Special Pathogen Call Down Drill

Exercise Plan

[DATE]

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** | Special Pathogen Call Down Drill |
| --- | --- |
| **Exercise Dates** | [Exercise Date] |
| **Scope** | This exercise is a drill, planned for [Exercise Duration] at [Location]. Exercise play is limited to clinical and non-clinical responders involved in a special pathogen activation. |
| **Mission Area(s)** | Response |
| **Core Capabilities** | Operational Communications - Ensure the capacity for timely communications in support of security, situational awareness, and operations by any and all means available, among and between affected communities in the impact area and all response forces.Health Care and Medical Response Coordination - Health care organizations, the HCC, their jurisdiction(s), and the state’s/jurisdiction’s Emergency Support Function-8 (ESF-8) lead agency plan and collaborate to share and analyze information, manage and share resources, and coordinate strategies to deliver medical care to all populations during emergencies and planned events. |
| **Objectives** | * + - 1. Notify leadership to a Special Pathogen PUI via [method]
			2. Activate Staff Notification process and call-down
			3. Identify correct staff (Tier 1 and Tier 2) to respond to Biocontainment/ICC
			4. Staff Respond to Biocontainment within [expected timeframe] and the ICC within [expected timeframe].
 |
| **Threat or Hazard** | Emerging Infectious Diseases – Special Pathogen |
| **Scenario** | [FACILITY NAME] is notified of an incoming Person Under Investigation (PUI) with a suspected Special Pathogen. [Facility] will need to notify and activate its staffing, with Tier 1 and Tier 2 staff responding in an appropriate time frame. |
| **Sponsor** | [Insert Sponsors] |
| **Participating Organizations** | [Insert Participating Organizations] |
| **Point of Contact** | [Insert Point(s) of Contact] |

# 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 |
| --- | --- |
| Notify leadership to a Special Pathogen PUI via [method] | Operational Communications |
| Activate Staff Notification process and call-down | Operational Communication |
| Identify correct staff to respond to Biocontainment/ICC | Health Care and Medical Response Coordination |
| Staff Respond to Biocontainment within [\_\_\_] minutes/ICC within [\_\_\_] minutes | Health Care and Medical Response Coordination |

Table 1. Exercise Objectives and Associated Core Capabilities

## Participant Roles and Responsibilities

The term *participant* encompasses many groups of people, not just those playing in the exercise. Groups of participants involved in the exercise, and their respective roles and responsibilities, are as follows:

* **Players.** Players are personnel who have an active role in discussing or performing their regular roles and responsibilities during the exercise. Players discuss or initiate actions in response to the simulated emergency.
* **Controllers.** Controllers plan and manage exercise play, set up and operate the exercise site, and act in the roles of organizations or individuals that are not playing in the exercise. Controllers direct the pace of the exercise, provide key data to players, and may prompt or initiate certain player actions to ensure exercise continuity. In addition, they issue exercise material to players as required, monitor the exercise timeline, and supervise the safety of all exercise participants.
* **Evaluators.** Evaluators evaluate and provide feedback on a designated functional area of the exercise. Evaluators observe and document performance against established capability targets and critical tasks, in accordance with the Exercise Evaluation Guides (EEGs).

## Exercise Assumptions and Artificialities

In any exercise, assumptions and artificialities may be necessary to complete play in the time allotted and/or account for logistical limitations. Exercise participants should accept that assumptions and artificialities are inherent in any exercise, and should not allow these considerations to negatively impact their participation.

**This is a no-notice exercise and specific exercise information should not be communicated to the participants. Department heads will receive communication from the exercise planning team to notify them of interruption in normal work for approximately 15 minutes.**

### Assumptions

Assumptions constitute the implied factual foundation for the exercise and, as such, are assumed to be present before the exercise starts. The following assumptions apply to the exercise:

* The exercise is conducted in a no-fault learning environment wherein capabilities, plans, systems, and processes will be evaluated
* The exercise scenario is plausible, and events occur as they are presented.
* Exercise play will not interfere with patient care.

### Artificialities

During this exercise, the following artificialities apply:

* Exercise communication and coordination is limited to participating exercise individuals and departments.
* The Incident Command Center will not be actually activated during exercise play.

# Exercise Logistics

## Safety

Exercise participant safety takes priority over exercise events. The following general requirements apply to the exercise:

* A Safety Controller is responsible for participant safety; any safety concerns must be immediately reported to the Safety Controller. The Safety Controller and Exercise Director will determine if a real-world emergency warrants a pause in exercise play and when exercise play can be resumed.
* For an emergency that requires assistance, use the phrase **“real-world emergency.”** The following procedures should be used in case of a real emergency during the exercise:
* Anyone who observes a participant who is seriously ill or injured will immediately notify emergency services and the closest controller, and, within reason and training, render aid.
* The controller aware of a real emergency will initiate the **“real-world emergency”** broadcast and provide the Safety Controller, Senior Controller, and Exercise Director with the location of the emergency and resources needed, if any.

# Post-exercise and Evaluation Activities

## Debriefings

Post-exercise debriefings aim to collect sufficient relevant data to support effective evaluation and improvement planning.

### Hot Wash

At the conclusion of exercise play, controllers facilitate a Hot Wash to allow players to discuss strengths and areas for improvement, and evaluators to seek clarification regarding player actions and decision-making processes. All participants may attend; however, observers are not encouraged to attend the meeting. The Hot Wash should not exceed 30 minutes.

## Evaluation

### Exercise Evaluation Guides

EEGs assist evaluators in collecting relevant exercise observations. EEGs document exercise objectives and aligned core capabilities, capability targets, and critical tasks. Each EEG provides evaluators with information on what they should expect to see demonstrated in their functional area. The EEGs, coupled with Participant Feedback Forms and Hot Wash notes, are used to evaluate the exercise and compile the After-Action Report (AAR).

### After-Action Report

The AAR summarizes key information related to evaluation. The AAR primarily focuses on the analysis of core capabilities, including capability performance, strengths, and areas for improvement. AARs also include basic exercise information, including the exercise name, type of exercise, dates, location, participating organizations, mission area(s), specific threat or hazard, a brief scenario description, and the name of the exercise sponsor and POC.

## Improvement Planning

Improvement planning is the process by which the observations recorded in the AAR are resolved through development of concrete corrective actions, which are prioritized and tracked as a part of a continuous corrective action program.

### After-Action Meeting

The After-Action Meeting (AAM) is a meeting held among decision- and policy-makers from the exercising organizations, as well as the Lead Evaluator and members of the Exercise Planning Team, to debrief the exercise and to review and refine the draft AAR and Improvement Plan (IP). The AAM should be an interactive session, providing attendees the opportunity to discuss and validate the observations and corrective actions in the draft AAR/IP.

### Improvement Plan

The IP identifies specific corrective actions, assigns them to responsible parties, and establishes target dates for their completion. It is created by elected and appointed officials from the organizations participating in the exercise, and discussed and validated during the AAM.

# Participant Information and Guidance

## Exercise Rules

The following general rules govern exercise play:

* This is a no-notice exercise, and information about the exercise specifics should not be provided to participants ahead of the activation.
* Real-world emergency actions take priority over exercise actions.
* Exercise players will comply with real-world emergency procedures, unless otherwise directed by the control staff.
* All communications (including written, radio, telephone, and e-mail) during the exercise will begin and end with the statement **“This is an exercise.”**
* Exercise players who place telephone calls or initiate radio communication with the SimCell must identify the organization or individual with whom they wish to speak.

## Players Instructions

Players should follow certain guidelines before, during, and after the exercise to ensure a safe and effective exercise.

### Before the Exercise

* Review appropriate organizational plans, procedures, and exercise support documents.
* Be at the appropriate site at least 30 minutes before the exercise starts. Wear the appropriate uniform and/or identification item(s).
* Sign in when you arrive.
* If you gain knowledge of the scenario before the exercise, notify a controller so that appropriate actions can be taken to ensure a valid evaluation.

### During the Exercise

* Respond to exercise events and information as if the emergency were real, unless otherwise directed by an exercise controller.
* Controllers will give you only information they are specifically directed to disseminate. You are expected to obtain other necessary information through existing emergency information channels.
* Do not engage in personal conversations with controllers, evaluators, observers, or media personnel. If you are asked an exercise-related question, give a short, concise answer. If you are busy and cannot immediately respond, indicate that, but report back with an answer as soon as possible.
* If you do not understand the scope of the exercise, or if you are uncertain about an organization’s participation in an exercise, ask a controller.
* Parts of the scenario may seem implausible. Recognize that the exercise has objectives to satisfy and may require incorporation of unrealistic aspects. Every effort has been made by the exercise’s trusted agents to balance realism with safety and to create an effective learning and evaluation environment.
* All exercise communications will begin and end with the statement “This is an exercise.” This precaution is taken so that anyone who overhears the conversation will not mistake exercise play for a real-world emergency.
* When you communicate with the SimCell, identify the organization or individual with whom you wish to speak.
* Speak when you take an action. This procedure will ensure that evaluators are aware of critical actions as they occur.
* Maintain a log of your activities. Many times, this log may include documentation of activities that were missed by a controller or evaluator.

### After the Exercise

* Participate in the Hot Wash at your venue with controllers and evaluators.
* Complete the Participant Feedback Form. This form allows you to comment candidly on emergency response activities and exercise effectiveness. Provide the completed form to a controller or evaluator.
* Provide any notes or materials generated from the exercise to your controller or evaluator for review and inclusion in the AAR.
* Participants are encouraged to complete a survey on their attitudes and perceptions of readiness.

## Simulation Guidelines

Because the exercise is of limited duration and scope, certain details will be simulated. The physical description of what would fully occur at the incident sites and surrounding areas will be relayed to players by simulators or controllers.

Acronyms

| Acronym | Meaning |
| --- | --- |
| AAR/IP | After Action Report/Improvement Plan  |
| ADN | Assistant Director of Nursing |
| AOD | Administrator on Duty |
| ASPR | Assistant Secretary for Preparedness and Response (HHS) |
| BCU | Biocontainment Unit |
| CDC | Center for Disease Control |
| CEO | Chief Executive Officer |
| COO | Chief Operating Officer |
| DOT | Department of Transportation |
| ED | Emergency Department |
| EMS | Emergency Medical Services |
| EOC | Emergency Operations Center |
| EOP | Emergency Operations Plan |
| EVD | Ebola Virus Disease |
| EVS | Environmental Services |
| ICC | Incident Command Center |
| IRG | Incident Response Guide |
| HHS | Health & Human Services (Federal Department) |
| HICS | Hospital Incident Command System.  |
| HIMT | Hospital Incident Management Team |
| MCI | Mass Casualty Incident |
| MD | Medical Doctor |
| PUI | Person Under Investigation |
| RESPTC | Regional Ebola and Special Pathogen Treatment Center |
| RN | Registered Nurse |
| SPP | Special Pathogen Program |
| SPU | Special Pathogen Unit |
| VHF | Viral Hemorrhagic Fever |