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HEALTHCARE EMERGENCY PREPAREDNESS  
INFORMATION GATEWAY

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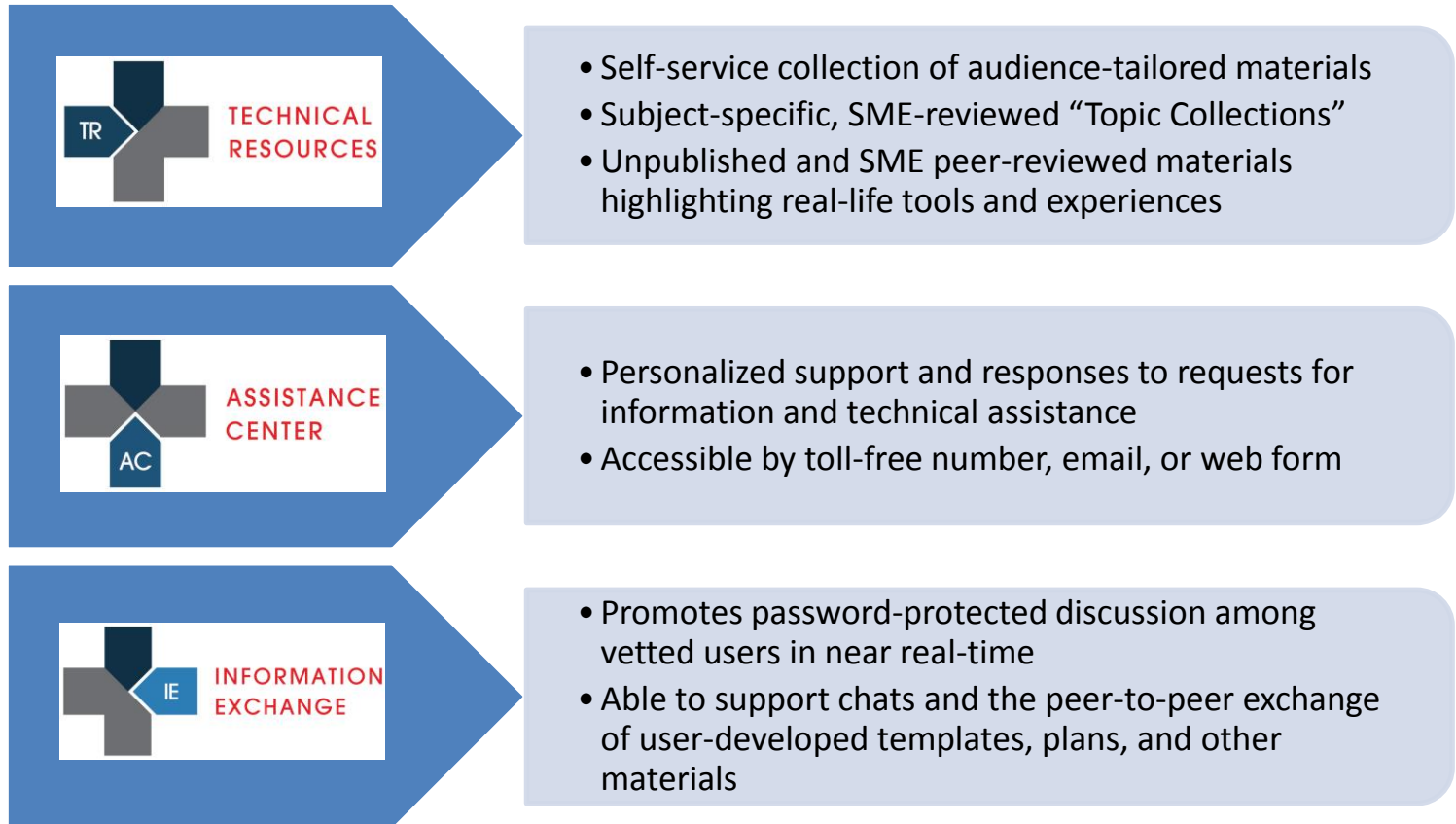
[Acronym List:](https://asprtracie.hhs.gov/documents/acronyms-used-during-webinar.pdf)

[https://asprtracie.hhs.gov/documents/  
acronyms-used-during-webinar.pdf](https://asprtracie.hhs.gov/documents/acronyms-used-during-webinar.pdf)

# Highly Pathogenic Infectious Disease Exercise Planning for Frontline Facilities

May 24, 2017

# ASPR TRACIE: Three Domains



[ASPR TRACIE Website](#)

# Highlighted ASPR TRACIE Resources

- TRACIE-developed Technical Resources
  - CMS Emergency Preparedness Rule: Resources at Your Fingertips
  - Ambulatory Care and Federally Qualified Health Centers Topic Collection
  - Tips for Retaining and Caring for Staff after a Disaster Tip Sheet
- Newsletter and announcements distribution list
- Assistance Center and Information Exchange



EMORY  
MEDICINE



UNMC  
Nebraska  
Medicine

NYC  
HEALTH+  
HOSPITALS

| Bellevue

[www.netec.org](http://www.netec.org)

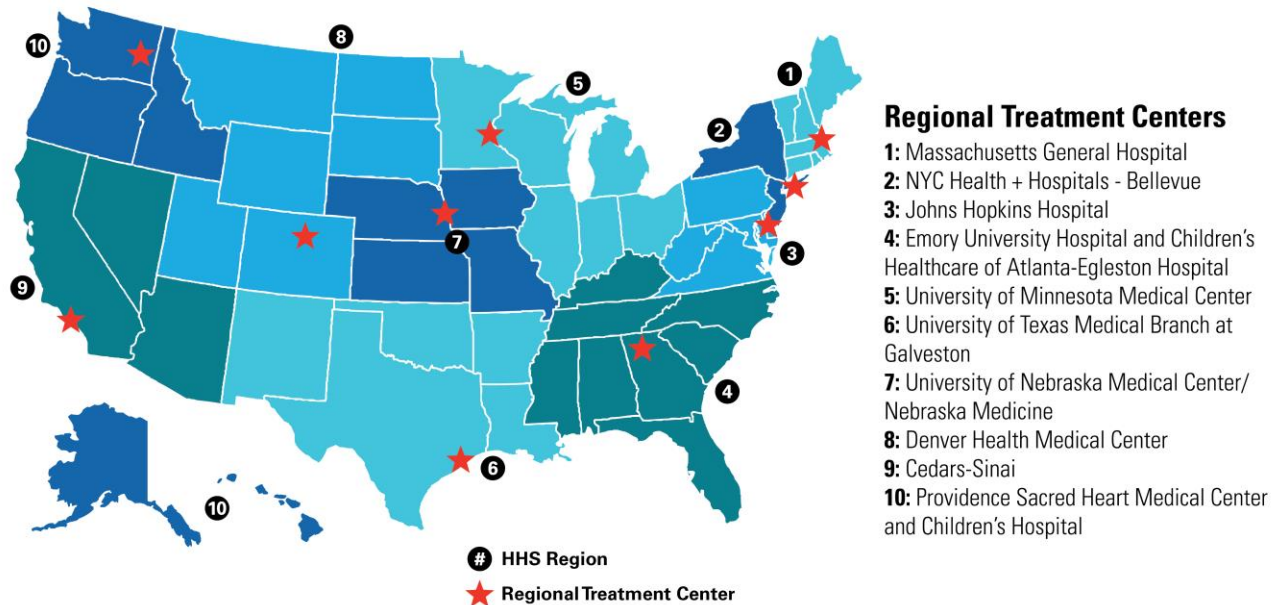
# National Ebola Training and Education Center (NETEC)

Mission: To increase the capability of United States public health and health care systems to safely and effectively manage individuals with suspected and confirmed special pathogens

For more information, visit [www.netec.org](http://www.netec.org)  
or email us at [info@netec.org](mailto:info@netec.org)

# Role of NETEC

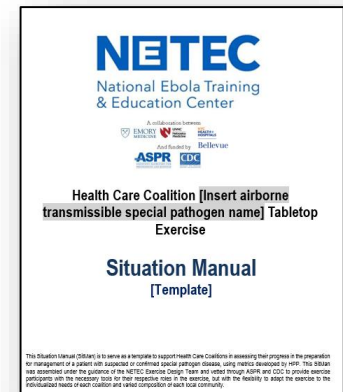
- Through the 5 year project period and in collaboration with ASPR, CDC and other stakeholders, the NETEC will:
  - Create readiness metrics.
  - Conduct peer review readiness assessments of regional and state ETCs as well as assessment centers as requested by state health departments.



# Role of NETEC (continued)



- Create, conduct, and maintain a comprehensive suite of onsite and online education courses and helpful resources and tools.
- Develop a repository for education resources, announcements, links to key information, exercise templates at [www.netec.org](http://www.netec.org)
- Provide technical assistance to public health departments and healthcare facilities.
- Create a research infrastructure across the 10 regional ETCs.





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**Richard Hunt, MD**  
**Senior Medical Advisor, Division of National Healthcare  
Preparedness Programs**



# Welcome Message and Webinar Purpose

- The management of patients with highly pathogenic infectious diseases is based on the regional, tiered approach set forth by ASPR for Ebola.
- Frontline facilities play a critical role in the success of that approach.

# Learning Objectives

- Participants will:
  - Learn about exercise templates – specifically tailored for frontline facilities – to test readiness for highly pathogenic infectious patients.
  - Understand how exercises support ASPR's regional, tiered approach.
  - Hear tips from two facilities on how to apply the templates.



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**Nicholas V. Cagliuso, Sr., PhD, MPH**  
**Assistant Vice President, Emergency Management**  
**New York City Health + Hospitals**

# NETEC Exercise Resources

## 6 end-users

- Frontline Facilities
- Assessment Hospitals
- State-Designated ETCs
- Regional Ebola and Special Pathogen Treatment Centers (RESPTCs)
- Healthcare Coalitions
- Regional Transport Plan



## 2 exercise types

- Discussion-based
- Operations-based



## 2 exercise options

- Ebola
- Other Special Pathogens (airborne)



# NETEC Exercise Templates

- Fully customizable to meet each end user's unique requirements
- Option to choose any single airborne-transmissible pathogen and proceed expeditiously
- Directly map to specific measures in the ASPR HPP Ebola Preparedness Measurement Implementation Guidance

**Table 1: Airborne Transmissible Disease Selection**

- Middle Eastern Respiratory Syndrome Coronavirus (MERS-CoV)
- Severe Acute Respiratory Syndrome (SARS)
- Highly Pathogenic Avian Influenza (HPAI)

\*This is not an exhaustive list. Other airborne diseases may be substituted.

DISCLAIMER: THE 2015 HOSPITAL PREPAREDNESS MEASUREMENT IMPLEMENTATION GUIDANCE FOR EBOLA PREPAREDNESS HAS BEEN MODIFIED BY THE NATIONAL EBOLA TRAINING AND EDUCATION CENTER (NETEC) TO ASSIST WITH MAPPING OF THE METRICS TO NETEC EBOLA AND OTHER SPECIAL PATHOGENS EXERCISE DESIGN TEMPLATES.

THIS GUIDANCE REMAINS THE PROPERTY OF ASPR.

Special Pathogen – Highly infectious disease (e.g., MERS-CoV, measles, etc.)

**ASPR**  
ASSISTANT SECRETARY FOR  
PREPAREDNESS AND RESPONSE

**Ebola  
Preparedness**

**2015**

**Hospital Preparedness  
Program (HPP)**

**Measurement  
Implementation  
Guidance**

*Hospital Preparedness Program (HPP)  
Ebola Preparedness and Response Activities  
CFDA # 93.817*

VERSION 7.0

# NETEC Exercise Templates

- Built-in injects throughout for further food-for-thought
- Contains HSEEP-compliant:
  - Situation Manual/Exercise Plan
  - How to Use This Template
  - Exercise Schedule
  - Relevant Plans
  - After Action Report
  - Improvement Plan
  - Participant Feedback Form and more

## Appendix A: Exercise Schedule

Suggested Time	Activity
Varies	Facilitator/Evaluator Briefing and Registration
20 – 30 minutes	Welcome and Introductory Briefing <ul style="list-style-type: none"> <li>• Participant Introductions (Players, Facilitator(s), Evaluators, Observers)</li> <li>• Exercise Overview                             <ul style="list-style-type: none"> <li>– Agenda</li> <li>– Guidelines</li> <li>– Assumptions and Anticipations</li> <li>– Evaluation</li> </ul> </li> </ul>
45 minutes	Exercise 1: Unit Activation, Transport and Patient Care for [Stable or Critical] [Insert airborne/transmissible disease name] Patient <ul style="list-style-type: none"> <li>• Module 1</li> <li>• Module 2</li> <li>• Module 3</li> </ul>
45 minutes	Exercise 2: Admit a Walk-in Patient from State-Designated Ebola Treatment Center's Emergency Department (ED) <ul style="list-style-type: none"> <li>• Module 1</li> <li>• Module 2</li> </ul>
120 minutes	Exercise 3: Planning for Special Considerations for State-Designated Ebola Treatment Center <ul style="list-style-type: none"> <li>• Module 1</li> </ul>

## Improvement Plan

This IP has been developed specifically for [Organization or Jurisdiction] as a result of [Exercise Name] conducted on [Date of exercise].

Target Capability	Issue/Area for Improvement	Corrective Action	Capability Element <sup>2</sup>	Primary Responsible Organization	Organization POC	Start Date	Completion Date
Target Capability 1 [Capability Name]	1. [Area for improvement]	[Corrective Action 1]					
		[Corrective Action 2]					
		[Corrective Action 3]					
Target Capability 2 [Capability Name]	2. [Area for improvement]	[Corrective Action 4]					
		[Corrective Action 5]					
		[Corrective Action 6]					

<sup>2</sup> Capability Elements are Planning, Organization, Response

## Exercise Overview

Exercise Name	[Insert the formal name of exercise, which should match the name in the document header]
Exercise Date	[Month/Day, Year]
Scope	This exercise is a [exercise type], planned for [exercise duration] at [exercise location]. Exercise play is limited to [exercise parameters].
Mission Area(s)	[Prevention, Protection, Mitigation, Response, and/or Recovery]
Target Capabilities	Foundation for Health Care and Medical Readiness, Health Care and Medical Response Coordination, Continuity of Health Care Service Delivery, and Medical Surge. [List any other applicable target capabilities being exercised]
Objectives	<ol style="list-style-type: none"> <li>1. Evaluate the Concept of Operations for the Assessment Hospital's ability to safely and effectively receive a person under investigation (PUI) for [insert airborne/transmissible disease name] within an appropriate time frame and provide up to 96 hours of evaluation and care to PUI until the diagnosis is either confirmed or ruled out and until discharge or transfer is completed.</li> <li>2. Examine the Assessment Hospital's ability to coordinate transportation arrangements, and safely and effectively transport a patient with confirmed [insert airborne/transmissible disease name] to Regional Ebola and Other Special Pathogen Treatment Center within an appropriate time frame.</li> <li>3. Assess the notification and communication processes internally with rostered staff and externally between local, state, and federal public health, EMS, and other healthcare delivery system partners, Assessment Hospitals, State-Designated Ebola Treatment Centers, and the Regional Ebola and Other Special Pathogen Treatment Center, as well as media management.</li> <li>4. Examine EMS capabilities, and determine the most appropriate method for transportation (e.g., air versus ground)                             <ul style="list-style-type: none"> <li>• Discuss management of [stable or critical] patient or PUI transported by ground EMS personnel</li> <li>• Discuss the management of patient undergoing air transportation and coordination with ground EMS personnel for [stable or critical] patient or PUI</li> </ul> </li> <li>5. Assess just-in-time PPE don/doff training resources and PPE availability for EMS, and healthcare delivery system personnel, including those at the Assessment Facility.</li> <li>6. Assess planning for special considerations (e.g., surge capacity, diagnostic radiological imaging, laboratory services, pediatric patient, waste management and decedent management.)</li> <li>7. [List any additional exercise objectives]</li> </ol>

# NETEC Exercise Resource Suite

- Special consideration sections:
  - Surge management
  - Laboratory support services
  - Waste management
  - Care of a pediatric patient
  - Decedent management
  - Care of a labor/delivery patient
  - Diagnostic radiological studies
  - Surgical intervention

## Exercise 5: Planning for Special Considerations for an Assessment Hospital

### Scenario

Multiple patients arrive at the Assessment Hospital: A family of three, including 50-year old husband, 47-year-old wife and six-year-old daughter with recent travel history to [insert relevant country], experiencing severe acute respiratory symptoms including persistent cough, difficulty breathing and myalgia in addition to diarrhea and fever have self-presented at your ED. Approximately five hours after hospital admission, the 50-year-old husband expires.

*[This Master Scenario applies to all four modules below]*

### Module 1: Surge Capacity

#### Key Issues

- Surge Capacity
- Available resources

#### Questions

1. What processes do you have in place in the event of multiple patients or exposed family members? What are your facility plans for surge capacity?  
Considerations:
  - Facility surge capacity (e.g., number of available A&I/R)
  - Just-in-time training plan
  - Surge staffing plan to care for multiple patients
  - Plans or agreements in place for diverting patients to other Regional Ebola and Other Special Pathogen Treatment Centers or State-Designated Ebola Treatment Centers if patient and/or resource capacity is reached
  - Skill mix of patient care team (e.g., pediatrician, critical care specialist)
  - Dedicated staff that train together frequently to enhance team work and confidence to work with a [insert airborne transmissible disease name] patient

**INJECT:** It is currently flu season. News broke out of potential cases of [insert respiratory disease name] in their city. An influx of patients are now presenting to your ED worried they may have [insert respiratory disease name]. The challenge of differentiating symptoms of seasonal influenza and [insert respiratory disease name] has arisen.



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**Syra S. Madad, DHSc, MSc, MCP**  
**Director, System-wide Special Pathogens Program**  
**New York City Health + Hospitals**



# Frontline Facilities

**NETEC**  
National Ebola Training  
& Education Center

A collaboration between  
EMORY MEDICINE UNMC MEDICAL CENTER UNMC HEALTHCARE SERVICES  
And funded by ASPR BELLEVUE  
DEPARTMENT OF HEALTH & HUMAN SERVICES U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES

Frontline Facility [Insert airborne transmissible  
special pathogen name] Tabletop Exercise

**Situation Manual**  
[Template]

This Situation Manual (SitMan) is to serve as a template to support Frontline Facilities. This SitMan was assembled under the guidance of the NETEC Exercise Design Team and vetted through ASPR and CDC to provide exercise participants with the necessary tools for their respective roles in the exercise, but with the flexibility to adapt the exercise to the individualized needs of each center and varied composition of each local community.

Situation Manual (SitMan) 2016-2017 Frontline Facility TTX NETEC

**Situation Manual (SitMan)**

**NETEC**  
National Ebola Training  
& Education Center

**2016-2017 Frontline Facility Ebola  
Tabletop Exercise**

A collaboration between  
EMORY MEDICINE UNMC MEDICAL CENTER UNMC HEALTHCARE SERVICES  
And funded by ASPR BELLEVUE  
DEPARTMENT OF HEALTH & HUMAN SERVICES U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES

Exercise Date: XXX

Situation Manual (SitMan) i NETEC VERSION

# Frontline Facilities: Ebola Exercise Template Structure

1. Patient Self-Presents at Frontline Facility
  - 2 Modules: Identification & Isolation / Frontline Facility Activation
  - 1 Special Consideration Section: Basic Laboratory Services
2. Patient Transport
  - 3 Modules: Coordination & Planning  
Transportation / Ground Transport / Recovery Planning

# Frontline Facilities: Special Pathogen Exercise Template Structure

1. Patient Self-Presents at Frontline Facility
  - 2 Modules: Identification & Isolation / Frontline Facility Activation
  - 4 Special Consideration Sections: Basic Laboratory Services, Surge Capacity, Diagnostic Radiological Imaging, Waste Management
2. Patient Transport
  - 3 Modules: Coordination & Planning  
Transportation / Ground Transport / Recovery Planning

# How to Use the Exercise Template

## Using This Document

1. As the exercise planner, you are responsible for scheduling the exercise and inviting the appropriate individuals to the exercise. It is best to plan for approximately 30 minutes to 2 hours per module, plus 1+ hours for instructions and hotwash (Appendix A).
2. This template should be customized to meet each end users unique requirements. Insert appropriate selection into highlighted gray areas.
3. You will need to assign someone to facilitate and evaluate the exercise at your site and write the After Action Report and Improvement Plan (Appendix D).
4. To ensure the best possible learning opportunity for your team, it is strongly recommended that you already have a plan in place for the processes that are discussed in this document. The scenarios and injects that comprise this exercise are designed to stimulate thought and discussion about your current plans and how to improve them.
5. On the day of the exercise, your team should gather in a conference or training room to participate in the exercise using a single computer, combination computer/LCD projector and/or handouts.
6. Invite your entire Incident Management Team to this Tabletop exercise. If you do not have an Incident Management Team, some suggestions of people to invite would be:
  - Senior Administrative Leadership (e.g., CEO, COO, CMO, CNO or CFO)
  - Emergency Preparedness Coordinator
  - Physicians
  - Nurses
  - Nursing Assistants
  - Facilities Management staff
  - Environmental Services staff
  - Infection Prevention Leadership
  - Respiratory Protection Program/Industrial Hygiene Leadership
  - Any other staff members that participate in patient care
7. Consider inviting members of your local Public Health, Fire and Rescue, Law Enforcement, and/or Emergency Medical Services (EMS) teams.
8. Have all participants fill out a Sign-in Sheet.
9. It is helpful for each participant to have a handout that includes the scenario and questions for the exercise so they can follow along and reference the scenario as questions arise during the discussion. This document should be developed based on the portion of the exercise that is planned.
10. Have all participants fill out a Participant Feedback form and hand back to you. (Appendix E)
11. To ensure this Tabletop Exercise meets the requirements of Joint Commission, you will need to have additional community members (local Public Health, etc.) in the room for your discussion. (FOR JOINT COMMISSION ACCREDITED FACILITIES ONLY)
12. An After Action Report (AAR) template (Appendix D) is included in this packet. This is a template for you to fill out after the exercise is completed. It will allow you to easily organize your strengths, weaknesses and improvement planning efforts.

NETEC  
Version 01/2017

8  
FOR OFFICIAL USE ONLY

Homeland Security Exercise and Evaluation Program (HSEEP)

[Sponsor Organization]

- Exercise Overview
- General Information
  - Purpose / Scope
  - HPP Measures
  - Target Capabilities
  - Exercise Objectives
  - Participant Roles
  - Exercise Guidelines
  - Exercise Assumptions

# Exercise Appendices

## Appendix A: Exercise Schedule

Suggested Time	Activity
Varies	Facilitator/Evaluator Briefing and Registration
20 – 30 minutes	Welcome and Introductory Briefing <ul style="list-style-type: none"><li>• Participant Introductions (Players, Facilitator(s), Evaluators, Observers)</li><li>• Exercise Overview<ul style="list-style-type: none"><li>– Agenda</li><li>– Guidelines</li><li>– Assumptions and Artificialities</li><li>– Evaluation</li></ul></li></ul>
60 minutes	Exercise 1: Patient Self-Presents to Frontline Facility <ul style="list-style-type: none"><li>• Module 1</li><li>• Module 2</li></ul>
30 minutes	Special Considerations for Frontline Hospitals (if applicable) <ul style="list-style-type: none"><li>• Basic Laboratory Services</li><li>• Surge Capacity</li><li>• Diagnostic Radiological Imaging</li><li>• Waste Management</li></ul>
60 minutes	Exercise 2: Patient Transport <ul style="list-style-type: none"><li>• Module 1</li><li>• Module 2</li><li>• Module 3</li></ul>
30 minutes	Hot Wash/Closing Remarks/Participant Feedback Forms
Varies	Facilitator/Evaluator Debrief

23 [Sponsor Organization]  
FOR OFFICIAL USE ONLY  
Homeland Security Exercise and Evaluation Program (HSEEP)

- Exercise Schedule
- Relevant Plans
- After Action Report/Improvement Plan
- Participant Feedback Form
- Acronyms and Abbreviations

# Exercise 1: Patient Self-Presents to Frontline Facility

- **Module 1:** Identification and Isolation of a PUI for [insert airborne transmissible special pathogen name].
- **Module 2:** Frontline Facility Activation following Arrival of PUI for [insert airborne transmissible special pathogen name].
  - Special Consideration for Frontline Hospitals: Basic Laboratory Services
  - Special Consideration for Frontline Hospitals: Surge Capacity
  - Special Consideration for Frontline Hospitals: Diagnostic Radiological Imaging
  - Special Consideration for Frontline Hospitals: Waste Management

# Exercise 2: Patient Transport from a Frontline Facility to a Receiving Hospital

- **Module 1:** Coordination and planning transportation to an Assessment Hospital or Treatment Facility
- **Module 2:** Ground transport of patient from a Frontline Facility to an Assessment Hospital or Treatment Facility
- **Module 3:** Recovery Planning for Returning to Normal Operations

# Closing the Loop



Situation Manual  
(SitMan)

## Appendix D: After Action Report/Improvement Plan (AAR/IP)

### Exercise Overview

Exercise Name	2016-2017 Frontline Facility Tabletop Exercise
Exercise Dates	Month XX, XXXX
Scope	Frontline Facilities: The exercise will focus on how Frontline Facility's respond to a patient with suspected airborne transmitted special pathogens.
Mission Area(s)	
Target Capabilities	<ul style="list-style-type: none"> <li>Foundation for Health Care and Medical Readiness</li> <li>Health Care and Medical Response Coordination</li> <li>Continuity of Health Care Service Delivery</li> <li>Medical Surge</li> </ul>
Objectives	<ol style="list-style-type: none"> <li>Evaluate the Frontline Facility's ability to identify and provide isolation care for a person under investigation (PUI) for [insert airborne transmissible special pathogen name]</li> <li>Evaluate the Frontline Facility's ability to coordinate transportation arrangements, and safely and effectively transport a PUI to an Assessment Hospital or Treatment Facility within an appropriate timeframe.</li> <li>Assess the notification and communication processes between local, state, and federal public health, EMS, healthcare delivery system partners, Assessment Hospitals, State-Designated ETCs, and the Regional Ebola and Other Special Pathogen Treatment Center, as well as media management (if applicable).</li> <li>Examine EMS capabilities, and determine the most appropriate method for transportation (e.g., air versus ground.)</li> <li>Assess just-in-time PPE don / doff training resources and PPE availability for Frontline Facility</li> <li>Examine the Frontline Facility's ability to receive information from their coalition on the quantity and location of PPE supply.</li> <li>Assess planning for risk mitigation (e.g., basic laboratory processes for PUI, surge capacity, diagnostic radiological imaging, waste management).</li> <li>[List any additional exercise objectives]</li> </ol>
Threat or Hazard	Airborne transmitted special pathogen
Scenario	Highly Infectious Disease Management
Sponsor	Special pathogen health care system preparedness, response, and the development of a regional special pathogen treatment strategy were supported by ASPR through HPP.
Participating Organizations	
Point of Contact	

26

### Analysis of Target Capabilities

Aligning exercise objectives and target capabilities provides a consistent taxonomy for evaluation that transcends individual exercises to support preparedness reporting and trend analysis. Table 1 includes the exercise objectives, aligned target capabilities, and performance ratings for each target capability as observed during the exercise and determined by the evaluation team.

Objective	Target Capability	Performed without Challenges (P)	Performed with Some Challenges (S)	Performed with Major Challenges (M)	Unable to be Performed (U)
[Objective 1]	[Target capability]				
[Objective 2]	[Target capability]				
[Objective 3]	[Target capability]				
[Objective 4]	[Target capability]				

**Ratings Definitions:**

- Performed without Challenges (P): The targets and critical tasks associated with the core capability were completed in a manner that achieved the objective(s) and did not negatively impact the performance of other activities. Performance of this activity did not contribute to additional health and/or safety risks for the public or for emergency workers, and it was conducted in accordance with applicable plans, policies, procedures, regulations, and laws.
- Performed with Some Challenges (S): The targets and critical tasks associated with the core capability were completed in a manner that achieved the objective(s) and did not negatively impact the performance of other activities. Performance of this activity did not contribute to additional health and/or safety risks for the public or for emergency workers, and it was conducted in accordance with applicable plans, policies, procedures, regulations, and laws. However, opportunities to enhance effectiveness and/or efficiency were identified.
- Performed with Major Challenges (M): The targets and critical tasks associated with the core capability were completed in a manner that achieved the objective(s), but some or all of the following were observed: demonstrated performance had a negative impact on the performance of other activities; contributed to additional health and/or safety risks for the public or for emergency workers; and/or was not conducted in accordance with applicable plans, policies, procedures, regulations, and laws.
- Unable to be Performed (U): The targets and critical tasks associated with the core capability were not performed in a manner that achieved the objective(s).

**Table 1. Summary of Target Capability Performance**

The following sections provide an overview of the performance related to each exercise objective and associated target capability, highlighting strengths and areas for improvement.

#### [Objective 1]

The strengths and areas for improvement for each target capability aligned to this objective are described in this section.

#### [List Applicable Target Capabilities]

#### Strengths:

The [full or partial] capability level can be attributed to the following strengths:

Strength 1: [Observation statement]

Strength 2: [Observation statement]

28

[Sponsor Organization]

Homeland Security Exercise and Evaluation Program (HSEEP)





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INFORMATION GATEWAY

**Joseph R. Masci, MD**  
Director of Medicine  
Elmhurst Hospital Center



# NYC Health + Hospitals/Elmhurst



- Level 1 Trauma Center
- NYS Designated AIDS Center
- Stroke Center / C Port Center
- Affiliated with Icahn School of Medicine at Mount Sinai

- Operating Beds: 545
- Clinic Visits: 660,000
- Discharges: 22,638
- ED Visits: 73,000



**\*Most culturally diverse community in the world**

# Elmhurst Hospital - Real World Experience

## • Triage of potential cases

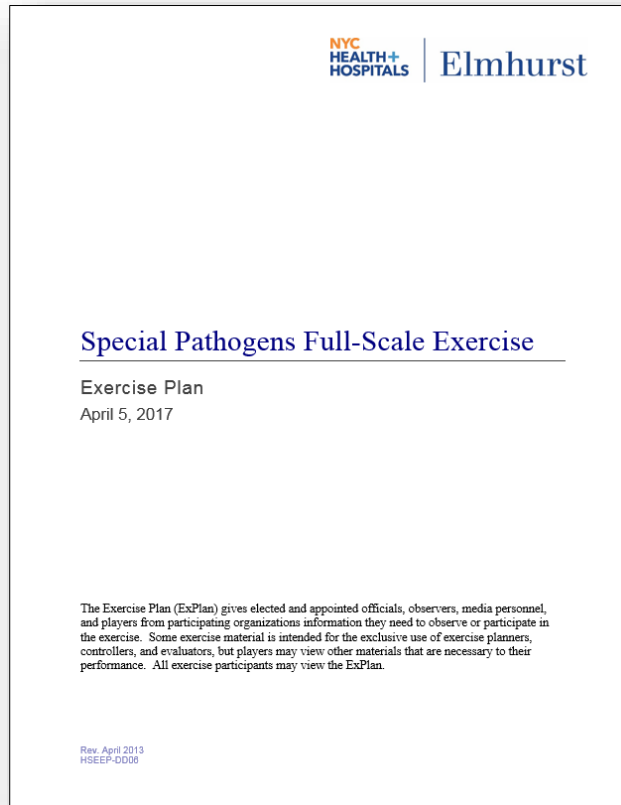
- ↓
  - Patient/family questioned by triage nurse
- ↓
  - If appropriate travel history to Ebola endemic region within 21 days patient and nurse masked
- ↓
  - Patient brought to high-level isolation room with telephone communication available
- ↓
  - All entering staff gowned with assistance in appropriate PPE under observation in anteroom
- ↓
  - Patient interviewed regarding symptoms, potential exposure

Elmhurst HOSPITAL CENTER		BIO ISOLATION TRANSFER CARD (BIT)
FDNY TRANSPORT TO HOSPITAL		
<b>Hospital Requirements</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Assemble Receiving Team</li> <li><input type="checkbox"/> Lesson Report to Command Post</li> <li><input type="checkbox"/> Don PPE to Receive Patient from FDNY</li> <li><input type="checkbox"/> Standby at Transfer Point</li> <li><input type="checkbox"/> Prepare 55 Gallon Bio-Waste Drums</li> <li><input type="checkbox"/> Provide Patient Info to HaTac following Triage</li> </ul>	<b>FDNY Requirements</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Briefing with Liaison prior to Patient Arrival</li> <li><input type="checkbox"/> Confirm Transfer Point</li> <li><input type="checkbox"/> Decontamination Corridor Prepared</li> <li><input type="checkbox"/> Supervise Patient Transfer to Hospital</li> <li><input type="checkbox"/> Supervise HaTac Drilling and Decon</li> <li><input type="checkbox"/> Supervise Secus of Ambulance</li> </ul>	
<ul style="list-style-type: none"> <li>• Ensure Decontamination Corridor Prepared</li> <li>• Provide Bi-Directional Responsibility</li> <li>• Secure patient transfer area utilizing Hospital Security</li> <li>• Identified Decontamination area clearly</li> </ul>		
<b>Hospital Contacts:</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Hospital ED: (718)224-0000 Red Phone</li> <li><input type="checkbox"/> Hospital EOC: (718)224-1423</li> <li><input type="checkbox"/> On Duty Hospital Police Commander: (718)224-1945</li> </ul>	<b>FDNY Contacts:</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> FDCC: (718)999-7900</li> <li><input type="checkbox"/> EMS: Telemetry: (718)999-9902</li> <li><input type="checkbox"/> Hospital Battalion Call: (347) 539-0560</li> </ul>	
Receiving Hospital Transfer To Treatment Hospital		
<b>Hospital Requirements</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Transfer Team Consists PPE</li> <li><input type="checkbox"/> Control of Transfer Area</li> <li><input type="checkbox"/> Lesson reports to the Command Post</li> <li><input type="checkbox"/> Identify Transfer Location</li> <li><input type="checkbox"/> Await HaTac Personnel to receive Patient</li> <li><input type="checkbox"/> HaTac Personnel Accepts Patient</li> <li><input type="checkbox"/> HaTac Transport Patient</li> </ul>	<b>FDNY Requirements</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> HaTac responds to Receiving Facility</li> <li><input type="checkbox"/> HaTac Officer Meets Liaison</li> <li><input type="checkbox"/> Transfer Point Confirmed with Liaison</li> <li><input type="checkbox"/> HaTac Personnel Don PPE</li> <li><input type="checkbox"/> HaTac Officer supervises transfer</li> <li><input type="checkbox"/> Ensure response of Clean Ambulance</li> <li><input type="checkbox"/> Both Ambulances driven by clean personnel ONLY</li> </ul>	

Discussion-based  
EVD Tabletop  
Exercise  
02/10/2015



# Elmhurst Hospital - Real World Experience



- Operations-based Special Pathogen Full-Scale Exercise via NETEC Template on 04/5/2017

# Exercise Pearls + Pitfalls for a Frontline Hospital

- Minimal lapses in appropriate handling of patient and PPE procedures can result in infection of staff
- Drills should be unannounced
- Training in full PPE (Ebola-level) should be incorporated into annual training with audio/video review every 3 months for key staff
- Identify appropriate isolation room, anteroom preferred with full PPE available



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HEALTHCARE EMERGENCY PREPAREDNESS  
INFORMATION GATEWAY

**Joseph Williams, MD**  
**Interim Chief Medical Officer**  
**Morrisania Diagnostic & Treatment Center**



# NYC Health + Hospitals/Morrisania



NYC  
HEALTH+  
HOSPITALS

Gotham Health  
Morrisania

- Member of Gotham Health Community Health Center
- Primary care with limited specialty service
  - Non-emergency health care
- Part of the largest public health care system in the nation
- Clinic Visits: 80,000

**\*Ready or not, patients will present (hospital or outpatient facility)**



# Morrisania DTC- Real World Experience

- Triage of potential cases



- Front desk staff ask 2 simple questions

- Travel/fever



- Nurse picks up patient and transport to isolation – clinical query from isolation



- Providers on scene, nurse informs if high or low suspicion patient



- Provider – high risk patient
  - Assessment – BP/pulse/pertinent query
  - Contact DOH and consults – speaker phone



Discussion-based EVD  
Tabletop Exercise  
04/19/2016

Ebola-Focused System-wide  
Virtual Tabletop Exercise

Situation Manual  
04/2016



# Morrisania DTC- Real World Experience

**NYC Health + Hospitals / Morrisania**

**Highly Infectious Disease/Special Pathogen Incident Response Guide**

<b>Originator:</b> Central Office Emergency Management	<b>Functions:</b> Infection Prevention (IC); Environmental Care (EC); Emergency Management (EM); Human Resources (HR); Leadership (LD)
<b>Subject:</b> SPECIAL PATHOGEN RESPONSE GUIDELINES	
<b>Date Issued:</b> 01/26/2017	
<b>Date Revised:</b>	

**I. PURPOSE:**  
To provide guidelines for the recognition and management of Special Pathogen (highly communicable disease) patients at health care workers

**II. SCOPE:**  
All patient care areas to the Adult/Pediatric area.

**III. REQUIREMENT:**  
NYC Health + Hospitals

**IV. RESPONSIBILITY:**

- Clerk - greeting
- Chief/Nursing Coordinator
- Associate Director and requiring by
- Associate Medical recording and
- Runner - assist
- Attending Physician
- Nurse - respond
- Laboratories - if
- Environmental - if
- Infection Prevention tracking of any
- Hospital Police protect patient

## EMS Transport from Ambulatory Site Checklist

Ambulatory Site Requirements	
Assemble Transfer Team	
Identify Liaison (designated point person)	
Identify Transfer Location and Share with EMS	
Identify / Clear Location on 1 <sup>st</sup> Floor for FDNY EMS Hot ac Crew to Don Personal Protective Equipment (PPE)	
Transfer Team Don PPE (if necessary)	
Secure & Control of Transfer Area /	
Await EMS Personnel to receive Patient	
Provide Patient Info to EMS Upon Arrival	
Secure & Control Elevator for FDNY Patient to Ambulance	
After Patient Transfer, Identify Deco	

EMS Requirements (FDNY)	
Hot ac responds to Receiving Facility	
Hot ac Officer meets Liaison & obtains Information	
Transfer Point Confirmed with Liaison	
Hot ac Personnel Don PPE	
Hot ac Officer supervises Transfer	
Ensure Response of Clean Ambulance	
Both Ambulances Driven by Clean Personnel	

FDNY Contacts	
FOOC: (718) 999-7011	
EMS Telemetry: (718) 899-5062	
Hazmat Battalion Cell: (347) 539-0560	
FDNY EMS Hot ac Officer: (347) 203-7400	

## Special Pathogens Full-Scale Exercise

Exercise Plan  
April 5, 2017

The Exercise Plan (ExPlan) gives elected and appointed officials, observers, media personnel, and players from participating organizations information they need to observe or participate in the exercise. Some exercise material is intended for the exclusive use of exercise planners, controllers, and evaluators, but players may view other materials that are necessary to their performance. All exercise participants may view the ExPlan.

Rev April 2013  
HSEEP-0203



- Operations-based Special Pathogen Full-Scale Exercise via NETEC Template on 04/5/2017

# Exercise Pearls + Pitfalls for an Outpatient Setting

- All 'Covered Lives' team members are trained in the H+H 'Donning and Doffing Protocol' twice a year – video
- Comprehensive drills involving the entire team
  - Clerical/nursing/physician/admin
  - Morrisania DTC Use and Experience with NETEC Frontline Facility Exercise Template
- Defined isolation room with exercises in full PPE occurring in that area.

# NETEC Exercise Resources



- NETEC offers exercise support via:
  - Remote technical assistance
  - On-site technical assistance

# Walk-through of NETEC Frontline Facility Exercise Template



ABOUT TECHNICAL RESOURCES EDUCATION AND TRAINING NEWS Q

Resources / Repository

Request a Site Visit

Exercises

Have a question?

The NETEC Exercise Design Templates directly map to and support the [ASPR Ebola Preparedness 2015 Hospital Preparedness Program Measurement Implementation Guidance](#).

These templates should be customized to meet each end users requirements. The templates contain HSEEP-compliant exercise content and material related to assessing, treating and managing Ebola virus disease patients for Assessment Hospitals, State-Designated Ebola Treatment Centers, Regional Ebola and Special Pathogen Treatment Centers & Regional Partners, and Health Care Coalitions.

## General materials

Highly pathogenic infectious disease exercises webinar – [PDF](#) | [recording](#)



### Frontline Facilities

- Exercise Materials for Ebola
  - [Ebola Tabletop Exercise Template](#)
- Exercise Materials for Special Pathogens
  - [Frontline Facility Special Pathogen \[Airborne\] Tabletop Exercise Template](#)

### Assessment Hospitals

- Exercise Materials for Ebola
  - [Ebola Tabletop Exercise Template](#)
- Exercise Materials for Special Pathogens
  - [Assessment Hospital Special Pathogen \[Airborne\] Tabletop Exercise Template](#)

### State-Designated Ebola Treatment Centers

# Question and Answer Logistics

- To ask a question
  - Type the question into the chat feature on your GoToWebinar console.
  - We will collect all questions and ask them on your behalf.



# Questions and Answers



# For Additional Support

- Contact National Ebola Training and Education Center (netec.org)



- Contact your NHPP Field Project Officers
- Contact ASPR TRACIE



[ASPR TRACIE Website](#)



1-844-5-TRACIE



[Email ASPR TRACIE](#)