps in mandates or lack of operational capacity exist

- Ensure that CARE staff understands and knows how to apply CI and other international protocols, standards and guidelines regarding to emergency preparedness and response
- Ensure the EPP is kept up to date and used to inform strategic and programmatic planning processes

Requirements of the team

- The ERT will meet at least once every three months during non emergency periods.
- The ERT will consist of 5-15 members, ensuring at least 40% are women.
- The ERT will be trained on gender issues (minimum requirement: IASC e-learning course) and include a gender focal point.
- The ERT will include focal points for all the sectors in which the CO plans to respond. Those focal points will establish contacts with global sector specialists prior to disasters in order to access technical support for the development of emergency response strategies, concept notes and proposals.
- The ERT will include an accountability focal point.
- Each member of the ERT should have clearly defined roles and responsibilities for both the preparedness and response phases.
- Depending on the size and capacity of the CO, multiple functions may be performed by the same ERT member.
- Back-up staff should be identified for each ERT role so that the CO can function without interruption in the case of any staff transition.
- Job descriptions (JDs) and individual operating plans (IOPs) of ERT staff should reflect responsibilities pertaining to emergency preparedness and response, in order to acknowledge workload and emphasize its priority.
- The ERT structure should be articulated as part of the overall Country Office organization chart so that everyone understands the reporting lines and how the ERT structure is integrated.

ERT tasks before an emergency

- Ensure that the EPP is developed and maintained and is in line with CO strategic and program planning processes
- Participate in relevant interagency coordination mechanisms (clusters and others) prior to the emergency to ensure CARE is recognized as a serious emergency responder
- Coordinate capacity-building for emergency response (e.g. simulations, orientation to CET, etc)
- Collect, develop, and disseminate best practice training manuals, guidelines and protocols for different levels
- Ensure gender mainstreaming during preparedness and response – refer to the attached Mainstreaming Gender in EPP document, Annex 3, for more information
- Develop effective communication strategies on impending disasters
- Ensure effective monitoring of potential disasters and identify opportunities to collaborate and network with stake holders

ERT tasks during an emergency

- Send an emergency alert
- Make sure all CARE staff are safe
- Start using the instructions in the emergency management protocols
- Call an ERT meeting to review EPP and plan for response
- Set up an operations room for the ERT
- Deliver initial CARE emergency response within 48 hours of emergency
- Ensure the timeliness, quality and effectiveness of CARE's emergency response
- Prepare, review and update an initial Response Strategy that can be circulated to CI and donors within 48 hours

- Participate in relevant interagency coordination meetings (clusters), assessments, gender analysis (refer to the attached Gender is Easy document, Annex 4, for additional information on gender analysis in emergencies) and funding schemes (flash and consolidated appeals)
- Arrange proper support to the emergency response in the form of programming, finance, administration, procurement, safety and security, IT and communication
- Shift regular HR, procurement and finance procedures into emergency mode (refer to the CET: chapter 23 Human Resources, chapter 24 Finance and chapter 27 Procurement)
- Identify additional support requirements and make request to the lead member and CEG
- Scale up emergency activities
- Ensure proper communication with CARE International by providing regular sit-reps and other information as needed
- Develop media and communications materials in coordination with CI (press releases, interviews, photos)
- Initiate process of strategy development for transition into recovery programming
- Carry out After Action Review (this usually takes place after three months of the emergency response) and feed the lessons learned to the existing programmes

Particular attention needs to be paid to humanitarian coordination. It is important that the ERT understands the cluster approach to humanitarian coordination and participates in the key/relevant cluster activities during emergency. Some countries have active national clusters even in non-emergency situations, and it is important that the CO participates in these activities as well. CO participation in the cluster system and in the UN Flash or consolidated appeals will increase the opportunity to receive assistance and funding when needed. More information on the specifics of the Cluster system can be found at the website: <http://onerresponse.info/Coordination/ClusterApproach>

3. Risk analysis

The EPP is a scenario-based plan. The disasters identified in this section will become the basis for developing much of the preparedness plan. It is an important step that requires some preparation and thoughtfulness. This risk analysis is to be reviewed during every annual EPP process and semi-annual Dashboard review.

Guided by the workbook, first review the historical data on disasters in the area (in-country or across borders if applicable). Then consider other non-historical risks that could occur as a result of climate change or other trends relevant to the area, such as migration, drought, conflict, climate change, terrorism, heat wave, epidemic, infrastructure disruption, wildfire, coastal erosion, financial disruption or information disruption. Use this information to identify potential disasters that may occur within the next three years.

For each potential disaster, rank both the probability and the impact separately, using scales of 1 (negligible) to 10 (severe). 1 is very unlikely or will have very little impact; 10 means the event is certain to occur or will have the highest impact. Multiply these risk factors together, for each disaster, in order to generate a risk level rating between 0 and 100. $RISK LEVEL = PROBABILITY \times IMPACT$

The highest-risk hazards are those that have both a high probability of occurring and will also have a high impact if they occur. This scale is obviously very subjective; the numbers will vary depending on who is ranking them. Therefore it is not the exactness of the numbers that is important; it is being consistent in the process.

Rank the hazards in order of highest-risk to lowest-risk. Then identify the top three risk scenarios. The following sections will develop plans for those three scenarios. If the CO faces other serious risks, those can be planned for as well. However, it is better to have three well-developed response strategies rather than multiple less-developed ones.

4. CARE capacity to respond

In this section, describe CARE's capacity to respond to emergencies in the country. The workbook offers a sample format. Fill-in the blanks where appropriate, delete anything that does not apply and add any additional information. If there are critical gaps that the response strategy does not cover, explain why not. It should not be longer than a half page.

The ERT should also discuss and complete the Capacity Assessment Questionnaire from the CET, Protocol C3, Annex 4.2. When an emergency occurs, return the completed form to the Lead Member (line manager, RMU, and emergency director) and CEG. This should be before the first CCG call if possible.

CARE Country Offices should also complete the Emergency Preparedness Dashboard form. The EPP Dashboard summarizes the information generated from the EPP process, as well as external information, and generates an overall CO Readiness Level score. This is how CARE tracks CO progress in emergency preparedness. Readiness levels and other EPP related information (EPP plans, Response Strategies, etc) can be viewed at the website: <http://usago.care.org/emergency/default.aspx> (*username: wsscure\care, password: abc!123*). The Dashboard form must be submitted twice per year (January 10 and July 10) by CARE USA Country Offices. The dashboard is optional but encouraged for other COs.

5. Emergency response strategy

Now that the top disaster risks have been identified through risk analysis, the following sections will guide you to develop emergency response strategies/contingency plans for each disaster scenario. Preparing thorough Response Strategies gives the Country Office the chance to evaluate the scenarios as if they were currently unfolding.

In a large scale emergency the CO will be requested to share an initial emergency response strategy within 48 hours of an emergency onset. It is both the main emergency response planning tool and an excellent fundraising tool that will likely form the basis of early proposals to donors. The Emergency Response Strategies that are developed in the following sections align with the standard format and can be quickly adapted at the onset of an emergency.

5.1 Scenario description and needs analysis

A scenario description is nothing more than a summary of the scene one would expect to see if a particular disaster occurred. It should be as detailed as possible. Obviously, scenario description will be based on a number of assumptions of the magnitude of the hazard and its impact. At this point, an educated estimate based on thoughtful analysis is sufficient. This description can be updated throughout the EPP process as additional considerations become clear.

Begin the workbook section by inserting a map of all potential disaster-affected areas. Ideally, the map will be interactive, meaning that it can be zoomed in and out to different levels of detail and is searchable.

Complete the first chart in this section of the workbook by identifying the areas likely to experience the particular hazard and by identifying the populations in those areas. The four columns in the chart are just a suggestion; there can be more, or less, than four geographies identified. Below it, there is also room to elaborate on why the disaster is occurring and its timeframe.

For the second table, consider the disaster's immediate impacts on the community and different areas of daily life. Not all concerns listed in the chart will be applicable to the scenario, but for those that are, describe how the effects will likely be felt.

5.2 Early warning and trigger indicators

This section is optional because it does not apply to all risk scenarios. Knowing when to respond to a rapid-onset disaster, such as an earthquake or flood is not typically complicated. However, it is often

more challenging to know when to start responding to slow-onset disasters, such as drought, disease outbreak and conflict.

An early warning system provides information about potentially critical situations. It involves a system of tracking key information to monitor trends that could lead to humanitarian crises and communicating that information to stakeholders in a timely way. A trigger is a type of indicator monitored by an early warning tracking system.

Some COs actively monitor trigger indicators. If that is the case, the ERT should determine the level of the indicator or the number that must be present for a response to be triggered. Some examples of trigger indicators are crude mortality rate, morbidity, mortality, malnutrition rate, crop maturation, distress asset sales, death or distress sale of livestock, increased market prices, increased political violence, distress migration and increased movement into cities or larger centers.

Some COs rely upon partners or coordinating bodies to do the actual measurement of indicators. If this is the case, the CO will need to identify organizations or tools that are being referenced, for example, the Integrated Food Security Phase Classification (IPC).

5.3 Goals and objectives of CARE response

This is a standard goals and objectives statement. Add to it if necessary, but it should be no longer than a single paragraph. An example is provided in the workbook.

5.4 Proposed CARE response

For each disaster scenario the CO must decide in which sectors it plans to respond and approximately how many beneficiaries will be assisted. This decision should be based on the existing CO programs and experience, and it should contribute to achieving the goals and objectives of a CARE response. A response should focus on *no more than three sectors*, one of which should be either WASH, Shelter/NFIs, or Food Security - which are the priority emergency sectors of CARE. Clearly if the CO has existing programs in an area it is hoped that the existing expertise will be used and preparedness will be incorporated in the existing program strategies and donor funding. Additionally, it is recommended to work with other NGOs to ensure coordination in choosing sectors.

Complete the chart in the workbook, disaggregating the information by geographic area if applicable. Keep the activities specific and clearly linked to the scenario. The discussion in this section should focus primarily on the immediate response, but should consider long-term goals of the intervention as well. In the workbook, use the indicated section to briefly address how the disaster itself and proposed response interventions are linked to the CO's Long Range Strategic Plans, including impact groups, theories of change, etc.

5.5 Partnership arrangements

There are several ways by which CARE COs respond to emergencies. One includes direct delivery of services; another is working solely through partners. Some perform a mix of both. If the CO is not planning to deliver emergency response through or with partners, then this section is not mandatory.

However, if the CO strategy is to work with partners, then they need to be identified and be part of the preparedness phase well ahead of disaster. It is advisable to have worked with the partners before, so the best approach is to review existing program partners and to have EPP discussions with them in order to understand their potential roles, responsibilities and strengths.

Along with the partners, the ERT needs to delineate the potential role of the partner versus the role of CARE. A Memorandum of Understanding (MOU) clarifying roles and responsibilities can be signed,

though an MOU is ideally already a part of the existing program partner agreements. Also, a capacity assessment of the implementing partner should be performed and attached to the EPP. The Partner Capacity Assessment Guide is located in the CET, Chapter 17. Based on the assessment, there may be a need to increase the capacity of the partner. If so, consult the Capacity Assessment Guide and attach those resulting plans to the EPP as well.

5.6 Key additional staffing requirements

Develop a key staffing structure for the proposed CARE response. Note that a large scale emergency response is likely to require the following full time, experienced staff for the duration of response activities:

- Team Leader/Emergency Coordinator
- Information Management Officer
- Media/Communications Officer
- Sector Coordinator (for each of the identified sectors)
- Logistics Officer
- Monitoring and Evaluation/Quality and Accountability focal point

Please note that other positions may be required for the response. Take into consideration existing Human Resource capacity in the Country Office (ERT members and other key staff). Based on their availability during the response, identify which positions will have to be identified, where are they going to be based, what are the minimum requirements to those positions (gender, language, cultural diversity) and how to source them (existing staff, or local, national, international new hire).

5.7 Relief item requirements

Now that general needs have been identified and the interventions have been planned, the specific relief item requirements can be determined. The following are the guiding questions that will help define requirements for relief items:

- What type of items will be needed for each intervention and sector?
- How and where will these items be sourced?
- What is already in place? Have vendors been identified and pre-supply agreements prepared?
- What are the customs clearances and duties for importing emergency relief items?
- Does the CO have an agreement with the concerned government bodies for importing relief items?

The CO needs to aim for relief items to be available for use in interventions within 48 hours of emergency. Therefore, it is important to either pre-position these items within CARE facilities and/or with implementing partners, or to have pre-supply agreements with vendors.

5.8 Logistics and equipment requirements

For each geographic area identify the needs for office space, vehicles, accommodation for CARE staff, warehouse space, transportation of relief items and communications equipment. Please note that some of these facilities/items may be provided by implementing partners or other organizations.

5.9 Funding target

Develop a summary budget that corresponds with the likely staffing, relief item and logistical needs of the proposed CARE response. For guidance, refer to the Basic Project Budget Preparation Guidelines in CET, Annex 14.11

This concludes the Emergency Response Strategy for Scenario 1. Please complete all of section 5 for Scenarios 2 and 3.

6. Policy and management considerations

This section is optional but advisable. This section helps identify the policy, management, programming and operational challenges that could potentially arise during an emergency response. Each CO will face a different combination of issues.

The CET provides in-depth information on the topics listed below, and should be consulted extensively when preparing this section. Relevant ERT members should review corresponding sections in the CET (and/or consult other sources) and identify challenges which may arise during the emergency response. The ERT should then discuss these potential challenges and outline specific plans for addressing them, including what action needs to be taken, who is responsible for the action and when it will be performed.

The key areas of consideration are:

- | | |
|--|---|
| 1. Humanitarian policy framework | 21. Environment and disasters |
| 2. Quality and accountability | 22. Infant and young child feeding in emergencies |
| 3. Safety and security | 23. Advocacy |
| 4. Humanitarian space | 24. Early warning |
| 5. Civil–military relations | 25. Assessment |
| 6. Prevention of sexual exploitation and abuse | 26. Funds mobilisation |
| 7. Humanitarian coordination | 27. Proposal writing |
| 8. Water, sanitation and hygiene | 28. Donor contract management |
| 9. Shelter and camp management | 29. Partnerships and sub granting |
| 10. Food security | 30. Monitoring and evaluation |
| 11. Psychosocial programming | 31. Information management |
| 12. Health | 32. Media |
| 13. Economic recovery | 33. Human resources |
| 14. Education | 34. Finance |
| 15. Gender | 35. Logistics |
| 16. Conflict sensitivity | 36. Distribution |
| 17. HIV/AIDS | 37. Procurement |
| 18. Disaster risk reduction | 38. Administration |
| 19. Participation | 39. Telecommunications and IT systems |
| 20. Protection | |

7. Action planning

Based on all the previous analyses including the CO Capacity Assessment

- Develop a plan of action to address gaps and strengthen the Preparedness Plan during the next 12 months.
- Monitor and review the action plan every quarter during the ERT meetings.
- Evaluate the progress and update the plan as necessary.
- Remember to include partners in relevant trainings and activities that arise from the EPP Action Plan.
- Where training needs are identified, contact the Lead Member emergency unit or Regional Emergency Coordinator to see what training options are available.
- See attached Matrix of priority emergency capacity building activities, Annex 5, to help identify specific areas where the CO needs to build capacities.

Managing the ongoing emergency preparedness process

The Emergency Preparedness Plan should be documented using the EPP workbook, Annex 1, which provides a template for the written plan. The written plan needs to be shared for review and endorsement with the Country

Director and the Country Office leadership team, the Country Director's line manager, the Regional Emergency Coordinator and the lead member Emergency Director.

Activities identified in the EPP action plan need to be implemented. The action plan needs to be monitored on a quarterly basis with the EPP document updated accordingly.

The EPP needs to be reviewed and updated at least once a year, and submitted along with the draft CO AOP, in order to ensure that the plan is relevant and reflects all recent changes in the Country Office. The review should cover all areas of the EPP: composition of ERT, risk analysis, scenario description, emergency response strategies and capacity-building action planning. It should also address critical gaps identified under the capacity assessment.

The EPP is a planning tool that complements, builds upon and contributes to CO programs and long-term strategic plans, as well as informs Annual Operating Plans. Therefore, it is required to carry out the EPP update prior to the AOP and LRSP processes.

It is important to include partner, program support, program teams and field office teams in the EPP development and review. Some Country Offices with large and remote field offices may find it useful to develop separate EPPs for the field offices. These field office EPPs should then be included in the overall CO EPP.

The EPP needs to be developed with implementing partners who will participate in potential emergency responses in order to ensure joint understanding and ownership.

Annexes

1. EPP Workbook.
2. Humanitarian Accountability Framework - Pilot Version, February 2010
3. Mainstreaming Gender in EPP.
4. Gender is Easy- how to do a quick gender analysis.
5. Matrix of priority emergency capacity building activities.
6. WASH Guidelines for Emergency Preparedness Plans (EPP)
7. Key Considerations for Supply Chain Preparedness.
8. HPA Concept Template and Example.
9. Steps to Mainstreaming Health into Emergency Preparedness Planning.

Ends.