

2025 Annual Medical and Health Exercise

Hospital 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.

HOSPITAL SECTOR OBJECTIVES

CAPABILITY 1. FOUNDATION FOR HEALTH CARE AND MEDICAL READINESS

Objective 1 - MHOAC Communications and Resource Requesting.

Sample task(s): *[Remove those that you are not testing]*

- ☐ Establish access to communication systems (e.g., ReddiNet, VMed-28, etc.)
- ☐ Respond to pertinent polls, surveys, and/or emails received from MHOAC.
- ☐ Identify needs and submit appropriate Resource Request(s).

CAPABILITY 2. HEALTH CARE AND MEDICAL RESPONSE COORDINATION

Objective 2 - Maintain situational awareness by gathering and sharing real-time emergency information through coordination with the Medical and Health Operational Area Coordinator (MHOAC).

Sample task(s): *[Remove those that you are not testing]*

- ☐ Define and document procedures for how information will be shared during the response to the incident (i.e. frequency of information sharing).

Objective 3 - Notify the Hospital Incident Management Team (HIMT) or Hospital Command Center (HCC) personnel of the incident within *[insert timeframe]* minutes.

Sample task(s): *[Remove those that you are not testing]*

- ☐ Identify the triggers that activate alerts to the appropriate departments and personnel within the hospital.
- ☐ Identify communication processes (redundancies) & utilize Emergency Communication Systems for staff notification/recall (e.g. Everbridge, Dept. Emergency Call Trees, Cell phones, Rave Mobile, Voalte, KPARN, handheld radios, runners, etc.)

Objective 4 - Activate the Hospital Command Center within *[insert timeframe]* minutes of notification.

Sample task(s): *[Remove those that you are not testing]*

- ☐ Incident commanders establish command structure
- ☐ Activate incident management team with subject matter expertise based on scenario (e.g., medical technical specialist)
- ☐ Evaluate strategies for operating without electronic health records (EHRs) and identify any issues related to information sharing between systems.
- ☐ Coordinate health care information that could be shared with the public (information should be accurate, consistent, and appropriate).

Objective 5 - Develop an Incident Action Plan (IAP).

Sample task(s): *[Remove those that you are not testing]*

- ☐ Identify and review applicable plans, policies, and/or procedures (e.g., Surge, Earthquake, Evacuation, Communication, Shelter-in-Place, Fatality Management Plans, etc.)

- ☐ Assess facility status and provide a status report.
- ☐ Establish incident objectives and determine the tactics and resources needed to achieve them.

CAPABILITY 3. CONTINUITY OF HEALTH CARE SERVICES DELIVERY

Objective 6 - Continuity of Essential Functions

Sample task(s): *[Remove those that you are not testing]*

- ☐ Identify and communicate essential departments and critical services/functions that must remain operational to ensure safe and continuous patient care.
- ☐ Identify and communicate non-essential departments and services/functions that can be temporarily suspended or delayed. Discuss options such as reassigning staff to support priority operations (e.g., supplementing the labor pool or taking on alternate duties).
- ☐ Evaluate supply chain integrity and availability to ensure the ongoing delivery of patient care services.

CAPABILITY 4. MEDICAL SURGE

Objective 7 -Assess the hospital's ability to activate patient surge response plan(s) during a large-scale or multicausality incident.

Sample task(s): *[Remove those that you are not testing]*

- ☐ Implement plans to receive an influx of patients (e.g. Patient Surge Plan, Code Triage, etc.)
- ☐ Implement strategies to expand operational capacity and accommodate increased demand.
- ☐ Initiate the use of alternate care spaces to meet patient care needs (non-traditional settings and modalities for healthcare delivery).
- ☐ Assess resource requirements (e.g. people, equipment, supplies, space, systems).