

Crisis Standards of Care & Surge Strategy TTX

Exercise Evaluation Plan

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.

EXERCISE OVERVIEW

Exercise Name	Crisis Standards of Care & Surge Capacity TTX
Exercise Dates	[Month Date, Year]
Scope	This is a drill, planned for [participating agencies and facilities]. Exercise play is limited to no longer than 3 hours. Drill should begin shortly after [time].
Mission Area(s)	Mitigation & Response
Core Capabilities	Planning, Operational Coordination, Situational Assessment, Critical Transportation, and Health & Social Services.
Objectives	<ul style="list-style-type: none"> • Address how [participating facilities] will manage a 20% surge in census. • Identify key resources and management strategies for surge capacity. • Estimate [participating facility's] potential risk for surge and the impact it will have on continuity of operations, patient care, and overall hospital operations.
Threat or Hazard	Influenza, severe weather event, surge, and supply shortages
Scenario	<p>It is Monday, January 14, 2019 and [participating facilities] have seen a dramatic increase in influenza-like illnesses. For the past three weeks, [participating facilities] have had a census between 98% and 110%. Today, [Give census of participating facilities as ~120% of usual peak.] Across all facilities, there has been a 15% staff call-out due to illness and lack of reliable transport due to severe winter weather. The area has seen 4 inches of snow over the past 48 hours and is inundated with snow and black ice. Many supply shipments have been delayed due to poor road conditions, and EMS has had difficulty with patient transport. Additionally, all hospitals in the region have seen a shortage in saline, amino acids, and sterile water.</p>
Sponsor	<p>[List sponsor]</p> <p>[List facilitators]</p>

**Participating
Organizations**

[List participating organizations]

**Point of
Contact**

[List points of contact, along with contact information]

GENERAL INFORMATION

Exercise Objectives and Core Capabilities

The following exercise objectives in Table 1 describe the expected outcomes for the exercise. The objectives are linked to core capabilities, which are distinct critical elements necessary to achieve the specific mission area(s). The objectives and aligned core capabilities are guided by elected and appointed officials and selected by the Exercise Planning Team.

Exercise Objective	Core Capability
Assess how [participating facilities] will manage a 20% surge in census.	Planning
Identify key resources and management strategies for surge capacity.	Planning
Estimate [participating facility's] potential risk for surge and the impact it will have on continuity of operations, patient care, and overall hospital operations.	Long-Term Vulnerability Reduction

Table 1. Exercise Objectives and Associated Core Capabilities

APPENDIX A: EXERCISE SCHEDULE

Time	Personnel	Activity	Location
30 min.	Mtg. Attendees	Arriving to Conference	
15 min.	Sponsor	Introductions	
15 min.	Facilitator	History/Background of Crisis Care Plan (See powerpoint presentation.)	
90-120 min.	Facilitators	Table Top Exercise	
20 min.	Sponsor	Exercise Conclusion – Identify candidate surge capacity strategies; Outline Next Steps	
10 min	Sponsor	Hot Wash	

APPENDIX B: EXERCISE PARTICIPANTS

Participating Organizations

APPENDIX C: EXERCISE QUESTIONS

- 1) Influenza is spread by droplet transmission. The more rapidly the number of cases rises, the more likely local healthcare will be overwhelmed. What strategies would you use to prevent spread within your hospital(s)? Other healthcare settings? What are the advantages and disadvantages to the strategies listed below? Are there others you would use instead?
 - a) Reinforce infection control practices, including staff withdrawal from care or masking when sick.
 - b) Screen all scheduled outpatients and elective admissions 24 hours in advance. Cancel if influenza-like symptoms are present.
 - c) Screen for influenza-like illness in visitors and restrict entry for those ill, but not seeking treatment.
 - d) Supply masks for patients with respiratory symptoms.
 - e) Require staff who are not vaccinated against influenza to wear masks at all times.
 - f) Relocate essential outpatient services offsite.

- 2) Despite these measures, the number of patients at your facilities continues to rise. Some are ready for discharge, but can't get transportation home or to a long-term care facility. Some, while sick, do not have life-threatening conditions. Others are more sick, but do not require intensive management and could have their care managed in an alternate care setting outside of the hospital. Many, though, are still very ill and require hospitalization. To take the pressure off of your emergency departments and hospitals, you consider establishing an alternate care site in an area of your facility not routinely used for patient care.
 - a) Is this a good idea? If so, how would you staff it?
 - b) Is there a Memorandum of Understanding (MOU) in place that you could utilize?
 - c) How would you provide care for the increased numbers of influenza patients sick enough to require hospitalization?
 - i) Set up additional cots and beds?
 - ii) Cancel non-essential services or re-assign staff?
 - iii) Evaluate current inpatients and expedite transfers to a lower acuity alternate care area?
 - iv) Decrease nurse-patient ratios, with experienced nurses overseeing other staff to provide direct bedside care?
 - d) If you cancel non-essential services, which ones would you cancel? What would this entail?
 - e) What options do you have to extend staffing? What issues might arise and how would you address them?

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- 3) The number of patients severely ill with influenza continues to rise and many of them require hospitalization. At the same time, other patients with stroke, trauma, acute cardiac events, and other conditions requiring hospitalization, and sometimes mechanical ventilation, continue to present for care.
- a) What strategies might you use to prevent the spread of influenza to patients presenting with other conditions?
 - b) Are there non-ICU facilities within the hospital or outside it that could be used to provide care for patients requiring mechanical ventilation?
 - c) What strategies would you use to increase the availability of ventilators, if needed? Where and how would you house additional patients that require intensive care, assuming you can get them there?
 - d) Are these strategies incorporated into your hospital's Emergency Operations Plans. If so, in what level of detail? Are there specific, key elements of these strategies that you should exercise?