

# Pediatric Surge Coalition TabletopSituation Manual (Sitman)

MM/DD/YYYY

## Exercise Overview

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| --- | --- |
| Exercise Name | Pediatric Surge Coalition Tabletop |
| Exercise Dates |  |
| Scope | The scope of this exercise is limited to coalition leaders, hospital emergency department staff, administrators and emergency managers, and emergency medical service staff responding to an incident. |
| Mission Area(s) | Response |
| Core/Healthcare System Capabilities | HPP Cap. 1: Foundation for Health Care and Medical ReadinessHPP Cap. 2: Health Care and Medical Response CoordinationHPP Cap. 4: Medical Surge |
| Objectives | 1. Evaluate disaster response interface between EMS and Hospital Emergency Responders in the region.
2. Describe ideal communication between EMS providers in the field and ED staff in a surge incident.
3. Evaluate surge capacity and capability of both EMS agencies and hospitals including alternate care sites.
4. Review memoranda of understand and transfer agreements with other EMS agencies and hospital.
 |
| Threat or Hazard | School bus accident |
| Scenario | A school bus carrying 32 occupants, both children and adults has crashed near your hospital. |
| Sponsor |  |
| Participating Organizations | Full list of participating agencies in Appendix B. |
| Point of Contact |   |

## General Information

### Exercise Objectives and HPP Capabilities

| Exercise Objective | Core Capability |
| --- | --- |
| Evaluate disaster response interface between EMS and Hospital Emergency Responders in the region. | Cap 1: Foundation for Health Care and Medical Readiness, Objective 4: Train and Prepare the Health Care and Medical Workforce |
| Describe ideal communication between EMS providers in the field and ED staff in a surge incident. | Cap 2: Health Care and Medical Response Coordination, Objective 3: Coordinate Response Strategy, Resources, and Communications |
| Evaluate surge capacity and capability of both EMS agencies and hospitals including alternate care sites. | Cap 4: Medical Surge, Objective 2: Respond to a Medical Surge |
| Review memoranda of understand and transfer agreements with other EMS agencies and hospital. | Cap 4: Medical Surge, Objective 1: Plan for a Medical Surge |

### 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.
* **Observers.** Observers do not directly participate in the exercise. However, they may support the development of player responses to the situation during the discussion by asking relevant questions or providing subject matter expertise.
* **Facilitators.** Facilitators provide situation updates and moderate discussions. They also provide additional information or resolve questions as required. Key Exercise Planning Team members also may assist with facilitation as subject matter experts (SMEs) during the exercise.
* **Evaluators.** Evaluators are assigned to observe and document certain objectives during the exercise. Their primary role is to document player discussions, including how and if those discussions conform to plans, polices, and procedures.

### Exercise Structure

This exercise will be a multimedia, facilitated exercise. Players will participate in the following three modules:

* Module 1: EMS and Prehospital Response to Disasters
* Module 2: Communication
* Module 3: Surge Capacity and Alternate Care Sites
* Module 4: MOUs, Transportation Certificates and EMS Interagency Assistance

Each module begins with a scenario update that summarizes key events occurring within that time period. After the updates, all participants will review the situation and engage in large group discussions where each functional group will describe their response processes with the rest of the exercise participants. For this exercise, the functional groups are as follows:

* Health Care Facilities
* Emergency Medical Services
* Health Care Coalition (HCC) Leaders

### Exercise Guidelines

* This exercise will be held in an open, low-stress, no-fault environment. Varying viewpoints, even disagreements, are expected.
* Respond to the scenario using your knowledge of current plans and capabilities (i.e., you may use only existing assets) and insights derived from your training.
* Decisions are not precedent setting and may not reflect your organization’s final position on a given issue. This exercise 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 or recovery efforts. Problem-solving efforts should be the focus.

### 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. During this exercise, the following apply:

* 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.
* All players receive information at the same time.

### Exercise Evaluation

Evaluation of the exercise is based on the exercise objectives and aligned capabilities, capability targets, and critical tasks, which are documented in Exercise Evaluation Guides (EEGs). Evaluators have EEGs for each of their assigned areas. Additionally, players will be asked to complete participant feedback forms. These documents, coupled with facilitator observations and notes, will be used to evaluate the exercise and compile the After-Action Report (AAR).

## Module 1: EMS and Prehospital Response to Disasters

### Scenario

#### 10:00 AM

It’s an icy morning in your area. A Click or tap here to enter text. school bus hit a patch of black ice and crashed. It went into the grassy median and rolled once before coming to a stop on its side. The bus was on its way to a field trip. Children who attend Click or tap here to enter text. range in ages Click or tap here to enter text.. There are 32 occupants aboard, including adult teachers, chaperones, and the driver. A witness to the accident has called 9-1-1 to report the accident.

### Questions

1. Are the EMS agencies in your area public? Private? Volunteer?
2. How are EMS agencies in your area dispatched?
3. How many ambulances would be available to respond to this mass casualty incident (MCI)? Would that number be different if it were 10:00 PM instead of 10:00 AM?
4. Who is responsible for medical oversight of the EMS response to the MCI?
5. Has an MCI involving children occurred in your area? How much experience do EMS personnel have with pediatric trauma?

## Module 2: Communication

### Scenario Update

#### 10:30 AM

Ambulances, fire, and police are on-scene. The victims have been extricated from the bus. The crash occurred Click or tap here to enter text. miles from the closest hospital. The hospital is a Level Choose an item. trauma center. It Choose an item. have expertise in pediatrics.

### Questions

1. Typically, what information does EMS receive from dispatch prior to scene arrival?
2. What information is communicated to the receiving facility by EMS?
3. What barriers are there to effective communication?
4. In prior MCI responses, have initial estimates of the number of victims, assessments of the nature of the incident or other details pertinent to the response been accurate? How does this affect preparedness at the health care facility?

## Module 3: Surge Capacity and Alternate Care Sites

### Scenario Update

#### 10:45 AM

Victims are ready to be transported. There are a total of 27 pediatric victims and 5 adult victims. Triage results in the field by EMS are:

| **Field Triage Status and Age** | **Red** | **Yellow** | **Green** |
| --- | --- | --- | --- |
| Pediatrics (< 18 years) | 8 | 4 | 15 |
| Adults (≤ 18 years) | 1 | 1 | 3 |

### Questions

1. Where would pediatric victims of the crash be dispositioned by triage level? Where would pediatric victims and adult victims be transported?
2. At this hospital, how would a decision about the following be made?
	1. Generating surge capacity (e.g. alternate care sites, utilizing space in a different way)
	2. Generating pediatric-specific surge capacity
	3. When surge capacity has been reached or exceeded
3. What additional EMS resources can be requested if the readily-available ambulances and intercept vehicles are inadequate? Who should request these assets?

## Module 4: Memoranda of Understanding, Transportation Certificates and EMS Interagency Assistance

### Questions

1. Does your hospital have MOUs with other hospitals regarding MCIs, diversion status, transfers in the event your hospital becomes overwhelmed by an incident?
2. How are EMS interagency assistance agreements determined in your EMS regions?
3. What is the role of your coalition in an incident of this nature? What do hospitals and EMS expect of your coalition leadership?

## Appendix A: Acronyms

| **Acronym** | **Term** |
| --- | --- |
| ACS | Alternate Care Sites |
| AAR | After Action Report |
| ED | Emergency Department |
| EEG | Exercise Evaluation Guide |
| EM | Emergency Manager |
| EMS | Emergency Medical Services |
| HCC | Health Care Coalition |
| HPP | Health Care Preparedness Program |
| HSEEP | Homeland Security Exercise and Evaluation Program |
| MCI | Mass casualty incident |
| MOU | Memoranda of understanding |
| SitMan | Situation Manual |
| SME | Subject Matter Expert |
| TTX | Tabletop Exercise |
|  |  |
|  |  |

## Appendix B: Exercise Participants

| Participating Organizations |
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| Health Care Facilities |
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|  |
| Emergency Medical Services |
|  |
|  |
| Health Care Coalition Leaders |
|  |
|  |

## Participant Feedback Form

Thank you for participating in this exercise. Your observations, comments, and input are greatly appreciated, and provide invaluable insight that will better prepare our nation against threats and hazards. Any comments provided will be treated in a sensitive manner and all personal information will remain confidential. *Please keep comments concise, specific, and constructive.*

## Part I: General Information

Please enter your responses in the form field or check box after the appropriate selection.

**Name:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Agency/Organization Affiliation:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Position Title:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Number of Exercises Previously Participated in:** **[ ]**  0 **[ ]**  1-5 **[ ]**  5-10 **[ ]**  15+

**Exercise Role:** **[ ]**  Player **[ ]**  Facilitator/Controller **[ ]**  Observer **[ ]**  Evaluator

## Part II: Exercise Design

Please rate, on a scale of 1 to 5, your overall assessment of the exercise relative to the statements provided, with 1 indicating strong disagreement and 5 indicating strong agreement.

| **Assessment Factor** | **Strongly****Disagree** | **Strongly Agree** |
| --- | --- | --- |
| The exercise scenario was plausible and realistic. | 1 | 2 | 3 | 4 | 5 |
| Exercise participants included the right people in terms of level and mix of disciplines.  | 1 | 2 | 3 | 4 | 5 |
| Participants were actively involved in the exercise. | 1 | 2 | 3 | 4 | 5 |
| Exercise participation was appropriate for someone in my field with my level of experience/training. | 1 | 2 | 3 | 4 | 5 |
| The exercise increased my understanding about and familiarity with the capabilities and resources of other participating organizations. | 1 | 2 | 3 | 4 | 5 |
| The exercise provided the opportunity to address significant decisions in support of critical mission areas. | 1 | 2 | 3 | 4 | 5 |
| After this exercise, I am better prepared to deal with the capabilities and hazards addressed. | 1 | 2 | 3 | 4 | 5 |

## Part III: Participant Feedback

1. **I observed the following strengths during this exercise:**

| **Strengths** |  |  |
| --- | --- | --- |
|  |
|  |
|  |

1. **I observed the following areas in need of improvement during this exercise** (e.g., updating plans, adding to coalition membership, needed trainings, etc.)

| **Areas for Improvement** |
| --- |
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|  |
|  |

1. **Please provide any recommendations or comments you may have in regards to this or future exercises:**

Minnesota Department of Health
Center for Emergency Preparedness and Response
PO Box 64975
St. Paul, MN 55164
651-201-5700
health.epr@state.mn.us
[www.health.state.mn.us/facilities/preparedness/surge/pediatric/](http://www.health.state.mn.us/facilities/preparedness/surge/pediatric/)

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