



2025 Annual Medical and Health Exercise EMS Agency MCC /MHOAC Sector Objectives

How to use this document: The purpose of this document is to provide sample objectives and capabilities to exercise planners to select from when designing their coalition based Annual Medical and Health Exercise (AMHE).

If you do not use all the objectives, remember to remove those objectives and corresponding capabilities that do not pertain to your chosen objectives. You may also replace or add objectives that are not given as examples.

ASPR HEALTH CARE PREPAREDNESS AND RESPONSE CAPABILITIES

Capability 1: Foundation for Health Care and Medical Readiness

Goal of Capability 1: The community has a sustainable Health Care Coalition - comprised of members with strong relationships - that can identify hazards and risks and prioritize and address gaps through planning, training, exercising, and acquiring resources.

Capability 2. Health Care and Medical Response Coordination

Goal for Capability 2: Health Care and Medical Response Coordination Health care organizations, the HCC, their jurisdiction(s), and the ESF-8 lead agency plan and collaborate to share and analyze information, manage, and share resources, and coordinate strategies to deliver medical care to all populations during emergencies and planned events.

Capability 3: Continuity of Health Care Service Delivery

Goal of Capability 3: Health care organizations, with support from the HCC and the ESF-8 lead agencies, provide uninterrupted, optimal medical care to all populations in the face of damaged or disabled health care infrastructure. Health care workers are well-trained, well-educated, and well-equipped to care for patients during emergencies. Simultaneous response and recovery operations result in a return to normal or, ideally, improved operations.

Capability 4. Medical Surge

Goal for Capability 4: Health care organizations - including hospitals, emergency medical services (EMS), and out-of-hospital providers - deliver timely and efficient care to their patients even when the demand for health care services exceeds available supply. The HCC, in collaboration with the Emergency Support Function-8 (ESF-8) lead agency, coordinates information and available resources for its members to maintain conventional surge response. When an emergency overwhelms the HCC's collective resources, the HCC supports the health care delivery system's transition to contingency and crisis surge response and promotes a timely return to conventional standards of care as soon as possible.

EMS AGENCY MCC / MHOAC SECTOR OBJECTIVES

CAPABILITY 1. FOUNDATION FOR HEALTH CARE AND MEDICAL READINESS

support any requests for staff. [Logistics]

Objective 1 - Communication: Activate the Medical Coordination Center (MCC) and establish communications with all healthcare sectors/Coalition members as outlined in the Los Angeles County EMS Agency Communication Plan

Samı	ole task(s): [Remove those that you are not testing]			
	AOD initiates the appropriate level of MCC activation within one hour of incident notification. [Management]			
	Keep EMS Agency staff updated by sending out Everbridge notifications as needed including activation of the MCC [MHOAC]			
	Coordinate a huddle with MHOAC partners after the objectives meeting [MHOAC]			
	Establish and maintain communications with appropriate entities by ensuring ReddiNet is functional, and emails are monitored throughout the exercise [Operations]			
	Inform sectors to activate their surge plans [Operations]			
	Review and update the ICS 205 Communication Plan and all IT equipment is operable. [Logistics]			
	Section Coordinators ensure updates and information are given to all section staff after meetings, and at hand over to the oncoming team [All MCC sections]			
CAPABILIT	Y 2. HEALTH CARE AND MEDICAL RESPONSE COORDINATION			
-	e 2 - Situational Awareness: Obtain situation status and share with all healthcare and MHOAC partners			
Sample task(s): [Remove those that you are not testing]				
	Define Provide healthcare sectors with initial incident information and updates as appropriate [Operations – General]			
	Develop a flash report within 60 minutes of incident notification and submit it to State and MHOAC partners. [MHOAC]			
	Keep MHOAC partners updated with current situation by organizing a huddle after the objectives meeting. [MHOAC]			
	Develop a sit rep and submit to the Regional Disaster Medical and Health Specialists (RDMHS) within two hours of incident notification. [MHOAC]			
	Display appropriate information in the MCC relating to incident throughout the exercise e.g., available beds, geographical areas affected, etc. [Planning]			
Objective	3 - Coordination of Resources			
Sam	ple task(s): [Remove those that you are not testing]			
	Determine what resources are, or may be needed to support the incident [Logistics]			
	Vet resource requests for appropriateness and process per protocols [Logistics]			
	Utilize the inventory management system to assess resource availability [Logistics - DSF]			
	Fulfill and complete resource requests per established processes [Logistics - DSF]			
	Ensure the Disaster HealthCare Volunteers (DHV) – Surge Unit system is operational to			

		Coordinate transportation and patient destination as requested; activate the Fire Operational Area Coordinator (FOAC) if necessary [Operations – Transportation & General]
		Assist facilities with transportation needs if unable to procure [Operations]
		Assume evacuation coordination if facility requests support from the MHOAC (Ref 1112, Policy I, b.v.) [Operations]
		Request resources via SEMS if unavailable to procure within the Operational Area [RDMHS] [Management]
		Procure resources through established ordering systems as needed. [Finance]
CAPABIL	ITY	3. CONTINUITY OF HEALTH CARE SERVICES DELIVERY
Objecti	ve 4	4 – Incident Management: Respond to a surge by following the SEMS/ICS
San	nple	e task(s): [Remove those that you are not testing]
		Track MCC staff hours and applicable costs by the end of the exercise. [Finance]
		Ensure all MCC staff sign in and out throughout the exercise. [Finance]
		Ensure all responding staff complete and submit a 214 Activity Log at the end of the exercise. [Finance]
		Section Coordinators to review staff 214s for completeness prior to submitting to the Documentation Unit Leader in Planning [All MCC sections]
		Develop a Coordinated Action Plan (CAP) to support the incident utilizing SMART objectives [Planning]
		Support any requests for additional staff to support the MCC equitably [Planning]
		Set up a hard copy system and create an electronic file to ensure all documents utilized during the exercise are collected [Planning]
		Ensure command meetings follow the set agendas [Management] [Planning]
		Ensure SEMS/ICS concepts are followed throughout the incident [Management]
		Support staff who need mental health assistance [Management]
		Ensure staff safety by completing a safety walkaround, developing a safety message/plan ICS 208 and completing the safety checklist. [Management]
CAPABIL	JTY	4. MEDICAL SURGE
Objecti	ve 5	5 – Medical Surge: Evaluate the MCC's ability to support a surge in patients
San	nple	e task(s): (Remove those that you are not testing]
		Send out a service level poll to all sectors within 60 minutes of incident notification [Operations – General & MAC]
		Determine which hospitals need immediate evacuation support versus delayed in coordination with the hospital's incident command [Operations – Hospital Unit Leader]
		Remind facilities to track all patient movement throughout the exercise [Operations - General]

Contact non-hospital sectors to determine how they can support the surge and coordinate cross-sector communications within two hours of the MCC being activated [Operations – General]
Evaluate major principles in the Hospital Relocation/Evacuation Ref. No. 1112 [Management]