

2018 Statewide Medical Health Exercise – Participant Level of Play

This is to be used as a guide to define the level of participant activity in the exercise.

Level 1

At this level, the participating organization agrees to respond to a minimum level of play by responding to electronic and/or verbal correspondence associated with the exercise; e.g. Email messaging, CAHAN messages, ReddiNet, phone call. We anticipate that 2-6 responses are needed during the course of the exercise. Message responses should be thought through and as realistic as possible.

Time Commitment: 2-4 hours intermittently

Staff Commitment: 1-2

1. Register for and participate in tabletop & functional exercises
2. Receive and respond to messages during the functional exercise

Level 2

At this level, the participating organization agrees to participate by having staff committed for the exercise and exercising a plan within their organization. Agree to provide exercise planners with objectives that can be included in the overall scenario and provide updates or status to Alameda County Emergency Operations Center (EOC) or the Alameda County Health Care Services Department Operations Center (HCSA DOC) during the exercise. Complete an exercise evaluation to monitor progress and outcome of objectives. At this level, some level of ICS activation is expected. Message responses should be thought through and as realistic as possible involving appropriate staff.

Time Commitment: 2-4 hours intermittently

Staff Commitment: > 2

1. Register for tabletop & functional exercises
2. Identify plan to test
3. Develop objectives
4. Complete exercise evaluation
5. Receive and respond to messages during the functional exercise

Level 3

At this level, the participating organization agrees to participate by having staff committed for the exercise and by exercising a plan within their organization. Agree to provide exercise planners with objectives that can be included in the overall scenario and provide updates or status to Alameda County Emergency Operations Center (EOC) or the Alameda County Health Care Services Department Operations Center (HCSA DOC) during the exercise. Complete an exercise evaluation to monitor progress and outcome of objectives. At this level, partial ICS activation is expected. Message responses should be thoroughly thought through and as realistic as possible involving various levels of staff.

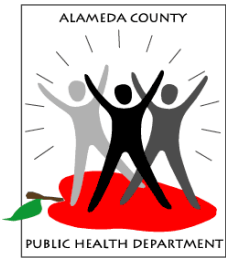
Time Commitment: 2-4 hours

Staff Commitment: > 4

1. Register for tabletop & functional exercises
2. Identify plan(s) to test
3. Develop objectives
4. Commit staff to active participation during the functional exercise
5. Complete exercise evaluation
6. Receive and respond to messages during the functional exercise

Register online via the Exercise Flyer & Registration

<http://www.acphd.org/media/526349/2018-swmhe-registration-v2.pdf>



**ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY
PUBLIC HEALTH DEPARTMENT**

**Colleen Chawla, Director
Kimi Watkins-Tartt, Interim Director**

Division of Communicable Disease Control and Prevention

**Erica Pan, MD, MPH, Director
Interim County Health Officer**

1000 Broadway, 5th Floor
Oakland, Ca 94607

(510) 267-3200
Fax (510) 268-2140

Please note that CMS requires a full-scale exercise that shows real people doing real things, in real time and in real roles.

- **FOR LTCFs**
 - Participate in in community mock disaster drill at least annually or when community mock disaster drill is not available, conduct an individual, facility-based mock disaster drill at least annually.
 - Conduct a paper-based tabletop exercise at least annually that includes a group discussion led by a facilitator using a narrated, clinically relevant emergency scenario and a set of problem statements, directed messages or prepared questions designed to challenge the emergency plan.
- **FOR FQHCs**
 - Participate in a full-scale exercise that is community based or when community-based exercise is not accessible, individual, facility-based.
 - Conduct a second exercise that may include but is not limited to a second full-scale exercise that is individual, facility based; a tabletop exercise that include a group discussion led by a facilitator using a narrated, clinically relevant emergency scenario and a set of problem statements, directed messages or prepared question designed to challenge the emergency plan.
- **FOR DIALYSIS**
 - Participate in a full-scale exercise that is community based or when community-based exercise is not accessible, individual, facility-based.
 - Conduct a second exercise that may include but is not limited to a second full-scale exercise that is individual, facility based; a tabletop exercise that include a group discussion led by a facilitator using a narrated, clinically relevant emergency scenario and a set of problem statements, directed messages or prepared question designed to challenge the emergency plan.
- **FOR HOSPITALS**
 - Participate in a full-scale exercise that is community-based or when community-based exercise is not accessible, individual, facility-based.
 - Conduct a second exercise that may include but is not limited to a second full-scale exercise that is individual, facility based; a tabletop exercise that include a group discussion led by a facilitator using a narrated, clinically relevant emergency scenario and a set of problem statements, directed messages or prepared question designed to challenge the emergency plan.

We understand that healthcare facilities may exercise throughout the year and/or have real events to respond to and that participation in the Statewide Medical and Health Exercise is voluntary. Please however consider the following benefits to participation in County/Operational Area exercises:

- ✚ Your facility name gets included in the documentation (e.g. reports, agendas).
- ✚ Participation demonstrates a relationship with the County.
- ✚ Opportunity to share information among operational area partners up to the state level.
- ✚ Understanding resource availability and capabilities across the healthcare system.
- ✚ Test resource coordination via the Standardized Emergency Management System.
- ✚ Opportunity to validate policies, plans, procedures, training, equipment, and agreements.
- ✚ Clarifies roles and responsibilities in emergency response and recovery.
- ✚ Improves interagency coordination.
- ✚ Strengthens relationships among all participating agencies.