

 **2020 Hospital Tabletop Exercise for COVID-19**

**We’re in the midst of the ongoing concern for the spread of COVID-19 to our communities, which will affect everyone including facilities and staff and their families.**

1. What have you done to prepare your facility and staff for a potential positive patient?

2. Do you have the necessary PPE?

3. If your supply of PPE is limited, how are you going to protect it?

4. Have you trained pertinent staff on PPE, donning and doffing, and infection prevention issues? Will you do Just in Time training?

5. Are staff familiar with your plans and policies for dealing with a person under investigation (PUI)?

6. Have you identified staff that could work from home, if necessary?

7. How will you deal with staff fear and absenteeism?

**A man is brought into your Emergency Department (ED) by his family with a high fever, cough and difficulty breathing. He lives in your city and has just returned home from a business trip to China. Based on his symptoms and his recent travel history, the man (58 years old) is suspected of having COVID-19.**

1. Who should be informed, when and how?

2. What plans, procedures and resources would you activate at this point?

3. Where are you getting your information regarding requirements and recommendations to follow for care of this patient?

4. Are you following guidance for shortage of PPE if that is applicable to your facility?

5. What Infection Prevention and Control measures would you put in place for this patient as well as the facility and other staff?

**MDH lab is now able to do the testing.**

1. How will you confirm whether the patient has COVID-19 or influenza?

2. How long will confirmation take?

3. How and where will you care for the patient before receiving test results?

**The lab report confirms a positive test for COVID-19 for the man. The man’s condition worsens and is critical.**

1. Does the patient need to be transferred to another hospital? If so, where will you transfer to and mode of transport?

2. What happens if no higher level of care hospital will accept your patient?

**Total contacts identified since patient’s onset of symptoms are 15, including the examining doctor and two nurses, who initially cared for him in the ED, his immediate family and some local office colleagues.**

1. What are your immediate priority actions?

2. Have you considered standing up your Hospital Incident Command System (HICS) yet?

2. What additional information do you require?

3. Who would you notify about this suspected case? MDH? RHPC? LPH? Coalition? Others?

4. Who manages and conducts the monitoring and testing of the contacts?

**Six of the contacts being monitored, including the man’s wife and two nurses and a doctor have now tested positive for COVID-19.**

1. Who needs to be informed of the results—in house, local public health, region, others?

2. COVID-19 a reportable condition/disease now. Who reports it and to whom?

**In addition, 3 separate clusters of a total of 30 lab confirmed cases have been admitted in area hospitals.**

**Domestic/community transmission is now evident. The public is nervous, and the media is looking for a statement and comment on rumors of multiple confirmed cases within your county.**

1. How would this event be coordinated and managed?

2. Where would the funding come from to implement the response?

3. What support would you request from MDH, Healthcare Coalition, LPH, Emergency Management and other partners?

4. Who is leading the risk communication for this event? Hospital PIO?, Local Public Health PIO, Emergency Management PIO?, other PIO?

5. What communication needs to take place and to whom?

6. What is your strategy for media communication?

**Discuss and answer these questions:**

1. What worked well? (Achievements)

2. What was challenging? (Challenges)

3. Recommendations? (Prioritize those to identify your top 3)