

The “Simulation and Training Exercise Collaboratory” (SIMTEC)

Outbreak Orange Exercise

CONTROLLER GUIDE



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JIBC

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Sincerely,



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ABOUT THE CONTROLLER GUIDE

The Controller Guide contains the instructions on how to successfully deliver SIMTEC's Pandemic Exercise, Exercise Outbreak Orange. The exercise makes use of both online and print content. Consisting of a variety of functional activities, Players will be challenged to explore and apply Emergency Operations Centre (EOC) and Health Emergency Operations Centre (HEOC) processes and activities. By conducting these exercises, personnel should be able to confirm the capabilities of the EOC/HEOC to manage the psychosocial impacts involved in patient management during a pandemic. They will also identify areas where additional training, planning or resources are required. Subsequent exercises can then validate the efficiency of any "corrective actions" that are put into place. There is also the option to include staff from a federal ministry of health in the exercise, though their role is limited to answering questions and provide pandemic-related information. The Ministry of Health would not have formal Players in the exercise. These materials describe only the EOC and HEOC pods; if the Ministry of Health is participating, one additional copy of inputs/handouts should be developed for their use.

It is important to note that this material is designed for **experienced Exercise Controllers** to deliver an exercise to experienced command and control personnel proficient in **EOC/ HEOC response processes and protocols**. Additional training may be appropriate for both controllers and Players prior to delivery of the exercise in order for success.

Please ensure you have reviewed this entire document prior to running your exercise.

BACKGROUND INFORMATION

SIMTEC is a multi-year project, based at the Justice Institute of British Columbia (JIBC), which will assist Emergency Operations Centre (EOC) personnel to consider the psychosocial dimensions of chemical, biological, radiological, nuclear, and explosives (CBRNE) and other hazardous events. The term **“psychosocial” refers to the mental well-being of an individual and the role of relationships and community in impacting that person’s mental health.** The project involves designing and conducting simulation exercises with complex disaster scenarios and inputs specifically to elicit psychosocial responses from senior decision-makers in the EOC.

“Psychosocial” refers to the mental well-being of an individual and the role of relationships and community in impacting that person’s mental health.

Information collected from the exercises, focus groups, and Subject Matter Expert interviews throughout the research process will assist in the development of training materials and guidelines for psychosocial interventions by senior EOC personnel. Training EOC personnel to respond to the psychosocial consequences of disasters will reduce stress levels and enhance strategic and tactical decision-making. The exercises and training protocols will be publicly-available through an online collaboratory for use by any English-speaking jurisdiction with access to high-speed internet and emergency management protocols that include an EOC.

Outbreak Orange is the fourth in a series of simulation exercises which includes winter storms, decontamination, mass casualty incidents, and earthquake events. This exercise focused on the responses of an EOC and a health EOC in the development of protocols and procedures to manage a pandemic event.

This Controller Exercise Guidebook provides details on the administration of the SIMTEC Outbreak Orange training exercise including background information, how to run the exercise, key training points to be emphasized and a list of frequently asked questions for Controllers.

PURPOSE AND DEVELOPMENT OF EXERCISE OUTBREAK ORANGE

Exercise Outbreak Orange was designed with two purposes in mind:

1. To serve as an opportunity to exercise a potentially real scenario which involves a serious, communicable disease.
2. To deliberately include inputs of psychosocial stressors.

This simulation exercise and training video can assist emergency management leaders in understanding and enhancing the decision-making processes and psychosocial interventions of EOC/HEOC personnel during health emergencies.

SUPPORTING MATERIALS

Along with this Guidebook, the exercise, training video, training protocols, and supporting materials are available on the online SIMTEC Collaboratory. Materials are organized into sections based on how they are used in the exercise. These sections are titled:

- Materials for Controllers
- Materials for the EOC/HEOC Pods
 - If the representatives from the Health Portfolio are participating in the exercise, an additional copy of the HEOC materials should be developed for their use
- Videos

ABOUT EXERCISE OUTBREAK ORANGE

Exercise Outbreak Orange is a hybrid tabletop exercise, intended to validate the Players' ability to complete common tasks at a Local Community Emergency Operations Centre (EOC), or Health Emergency Operations Centre (HEOC). Additionally, the exercise prompts Players to consider the psychosocial impacts on individuals infected with a severe, transmissible illness, their families, first responders/receivers and the broader community.

The exercise materials were originally focused on a pandemic event taking place in British Columbia. Some inputs were customized to reflect participating communities (such as referencing local hospitals). Participants were placed into one of two groups – a Local Community EOC, or a Health EOC.

The Local Community EOC was staffed with a cross-section of government workers. These included representatives from Police Service, Fire & Rescue Services, Emergency Medical Services (e.g., paramedics), Emergency Social Services, Public Works, Parks & Recreation, Bylaw Officers, Emergency Mangers, and other available program managers.

The Health EOC was unique in that it was staffed by a variety of health employees. These participants primarily consisted of staff from specific BC Health Authorities. (In British Columbia, health authorities plan and coordinate the delivery of provincial programs in a specified region, and who also oversee the provision of highly specialized services.) Additional staff members included employees from the BC Centre for Disease Control, a BC agency that provides provincial and national leadership in public health through surveillance, detection, treatment, prevention and consultation services.

“Emergency Social Services” is the name given for the services that provide for the care of community residents. This can include providing shelter, food, clothing, and family reunification, as well as personal services including emotional support, first aid, pet care, child care and transportation.

The exercise scenario focuses on the management of impacts caused by the movement of students infected with a virulent disease. At the start of the exercise Players are provided with a series of news clips describing the activities of local university students performing fieldwork overseas. Players learn that the students were involved in a series of historical grave excavations as part of their forensic anthropology program. As the exercise begins, Players are called into an emergency planning meeting, either at the EOC or the HEOC. Players are informed that at least one of the returning students has been admitted to hospital displaying symptoms of smallpox. As the exercise unfolds, Players are confronted with a number of situations that they must decide how to deal with, e.g., the movement of potentially infected students around the province, the need to maintain/enforce quarantine on “contacts”, and the

need to appropriately resource & train staff members. In each case, Players rely on their training, experience, and plans to decide the most appropriate course of action.

The video inputs produced for this exercise reference locations and agencies in British Columbia. During the exercise, the Controller will need to provide local context for the Players. For example, the Controller should inform Players that they should assume the video reflects events at a local university; that Health Authorities refer to local health agencies; etc.

The documents used in the exercise can be updated to reflect local areas.

In preparing for this exercise, the Controllers will need to gather a variety of plans and materials. These are described in more detail later in this document.

EXERCISE – SEPTEMBER 10, 2014

Prior to the start of the final exercise, players viewed the training video.

- A tabletop exercise was conducted in the Dr. Donald B. Rix Public Safety Simulation Building at JIBC. Two rooms were set up as Local Community EOCs and two rooms were set up as Health EOCs. Data collected in this exercise were analyzed and used to create the final web based exercise.
- An introduction was provided to players about the simulation exercise and the supplies and resources available in each pod
- A three-hour simulation exercise was conducted – each pod was audio- and video-recorded
- Researchers and Subject Matter Experts (SME) observed the exercise in real-time from the control room
- A psychosocial debrief of the simulation exercise was held with all present
- Players and SME focus groups participated in post-exercise researcher guided sessions

Again, researchers and Subject Matter Experts observed the exercise in real time. Following the exercise, focus group interviews were held with each pod. In addition to addressing the realism of the exercise and the decision-making processes in the pods, questions concentrated on the Players' perceptions of the training video, including its effectiveness, its potential influence on decision making and actions taken in the pods, and its usefulness for future training.

During the data analysis process, the SIMTEC research team identified relevant key common themes that emerged from the exercises.

- There is a need to address the communications with health staff in a timely manner. With widespread social media availability, information and rumours will quickly spread and messaging needs to be positive and quick.
- News will quickly reach the community and messaging needs to be developed to handle growing concerns and fears.
- Both Health EOCs and Community EOCs need information on when and how a disease outbreak in Canada is confirmed.
- Protocols for police officers and public health staff need to be developed to address best practices for persons who refuse to be quarantined and what to do about their possessions.
- Health Care Organizations and First Response Organizations need to provide psychosocial support to their personnel during a disease outbreak.
- Ensuring that health care providers and first response and first receivers are physically safe is of major importance. Information on Personal Protective Equipment (PPE) will need to be available quickly.

Members of the Expert Working Group met with the SIMTEC research team the next day and provided feedback after viewing the training video. Adaptations were made to the training video and exercise following the analysis of all interviews with exercise Players, Subject Matter Experts, and the Expert Working Group.

All audio recordings were transcribed and analyzed, and video footage was analyzed for non-verbal behaviours. In response to feedback from exercise Players, further adjustments were made to the exercise.

EXERCISE AGENDA

A sample agenda for the day, including timings, is as follows:

Time Required	Activity	Comments
45 minutes	WELCOME & BRIEFING	<ul style="list-style-type: none"> • Introductions • Opening Remarks • Briefing
18 minutes	TRAINING VIDEO	<ul style="list-style-type: none"> • Review of Training Video by Players
45 minutes	PLAYER FAMILIARIZATION	<ul style="list-style-type: none"> • Players enter exercise room • Review of documents and maps
180 minutes (3 hours)	Exercise	<ul style="list-style-type: none"> • Start • End
45 minutes	DEBRIEFING	<ul style="list-style-type: none"> • Player feedback gathered • Exercise Evaluation Guides gathered
333 minutes (5 hours 33 min)	TOTAL	

GETTING STARTED – OPERATIONAL CONSIDERATIONS

As a Controller, you are responsible for making sure the exercise is planned, organized and delivered effectively. The information provided in this section will assist in making sure your exercise is a success.

IDENTIFYING PLAYERS

This exercise is intended to be used with personnel who work with in a Local Community EOC (typically response agency and local government staff), or in a Health EOC at the health authority/health region level. Participants will work out of one of two pods – the Local Community EOC pod or the Health EOC pod.

Each participant should have a basic understanding of the facility they will be representing. For example, staff at the Local Community EOC should have EOC training; staff at the Health EOC should have an understanding of the emergency management functions and activities used in implementing quarantine and other public health measures. If there are some personnel participating that have not taken any formal training, it is best to partner them up with those who have been trained. For both pods, it is beneficial to have a cross-section of personnel participating in the exercise.

In all cases, Players will play their actual role, drawing on their real world experience to fulfill the role. The scenario is intended to reflect events actually occurring in their jurisdiction.

During the exercise, one or more players should act as a Team Support Worker. This role is carried out by individuals trained in Disaster Psychosocial Services. Team Support Workers may be Disaster Psychosocial Volunteers, or especially trained psychologists, social workers or counsellors.

Throughout this document, the terms ‘players’ and ‘participants’ are used interchangeably.

Team Support Workers are specially training psychologists, social workers or mental health workers to provide psychosocial support to EOC personnel and frontline staff as well as offer advice regarding psychosocial needs of the community residents.

IDEAL EOC PARTICIPANTS

1. The Local Community EOC should include representatives from: fire, police, ambulance, emergency management, emergency social services, engineering, parks/by-laws, communications, and administration

2. The Health EOC should include: emergency management, medical health officer, public health officer, emergency medicine, nursing, infectious disease/lab scientist, supply services, communications, and human resources

PRE-TRAINING

In order to ensure the best success for Players, it is strongly recommended that exercise Players take part in training relevant to their specific pod. Ideally, all exercise Players will also have some practical experience. For further information on Emergency Operations Centre, and Health Emergency Operations Centre training, please contact the JIBC's Emergency Management Division – www.jibc.ca/emergency.

DETERMINING EXERCISE NEEDS

The exercise was designed around three specific objectives. These are:

1. Manage the psychosocial impacts of a disease outbreak on health care workers
2. Manage the psychosocial impacts of a disease outbreak on first responders/receivers and EOC staff
3. Develop plans around the management of public health activities including public notification, information sharing, maintenance of isolation (quarantine), and surveillance of contacts

Each of the inputs delivered during the exercise will prompt Players to perform tasks related to one of these objectives. Keep in mind that these tasks are relatively broad; if there are activities or practices specific to your agency that you would like to see validated, you are encouraged to develop additional objectives and expected actions.

Not all inputs are required for the exercise to successfully be completed. As the Controller, you may choose to omit or adjust some of the paper inputs to better meet the needs of your organization.

SETTING A DATE AND TIME

The exercise will take approximately five hours and 30 minutes to complete. The first 45 minutes will focus on briefing Players; followed by the training video and player preparations. The following three hours will focus on exercise play. The final 45 minutes will be used to debrief Players. When determining a date for your session it is always best to give Players at least two weeks' notice.

The materials have been developed with a start time of 9:00 am. When delivering your own exercise, it is ideal to schedule it with a 9:00 am start time.

ARRANGING A LOCATION

Exercise Outbreak Orange will make use of two specific locations (known throughout this document as “pods”). There will be a Local Community EOC and a Health EOC.

The ideal location for this exercise would be at a Local Community EOC, making use of breakout rooms for the Health EOC. This will allow for Players to use the resources and materials that are regularly available in providing support to emergency response. However, if an EOC & breakout rooms are not available, an alternate location may be chosen. These alternates may include boardrooms, classrooms, or other meeting areas. When arranging a location for your exercise, make sure it is away from regular office distractions. The meeting space should have room for the number of Players attending. Flip charts and paper or whiteboards should also be provided.

At a minimum, you will require:

- 2 rooms for participants (or 3 rooms if the Health Portfolio is participating)
- 1 room for controllers
- A minimum of **1 computer with speakers** per room for playing the Input Video.

You should also ensure that Players have pens, paper, and access to other regular office supplies.

Players should be able to access one another by phone. Prior to the exercise, the Controller should determine which phones will be used (e.g., will they be supplied by the Controller or will participants be asked to use their own phones). A phone list for each player group should then be drafted and distributed at the start of the exercise.

No other communications equipment will be necessary. Players should not be in contact with actual agencies during the exercise – all communications are to be simulated between the Players and the Controllers.

CATERING

Catering should be ordered for this exercise. The level of catering required is at the discretion of the Controller but should include refreshments for a coffee break and a lunch service. One of the key learning points of any exercise is the importance on taking breaks and the need to provide healthy, nutritional food for exercise participants, and that these resources are made available.

Make available fresh fruit and vegetables, sandwiches, hot and cold beverages such as coffee, tea, juice, instant soup and water for break times. Make available decaffeinated beverage options as well to discourage the over-consumption of caffeine and its negative effects on the body.

Energy bars and bottles of water should be included in the each pod for times when individuals need a quick snack while continuing to work.

IDENTIFYING EXERCISE STAFF

In order to run the exercise, you will require Controllers, Evaluators, and a Simulator. Controllers will provide inputs to Players, monitor the exercise, respond to Player questions, and realign Player activities as necessary. Evaluators will observe Player actions and determine the degree to which these activities achieve the objectives of the exercise. The Simulators will simulate:

- the role of a reporter, appearing at the EOC & HEOC and asking specific questions about the steps being taken to manage the event, and
- A member of the provincial/territorial Ministry of Health, asking for an update on the response activities.

It is advised that you have a minimum of two Controllers, two Evaluators, and two Simulators. The person taking the lead on the delivery of the exercise is known as the Lead Controller.

PREPARING MATERIALS

Below you will find a list of the materials required to run the exercise. Some of these materials are available for download from the SIMTEC website; some materials you will need to source from the participating agencies. **It is recommended that you download all of the videos.** While you also have the option to stream them during the exercise, there is the potential for small interruptions in the feed that may impact upon your exercise timing.

The materials for this exercise are focused on a pandemic event occurring in British Columbia. In development, it was determined that creating generic version of materials would be impractical as the health structures often differ significantly between provinces/ territories. In order to deliver this exercise outside of British Columbia, some customization work will need to be completed. This includes either updating documents or identifying contextual details for the scenario. For a full list of document customizations, see appendix A.

Once all documents are updated, you will need to organize the Player Cards so that they are associated with their relevant Tracing Committee email.

The MSEL and Inputs reference a third pod for Health Portfolio staff (at the federal level in Canada). If the Health Portfolio is not participating, these inputs can be removed/skipped.

MATERIALS FOR CONTROLLER

These materials are necessary to manage and evaluate the exercise.

Item	Number	Description
Exercise Outbreak Orange Exercise Controller Guidebook (this document)	1 copy per Controller	This document provides an overview of the exercise. This includes how to prepare for delivery of the exercise, how to control exercise play, and how to evaluate/follow-up on with Players once the exercise has been completed.
Exercise Outbreak Orange Exercise Master Sequence of Events List	1 copy per Controller	The Master Sequence of Events List (MSEL) is a chronological timeline of Player actions and scripted messages and events that will occur during the exercise. This document is used by the Controller to identify when inputs are to be sent to Players. The MSEL also identifies when Controllers should drop off or pickup documents.
Exercise Outbreak Orange Exercise Inputs	1 copy for the Lead Controller	During the exercise, information is sent to Players based on the timings listed in the MSEL. This information is provided in a series of vignettes found on the “Input Video”. The Inputs also contain copies of the documents that are to be provided to Players by the Controllers during the exercise.
Exercise Outbreak Orange Exercise Supporting Documents	1 copy per Pod	<p>During the exercise, Players will receive a variety of written information. This includes:</p> <ul style="list-style-type: none"> • Tracing Committee emails, describing the whereabouts and conditions of the impacted students • Player Cards, providing detailed information about each student • Message & Response Templates, providing a structure for Players to organize their responses to specific tasks • Phone Messages & Emails, providing

additional scenario information to Players.

This paper inputs are handed by the Controller to Players during the exercise. These documents should be contextualized as necessary and printed in **colour** on standard letter sized paper. See Appendix A for a full overview of how to organize these materials in advance of the exercise.

Exercise Outbreak Orange Exercise Evaluation Guide	1 copy per Evaluator	The Exercise Evaluation Guide provides instructions to evaluators regarding the recording of their observations of Player actions and recommendations for improvement planning. The guide becomes a record of the level and quality of Player performance, and as such, is used to develop an After Action Report and Improvement Plan.
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These are the videos required to run the exercise.

Item	Number	Description
Training Video	1 copy to play on Computer	This video provides Players with the key psychosocial training points in preparation for the exercise. It is intended to be played prior to the exercise. This guidebook provides additional information to assist Controllers to answer any questions regarding the training points.
Exercise Outbreak Orange – Inputs for...	1 copy to play on Computer in respective pod	These videos contain a series of vignettes that describe events going on related to the pandemic. It is to be played to Players during the exercise. Each pod will receive a unique video. This video is to be played to Players during the exercise.
<ul style="list-style-type: none"> • EOC Pod • HEOC Pod 		

MATERIALS FOR THE EOC POD

The following materials will be used by the Local Community EOC Players in the Exercise. Items written in **red** refer to local documents that need to be obtained by the Controllers prior to the exercise.

Item	Number	Description
EOC Response Goals Poster	1 copy	The poster provides a list of the standard priorities of an EOC.
Local Community Emergency Management Plan	1 copy	This plan should describe the management structures and agreements created by the local government in order to support the management of emergency events.
Optional: Local Community Pandemic Plan	1 copy (if available)	Some communities have pre-identified activities that would be performed to scale back government services and protect employees during a pandemic event. If this document is available, it should be obtained for the exercise.
Local Resources & Demographics	1 copy	Resource information should include the resources maintained by each agency under Local Community control. Demographic information should include population numbers and distribution in the region.
Mutual Aid Agreement	1 copy	During the exercise, Players may determine the need to access mutual aid from neighbouring communities. If available, mutual aid agreements would describe the mechanisms for obtaining mutual aid.
Template & Response Message Forms	As many copies as needed per Pod	During the exercise, the pods will be asked to develop messages to the community. This template form provides a structure for Players to record their responses.
Leadership Poster	1 copy	The leadership poster provides a cue to staff regarding the types of behaviours that are consistent with safe and positive leadership practices.

SIMTEC Training Video Brochure	1 copy	The brochure describes important highlights from the training video.
Stress Tip Cards	1 copy for each participant	These cards should be printed on 10.16 cm. (4 in.) X 7.62 cm. (3 in.) cards and made available in the EOC. They can be ordered free of charge from the Emergency Social Services Office at Emergency Management BC at http://www.ess.bc.ca/pubs/workercare.htm
SIMTEC Psychosocial Considerations for Health Care Providers Pamphlet	1 copy	The brochure describes important highlights regarding the psychosocial impacts of a pandemic or disease outbreak.

MATERIALS FOR THE HEALTH EMERGENCY RESPONSE POD

The following materials will be used by the Local Community EOC Players in the Exercise. Items written in **red** refer to local documents that need to be obtained by the Controllers prior to the exercise.

Item	Number	Description
EOC Response Goals Poster	1 copy	The poster provides a list of the standard priorities of an EOC.
Emergency Management Plan	1 copy	This plan should describe the management structures and agreements maintained by the health authority in order to support the management of public health emergencies.
Pandemic-Specific Plans	1 copy (if available)	Health authorities will likely have identified and pre-planned activities related to contact tracing, implementing isolation, and other public health activities. This document will be important in identifying processes to address exercise tasks.
Leadership Poster	1 copy	The leadership poster provides a cue to staff regarding the types of behaviours that are consistent with safe and positive leadership practices.

SIMTEC Training Video Poster	1 copy	The poster describes important highlights from the training video.
Stress Tip Cards	1 copy for each participant	These cards should be printed on 10.16 cm. (4 in.) X 7.62 cm. (3 in.) cards and made available in the EOC. They can be ordered free of charge from the Emergency Social Services Office at Emergency Management BC at http://www.ess.bc.ca/pubs/workercare.htm
SIMTEC Psychosocial Considerations for Health Care Providers Pamphlet	1 copy	The brochure describes important highlights regarding the psychosocial impacts of a pandemic or disease outbreak.

CONTROLLER PREPARATION

When controlling the exercise, it is important to provide clear directions to all those involved. Review your materials in advance so that you are clear and confident during the exercise. When introducing the exercise it is always good to reinforce the applicable exercise objectives. This provides Players with a clear understanding of the outcomes. Have your room set-up and all materials prepared in advance so that you can focus on welcoming Players at the start of the session.

When the exercise is underway, the Controllers monitor the exercise and attempt to align Player activities to the objectives. This may involve clarifying any information provided in inputs (as necessary), providing mentoring, and helping resolve conflict. Controllers should not dominate conversations or turn to an instructing format. The intent of the exercise is for Players to work through the materials on their own. The scenario, inputs and tasks should prompt Players in addressing the outcome. During the exercise, if there is significant need to explain processes and practices, then this likely identifies a need for further training prior to subsequent exercising.

One Controller will simulate all agencies not taking part in the exercise. Players wishing to speak to outside agencies will speak directly with this Controller. This individual will attempt to provide answer and feedback based on how agencies would most likely respond to each request. There may be times when this Controller needs to provide information or details that are not provided in these materials. In this event, the Controller should draw from their own experiences to provide realistic answers to Player questions. The Controller needs to be very

familiar with the exercise materials so that they can provide appropriate feedback. Additionally, this Controller should gather the various documents prepared by the Players. These may include completed Position Logs, Incident Reports, Status Reports, Action Plans, and Situation Reports. These can then be reviewed and evaluated based on agency standards.

DELIVERING THE EXERCISE

Once you are ready to begin the exercise, there are a number of tasks to perform.

SETTING UP THE ROOM

Prior to the exercise, you will need to setup each room for use by Players. While each room represents a different location, they will be setup in relatively the same way. To setup the room, you will need to perform the following tasks:

1. Confirm the facility is available for the entire length of the exercise (approximately 5.5 hours)
2. Print out/gather the Player Resources identified earlier and lay these materials out in each pod
3. Gather office supplies for use by Players (pens, pencils, paper, laptops, etc.)
4. Gather copies of forms and templates
5. Post the EOC Posters in the pods. Players will use these objectives and priorities to structure their initial actions during the exercise. Players can subsequently update, remove, or add to these objectives & priorities.
6. Bring in adequate water and healthy snacks for Players during the exercise
7. Locate the computers so that they can be seen by all the Players. The computer playing the Inputs file should be placed prominently in the room.

PLAYER BRIEFING

Prior to the exercise, Players should be given a briefing about the rules and format of the exercise. During this briefing, the Lead Controller should provide an overview of the SIMTEC project; describe the structure of the exercise; review the types of communications that will be used during the exercise; and review the materials and resources available in each pod. Additionally, the Controller should tell the Players that they will be prompted to answer specific questions during the exercise. Each of the questions must be answered within a given timeframe. These answers should be recorded and handed to the Controller as the exercise progresses. The entire briefing will take approximately 30-45 minutes. Once the briefing is complete, you may send the Players into their respective pods and allow them to review the materials that have been provided / gathered.

As a final note, Players should be encouraged to alter their pod as they feel is appropriate. This includes:

- Maintaining, altering, and removing information displays

- Changing the volume on the Audio & Status Board video
- Assigning Players different roles
- Writing on (marking up) materials that are provided in their pod.

TIMELINE OF EVENTS

Inputs throughout the exercise specifically refer to dates in August and September so Players must be informed that the date within the exercise is **September 10th**. Here is a timeline of important events within the exercise for easy reference:

August 27th: Students exposed to Smallpox

August 31st: Students return from Russia

September 8th: Linda Gibbons experiences initial symptoms

September 10th: Exercise Date

STARTEX

Once the Players are ready to begin the exercise, you will start both the Input Videos in both pods at the same time. The Inputs will then play a series of vignettes that setup the exercise scenario. While pods will receive many of the same video inputs, there will be some variation in timings and information received by each pod.

Following along on the MSEL, you will notice that some inputs have specific task or questions to be addressed by one or more pods. These questions should be asked of corresponding pods at the time indicated on the MSEL. Players should be instructed to record their response on paper to turn into the Controller. The Controller should monitor the timeframe allotted for each question, returning once the time has expired to collect and/or review the pods response.

It should be noted that the times on the MSEL are approximates. Actual times may vary depending on when each video was started.

CONTINUITY

If the Controllers decide to pause the exercise (e.g. Players are becoming overwhelmed), they will need to pause the Inputs video in each of the pods at the same time. Restarting streaming videos may be difficult; it is recommended that you only pause videos that have been downloaded and which are playing off the computer's hard drive.

MASTER SEQUENCE OF EVENTS (MSEL) AND INPUTS

During the exercise, the Master Sequence of Events List will detail the approximate timings and lengths of the various inputs Players will receive. The Inputs document provides a detailed script of what is being said. As the Controllers follow the MSEL, they should pay close attention as to when a document appears, as this indicates the Controllers are to provide a print copy of this document to the Players.

COMMUNICATION

As mentioned earlier, one Controller will play an active role in communicating with the exercise Players throughout the exercise. This Controller will:

- Provide printed copies of documents from the Supporting Documents Package to the EOC Director. This is to be done at the timings indicated on the Master Sequence of Events List

- Simulate outside agencies, answering Player questions and providing feedback similar to the answers that would be provided by outside agencies
- Gather the documents created by the Players.

This Controller has some leeway in the types of answers provided to Players depending on how well the exercise is proceeding. For example, Players may be asked to provide a specific type of guidance to the public during the exercise; however, the urgency of the request is not provided. If Players appear to have the exercise well in hand, the Controller can indicate the request is urgent and requires an answer within the next few minutes. If Players are struggling and appear overwhelmed, the Controller can indicate the request is not urgent and can be dealt with as time allows.

ENDEX

The exercise, aside from briefings and debriefings, will last 3 hours. The first 20 minutes of the exercise is for Players to setup and review the materials in each pod; the subsequent 160 minutes are for the exercise play. At the 180 minute mark, the Input Video will stop providing inputs. The Status Board Video will continue on with background noise for approximately 3-4 minutes. At this time, Controllers should inform Players that the exercise has concluded and that a debriefing will now be held.

EVALUATION, DEBRIEFING AND CONCLUSION

UTILIZING EVALUATORS

Exercise evaluators, using the Exercise Evaluation Guide, will observe, analyze and record Player actions to assess whether the exercise objectives are being met. Evaluators must take care not to skew the results of the exercise by intruding on the exercise. Interactions with Players should be avoided. Evaluators will work with the Lead Controller to produce an evaluation report that identifies any issues and or gaps observed during the exercise.

EVALUATION PROCESS

In order to successfully evaluate the exercise, evaluators need to perform the following actions:

- Position themselves so that they can view the Players but not intrude on their conversations
- Observe the action related to the objectives identified in their Exercise Evaluation Guide (expected actions listed are not a complete list of actions but rather a guideline)
- Follow the framework provided in the Exercise Evaluation Guide for recording their observations (this may be in the form of written statements, completing checklists, recording the time it takes to complete specific tasks, etc.)
- If required, perform a preliminary analysis of their observations, offering insights into why conclusions were made or specific actions were performed
- Alert the Controller if any problematic situations develop
- Attend the Player debrief, updating their Exercise Evaluation Guides as necessary
- Submit their completed Exercise Evaluation Guide(s) to the Controller following the exercise

CONDUCTING DEBRIEFS

There are two types of debriefings which should be held following the exercise. One is an operational debrief and the other is a psychosocial debriefing.

OPERATIONAL DEBRIEFINGS

A formal debrief should be held following the delivery of the exercise. The debrief provides an opportunity for the Players/groups to share and comment on the work they completed and for the evaluators and Controller to comment on the expected outcomes as referenced in the

applicable Exercise Evaluation Guide. All Players should be given the opportunity to comment during the debriefing. Conversations should focus on:

- Areas where Players felt they performed well
- Areas where Players feel they require additional training, exercising, and mentoring
- Any item that requires immediate changes (e.g., updating an emergency plan)
- Potential next steps for Players

PSYCHOSOCIAL DEBRIEFINGS

A formal psychosocial debriefing should be held immediately following the delivery of the exercise. It is always possible that one of the inputs into the exercise, or an experience while participating in the exercise may trigger strong emotions in one or more of the players. This is especially true if a player has been diagnosed with Post-Traumatic Stress Disorder.

A psychosocial debriefing will not take long but should be led by a Team Support Worker or trained psychologist or counsellor. The psychosocial debriefing should review the key stressors inherent in the exercise; normalize any reactions that players may experience; provide some suggestions for coping or managing stress reactions; and provide contact information for referrals for any players needing support (e.g., accessing Employee Assistance Programs).

COLLECTING AND ACTING ON FEEDBACK

Following the exercise, the Controller or other designated personnel will be responsible for collecting and consolidating feedback from the exercise. This could include group responses to exercise questions, completed paper work and records of activities performed. As part of your next steps, this information should be analyzed and an After Action Report should be created which includes an Improvement Plan. An ultimate goal of exercising is to learn so that plans, procedures and related training can be improved resulting in subsequent exercises that are not identifying the same corrective actions as in past.

CONCLUDING THE EXERCISE

Following the debriefing, Players should be told the exercise has been formally concluded. Controllers should gather the Evaluation Guides from the Evaluators, gather the materials used during the exercise, and return the room to its original state.

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APPENDIX A – CUSTOMIZING INPUTS

Controllers can choose to:

- a. Run the exercise as if players were in Vancouver
- b. Customize the inputs to match locations and organizations in the controller's region.

If you decided to customize your inputs, you must take the following steps.

STEP 1: IDENTIFY EACH OF THE FOLLOWING

1. The city in which your exercise will be located **(City A)**: _____
 - The health authority that has jurisdiction for this city:
 - **Health Authority A** _____
 - Hospital located in this Health Authority **(Hospital A)**

2. A neighbouring city or suburb of City A **(City B)**: _____
 - **Health Authority B** _____
 - Hospital located in this Health Authority **(Hospital B)**:

3. A third city with a different health authority (or provincial/territorial equivalent) that will be referenced during the exercise **(City C)**: _____
 - **Health Authority C** _____
4. A **university** (or college) with an anthropology program. The university should be located in Health Authority A: _____
 - It would be appropriate to contact the university/college in advance of their exercise to ask their permission to reference their institution during the exercise.
5. **A First Nations community** located in Health Authority C:

 - If you are referencing an actual First Nations community, it would be appropriate to contact the communities Elders in advance of their exercise to ask their permission first. This may also be an opportunity to further engage First Nations community members in the exercise planning and delivery.

Quick Reference	
City A	
Health Authority A	
Hospital A	
City B	
Health Authority B	
Hospital B	
City C	
Health Authority C	
University	
First Nations Community	

Finally, note that students will be located in the following places:

Hospital A	Hospital B	Health Authority # 2	Health Authority # 3
<ul style="list-style-type: none"> • Linda Gibbons • Clark Freeman • Dancia Flasser • Brad Drumlan • Kyle Lussier • All other returned students 	<ul style="list-style-type: none"> • Trinity Weathers 	<ul style="list-style-type: none"> • Pierce Haverford 	<ul style="list-style-type: none"> • Charlotte Nadine

STEP 2: UPDATE DOCUMENT “1.4 EXERCISE OUTBREAK ORANGE SUPPORTING DOCUMENTS” BASED ON THE INFORMATION ESTABLISHED ABOVE:

- All items highlighted in yellow can be generated by you, the Controller. You may choose to use actual names of individuals from different Health Authority and Hospitals, in order to add to the reality, or you can invent your own. For any dates, give the current year.

- All items highlighted in blue should be populated based on the information in Step 1
- Note for Controllers Outside of Canada: All references to Canada or Canadian Federal Bodies have been highlighted in purple. These should be modified with the equivalent in your country
- Note for Controllers in the United States: If you are running this exercise in the United States, change the geographic details in
 - Input 35 & 36 to Canadian locations
 - Fran Branford’s Player Card

STEP 3: MODIFY AUDIO INPUTS

Audio inputs throughout the exercise make reference to specific locations and organizations in British Columbia. These references have been highlighted in orange in the Input Document (1.3 Exercise Outbreak Orange Exercise Inputs) In order to customize these inputs, you have two options:

Option 1

During these inputs, mute the audio (DO NOT STOP THE VIDEO!) and read the inputs aloud, replacing the highlighted words with appropriate information from your area. You can communicate these inputs to the pod in a number of ways:

- Use a telephone to call the pod
- Use a Walkie-talkie to contact the pod
- Walk into the pod and deliver the input in person

The following is a list of inputs that you may wish to deliver in this way:

9, 10, 11, 12, 13, 14, 23, 29, 30, 48, 49, 53 (and 35, for controllers in the US)

The following are paper and actor inputs that can easily be modified:

17, 20, 21, 40

Replacements are as follows

Input says...	Replace with...
Vancouver	City A
Health Authority	Health Authority A or B (see content of input for details)

Vancouver Coastal Health	Health Authority A
Vancouver General Hospital	Hospital A
Abbotsford	City B
Fraser Health Authority	Health Authority A
Abbotsford Regional Hospital	Hospital B
Fort St John	City C
Northern Health	Health Authority C
Fort St John Hospital	Hospital C
University of British Columbia (UBC)	University
For Controllers outside of Canada, the following terms and federal bodies will have to be replaced:	
Ministry of Health Public Health Agency of Canada Health Canada Canada Centre for Disease Control	

Option 2

Provide participants with the above table and let them know that anytime inputs make reference to organizations/locations in the left column that they should refer to the right column. Using this option, the Controller does not need to mute the video at any point during the exercise.