

Preparing for Public Health Emergencies: A Tabletop Exercise

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Today's Objectives

- **Demonstrate a tabletop exercise used by public health officials**
- **Identify issues typically emerging out of tabletops**
- **Identify how medical librarians can help to address these issues**
- **Define possible next steps for medical librarians**

Purpose:

To provide a learning opportunity for public health officials and their local emergency counterparts prepare for and respond to large scale public health emergencies (natural or man made)

Types of Emergency Exercises

- **Orientation**
- **Drill**
- **Tabletop Exercises**
- **Functional**
- **Full Scale**

What is a Public Health Tabletop Exercise?

- **Scripted scenario depicting a public health emergency**
- **Led by facilitator who asks a group (players) to respond to a series of incidents in the scenario**
- **Low stress, no right or wrong answer**
- **Examines the adequacy of the emergency response plans, policies and procedures and the key decision makers' understanding and knowledge of the plans.**
- **Debriefing to discuss next steps**

Types of Tabletops

- **Basic:** players respond to scenario as it unfolds, can be a mix of different disciplines, not necessarily key decision makers. More oriented to learning, rather than evaluation of current system
- **Advanced:** players in own role as defined by the emergency response plan; typically those that would be involved in decision making; identifies gaps, inconsistencies, or duplications in policies, plans, or procedures.

Objectives of Tabletops

- **Identify the policy issues associated with a public health emergency**
- **Identify gaps in local preparedness**
- **Discuss measures that can be performed at the local level**
- **Promote interagency collaboration & coordination**
- **Recognize the roles of public officials**
- **Identify training needs**

Why policies?

- ✓ Clarity and consistency (backups)
- ✓ Saves time (avoids confusion about what to do or for making decisions)
- ✓ Avoids duplication/conflicts
- ✓ Enhances interagency partnerships
- ✓ Can use the same tabletop multiple times (the focus is on policy, not disease or scenario).

Examples of policy areas identified through tabletops

- **Communication**
 - Vertically, horizontally, news media
- **Resources**
 - Manpower, material, technical assistance
- **Data**
 - Collection, analysis, mgmt, communication
- **Coordination**
 - Chain of command, leadership
- **Legal**
 - Medical, criminal, quarantine
- **Systems**
 - Interagency protocols, surveillance

Lessons Learned From Preparedness Tabletops

- **LHDs often lack written policies or protocols**
- **Each city or county is unique**
- **Local agencies may not include PH in their plans**
- **Emergency response policies are not well communicated between all agencies**
- **Self assessment does not equal performance**
- **Public health jargon often hinders communication**
- **Emergency response policies often conflict, are outdated, or not well communicated**

Tabletop Demonstration

Schedule:

- Introduction: 15 min
- Exercise: 1 hr
- Groups identify issues: 20 min
- Discussion of the medical librarian's role & next steps: 30 min

Roles:

- Facilitator
- Tabletop players
- Note takers

Description of Exercise

The Scenario:

A fictional account of a large scale public health emergency created by bioterrorists.

Four Storyboards:

Background information to put the scenario into context. Facts known to all.

1. The Setting
2. The Investigation
3. The Terrorist Act
4. The Aftermath

Description of Exercise

The Exercise:

Scripted scenario on 17 slides (**Update**) containing a total of 24 separate incidents occurring over a 4 day period

The Debriefing:

- Identification of policy gaps
- Identification of useful information (effective responses)
- Next steps

Setting the Scene

Participation:

- Respond as a group as each incident emerges (think about the policy issues or themes embedded in each incident)
- You are to assume the roles of public officials from CEDAR county

Policy Issues:

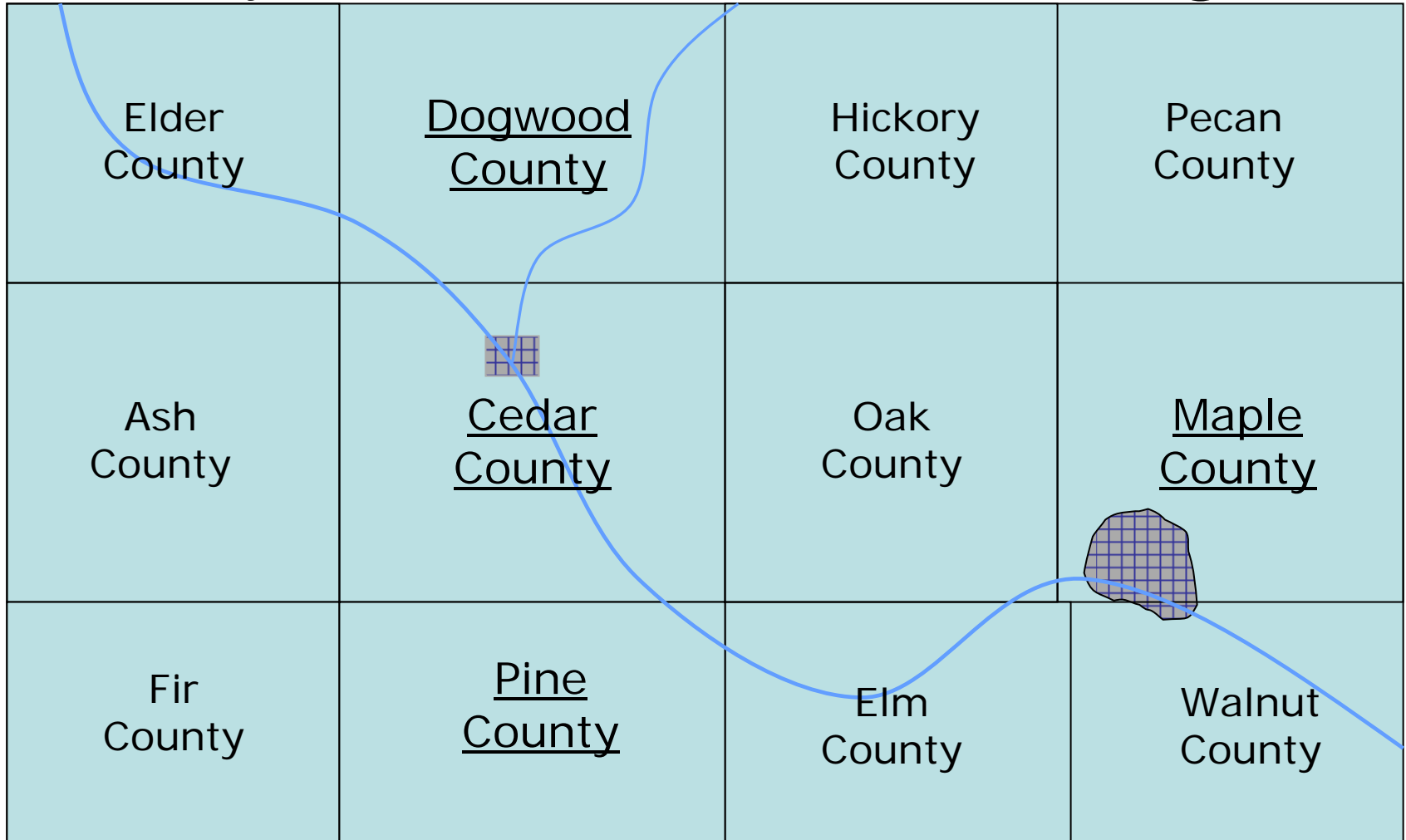
- Focus on who, what, and when vs. how
- Identify gaps and strengths of the system rather than individual knowledge
- Respond in real time, if possible

Instructions to Remember

- **Respond as a group as the information emerges**
- **Maintain your agency or community role throughout the exercise (think about how your agency, rather than how you, would respond)**
- **Focus on identifying policy issues rather than specific procedures**
- **Take notes for debriefing discussion**
- **Refer to handouts, as appropriate**

Questions?

Storyboard 1 – The Setting



Storyboard 1 – The Setting

- **Cedar County**
 - 150,000 residents
 - 1 major city of 40,000
 - 2 hospitals
 - 1 public water supply
 - Local health dept staff with 70 employees

Storyboard 1 – The Setting

- **Dogwood County**
 - Just north of Cedar County
 - 35,000 residents
 - Numerous water recreation areas
 - Multiple small water supplies
 - Local health dept staff of 25 employees

Storyboard 1 – The Setting

- **Pine County**
 - Just south of Cedar County
 - 15,000 residents
 - A Cedar County “bedroom community”
 - On the Cedar County water supply
 - Local health dept staff of 14 employees

Storyboard 1 – The Setting

- **Maple County**
 - Located 140 miles east of Cedar County
 - Site of the State Health Department
 - Site of the State Public Health Laboratory
 - State's major university located in Maple County
 - 1,000,000 residents

Storyboard 1 – The Setting

- **Today is Friday, Sept 5 (before 3 day Labor Day weekend)**
- **Major upcoming event: An Economic Trade Summit is scheduled to be held in Cedar County on Friday, Sept 12. Two hundred high level government and business leaders from three states and a few foreign dignitaries have been invited to attend**

Storyboard 1 – The Setting

- **Unusual current event**: On Friday evening, nurse hotlines, private providers in the area and the hospital ER's are receiving increasing number of calls and visits from people complaining about gastrointestinal illness exhibiting common symptoms (*severe diarrhea, fever, abdominal cramps, chills, headache, bloody stools, nausea*). Most patients are middle aged adults. By early Saturday AM, the number of reported cases is up to 45 and 3 people are hospitalized for dehydration

Questions?