



Webcast Agenda: Tuesday, December 9, 2014

Welcome and DHS Update

Karen McKeown, RN, MSN

State Health Officer & Administrator, Division of Public Health (DPH)

Ebola TTX Exercises and Related Materials

Brian Kaczmarek

Training and Exercise Coordinator

Office of Preparedness and Emergency Health Care , DPH

Overview of WI DHS EMS Guidance

Jennifer Ullsvik, MS, JD

Director, Office of Preparedness and Emergency Health Care, DPH

Question and Answer Session

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State Health Officer & Administrator, Division of Public Health

Closing Remarks

Karen McKeown, RN, MSN

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Ebola TTX Exercises and Related Materials





Purpose

To provide participants an opportunity to evaluate current response concepts, plans and capabilities in response to a possible outbreak of a viral disease with high mortality.





Objectives

Critical Transport: Discuss how critical transportation would occur in region/jurisdiction in the event of an Ebola case.

1. Determine criteria and process for transport to local hospital
2. Determine criteria for inter-hospital transport
3. Discuss responder safety as it relates to: Personal Protective Equipment (PPE), transport from one facility to another, decontamination of ambulance, etc. . .



Objectives

Operational Communications (Information Sharing and Emergency Public Information and Warning):

Ensure timely, accurate, internal and external communication throughout response

1. Identify internal communication and info sharing needs
2. Identify external communication needs
3. Develop risk communication strategy for public



Objectives

Medical Services: Determine the ability to provide appropriate, safe care to an Ebola Virus Disease patient.

1. Provide lifesaving medical treatment to an Ebola Virus Disease patient
2. Ensure responder safety and health throughout the course of providing treatment



Objectives

Public Health Functions:

1. Surveillance and Epi Investigation:

- Investigate case and identify contacts to patient
- Assemble appropriate screening tools/forms/resources to ensure consistent data collection
- Identify/activate local, regional, state and/or federal resources for surge capacity in contact tracing

2. Quarantine (if needed):

- Ensure the ability to appropriately quarantine those who may have been exposed to Ebola in alignment with recommended guidance
- Ensure Isolation/Quarantine plans are updated and ready to be operationalized



Objectives

Fatality Management Services: Discuss the coordination of fatality management services as it pertains to a fatality caused by Ebola.

1. Ensure responder health and safety throughout processing of the deceased
2. Ensure most current guidance is followed as it relates to handling Ebola contaminated remains
3. Provide mental/behavioral health services for those impacted by event





Benefits

- Bring appropriate local partners together
- Compare current plans vs. a realistic response
- Identify gaps
- Work to close gaps
- Meet exercise requirements



Suggested Partners

- Public Health
- Hospital/Clinic
- Emergency Management
- EMS
- 911/Call Centers
- Law Enforcement
- Others as appropriate



Resource Location

[PCA Home](#)
[People Search](#)
[PH Preparedness](#)
[Hosp Preparedness](#)
[Trauma](#)
[Other DPH Sites](#)
[TEAM](#)
[Healthcare Coalitions](#)
[Ebola Response](#)

Exercises

[Requirements](#)
[5](#)
[75](#)
[Tribal](#)
[n Reports](#)
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[and](#)

NEW!!! 2014-15 Tabletop Exercise (TTX) and Workshop Materials now available!! See 'Upcoming Exercises' to the right.

| | |
|---------------------------|---|
| Emergency Response Region | Document |
| Regions 1 and 4 | <p>NOTICE: Regions 1-6 Exercises have been suspended due to the Ebola response. LPHA's are encouraged to use their Ebola response to meet exercise requirements and/or conduct local TTX's related to Ebola to meet exercise requirements.</p> <p>Ebola related TTX materials NOW AVAILABLE. Look to right column under 'UPCOMING EXERCISES' for these materials.</p> |
| Region 2 | |
| Regions 3 and 6 | |
| Region 5 | |

Upcoming Exercises

| Title | Exercise Type | Exercise Date |
|--|---------------|---------------|
| Immunization Program Ongoing Vaccine Dispensing Activities | Functional | |
| Cities Readiness Initiative (CRI) Exercise | Full Scale | 5/5/2015 |
| LPHA TTX and WORKSHOP Materials with Fatality Management Theme | Tabletop | 5/30/2015 |
| Ebola TTX and EEGs NEW | Tabletop | 5/30/2015 |

Recent Exercises

Title Exercise Type Exercise Date
 There are no items to show in this view of the "exerciselist" list. To add a new item, click "New".



Technical Support

- Exercise facilitation
- Exercise Evaluation
- Based on availability

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Overview of EMS Guidance

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Wisconsin
Department of Health Services

EMS Guidance

Categories and Expectations of EMS During Ebola

December 8, 2014



Category One EMS...

- are able to transport patients confirmed to have Ebola to a designated *Category One* healthcare facility.
- are identified ahead of time and known to DHS.
- will work with DHS to coordinate transport of confirmed cases.

Category Two EMS...

- are able to respond and transport a suspected Ebola patient.
- will collaborate with usual partners to prepare to serve in this role.
- will operate using usual referral patterns, or locally agreed protocols.

Category Three EMS... (includes law enforcement and fire)

- are able to screen and identify a suspected Ebola patient.
- should develop agreements with *Category Two* EMS services in order to contact them in the event of a suspect case.

Scenario A: Patient in the Community

A patient in the community calls 911 or the local public health agency.



The patient is screened for risk factors and symptoms by 911 or the local public health agency:



Ask about existence of risk factors within 3 weeks before onset of symptoms.
(see Appendix A).



If patient has risk factors, screen for Ebola symptoms (see Appendix A).



A Category Two EMS Service should be notified.

The service should be notified of suspect Ebola cases and respond to the scene wearing appropriate PPE.

The service should contact the healthcare facility, as part of their regular referral pattern, and work in consultation with the facility and local public health to determine where the patient should be transported.

Scenario B: Patient in Clinic (ambulatory setting) or *Category Three* Hospital

A patient in a clinic or *Category Three* hospital meets the current CDC surveillance definition for a suspect Ebola case.



The clinic should work within regular protocols to contact EMS. A *Category Two* EMS service should be notified.

The service should be notified of a suspect Ebola case and respond to the scene wearing appropriate PPE.

The service should work with the clinic, healthcare facilities, and local public health to determine to what destination the patient should be transported.

Scenario C: Patient in a Healthcare Facility Needs Transportation to a *Category One* Designated Ebola Treatment Facility

A suspect patient has been confirmed to have Ebola.



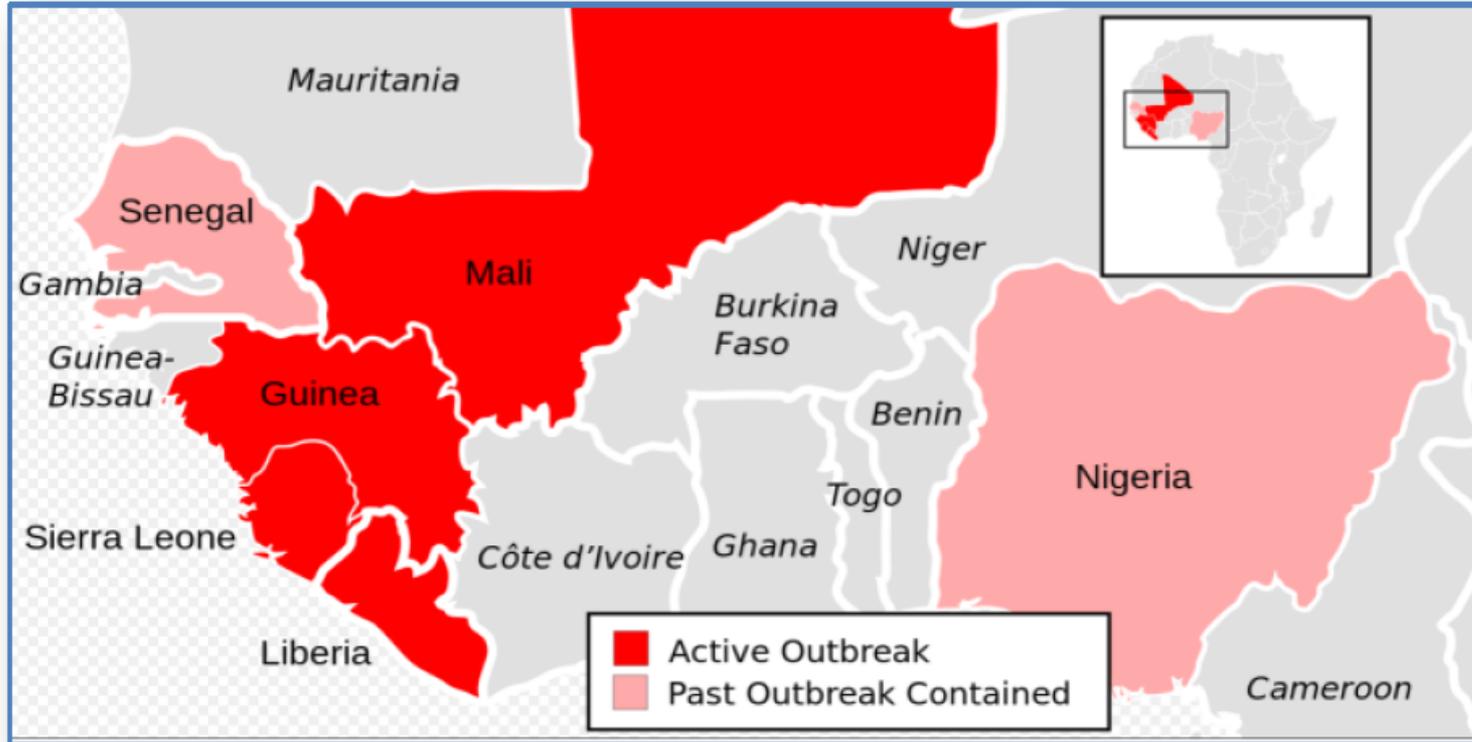
The WI Department of Health Services will notify a *Category One* EMS service.



The *Category One* EMS service will arrive at the healthcare facility and transport the confirmed Ebola patient to a Designated Ebola Facility per DHS.

Appendix A: Ebola Screening (Risk Factors and Symptoms)

Has the patient traveled to West Africa (Guinea, Liberia, Sierra Leone or Mali) within the 21 days (3 weeks) before the symptoms began?



Simplified Ebola Map found at https://commons.wikimedia.org/wiki/File:2014_ebolavirus_epidemic_in_West_Africa.svg

Does the patient have symptoms consistent with Ebola?

- Fever ($>100.4^{\circ}$)
- Headache, joint and muscle aches
- Weakness/fatigue
- Diarrhea, vomiting, stomach pain and lack of appetite
- Unexplained Bleeding



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