

Pandemic Preparedness Plan Exercise Program

Module 1: Preparing for an emergency

Introduction

The purpose of this tabletop exercise is to test through a facilitated discussion the awareness and operability of plans and procedures related to the planned response to pandemic influenza with the involvement of the agencies involved in that response.

These tabletop exercise materials are part of a series based on the WHO checklist for influenza pandemic preparedness planning¹. The materials in this module are designed to test elements of preparedness outlined in section 1 of the Checklist- Preparing for an emergency.

These materials include a definition of the scope of the exercise, objectives the scenarios to be acted upon, questions for the controller/facilitator to pose and a general description of the actions expected as a result of those questions. The players in the exercise should only be given the scenario on the day of the exercise.

A tabletop exercise, while simulating an emergency situation, is a discussion guided by the exercise controller. There are no "real" actions carried out during the exercise. Players explain and discuss among the group how they would react to the scenario, but do not actually execute those actions.

There are no right or wrong responses during the exercise. There are no consequences for exploring alternative solutions as part of the discussion. The success of a tabletop exercise is determined by the full and honest participation of the players and the impact the lessons learnt during the exercise have on the revision and enhancement of plans, policies and procedures.

It is not unusual during the course of a tabletop exercise discussion to learn that important policies or procedures are not clearly defined, not familiar to all those involved, or simply less efficient than a procedure used by a different group. Events such as this should not be seen as a failure of any particular agency or group, but an opportunity for all involved to learn from the strengths of others.

The virus in the exercise is (A) HxNy.

Scope

As it is impossible to test all elements of any plan under all circumstances in a single exercise, the scope of these exercise materials is to facilitate an exercise based on the following:

Type of emergency: Anticipation of an influenza pandemic

Location: Within the exercising Member State's borders.

Functions: Governmental (and if included in the plan, civil society and industry) commitment across relevant entities to preparation for an influenza pandemic.

Participants: Focal points or decision makers from all entities involved in the pandemic plan.

Exercise Type: Tabletop exercise

¹ http://www.who.int/csr/resources/publications/influenza/WHO_CDS_CSR_GIP_2005_4/en/

Objectives

The main objectives of this exercise are:

1. To ensure there is a defined focal point and alternate for each entity involved in the plan.
2. To determine if Standard Operating Procedures are in place for essential functions which may include but are not limited to-
 - a. alert and outbreak verification
 - b. establishing an emergency team
 - c. information flow
 - d. political decision making
 - e. achieving medical/scientific consensus
 - f. risk communication to the public and targeted risk groups
 - g. human resources management
3. To determine if mechanisms exist for the reliable and rapid communication between focal points in the plan, that critical contact information is known and tested/verified regularly.
4. To assess gaps in inter-ministerial and inter-agency coordination in the national plan.
5. To examine existing legal and ethical means for implementation of public health measures indicated in the plan which may include but are not limited to-
 - a. travel or movement restrictions, including the possibility of quarantine of patients and contacts
 - b. closure of educational institutions and public places
 - c. prohibition of mass gatherings

Scenario A

The WHO pandemic alert phase is 4. There is increasing evidence that influenza (A) HxNy which has been infecting both wild and domestic poultry is becoming more transmissible among humans. Reports of an outbreak of unusually severe respiratory illness is reported in a small town. At least 50 cases have been recorded with 12 patients requiring hospitalization and 4 deaths to date over a period of 2 months. Surveillance in surrounding areas is increased as new cases begin to be identified throughout the area. Specimens collected from the initial patients test positive for type A influenza virus. Samples are sent to a WHO collaborating laboratory, for further culture and sub-typing, where it is determined that the isolates are subtype (A) HxNy. Substantial mutations were identified in these specimens in comparison to the strains which were previously isolated from infected animals and humans.

The Ministry of Health requests assistance from WHO. WHO activates the GOARN network and, in collaboration with OIE and FAO, dispatches a team of epidemiologists, virologists and clinicians to evaluate the situation. The WHO team reports evidences suggesting that human-to-human transmission of this mutated influenza (A) HxNy is now more efficient.

Patients suspected of infection with the virus begin to be reported from urbanized areas and the outbreak becomes major news worldwide. Several countries in other WHO regions are considering imposing restrictions on travel to infected areas and are discussing implementing screening of passengers and isolation of travellers from your country as well as limiting imports of all food products.

WHO raises the pandemic alert phase to 5.

Scenario B

The WHO pandemic alert phase is 5. Outbreaks of (A) HxNy influenza have now also been reported in neighbouring countries. The worried well are backing up your health care system and the population is very concerned.

Several clusters of cases are reported in your country, with high hospitalization rates. Hospital staff are threatening to strike due to concerns about inadequate protection. People suffering other acute or chronic diseases are worried about visiting hospital for fear of contact with the sick. There are rumours that people coming from a neighbouring country are the source of the infection and there is significant discrimination against them.

Many people are turning to alternative and traditional medicines in an effort to protect themselves. There are rumours that many ill are not reporting their illness for fear of the economic consequences of quarantine for their family.

The outbreaks in your region worsen and WHO convenes its expert panel, which recommends raising the Pandemic phase to 6.

For facilitators and evaluators

The following questions can be used to guide the discussions. Questions are grouped by objective, with a guide to the expected result is given to assist evaluators in assessing the response. The questions asked to the players should be selected and customized when necessary to reflect the specifics of the plan being tested.

To ensure there is a defined focal point and alternate for each entity involved in the plan.

- Who is the decision maker/decision making entity for activation of the plan?
There should be a clear decision making structure for activating elements of the plan.
- The decision maker is out of the country and cannot be reached, what is the process to activate the plan now?
The decision making process should include possibilities for the delegation of authority or backup communication and contact processes.

To determine if Standard Operating Procedures are in place for essential functions which may include but are not limited to-

alert and outbreak verification
establishing an emergency team
information flow
political decision making
achieving medical/scientific consensus
risk communication to the public and targeted risk groups
human resources management

- Is there an emergency management team? Who is on it? Who convenes it?
Criteria should exist for establishing an emergency management team, the activation and dissolution of that team if called for in the plan.
- A new employee is assigned to work in the press office during a pandemic. How will they know what to do?
Standard operational procedures should be in place for all essential functions, including information flows and dissemination of information to the public.
- What kind of technical specialists are available to assist in creating messages for the public?
The government should have a good relationship with technical specialists who can be called upon to assist in drafting messages.
- Who is responsible for collecting information about the response during each phase of the pandemic?
A group should be appointed (preferably an existing group) for the collection and dissemination of data related to the pandemic. Potential members include participants from the ministry of health, agriculture and emergency services. At least one member of this group should be part of the pandemic planning community.

- How is information shared with WHO? Other national authorities?
Mechanisms for sharing information should exist. Ideally these should be mechanisms already in use. The International Health Regulations focal point for the country should be designated and communicated to WHO.
- Retired doctors and nurses are asking what they can do to help. Does the plan have provisions for licensing these workers?
Legal provisions should be in place for absorbing health care workers, emergency services workers, and others who may be working outside their normal area of training or expertise.

To determine if mechanisms exist for the reliable and rapid communication between focal points in the plan, that critical contact information is known and tested/verified regularly.

- What means of communication are used among key individuals in the plan?
There should be prioritized designated means of communication (telephone, mobile phone, pager, radio, etc), with a backup plan. This should include provisions for off hours, holiday and travel periods. The designated methods of communication should be regularly tested to ensure that the correct contact information is known and that the means of communication are functional.

To assess gaps in inter-ministerial and inter-agency cooperation in the national plan.

- Who is responsible for activating the plan and determining the level of activation?
There should be a designated official who is responsible for activating the plan and determining the level of response.
- What agencies, civil society organizations or private sector groups are involved in the pandemic response?
The plan should be multi-sectoral, not only the health authorities, but non-governmental organizations, the military and other security authorities, the business community and other groups may be involved.
- How is information communicated between local, regional and national authorities?
A clearly defined process for the up and downstream flow of information should be outlined. Ideally this process would already exist.

To examine existing legal and ethical means for implementation of public health measures indicated in the plan which may include but are not limited to-

travel or movement restrictions, including the possibility of quarantine of patients and contacts
closure of educational institutions and public places
prohibition of mass gatherings

- Will patients be quarantined? What about their contacts?
A legal, medically justified and ethical basis for any quarantine measures must be in place. Consideration must be taken to provide provisions for those in quarantine. The capacity of the country to provide adequate food, water and medical care for those in quarantine should be examined against the measures called for in the plan. Consideration should be taken on measures to relieve the burden of lost income due to quarantine as well.

What kind of stress is a potential pandemic going to put on hospitals? What about mortuary services?

An assessment of the impact should be made. If no modeling has been done within the country, have reports from other countries been examined?

- Will a state of emergency be declared? By whom? Under what conditions? What are the advantages and disadvantages?

Legal issues such as personal rights should be taken into account when declaring a state of emergency. In addition, there should be a clear indication of under what circumstances a state of emergency will be declared, for what duration and under what conditions it will end. Who is in charge of the response during this stage should be clear.

Will restrictions be placed on the movement of people?

A defined framework, both legal and ethical should be in place for when and how to place restrictions on movement.

- Will schools continue to operate?
The economic impact and effectiveness of closures should be examined within the context of the country resources and social structure.