

VHA Comprehensive Emergency Management Program

Capability Assessor’s Guide

**Results from VAMCs Evaluations**

Department of Veterans Affairs

Veterans Health Administration

Office of Public Health and Environmental Hazards, Emergency Management Strategic Health Care Group



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**VHA Emergency Management Capability Assessment Process Overview for VA Medical Centers**

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# Executive Summary

According to the United States Federal Emergency Management Agency (FEMA), during Hurricane Katrina, the agency provided a substantiated support network to Hurricane Katrina victims, emergency responders, and states. However, where it excelled in support, it lacked in response capabilities. Specifically in the areas of:

* Command and Management
* Communication
* Resource Management
* Mobilization

These deficiencies confirmed the need to enhance FEMA’s disaster response capability and all-hazards preparedness.

Two predictors of a well defined Emergency Management Program (EMP) are the integration of all-hazards preparedness and the facility’s response and recovery capability. These factors are what have distinguished the Veterans Health Administration (VHA) as a leader in emergency management.

Through the ongoing effort to further assess and enhance the VHA’s EMP with emphasis on all-hazards preparedness, the VHA initiated a project to help answer the question, “Are we ready?”. This project was developed under the guidance of the VHA’s Emergency Management Strategic Healthcare Group (EMSHG) and Booz Allen Hamilton (Booz Allen), composed of members with deep knowledge in Department of Veterans Affairs (VA) operations, emergency management and clinical healthcare expertise. Specifically, there are two primary objectives to this study.

1. **Formative guidance:** To further enhance and improve EMPs, the assessment teams, comprised of clinical, engineering, emergency management, and healthcare operations experts, shared lessons learned and promising practices from other VHA facilities as well as from the private sector.
2. **Determine baseline status of preparedness:** To determine the areas in which the VHA should focus attention, the assessment teams gathered information on local, regional and system-wide issues and opportunities for improvement. These identified issues should be elevated to national attention, through the EMSHG and the Emergency Management Coordination Group (EMCG).

Site visits conducted by the VHA assessment team will examine six main elements of emergency management. Figure 1 provides a depiction of these elements.

**Figure 1. Emergency Management Elements**

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**Incident Management**

**Medical Surge**

**Occupant Safety**

**Program Level**

**Continuity & Resiliency**

**Community Collaboration**

The VHA assessment team, through collaboration with multiple steering committees and expert panels, have identified 69 emergency management capabilities that meet or exceed The Joint Commission (TJC), National Fire Protection Association (NFPA) 1600, and Federal Emergency Management standards. These capabilities will aid in assessing the six main emergency management elements.

The VHA assessment team will conduct many activities designed to allow an overall assessment of each of the 69 capabilities. These activities will include individual and group interviews, facilitated discussions, Table Top exercises, and capability demonstrations. The team will interview key personnel in the facility and will interact extensively with the Emergency Program Coordinator (EPC) and the Emergency Management Committee (EMC).

At the conclusion of each site visit, the VHA assessment team will provide a brief closing conference, followed by a written report within 30 days that will provide insight into the facilities’ exemplary practices, its opportunities for improvement, and any recommendations the assessment team has for program improvement.

Aggregate results will be presented quarterly to the EMSHG for the purpose of highlighting systemic regional and national issues and opportunities for improvement

# Introduction

The VA is currently engaging in continuous quality improvement for emergency preparedness after having embraced the need to establish a more systematic strategy for proactively identifying system weaknesses. Such a strategy will not only allow the VA to consistently meet TJC, NFPA 1600, and FEMA standards, but also will position the VA as a leader in emergency preparedness for every community with a VA presence. In this way, the VA will be better able to ensure the safety of its employees and better serve Veterans and the communities in which they live.

# Project Background

The VHA EMSHG has requested that Booz Allen conduct extensive hospital program reviews as part of this continuous quality improvement process for emergency preparedness. This review will encompass up to 150 site visits over three years. The assessment team will consist of three team members, two analysts from Booz Allen and one from the VA system. The site visits will focus on assessing each facility’s overall emergency management capabilities, particularly those related to event response and recovery. For this review process, the assessment team developed a framework to define each capability. This framework includes the following components:

* **Resources** (including supplies, facilities, and equipment) assigned to maintain or enable that capability
* **Personnel** designated to manage or staff that area
* **Education/Training** provided to staff regarding that capability
* **Exercise** activities used to promote evaluation of that capability
* **Evaluation** of the exercise results
* **Organizational Learning** and process improvement that takes place as a result of the exercise and resulting evaluation.

# Purpose

This guide presents a consistent study methodology, provides a means for uniformly analyzing data, and offers a template for assessment team members conducting EMP site at select VA Medical Centers (VAMCs). It also offers a standardized approach to limit the evaluation variability that would naturally enter the review process given the number of facilities and evaluators who will be involved in the site review process.

# Site Visit Activities

Each VAMC site visit is envisioned to last 2½ to 3 days, and Veterans Integrated Service Network (VISN) visits will last approximately 1½ days. Figure 2 provides a high-level overview of site visit activities.

**Figure 2. Site visit activities**

**Closing Conference**

**Capability Observations**

**Tours of Specialty Areas & Tabletop Exercises**

**Opening Conference**

**Individual & Group Interviews**

**Appendix A** contains the comprehensive list of capabilities, a subset of which constitute the potential assessment elements of each site visit. The assessment team will customize the list of capabilities for assessment elements based on the result of the facility’s Hazards Vulnerability Analysis (HVA), its size, and mission

**Appendix B** contains the Pre-survey questionnaire, sent out to the VAMC prior to site visit assessment.

**Appendix C** contains the VAMC site visit agenda that the VHA Assessment Team will follow while on-site. This agenda may be modified to account for the VAMCs changing schedule (e.g., staff availability, capability demonstrations).

**Appendix D** contains the specific questions the assessment team will ask of each individual or the specific attributes to be observed during a facility tour or capability observation.

**Appendix E** contains the Capability Scoring Tool developed to assist the VHA Assessment Team in documenting the capability elements.

**Appendix F** contains the Opening Conference PowerPoint presentation.

**Appendix G** contains the Closing Conference PowerPoint presentation.

**Appendix H** contains a VAMC Site Visit Final Report Template.

**Appendix I** contains TJC Scoring Tool.

**Appendix J** contains the National Management System (NIMS) Scoring Tool.

The following sections describe each site visit activity and the capabilities the assessment team will evaluate during those activities.

## Opening Conference

The site survey will begin by assembling all key VAMC personnel who are stakeholders in the delivery of emergency management capabilities at the healthcare facility. At this opening conference, the assessment team will introduce itself; present the project’s goals, deliverables, and outcomes; and describe the projected agenda for the site visit.

VAMC personnel will then introduce themselves and describe the functional areas that they oversee. At the end of this conference, specific times and locations for individual interviews will be established and confirmed, as will the times and locations of the other EMP-wide assessment activities.

The assessment team will evaluate the following during the opening conference:

* Management commitment
* Level of understanding of the EMP
* Level of engagement

## Individual and Group Interviews

Assessment team members will conduct interviews with those VAMC personnel who contribute to the overall establishment and conduct of the EMP. The site survey team will attempt to allot the interview responsibilities based on the assessment team’s composition and expertise and will try to best match the team member by subject matter expertise to the individual being interviewed. The following sections describe the VAMC individuals and groups the assessment team will interview.

### Associate Director (AD)

The assessment team will evaluate the following capabilities through interviews with the AD:

* Administrative Activities that ensure the EMP meets its Mission and Objectives
* Processes and Procedures for Evacuation of Patients’, Staff, and Visitors’
* Maintaining Authorized Leadership (Leadership Succession)
* Maintaining Access to Critical Commodities and Services during Response and Recovery Operations

### Chief of Staff

The assessment team will evaluate the following capabilities through interviews with the Chief of Staff:

* Support under the National Response Framework (NRF)
* Processes and Procedures for Expansion of Staff for Response and Recovery Operations
* Designated Capability for Expanded Patient Triage, Evaluation, and Treatment during Surge
* Maintaining Laboratory, Blood Bank, and Diagnostic Imaging Surge Capability
* Processes and Procedures for Control and Coordination of Mass Fatality Management

### Nurse Executive, Associate Chief Nurse for Emergency Care, Emergency Department Nurse Manager, Designated Learning Officer, Mental Health Clinician

The assessment team will evaluate the following capabilities through interviews:

* Management of Care for Home-Based Primary Care Patients’ during Incidents
* Specialty Outpatient Services (e.g., Dialysis, Persons with Spinal Cord Injury Dependent [SCI/D] on Community/Outside Assistance in their Home, Oxygen Therapy Patients, and Dementia or Other Cognitive Impairment
* Internal and External (to the VA) Alternate Care Sites
* Processes and Procedures for Expansion of Staff for Response and Recovery Operations
* Situational Assessment of Response and Coordination Efforts for Initial Incident Management and Emergency Operations Center (EOC) Activation
* Maintaining Patient Mental Health and Welfare

### Chief of Medicine

The assessment team will evaluate the following capabilities through interviews with the Chief of Medicine:

* Provision of Ambulatory Clinical Services during Incidents
* Development, Implementation, Management, and Maintenance of the VA All-Hazards Emergency Cache
* Designated Capability for Expanded Patient Triage, Evaluation, and Treatment during Surge
* Maintaining Laboratory, Blood Bank, and Diagnostic Imaging Surge Capability

### Emergency Department (ED) Director

The assessment team will evaluate the following capabilities through interviews with the ED Director (conducted during facility tour):

* Designated Capability for Expanded Patient Triage, Evaluation, and Treatment during Surge
* Response/Interface with Community Healthcare Organizations
* Integration of Patient Reception, Surge, and Decontamination Teams

### Emergency Management Committee

The assessment team will evaluate the following capabilities through interviews with the EMC:

* VHA Emergency Management Guidebook 9-step Process
* Systems-Based Approach to the Development, Implementation, Management, and Maintenance, of the EMP
* Development, Implementation, Management, and Maintenance of an EMC process to Support the EMP

### Emergency Program Coordinator

The assessment team will evaluate the following capabilities through interviews with the EM:

* Processes and Procedures for Incident Recognition, Activation of EOP/EOC, and Initial Notification
* Processes and Procedures for Sheltering-in-Place
* Situational Assessment of Response and Coordination Efforts for Initial Incident Management and EOC Activation
* Development, Implementation, Management, and Maintenance of Community Based Outpatient Clinic (CBOC) EOP

### Safety Manager

The assessment team will evaluate the following capabilities through interviews with the Safety Manager:

* Processes and Procedures for Sheltering-in-Place
* Processes and Procedures for Managing a Hazardous Substance Incident
* Selection and Use of Personal Protective Equipment (PPE) for Response and Recovery Operations
* Transporting Critical Staff to the Facility during an Emergency
* Processes and Procedures for Evacuation of Patients’, Staff, and Visitors’
* Integration of Patient Reception, Surge and Decontamination Teams

### Chief Information Officer (CIO)

The assessment team will evaluate the following capabilities through interviews with the CIO:

* Maintaining Information Technology (IT) and Computing Systems Resiliency
* Maintenance of Voice and Data Communication through Satellite Link
* Interoperable Communications with VAMC Facilities’
* Maintaining Satellite Telephone Resiliency
* Interoperable Communications with External Agencies’

### Deployment Support Coordinator

The assessment team will evaluate the following capabilities through interviews with the Disaster Emergency Medical Personnel System (DEMPS) Coordinator:

* Management of Volunteers Deployment Support (e.g., DEMPS) during Response and Recovery Operations

### Chief Engineer

The assessment team will evaluate the following capabilities through interviews with the Chief Engineer:

* Development, Implementation, Management, and Maintenance of an Electrical Power Supply
* Management and Maintenance of Fixed and Portable Electrical Generator Resiliency
* Maintaining Fuel, Fuel Storage, and Fuel Pumps for Generators, Heating, and Vehicles Resiliency
* Development, Implementation, Management, and Maintenance of an Emergency Potable Water Plan
* Maintaining Sewage and Waste Resiliency
* Maintaining Medical Gases and Vacuum Resiliency
* Maintaining Heating Ventilation and Air Conditioning (HVAC) Resiliency
* Biohazard (Infection) Control Surge Services during Emergencies
* Development, Implementation, Management, and Maintenance of an Emergency Water Conservation Plan

### Chief of Police

The assessment team will evaluate the following capabilities through interviews with the Chief of Police:

* Perimeter Management of Access/Egress to Facility during an Incident (e.g., Lock Down)
* Biohazard (Infection) Control Surge Services during Emergencies
* Interoperable Communications with External Agencies’

### Chief of Pharmacy

The assessment team will evaluate the following capabilities through interviews with the Chief of Pharmacy (conducted during facility tour):

* Processes and Procedures for Staff and Family Mass Prophylaxis during an Infectious Outbreak (i.e., Influenza)
* Development, Implementation, Management, and Maintenance of the VA All-Hazards Emergency Cache
* Specialty Outpatient Services (e.g., Dialysis, persons with SCI/D on community/outside assistance in their home, Oxygen Therapy Patients, and Dementia or Other Cognitive Impairment

### Chief of Food Services, Chief of Dietary

The assessment team will evaluate the following capabilities through interviews with the Chief of Food Services and Chief of Dietary:

* Processes and Procedures for Personal Preparedness and Employee Welfare
* Maintaining Patient Mental Health and Welfare

### Chief of Acquisition and Materials Management

The assessment team will evaluate the following capabilities through interviews with the Chief of Acquisitions and Materials Management:

* Management and Acquisition of Resources for Incident Response and Recovery Operations
* Maintaining Access to Critical Commodities and Services during Response and Recovery Operations

### Chief of Infectious Diseases

The assessment team will evaluate the following capabilities through interviews with the Chief of Infectious Diseases:

* Response/Interface with Community Emergency Management Authorities and State and Local Public Health
* Biohazard (Infection) Control Surge Services during Emergencies

### Chief of Human Resources (HR)

The assessment team will evaluate the following capabilities through interviews with the Chief of HR:

* Processes and Procedures for Personal Preparedness and Employee Welfare
* Management of Extended Incident Operations

### Public Affairs Officer (PAO)

The assessment team will evaluate the following capabilities through interviews with the PAO:

* Public Information Management Services during an Incident

### Employee Representative(s)

The assessment team will evaluate the following capabilities through interviews with the Union President: Safety Representative:

* Processes and Procedures for Personal Preparedness and Employee Welfare

### National Disaster Medical System (NDMS) Coordinator

The assessment team will evaluate the following capabilities through interviews with the NDMS Coordinator:

* Provision of Supplemental Health Services to Support the NDMS

## Focused Facility Tours

The assessment team will tour selected areas of each medical center as part of its site visit. These areas will reflect significant locations and assets critical to an effective disaster response. Examples include the ED, VA All-Hazards Emergency Cache storage areas, and the EOC. The following sections present the capabilities of identified areas that the assessment team will evaluate during each portion of the facility tour. **Appendix B** includes the list of potential questions the assessment team can ask during that portion of the tour.

### Emergency Department

During the tour of the ED, the assessment team will interview the ED Director and inquire about the following capabilities:

* Processes and Procedures for Incident Recognition, Activation of EOP/EOC, and Initial Notification
* Perimeter Management of Access/Egress to Facility during an Incident (e.g., Lock Down)
* Designated Capability for Expanded Patient Triage, Evaluation, and Treatment during Surge
* Designation and Operation of Isolation Rooms
* Integration of Patient Reception, Surge, and Decontamination Teams

### VA All-Hazards Emergency Caches

The assessment team will interview the Chief of Pharmacy and tour the areas that store materials relative to the following capabilities:

* Processes and Procedures for Staff and Family Mass Prophylaxis during an Infectious Outbreak (i.e., Influenza)
* Maintaining Emergency Potable Water System Resiliency
* Development, Implementation, Management, and Maintenance of the VA All-Hazards Emergency Cache

### Hospital Emergency Operations Center (Hospital Command Center)

During the tour of the EOC, the assessment team will gather information relative to the following capabilities:

* Mobilization of Critical Staff and Equipment for Incident Response
* Situational Assessment of Response and Coordination Efforts for   
  Initial Incident Management and EOC Activation
* Response/Interface with State and Community Emergency Management Authorities, and State and Local Public Health
* Interoperable Communications with External Agencies’
* Support under the NRF
* Response/Interface with Community Healthcare Organizations
* Management of Extended Incident Operations
* Management and Acquisition of Resources for Incident Response and Recovery Operations
* Processes and Procedures for Demobilization of Personnel and Equipment
* Processes and Procedures for a Return to Readiness of Staff and Equipment
* Fire Protection and Rescue Services for Response to Incidents
* Maintenance of Voice and Data Communication through Satellite Link
* Interoperable Communications with VAMC Facilities’
* Provision of Supplemental Health Services to Support the NDMS
* VA/Department Of Defense (DOD) Contingency Hospital System

### Physician Manpower Pool Staffing Area

During the tour of the physician manpower pool staffing area, the assessment team will gather information relative to the following capabilities:

* Management of Extended Incident Operations
* Transporting Critical Staff to the Facility during an Emergency
* Management of Volunteers Deployment Support (e.g., DEMPS) during Response and Recovery Operations
* Integration of Patient Reception, Surge and Decontamination Teams

### General Manpower Pool Staffing Area

During the tour of the general manpower pool staffing area, the assessment team will gather information relative to the following capabilities:

* Management of Extended Incident Operations
* Transporting Critical Staff to the Facility during an Emergency
* Management of External Volunteers and Donations during Emergencies
* Management of Volunteers Deployment Support (e.g., DEMPS) during Response and Recovery Operations
* Integration of Patient Reception, Surge and Decontamination Teams

### Media Relations/Public Affairs Coordinating Area

During the tour of the media relations coordinating area, the assessment team will gather information relative to the media relations plan and processes.

### Other Areas as Appropriate

In addition to the above areas, other areas that may be toured include the following:

* Shelters for family of critical staff
* Medical gases storage areas
* Internal alternate care sites
* Isolation rooms
* Patient reception area, including NDMS support

## Document Reviews

During, and prior to, the site visit, the assessment team will review various documents, include the following:

* HVAs
* Emergency Operation Plans (EOPs)
* EMC documentation
* Exercise After Action Reviews (AARs)
* Memoranda of Understanding (MOUs) with key vendors
* Signed Memoranda of Agreement (MOAs) for NDMS.

The specific capabilities that each document will help the assessment team evaluate are presented in subsequent sections.

### Hazard Vulnerability Assessments

HVAs are a foundational element of every facility’s EOP. In reviewing HVAs, preferably prior to the site visit, the assessment team will evaluate the following capabilities:

* Development, Implementation, Management, and Maintenance of a HVA process as the Foundation for Conducting the EMP
* Incorporation of Comprehensive Mitigation Planning in the Facility's EMP
* Incorporation of Comprehensive Preparedness Planning in the Facility's EMP
* Incorporation of Continuity Planning into the Activities of the Facility's EMP to ensure Organizational Continuity and Resiliency of Mission Critical Functions, Processes, and Systems
* Demonstration of Systems-Based Evaluation of the Facility's overall EMP and its EOP

### Emergency Operations Plan

Prior to the response phase of a disaster, the facility should have well-documented processes for implementing each critical capability. The EOP should document these processes and capabilities.

### Emergency Management Committee Documentation

Once on-site, the assessment team will review all EMC-generated documentation, including meeting agendas and minutes. The specific capabilities to be assessed from this documentation include the following:

* Systems-Based Approach to the Development, Implementation, Management, and Maintenance of the EMP
* Administrative Activities ensure the EMP meets its Mission and Objectives
* Development, Implementation, Management, and Maintenance of an EMC process to Support the EMP
* Development, Implementation, Management, and Maintenance of an HVA process as the Foundation for Conducting the EMP
* Incorporation of Comprehensive Mitigation Planning into the Facility's EMP
* Incorporation of Comprehensive Preparedness Planning in the Facility's EMP
* Incorporation of Continuity Planning into the Activities of the Facility's EMP to ensure Organizational Continuity and Resiliency of Mission Critical Functions, Processes, and Systems
* Demonstration of Systems-Based Evaluation of the Facility's Overall EMP and its EOP
* Incorporation of Accepted Improvement Recommendations into the EMP and its Components such that the process becomes one of a Learning Organization

### Exercise After Action Reports

After reviewing the AARs, the assessment team will be able to determine the role exercises play in the facility’s overall planning efforts, the significance of lessons learned in the planning process, and how the facility has made improvements to its EOP based on the exercises’ AARs. The team will review the AARs with the following capabilities in mind:

* Incorporation of Comprehensive Preparedness Planning in the Facility's EMP
* Incorporation of Comprehensive Instructional Activity in the Preparedness Activities of the Facility's EMP
* Incorporation of a Range of Exercise Types that Test the Facility's EMP
* Demonstration of Systems-Based Evaluation of the Facility's Overall EMP and its EOP
* Incorporation of Accepted Improvement Recommendations into the EMP and its Components such that the process becomes one of a Learning Organization

### Memoranda of Understanding/Contracts and Memoranda of Agreement with Key Vendors

Legally reviewing MOUs/MOAs with key vendors is a critical aspect of disaster response. Supplies, equipment, and personnel will be in short supply following a disaster, and having backup through external vendors is crucial. During site visits, the assessment team will be looking for MOUs/MOAs that relate to the following capabilities:

* Management and Acquisition of Resources for Incident Response and Recovery Operations
* Processes and Procedures for Demobilization of Personnel and Equipment
* Processes and Procedures for Return to Readiness of Staff and Equipment
* Fire Protection and Rescue Services for Response to Incidents
* Maintaining Fuel, Fuel storage, and Fuel pumps for Generators, Heating, and Vehicles Resiliency
* Maintaining Emergency Potable Water System Resiliency
* Maintaining Access to Critical Commodities and Services during Response and Recovery Operations
* Internal and External (to the VA) Alternate Care Sites
* Management of Care for Home-Based Primary Care Patients during Incidents
* Specialty Outpatient Services (e.g., Dialysis, Persons with SCI/D on Community/Outside Assistance in their Home, Oxygen Therapy Patients, and Dementia or Other Cognitive Impairment
* Provision of Ambulatory Clinical Services during Incidents
* Designated Capability for Expanded Patient Triage, Evaluation and Treatment during Surge
* Maintaining Laboratory, Blood Bank Surge, and Diagnostic Imaging Surge Capability
* Processes and Procedures for Personal Preparedness and Employee Welfare
* Processes and Procedures for Control and Coordination of Mass Fatality Management

### Signed MOAs for the NDMS

The assessment team will examine whether there are signed MOAs in place for the NDMS.

### Presence of Inventory of Critical Resources (Pharmaceuticals, Equipment, and Supplies)

The assessment team will review documentation to ensure that the facility has performed and documented facility-wide resource levels of pharmaceuticals, equipment and supplies. Through this review, the team evaluate the following capabilities:

* Development, Implementation, Management, and Maintenance of an EMC process to Support the EMP
* Incorporation of Continuity Planning into the Activities of the Facility's EMP to ensure Organizational Continuity and Resiliency of Mission Critical Functions, Processes, and Systems
* Situational Assessment of Response and Coordination Efforts for Initial Incident Management and EOC Activation
* Management and Acquisition of Resources for Incident Response and Recovery Operations
* Management of Extended Incident Operations
* Integration of Patient Reception, Surge and Decontamination Teams

## Tabletop Exercises

The team will select one scenario for testing, with a specific focus on the outcomes related to surge capacity planning, continuity of operations capabilities, and implementation of facility security and safety measures. This scenario should map back to the facility’s recent HVA. Examples of capabilities that will be assessed during tabletop exercises include the following:

* Mobilization of Critical Staff and Equipment for Incident Response
* Situational Assessment of Response and Coordination Efforts for Initial Incident Management and EOC Activation
* Response/Interface with State and Community Emergency Management Authorities, and State and Local Public Health
* Response/Interface with Community Healthcare Organizations
* Support under the NRF
* Management and Acquisition of Resources for Incident Response and Recovery Operations
* Processes and Procedures for Evacuation of Patients’, Staff, and Visitors’
* Perimeter Management of Access/Egress to Facility during an Incident (e.g., Lock Down)
* Fire Protection and Rescue Services for Response to Incidents
* Development, Implementation, Management, and Maintenance of an Electrical Power System
* Management, and Maintenance of Fixed and Portable Electrical Generator Resiliency
* Maintaining Fuel, Fuel Storage, and Fuel Pumps for Generators, Heating, and Vehicles Resiliency
* Maintaining HVAC Resiliency
* Maintaining IT and Computing Systems Resiliency
* Interoperable Communications with External Agencies’
* Interoperable Communications with VAMC Facilities’
* Processes and Procedures for Expansion of Staff for Response and Recovery Operations
* Processes and Procedures for Personal Preparedness and Employee Welfare
* Designated Capability for Expanded Patient Triage, Evaluation and Treatment during Surge
* Provision of Supplemental Health Services to Support the NDMS
* VA/DOD Contingency Hospital System

By practicing these exercises at medical centers, valuable lessons will be learned that could be provided to national policy makers in VA, the Department of Homeland Security (DHS), Health and Human Services (HHS), and DOD, among others. This feedback could be used to improve these national scenarios and provide experience-based feedback to develop exercises and advance this body of knowledge.

## Capability Demonstrations

In addition to touring the facility and conducting the tabletop exercises, the assessment team will requests demonstrations of several capabilities, including the following:

* **Decontamination:** Observe the facility decontamination team setting up the tent (if it is a portable system)
* **PPE:** Identify the location of PPE storage and the ability of the staff to don it
* **Staff Hotlines:** Understand how these are stood up and managed to deliver critical information to staff
* **Portable Electrical Generators:** Identify where these are located
* **Satellite Link for Back-Up Voice and Data:** Determine where the facility actually uses the satellite link to establish communication
* **Satellite Telephones**
* **Critical Infrastructure:** Demonstrate how the mission-critical systems are tested without actually performing the tests.

## Pre-Survey Distribution

The assessment team will distribute the pre-survey to the facility prior to its scheduled site visit. The results of the pre-survey will inform the team about specific capabilities they will need to focus on during the site visit. **Appendix C** contains a copy of the pre-survey.

# Out-brief and Concluding Conference

At the end of the site visit, the assessment team and the VAMC personnel will reconvene. At this concluding conference, the assessment team will deliver a preliminary capability assessment review (out-brief) in the form of closing statements. This review will cover the functional aspects of the capability assessments conducted (i.e., pre-site visit survey results, facility tour assessment, document review analysis, and tabletop scenario outcomes). The discussion will be based on the capabilities observed, any gaps that should be addressed, and identified opportunities for developing capabilities that do not yet exist. The assessment team will also offer guidance on the kinds and types of issues that should be raised and which follow-up actions should include recommendations on how to improve or develop capabilities in the future.

## Use of Data Collection Tools

To ensure an efficient, standardized process for recording observations during the site visits, members of the assessment team will be equipped with data collection tools. Figure 3 describes the overall process for managing the data resulting from the site visits.

**Figure 3. Site Visit Data Management Processes**

CEMP

Assessment

Database

Input

Throughput

Output

CEMP

Assessment

Database

Capability Scoring

Tool

Input

Throughput

Output

Final Report (including scorecards)

Outputs generated will include a final report template (as described above) and ad hoc statistical reports for VHA as requested.

Note: Facility Outbrief/site visit report will be formative in nature.

Pre-surveys will be in the form of spreadsheets provided to VISNs for distribution and completion by VAMCs. VAMCs will fill out the pre-survey and send it back to BAH for analysis and upload to the database.

TJC and NIMS scorecards will aid the assessment teams in determining TJC and NIMS compliancy for healthcare facility preparedness.

The Capability Scoring Tool is composed from the VHA CEMP Analysis Capabilities document. Site visit assessment teams will populate the Capability Scoring Tool and send it back to BAH for upload into the database.

The CEMP Assessment Database will produce a pre-populated final report template based on the findings from the pre-survey, TJC Scorecard, the NIMS Scorecard, and the Capability Scoring Tool.

This template will be forwarded to the BAH Assessment Team for completion of a VAMC/VISN Final Report.

VAMC

Pre-survey

TJC

Scorecard

NIMS

Scorecard

## Site Visit Report

We will provide guidance to the assessors on how to complete this table and how to assign a rating for each capability. We will define the ideal state and various degrees of variation for each capability. This approach will provide a structured approach to help ensure consistency across assessors. It will also define objective criteria to explain to the VAMC leadership at the out-brief.

# Acronym List

|  |  |
| --- | --- |
| **Acronym** | **Definition** |
| AAR | After Action Report |
| AD | Associate Director |
| CBOC | Community-Based Outpatient Clinic |
| CIO | Chief Information Officer |
| DEMPS | Disaster Emergency Medical Personnel System |
| DHS | Department of Homeland Security |
| DOD | Department of Defense |
| ED | Emergency Department |
| EMC | Emergency Management Committee |
| EMCG | Emergency Management Committee Group |
| EMP | Emergency Management Program |
| EMSHG | Emergency Management Strategic Healthcare Group |
| EOC | Emergency Operations Center |
| EOP | Emergency Operations Plan |
| EPC | Emergency Planning Coordinator |
| FEMA | Federal Emergency Management Agency |
| HHS | Health and Human Services |
| HR | Human Resources |
| HVA | Hazard Vulnerability Analysis |
| HVAC | Heating Ventilation and Air Conditioning |
| IT | Information Technology |
| TJC | The Joint Commission |
| MOA | Memorandum of Agreement |
| MOU | Memorandum of Understanding |
| NDMS | National Disaster Medical System |
| NFPA | National Fire Protection Association |
| NIMS | National Incident Management System |
| NRF | National Response Framework |
| PAO | Public Affairs Officer |
| PPE | Personal Protective Equipment |
| SCI/D | Spinal Cord Injury Dependent |
| VA | Veterans Affairs |
| VAMC | Veterans Affairs/Administration Facility |
| VHA | Veterans Health Administration |
| VISN | Veterans Integrated Service Network |

# Appendix A: Capability Descriptor Document



# Appendix B: Pre-Survey



# Appendix C: Site Visit Agenda



# Appendix D: Questions for Site Visit Activity



# Appendix E: Capability Scoring Tool



# Appendix F: Opening Conference PowerPoint



# Appendix G: Closing Conference PowerPoint



# Appendix H: Final Report



# Appendix I: TJC Scoring Tool



# Appendix J: The NIMS Scoring Tool

