

# 2016 STATEWIDE MEDICAL AND HEALTH EXERCISE



## ALAMEDA COUNTY



## Tabletop Exercise

**Situation Manual**  
**September 27, 2016**



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## PREFACE

The 2016 California Statewide Medical and Health Exercise (SWMHE) is sponsored by the California Department of Public Health (CDPH) and the Emergency Medical Services Authority (EMSA). This Situation Manual (SitMan) was produced with input, advice, and assistance from the Alameda County SWMHE Planning Workgroup, comprised of representatives from:

- Alameda County Emergency Medical Services (EMS) – Healthcare Services Agency (HCSA)
- Alameda County Public Health Department
- Alameda County Office of Homeland Security and Emergency Services (OHSES)
- Alta Bates Summit Medical Center
- Chaparral House
- Eden Medical Center
- Kaiser Permanente
- Mier Consulting Group

A number of key informant interviews were also conducted with Alameda County healthcare system partners, to include: Alameda Health System, Kaiser Permanente San Leandro, Washington Hospital, Asian Health Services, Willow Rock Center, and four BLS providers (ProTransport, Royal Ambulance, NorCal, and Rural Metro).

This SitMan follows guidelines set forth by the U.S. Federal Emergency Management Agency (FEMA) Homeland Security Exercise and Evaluation Program (HSEEP). See Appendix A for a listing of agency/event acronyms. All exercise participants should use appropriate guidelines to ensure proper control of information within their areas of expertise and protect this material in accordance with current jurisdictional directives.



# ADMINISTRATIVE HANDLING INSTRUCTIONS

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## GENERAL INFORMATION

### *Exercise Purpose*

The purpose of this TTX is to discuss and address response functions of EMS and Public Health to a mass casualty incident (MCI), to include coordinated command and control as well as the coordination of response functions with transport providers, hospitals, long term care facilities, and clinics within the context of a large MCI generated from a passenger train derailment.

### *Exercise Structure*

This exercise will be delivered in person with the target audience consisting of representation from Alameda County agencies, private ambulance partners and representatives from the collective healthcare systems (i.e., hospitals, clinics, long-term care facilities [LTCF] and mental/behavioral health centers). The exercise will take place at the

Alameda County Office of Homeland Security Assembly Room  
4985 Broder Boulevard  
Dublin, CA 94568

Participants are encouraged to arrive at **8:00 AM for a prompt exercise start at 8:30 AM.**

This exercise will consist of panel briefings from a number of response disciplines and subject matter experts, which will be followed by all participants addressing scenario-driven sets of questions within three modules.

### *Exercise Objectives*

The exercise objectives in the table below, describe Alameda County's expected outcomes for the exercise. The objectives are linked to [Public Health Emergency Program (PHEP)/Hospital Preparedness Program/FEMA Core Capabilities, which are distinct critical elements necessary to achieve the specific mission area(s). The objectives and aligned capabilities are guided by elected and appointed officials and selected by the Exercise Planning Team; a working group convened by Alameda County Public Health Department and EMS to plan this exercise.



Exercise Objective	Capability
Discuss the process for the activation of and <u>coordination</u> between the Operational Area (OA) Emergency Operations Center (EOC), HCSA Department Operations Center (DOC), Hospital Command Centers (HCCs) and other command centers	Emergency Operations Coordination
Discuss <u>healthcare partner roles</u> , responsibilities and capabilities during a medical surge event requiring healthcare system expansion and decompression	Medical Surge
Describe considerations for initial <u>triage, patient distribution and tracking</u> and activation of mutual aid	Medical Surge
Discuss the utilization of <u>communications systems</u> to evaluate sharing of actionable information	Information Sharing
Discuss the support roles of other public health resources to include behavioral and mental health and environmental health	Emergency Operations Coordination

### ***Roles and Responsibilities***

**Moderators:** Serve to moderate the discussion and will be responsible for raising issues and questions, clarifying the conversations, identifying key points, and keeping the discussion focused on the topics outlined in the exercise schedule.

**Evaluators:** MCG will provide all evaluator activities for this exercise. Evaluators will not participate in the discussions or interact with players. They will monitor exercise play, collect data, and record observations about the players' actions and responses. Information gathered from the evaluators will be included in the After Action Report (AAR).

**Panelists:** Panelists are subject matter experts (SMEs) within various Alameda County agencies and organizations who will provide a briefing of their capabilities within the context of the exercise scenario.

**Players:** Players will respond to questions based on expert knowledge of response procedures, current plans and procedures, and insights derived from training and experience.

**Observers:** Observers will listen to discussions but will not participate in the discussion or tasking unless otherwise requested to do so.

**Scribes:** Responsible for recording conversations for use in the After Action Report.



### ***Player Instructions***

This is intended to be a safe, open environment. The problems and challenges are real and there is no “textbook” solution. The following exercise ground rules have been developed to ensure that the goals and objectives are met in a reasonable amount of time and the TTX runs smoothly:

- Keep the exercise’s objectives in mind throughout the exercise;
- Treat the scenario incidents as real events and play your appropriate role;
- Participate openly and focus discussions on appropriate topics – asking questions, sharing thoughts, and offering forward looking, problem solving suggestions are strongly encouraged, as these will enhance the exercise experience;
- Keep your comments focused and consider time constraints;
- Respect the observations, opinions, and perspectives of others, as the discussions will explore a variety of policies, decisions, actions, and key relevant issues from different sources; and
- Respond to the tasks and discussion questions as directed by the facilitator.
- Utilize this opportunity to discuss or clarify areas of Alameda County Response Plans your internal procedures that may require further development or consensus.

#### **Following the exercise:**

- Complete the Participant Feedback Online Survey. A survey link will be sent to all participants to gather candid comments on exercise activities and effectiveness.

### ***Exercise Guidelines, Assumptions, and Artificialities***

#### **Guidelines:**

- This is an open, low-stress, no-fault environment.
- Respond based on your knowledge of current plans and capabilities.





- Decisions are not precedent setting and may not reflect your organization’s final position on a given issue. This is an opportunity to discuss and present multiple options and possible solutions.
- Issue identification is not as valuable as suggestions and recommended actions that could improve response and preparedness efforts. Problem-solving efforts should be the focus.
- It is possible that this exercise will raise more questions than answers. It is a tool to help assess and improve your current planning.

### **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.

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

- The exercise scenario is plausible, and events occur as they are presented.
- Time lapses may be artificially used to achieve the exercise objectives.
- Impacts are seen across the spectrum of the response community.
- Exercise simulation contains sufficient detail to allow players to react to information and situations as they are presented as if the simulated incident were real.

### **Additional Considerations for Exercise Play:**

- The exercise is conducted in a no fault learning environment wherein capabilities, plans, systems, and processes will be evaluated.
- Decisions are not precedent setting and may not reflect your organization’s final position.
- Participants should use existing plans, policies, and procedures. If during the course of the TTX there is a disagreement with existing plans, policies, and procedures, this



should be noted, and relevant stakeholders should assess the need to change documents after the TTX.

- There are no “hidden agendas” or trick questions.
- All players receive information at the same time.
- Players do not need to call someone outside of the room during the exercise. If a player would normally contact an individual or department that is not represented at the TTX, they should tell the group what information they need, and who they would contact. This action should be noted.
- Participating agencies may need to balance exercise play with real-world emergencies. Real-world emergencies take priority.



## EXERCISE AGENDA

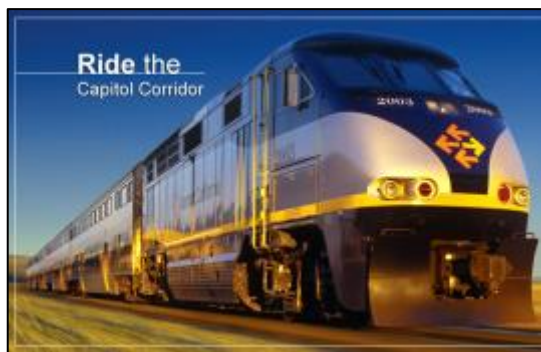
Tuesday - September 27, 2016

- 8:00-8:30am Registration
- 8:30-8:45am Welcome, Introductions, and Administrative Items
- 8:45-9:15am **MODULE 1: SCENE - Initial Scene Response Panel**  
Moderator: Cynthia Frankel, RN
- Travis Kusman, Director, Paramedic, Alameda County Emergency Medical Services
  - Stewart McGehee, City of Oakland Fire Department
  - Dale Feldhauser, Chief Operating Officer, Paramedics Plus
  - Stacy C. Weller, Regional Emergency Manager - Region 10, Amtrak
  - Jim Morrissey, Paramedic, Alameda County Emergency Medical Services
- 9:20-9:50am **MODULE 2: EOC MANAGEMENT & MEDICAL SURGE Panel**  
Moderator: Travis Kusman, Director, Paramedic
- Paul Hess, ALCO Office of Emergency Services & Homeland Security
  - Kelly Coleman, EMT-P, Alameda County Emergency Medical Services
  - Cynthia Frankel, RN, Alameda County Emergency Medical Services
  - Rafael Vargas, UCSF Benioff Children's Hospital Oakland
  - Matt Condie, ProTransport
  - Glen Morimoto, NorCal
  - Matthew Lane, Rural Metro
- 9:50-10:00am BREAK
- 10:00-11:00am **MODULE 1 & 2: ALL (Breakout for Facilitated Group Discussions - Moderator: Mier Group)**  
Table Facilitators: DPHC Steering Committee Members and Partners
- 11:00-11:30pm **MODULE 3: DPHC PARTNERS RESPONSE ROLES Panel**  
Moderators: John Adam, Willow Rock and Donata Nilsen
- Erica Pan MD, Deputy Health Officer, Alameda County Public Health Department
  - Matthew Soby, Alameda County Environmental Health Division
  - Karyn L. Tribble, PsyD, LCSW, Alameda County Behavioral Health Care Services
  - Kathy Smedley, Staff RN Developer, Chaparral House
  - Amanda Morris, Compliance Coordinator, LifeLong Medical Care
  - Sarah Finnigan, Alameda County 211
- 11:30-12:10pm **MODULE 3: ALL (Facilitated Group Discussion – Moderator: Mier Group)**
- 12:10-12:20pm LUNCH PICK UP
- 12:20-12:30pm **11/17/16 FUNCTIONAL EXERCISE - Requirements**
- 12:30 -12:55pm **WORKING LUNCH & HOTWASH (Facilitator: Mier Group)**
- 1:00pm Adjourn & Turn In Participant Feedback Forms

## EXERCISE SCENARIO

**November 17, 5:00 AM**

The Capitol Corridor Amtrak train is traveling from the Emeryville station to the Jack London Square station in Oakland departing at 5am.



At a busy intersection several blocks (Broadway and Embarcadero West) from the station, dozens of vehicles on either side of the tracks wait for the train to pass.

- Includes two school buses carrying their maximum capacity of 60 K-8 children.

At 0512 local time, the train strikes a van that attempts to cross the tracks, instantly killing the driver and setting off a chain reaction that begins with a 23-car derailment.



In addition to the train derailment, the standing vehicles including the school buses are hit by the derailed train cars.

Dozens of 911 calls begin to come in within seconds following the crash.

Callers are reporting that it appears nearly 80 people are trapped, severely injured or dead on impact. Others are reported as wounded walking away and calling Uber/Lyft from the scene.

There is diesel fuel leaking from one of the derailed train cars. One of the school buses is turned on its side and the other is still upright. Hospitals are already full to capacity.

First responders arrive on scene in minutes; the crash is declared a mass casualty incident. The initial scene assessment by EMS is reporting: 30 fatalities, 18 triaged as BLACK (5 pediatric), 90 triaged as RED (23 pediatric), 100 triaged as YELLOW (25 pediatric), and 92 triaged as GREEN (24 pediatric).



## EXERCISE DISCUSSION QUESTIONS

### Module 1: Initial Response

*Note: The questions included in this Situation Manual may differ than the final questions selected for discussion during the September 27 Tabletop Exercise.*

#### Alameda County EMS (panel)

- Describe the MCI response flow and field policy within the context of this scenario.
- What are the immediate actions of 911 Dispatch and the EMS Duty Officer?
- What are the initial messages to hospitals?
- Describe the process for MCI and HA v Bed polling.
- How does ALCO EMS coordinate with scene response – unified command?
- Describe the Clinic Field Treatment Site (FTS) Model.

#### Oakland Fire and Paramedics Plus (panel)

- What are the key elements of Initial Scene Response?
  - Scene assessment and Joint Command (ICS) and coordination with ALCO EMS
  - Priorities and Incident Action Planning for 4 hours
  - Initial Patient Triage, Transport Supervisor, Patient Movement, and Coordination
  - Requests for Mutual Aid and Ambulance Strike Teams

#### Amtrak (panel)

- What are the Amtrak priorities the first 4 hours (IAP)?
  - How do you coordinate with Unified Command, Oakland EOC, and OA EOC?

### Module 2: Medical Surge, Hospital Expansion, and Decompression

#### OA EOC and EOC Medical/Health Branch (panel)



- What is your priority ALCO EOC role to support the train derailment MCI with Unified Command and City of Oakland EOC?
- What is the coordination function of MHOAC and EOC Medical/Health Branch?
- Describe high level medical surge bed expansion options. Provide customized polling examples for medical surge.
- What is the process for joint information development and dissemination?

#### **UCSF Benioff Children's Hospital (panel)**

- How would your facility respond to an influx of critical patients?
- How will you expand your Pediatric Intensive Care Unit (PICU) and Neonatal Intensive Care Unit (NICU) capability and capacity?

#### **Basic Life Support (BLS) Providers (panel)**

- How will you coordinate with ALCO EOC and Oakland Field Unified Command at the scene?
- How many vehicles are available to support hospital decompression of patients in ALCO?
- Describe the notifications to hospitals when transports are underway.

#### **All Participants (group discussion)**

- What is your agency/organization's **priority response role** focused at the **EOC/HCC/DOC or Command Level?** (consider initial activities + 4 hours post event).
- How will you manage **medical surge – expand and/or decompress** to receive more patients?
- How are you coordinating your status and needs with the OA EOC Medical/Health Branch (e.g., conference call, SitStat submission, customized polling)?



### ***Module 3: Casualty Management***

#### **Health Care Services Agency (HCSA) – Public Health, Environmental Health, Behavioral Health (panel)**

- What is your primary response role in the field and at the OA EOC/DOC level?
- How will you coordinate with and support the Alameda County EOC?

#### **Clinic and LTCF Partners**

- What services and resources are available at your facility to support this medical surge response?

#### **All Participants (group discussion)**

- How would your organization receive notification of the train derailment?
- What internal and external notifications would be made?
- What are you communicating with the County?
- How might the location of the incident impact your facility's level of response?
- How will you ensure real time situational awareness of:
  - Patient Visits?
  - Bed Availability?
  - Capabilities?
  - Medical Supply and Staffing Needs?



## *Preparing for the Functional Exercise*

### **Functional Exercise Planning Questions**

- Based on today's discussion, what do we need to emphasize in the functional exercise?
- To what extent can your organization address some of the things discussed in the TTX during the functional?
- Has your organization registered for the functional exercise (November 17, 2016)?

### **Functional Exercise Expectations**

- Participation Form
- Conference Call
- SitStat Reporting
- Resource Requests
- EMS and Public Health Contact Information
- Website Link





## APPENDIX A – ACRONYMS

Acronym	Meaning
AAR	After Action Report
ACPHD	Alameda County Public Health Department
ALCO	Alameda County
ASPR	Assistant Secretary for Preparedness and Response
CDC	Centers for Disease Control and Prevention
CDPH	California Department of Public Health
DOC	Department Operations Center
ED	Emergency Department
EMS	Emergency Medical Services
EMSA	Emergency Medical Services Authority
EOC	Emergency Operations Center
EMS	Emergency Medical Services
EOP	Emergency Operations Plan
FEMA	Federal Emergency Management Agency
HAvBED	Hospital Available Beds for Emergencies or Disasters
HAZMAT	Hazardous Material
HCC	Hospital Command Center
HCSA	Health Care Services Agency
HPP	Hospital Preparedness Program
IAP	Incident Action Plan
JIC	Joint Information Center
LTCF	Long Term Care Facility
MCG	Mier Consulting Group
MCI	Mass Casualty Incident
MHOAC	Medical Health Operational Area Coordinator
NICU	Neonatal Intensive Care Unit
OA	Operational Area
OES	Office of Emergency Services
OHSES	Office of Homeland Security and Emergency Services
PHEP	Public Health Emergency Preparedness
PICU	Pediatric Intensive Care Unit
RDMHS	Regional Disaster Medical Health Specialist
REOC	Regional Emergency Operations Center
SitMan	Situation Manual
SME	Subject Matter Expert
SWMHE	Statewide Medical Health Exercise
TTX	Tabletop Exercise
UCSF	University of California San Francisco