Alameda County Medical and Health Tabletop Exercise 2014:
Welcome and Introductions

- Introduction of Exercise Planners and Facilitators
- Introduction of Participants
  - Overview of list of participants
- Housekeeping Issues
- Schedule
Schedule

830 - 845  Welcome and Opening Remarks
845 - 945  Module 1: Bio Watch and Anthrax Overview
945 - 1000 Break
1000 - 1100 Module 2: Intelligence and Information Sharing
1100 - 1145 Module 3: Priority Prophylaxis
1145  Working Lunch
1200 - 1230 Hot Wash and Closing Remarks
1245 - 130 Point of Dispensing Training (POD) (Optional)
130  POD Training Ends
The purpose of this exercise is to increase knowledge of the Bio Watch program and increase local capability to respond to terrorist threats involving an aerosolized anthrax attack.

This exercise will focus largely on local coordination and authority in Alameda County.
Scope

- This exercise is a tabletop exercise planned for Alameda County Health Care Service Agency, primarily Public Health Department and Emergency Medical Services. This exercise provides an overview of the BioWatch program and emphasizes the role of the local public health department and agencies that support BioWatch activities. Specifically, agencies that may be called to assist in activation of priority prophylaxis.
Assumptions and Artificialities

- In any exercise, assumptions and artificialities may be necessary to complete play in the time allotted. During this exercise, the following apply:

- The scenario is plausible, and events occur as they are presented.

- There is no hidden agenda, and there are no trick questions.

- All players receive information at the same time.
2014 Exercise Core Capabilities

- Intelligence/Information Sharing
- Public Health and Medical Services
Exercise Objectives

1. Understand the function of Bio Watch.

2. Describe the process of how your agency shares health alert information?

3. Discuss the process of how your agency will determine priority prophylaxis.
Exercise Ground Rules

- Do not fight the scenario
- Assume the scenario is real and may impact the jurisdiction and the participants
- Participate in a collegial manner: share policies, plans and practices that may benefit others
- Follow communications etiquette: turn off cell phones, smart phones, computers, and any other electronic data equipment
Modules

- The exercise consists of three modules
- Each module will identify the key issues followed by questions for discussion
- Participants are encouraged to share their plans, policies, strengths and gaps.
Background

- Anthrax is a bacterial disease caused by *Bacillus anthracis*.

- From mid-September to November 2001, a number of anthrax-laced letters were mailed to news media offices on the U.S. east coast and to the U.S. Congress. A total of 22 individuals contracted either cutaneous anthrax (11 cases) or inhalational anthrax (11 cases), and 5 died (all from inhalational anthrax). Anthrax cases included individuals at targeted locations (9 cases), postal service employees (9 cases), individuals who handled cross-contaminated mail (2 cases), and individuals with unpinpointed exposures (2 cases). An additional case of cutaneous anthrax occurred in March 2002 due to laboratory exposure to collected samples.
2001 Anthrax letters

- The anthrax employed in the letters was a common genetic strain and had been treated to maximize its tendency to aerosolize. The genetic strain as well as the method of weaponization suggest the perpetrator(s) had access to U.S. bioweapons research facilities.
Module 1 BioWatch Background

- Shortly after the anthrax letters of 2011 every health department in the nation has been required to prepare for terrorist attacks.

- In 2003, the BioWatch system was deployed by DHS in multiple cities nationwide.

- Locally the San Francisco Bay Area (SFBA) BioWatch Program was implemented and operated under the SFBA BioWatch Advisory Group (BAC).

- Members included local health departments, state representatives, EPA, and FBI.
Additional BioWatch Background

• Operational Overview
  ▪ Day to Day Operations
  ▪ Field and Lab Operations
  ▪ Agents

• Local BioWatch Jurisdiction Profile
  ▪ Bay Area Counties

• Bio Watch Advisory Committee (BAC)
  ▪ Local Planning
Initial Bio Watch Response

- Bio Watch Advisory Committee
- BioWatch notifications and conf calls
- Situational Assessment
  - PH surveillance
- Lab Analysis
- Intelligence Analysis and Criminal Investigation
  - FBI is lead law enforcement agency
- Response
  - Medical Countermeasures
Anthrax

• Acute disease caused by *Bacillus anthracis*
  ▪ *Cutaneous*
  ▪ *Inhalation*
  ▪ *Gastrointestinal*
  ▪ *Injection*

• Mode of transmission

• Incubation period 1-7 days, up to 60 days

• Transmission
Break 15 minutes PLEASE
Scenario

- **Exercise Time: October 6, 2014 ~ 9:30 PM**
- Yesterday around 5:00 PM, the San Francisco Bay Area BAC received information from the BioWatch laboratory in Southern California many of the daily filters from the collector units were positive for *Bacillus anthracis* DNA, indicating a possible exposure to anthrax spores across a wide portion of the San Diego County.
On the jurisdictional conference call that began at 6:30 PM on October 6, the investigative efforts of the FBI and local law enforcement revealed that a 32-foot Johnson Prowler, typically used as a charter fishing vessel, was reported stolen from the San Diego Harbor around 5:45 PM on October 6, 2014. The report filed stated that the fishermen passed a fishing vessel traveling unusually fast for bay traffic. The group of fishermen also found it odd that the two men in the speeding vessel were dressed in “white coveralls and each was wearing some sort of face mask.”
Scenario Cont

At 7:20 PM October 6 (during the jurisdictional conference call), the owner of Harbor Island West reported to the police, an unauthorized vessel (Figure 2) was moored at his marina; on board the vessel were "unusual clothing items and some sort of mechanical contraption. Local police responded and conducted an investigation.

On board the vessel they found two Tyvek suits stuffed into a cardboard box, an opened box of N-95 masks. This information was immediately reported to the FBI, Coast Guard and the California Highway Patrol.

Today CBS Channel 5 television has led off their morning broadcast with breaking news and footage of personnel donning personal protective equipment (PPE) at one of the affected collector locations. An unidentified "whistleblower" source for the television station has reported a "secret government cover-up of a massive bioterrorism attack." CNN, Fox News, and MSNBC in San Diego. Weaponized Anthrax is suspected.
Based on the information provided, participate in the discussion concerning the issues raised in Module 2. Identify any additional requirements, critical issues, decisions, or questions that should be addressed at this time.

The following questions are provided as suggested general subjects that you may wish to address as the discussion progresses. These questions are not meant to constitute a definitive list of concerns to be addressed, nor is there a requirement to address every question in this section.
Lisa Goldberg

- Information and Guidance Alameda County Public Health
Module 2: Intelligence and Information Sharing

Key Issues

- Internal and external communication between key response partners

- What are appropriate actions for a POTENTIAL health event when critical information is pending? Note: An event has occurred in another part of the state, but it is unknown if Alameda County is affected or will be affected
Multiple conference calls at the local, regional, and federal level have been held to assess risk and determine initial actions.

The Public Health DOC has been activated. The Alameda County Emergency Operation Centers (EOCs) has been partially activated.

Emergency response agencies and local external partners have been alerted by the Op Area EOC.

CDPH and other health departments have started surveillance activities. Veterinary surveillance data will be reviewed, syndromic surveillance will be enhanced, passive surveillance will be enhanced utilizing a health alert, and active surveillance will be conducted by public health.

Bay Area Health Officers have been put on alert to consider Post-exposure prophylaxis (PEP) for all Bay Area Residents, just in case.
Questions for Discussion

• See health alert hand out.

• What actions will be taken on the basis of this information? By whom?

• What is your process for receiving and disseminating critical information internally and externally with partners?

• Who is responsible to notify agency executives regarding health alerts of this nature?

• Health Care Facilities
  • What percentage of your staff is on CAHAN? Are key members of your staff on CAHAN?
Module 3 Priority Prophylaxis

Situation Update:

County Health Officials have located small caches of doxycycline and ciprofloxacin in the Bay Area. This cache will be shared with health departments in the Bay Area. A decision is being CONSIDERED to who should receive medicine from this cache.
KEY ISSUES

- Recommendations on priority prophylaxis are being developed. In the case of anthrax, exposed people (those who were in the area of an anthrax release) are given antibiotics and/or anthrax vaccine as prophylaxis.

- If there was a county wide exposure to anthrax who should receive the limited supply of antibiotics?
Questions

- As a precaution the Health Department is assessing how many doses of Doxycycline and Ciprofloxacin are currently in your agency. Does your agency have any doxycyline or ciprofloxacin?

- If your agency was given an allocation representing 10% of your staff, who would most likely receive those doses?

- Who are the key decision makers involved in this decision?

- How will this decision affect your agency?

- How will this affect your work force?

- How will not providing medicine to family members affect your staffing?

- If you are a representative from a city, how do you define your critical infrastructure?
Debrief

- Strengths
- Weaknesses
- Opportunities
- Threats
Closing Comments

- Thank you for your participation today.
- Please be sure to fill out and submit a participant feedback form.
  - Discussion and feedback captured during today’s tabletop will be utilized for revisions and improvement of the plans presented today.
  - Additionally, comments, suggestions, recommendations, and feedback from participant feedback forms will be reviewed.
  - Comments and discussion will be included in the After Action Report.
Exercise Level of Play:

- What level of exercise play does your organizations/ agencies anticipate for the November 20, 2014 exercise

- Examples include communications drill, functional and full scale exercises. Level of play may include use of simulated patients, receipt of supplies, movement of patients to healthcare facilities, medical surge, etc.
November 20, 2014

- **SCENARIO**
  - The scenario for the 2014 Statewide Medical and Health Exercise will be an anthrax scenario and medical surge.

- **TARGET CAPABILITIES AND GOALS**
  - Emergency Operations Center Management
  - Medical Surge
  - Communication
    - Emergency Public Information and Warning
  - Mass Prophylaxis
Conclusion of Discussion-Based Tabletop