DPH Pandemic Influenza Spring Exercise May 12-13, 2008



San Francisco Department of Public Health Communicable Disease Control & Prevention Section

After Action Report

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EXECUTIVE SUMMARY

BACKGROUND

On May 13, 2008, the Communicable Disease Control & Prevention (CDCP) Section of the San Francisco Department of Public Health (DPH) participated in the Pandemic Influenza Spring Exercise to test 1) the ability of DPH staff to make infection control and other recommendations while facing shortages in infection control supplies and staffing, and 2) communication between the Infections Disease Emergencies Response (IDER), area hospitals and the DPH Departmental Operating Center (DOC).

In November 2007, CDCP participated in an all-day functional exercise with area hospitals that simulated the arrival of the first US case of pandemic influenza in San Francisco. Area hospitals suggested an exercise based on a scenario that occurs six weeks after the first case of

EXERCISE FOCUS AREAS

- Testing ability to communicate with area hospitals and provide infection control guidelines under a shortage situation
- Testing communication and reporting with the DPH Departmental Operations Center and state partners during an IDER activation using traditional means and the new Virtual Command Center software
- Evaluating responders' use of newly revised and shortened ICS forms

pandemic influenza arriving in San Franciso. In this scenario, there were shortages in staffing and infection control supplies such as gowns and masks, and vaccines and antivirals were unavailable for prophylaxis or treatment.

Four CDCP staff began planning for CDCP activities began approximately 2 months before the exercise date. Two CDCP staff also participated in planning the overall SFDPH exercise organized by the Office of Policy and Planning. Twenty-nine CDCP staff were mobilized as exercise participants. Room set-up, IDER activation and notification of all CDCP staff took place on the afternoon of May 12 in preparation for a 4-hour exercise on May 13.

The purpose of this report is to analyze exercise results, identify strengths to be maintained and built upon, identify potential areas for improvement, and support development of corrective actions.

MAJOR STRENGTHS

- Both IDER and DOC staff found the Virtual Command Center (VCC) electronic status board to be a very effective tool and would like to practice its use in subsequent exercises. The VCC is a secure web-based portal developed by Law Enforcement Online and currently being piloted by the San Francisco Department of Emergency Management to help maintain status updates during a citywide emergency. IDER Plans Section was in charge of periodically posting updates to the board, which was projected onto the walls in each room housing responders. Plans staff received updates from modules via the Module Objectives and Updates Form (ICS 202b) and posted information such as updated case counts, changes in situational information, changes in policies, reminders to submit update forms and major response actions. The DOC found the updates to be timely, relevant and of useful granularity.
- IDER Command staff found it very effective to designate the responsibility of communication with the DOC to the Deputy Incident Commander.
- Since the October 2007 functional exercise, the number of ICS forms that each module needs to submit on a regular basis decreased from five to three. Staff responded positively to having to fill out fewer forms and being able to log all updates onto one form over the course of one operational period. Staff also appreciated receiving most relevant information in the form of an incident action plan, rather than having to manage many pieces of paper from different sources, and reading it together at the Situation Station at the Staging Area.
- Set-up on May 12 was very efficient; a team of six (plus two rotating MIS staff) were able to complete set-up of
 each conference room in about one hour (including all furniture re-arrangement and setting up phones, lap-

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tops, printers and projectors) using the IDER Set-up Manual. Half of the staff did not have any experience with set-up prior to the exercise.

- Participating hospitals were able to identify currently existing assets that may be useful in pandemic response, and/or identify areas where they can improve their pandemic response:
 - o In an effort to take inventory, one hospital noted that most of their rooms could be turned into negative pressure rooms if needed. Follow-up includes testing each room and noting which ones meet capacity.
 - One hospital is also creating just-in-time training tools for using infection control materials (i.e. donning/doffing PPE), which it will share with DPH and other hospitals when completed.
 - One hospital noted that the exercise helped to move their emergency plan from an earthquake to allhazards focus.
 - One hospital identified a need to test their credentialing program to match skills to jobs in an emergency.

AREAS FOR IMPROVEMENT

- Even though the VCC was helpful in pushing updates to responders, many responders still did not feel that they received adequate updates about the "big picture" such as changes in situational information or what response activities other modules were doing. In addition, the Continuity of Operations staff felt very isolated from the response because they did not have access to the VCC or have update meetings with IDER staff.
- Better guidelines for the frequency and type of updates needed by the DOC need to be developed. Also, in order to avoid overwhelming IDER responders, having DOC staff prioritize their requests and questions for IDER would help responders balance carrying out response tasks and summarizing the information requested by the DOC.
- Communicable Disease Information Branch staff found it difficult to quickly determine what information or guidelines already existed around the topic. Thus, when faced with the shortage scenario and questions from hospitals, it was difficult to give an answer in the time allotted.
- Many IDER responders are still unclear about the level of approval needed for documents and resource requests.
- Having a press conference as part of the exercise scenario but not having activated the Public Information
 Officer position at the DOC caused some confusion about the division of responsibilities in producing public
 documents. It would be helpful to activate this position if any mock media contact is expected to arise out of
 the scenario.

Overall, the IDER exercise was successful in testing IDER's communication with external parties and the usability of IDER protocols and forms that have been revised based on last year's exercise. While improvements need to be made, it showed that the current plan and tools are, for the most part, adequate to facilitate a response. In the future, it would be useful to test activating IDER over multiple days and/or shifts and doing so with less pre-exercise briefing for staff.

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