

STATEWIDE MEDICAL AND HEALTH EXERCISE

HOSPITAL OBJECTIVES - Pandemic Influenza

*How To Use This Document: The purpose of this document is to provide sample objectives and core capabilities[[1]](#footnote-1) for exercise planners to select from in designing their Statewide Medical and Health Exercise (SWMHE). These core capabilities and their supporting objectives were identified based on previous exercises, incidents, and your feedback. To use this document, insert your agency/organization’s name in the bracketed text in the header that reads “INSERT NAME OF AGENCY/ORGANIZATION HERE”. Review the suggested core capabilities and objectives and* ***consider them as options to create an Exercise Plan that is tailored to the unique characteristics of your organization*** *and community. Select and modify as needed core capabilities and exercise objectives for your organization based on prior incidents, exercises, and requirements. According to the Federal Emergency Management Agency (FEMA),* ***ten or fewer objectives are recommended for a functional exercise****. Additional agency/discipline specific objectives have also been developed to encourage participation by partner agencies and aid with the design of a multi-agency/discipline exercise. To access these documents, please visit www.californiamedicalhealthexercise.com.*

CAPABILITY: OPERATIONAL COMMUNICATIONS

| **Objective 1:** | **Exercise communications PROCESS internally and externally in accordance with local policies and procedures within the exercise timeframe** |
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| **Objective 2:** | **Test REDUNDANT communications modalities within and across response partners in accordance with local policies and procedures[[2]](#footnote-2)** |
| **Activity** | Provide hospital command center communications support |
| **Task** | **Description** |
| ComC 4.2.1 | Communicate internal incident response information |
| ComC 4.2 | Implement response communications interoperability plans and protocols |
| Res.B1c 5.2.3 | Coordinate with public health, non-government agencies and/or private sector to collect/share data on incident situation |
| **Objective Comments** | |
| This section addresses the communication process both internally and externally, and the use of redundant communication modalities. These communication processes may include evaluating policies and procedures in communications utilizing alerting and notification systems such as ReddiNet, WebEOC, LiveProcess, EMResources, or other communication systems, email, phone, ham radio, etc. A continuous flow of critical information is maintained as needed among multi-jurisdictional and multi-disciplinary emergency responders, command posts, agencies, and the governmental officials for the duration of the emergency response operation in compliance with the National Incident Management System (NIMS) and the Standardized Emergency Management System (SEMS). | |

CAPABILITY: OPERATIONAL COORDINATION AND ON-SITE INCIDENT MANAGEMENT

| **Objective 3:** | **Activate the Incident Command System (ICS)[[3]](#footnote-3)** |
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| **Objective 4:** | **Develop an Incident Action Plan (IAP) and conduct associated meetings** |
| **Objective 5:** | **Test the ability to respond and manage the incident based on the specific incident, threat, and agent** |
| **Activity** | Activate ICS |
| **Task** | **Description** |
| Res.B1a 4.2 | Initiate and implement ICS |
| Res.B1a 5.1.2 | Establish the command structure to manage the incident and meet objectives |
| Res.B1c 5.2.4 | Make appropriate notifications |
| **Activity** | Develop an IAP |
| **Task** | **Description** |
| ResB1a 6.2 | Develop an IAP that identifies objectives, priorities, and the operational period |
| Res.B1a 6.2.1.1 | Obtain Incident Commander approval of IAP |
| Res.B1a 7.1.1 | Disseminate the IAP, to include the sharing of IAP information in incident briefings and dissemination of the IAP with other programs |
| Res.B1a 7.5.1 | Evaluate and revise processes in response to incident developments |
| ComC 4.2.3 | Report and document the incident by completing and submitting required forms, situation reports, documentation, and follow-up notations |
| **Objective Comments** | |
| This section looks at incident management and information sharing from the on-site location to the command centers across the state at the various levels. | |

CAPABILITY: PUBLIC HEALTH AND MEDICAL SERVICES

| **Objective 6:** | **Activate and implement surge plans in response to a surge event[[4]](#footnote-4)** |
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| **Objective 7:** | **Test the ability to request, receive, and distribute medical countermeasures and materiel through established plans, procedures, and protocols** |
| **Objective 8:** | **Exercise the incorporation of medical volunteers into hospital operations, including the provision of Just-in-Time training and the supervision of the credentialing process** |
| **Objective 9:** | **Test the ability to gather and share information on potential exposure and disease with local public health** |
| **Objective 10:** | **Test the ability to implement necessary control measures to stop further cases of illness or disease in accordance with established policies** |
| **Activity** | Direct and coordinate medical and health surge operations |
| **Task** | **Description** |
| Res.B1d 3.2.2 | Identify existing internal, facility-specific resources available to support response and recovery operations |
| Pro.A2a 1.1.4 | Implement medical surge plans |
| ResC1b 4.5.1 | Monitor bed census and activate management procedures |
| Res.C1b 4.6 | Activate plans, procedures, and protocols to ensure surge capabilities for treatment of people with disabilities and others with access and functional needs |
| **Activity** | Support and coordinate response |
| **Task** | **Description** |
| Res.B1a 5.2 | Implement processes to order, track, assign and release incident resources ordered by staff |
| Res.B1a 4.2.4 | Identify and request additional resources as necessary for operations and on-site incident management |
| Res.B1d 3.1.1 | Establish communication between the Hospital Command Center (HCC) and other key response areas of the hospital[[5]](#footnote-5) |
| Res.B1d 3.2.2 | Identify existing internal resources available to support response and recovery operations |
| Res.B1d 4.3 | Implement resource-tracking system[[6]](#footnote-6) |
| **Activity** | Surveillance and detection |
| **Task** | **Description** |
| Pro.B1a 4.2.1 | Detect illness through pattern recognition |
| **Activity** | Direct isolation and quarantine tactical operations |
| **Task** | **Description** |
| Res.B3b 3.1.2 | Identify applicable isolation and quarantine laws, policies, implementation procedures |

|  | **Other Suggested Tasks:** |
| --- | --- |
| See Res. B1d 3.1.2 and Res C1b. 3.4.1 | Assess near and long-term capacity to provide necessary medical services and implement plans and practices, to include resource requests and mutual aid agreements, to obtain necessary supplies and equipment |
|  | Activate contingency plans in anticipation of possible staff absenteeism and a decreased workforce |
| **Objective Comments** | |
| This section includes evaluating the organization’s medical and health surge plans to include the accommodation of people with disabilities and others with access and functional needs. These objectives target resource requesting and tracking, and use of the local disaster medical volunteer system. These objectives also test the ability to conduct surveillance and epidemiological investigation for potential exposure or disease. | |

CAPABILITY: ON-SCENE SECURITY AND PROTECTION

| **Objective 11:** | **Test the ability to coordinate hospital security in response to a surge event [[7]](#footnote-7)** |
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| **Activity** | Activate public safety and security response |
| **Task** | **Description** |
| Res.B3d 4.1.3 | Establish or integrate public safety and security into the ICS structure |
| Res. B3d 7.1 | Test the ability to manage a surge of patients and visitors who display disgruntled or aggressive behavior |
| **Objective Comments** | |
| This objective tests the ability of the hospital to ensure a safe and secure environment which may include private security resources and coordination with law enforcement for people and communities located within the hospital and also for all hospital staff engaged in lifesaving and life-sustaining operations. | |

CAPABILITY: EMERGENCY PUBLIC INFORMATION AND WARNING

| **Objective 12:** | **Test hospital risk communications in response to a surge event[[8]](#footnote-8)** |
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| **Activity** | Activate emergency public information, alert/warning, and notification plans |
| **Task** | **Description** |
| Res.Blf 4.2.6 | Activate and deploy public information/affairs personnel |
| **Activity** | Issue public information, alerts/warnings, and notifications |
| **Task** | **Description** |
| Res.Blf 5.1 | Disseminate crisis and emergency risk communication (CERC) information to the public and stakeholders, in support of the Joint Information Center (JIC) and local public health |
| Res.Blf 5.2 | Provide emergency public information to populations with access and functional needs |
| **Objective Comments** | |
| This objective targets the policies and procedures in place to handle an increased demand for public information from other agencies, the media, and the public, including information-sharing, alerts, warnings, notifications, and risk communication messaging. | |

CAPABILITY: FATALITY MANAGEMENT

| **Objective 13:** | **Test the ability to activate and implement mass fatality plans and procedures** |
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| **Activity** | Direct fatality management tactical operations |
| **Task** | **Description** |
| Res.C4a 3.1 | Test the ability to manage a surge of decedents |
| Res.C4a 6.1 | Test the ability to expedite decedent processing |
| **Objective Comments** | |
| This objective targets the policies and procedures in place for mass fatality management, including storage, tracking, family notification, mortuary/morgue services, and coordination with local jurisdictions. | |

1. These are selected based on the National Preparedness Goal and Homeland Security Exercise and Evaluation Program (HSEEP) core capabilities (2013). The numbers used to enumerate the tasks are based on the 2007 Target Capabilities List as the 2013 core capabilities list does not provide numbered tasks. Tasks are amended/added to align with the Public Health Emergency Preparedness (PHEP) Program, HSEEP, and the Hospital Preparedness Program (HPP). [↑](#footnote-ref-1)
2. Joint Commission EM.03.01.03 EP 7 [↑](#footnote-ref-2)
3. Joint Commission EM.01.01.01 EP 7 [↑](#footnote-ref-3)
4. Joint Commission EM.03.01.03 EP 2 [↑](#footnote-ref-4)
5. Joint Commission EM.02.02.02 EP 1, 2 [↑](#footnote-ref-5)
6. Joint Commission EM.02.02.03 EP 6 [↑](#footnote-ref-6)
7. Joint Commission EM.02.02.05 EP 1, 2, 3 [↑](#footnote-ref-7)
8. Joint Commission EM.02.02.01 EP 6 [↑](#footnote-ref-8)