

Department of Veterans Affairs
Veterans Health Administration
Comprehensive Emergency Management Program

Enhancing Capability Assessment

Objectives

- Describe the development process for the methodology.
- Describe the design of the capability framework.
- Identify the various components of the methodology and the contribution each makes into the overall assessment procedure.
- Discuss the applications of data from this study to system-wide quality improvement

Background

- Department of Veterans Affairs (VA)
 - Veterans Health Administration (VHA)
- VHA missions
 - Health care, education, research and contingency support
- Contingency/EM focus:
 - Continuity of care for Veterans
 - Varying perspectives on deliberate planning with communities

EM Program Evaluation Activities

- On-going - Joint Commission surveys of VA treatment facilities
- 2005 - Web-based survey of all VA Medical Centers (VAMCs) and Network offices
- **2007-2010 - Capability Assessment Program**
- 2009 – Education and Training Needs Assessment Survey
- 2009 - Emergency Management Accreditation Program (EMAP) Pre-assessment

Capability Assessment Program

- Based on Comprehensive Emergency Management (CEM): mitigation, preparedness, response and recovery.
- Hospital-focused (Tier 1):
 - Set of activities commonly seen in emergencies/disasters.
 - Integrates all EM-related standards and regulations.

"Are We Ready?"

- This simple question was posed by a senior official responsible for the VA health care system in the summer of 2007.
- The VHA Capability Assessment Program includes:
 - 158 VA Medical Centers
 - 21 Network Offices, and
 - VHA Central Office.

Development Process

- The Veterans Health Administration (VHA) Capability Assessment Program (CAP) was developed over a six month period, involving approximately 100 subject matter experts from VHA, other Federal agencies, and the private sector.
- The design of the CAP methodology took advantage of past and current practices, and used two pilot sites to refine the approach.

Organizational Priorities

- Occupant safety is the primary initial and on-going concern, followed by continuity of service delivery and business functions.
- If conditions allow, the organization will try to expand service delivery (surge) and support its partners, the community and/or the Nation.
- An incident management system is used to coordinate these activities.
- The operational readiness of these capabilities are developed on a day-to-day basis through a deliberate planning process.

Resultant Capability Framework

- Program level
 - Mitigation and preparedness activities
- Emergency operations level
 - Incident management activities
 - Occupant safety activities
 - Resiliency/continuity of operations activities
 - Medical surge capacity/capability activities
 - External support activities

Design Challenges

- The challenge of the design process included:
 - How to maximize the learning potential of such an assessment, while at the same time, balancing the need to provide an objective appraisal of the operational readiness?
 - How to integrate all of the various requirements into this formative assessment process?

Resultant CAP Methodology

- The methodology includes a pre-survey (self report); a defined set of capabilities; and, a four day on-site, independent third-party assessment process that uses document review, interview, observation, and capability demonstration methods.
- The assessment team blends key disciplines (hospital administration, clinical, technical, and emergency management expertise) and uses a standardized site visit agenda, interview questions, and scoring tool.

“Hospital Target Capability List”

- 69 capabilities were identified for VA Medical Centers and 43 for the Network offices.
 - Program; incident management; occupant safety; continuity/resiliency; medical surge; and, support to external requirements
- Each capability description includes a performance objective, rationale, measurement techniques, and elements.
 - The measurement tables were expanded from those found in the DHS Target Capability List.

On-site Visit

- Opening Conference
- Site Visit Agenda
- Document Review
- Facility Tours
- Capability Demonstrations
- Tabletop Exercise
- Interview Questions
- Scoring Process
- Reporting

Document Review

- Hazards Vulnerability Analysis
- Standard Operating Procedures for priority hazards
- Emergency Operations Plan
- Resource Inventory and list of mutual aid agreements/contracts
- Incident Management Team assignments
- Key personnel contact list
- Last two After Action Reports for exercises
- Minutes from last six EMC meetings
- Last two annual program evaluation reports of the Emergency Management Committee

Facility Tours

- Emergency Operations Center
- Decontamination area
- Resource storage
- Emergency Department
- Emergency pharmaceutical cache
- Laboratory/blood bank
- Selected treatment areas, including isolation and negative pressure rooms, patient surge areas, and alternate care sites
- Mission critical systems (e.g., generators, external hook-ups for water, control of external vents for HVAC, etc.).

Capability Demonstrations

- Mobilization of disaster resources (e.g., surge supplies)
- Mobilization of pharmaceutical cache
- Lockdown procedure
- Setting up decontamination capability
- Linkages between decontamination and patient reception during surge and evacuation
- Disaster patient registration and decontamination process

Interview Questions:

“Management and Maintenance of Fixed and Portable Electrical Generation”

- Does your facility have a portable generator program?
- Describe how your facility plans to replenish fuel for generators and portable generators?
- Does your facility identify the risk that some assets may not be available from planned sources and that contingency plans will be necessary for those critical supplies?
- Are generators tested periodically in accordance with the manufacturer’s recommendations?
- What are the plans for relatively rapid connection of your portable generators to the facility’s electrical system?

Evaluation Criteria

- Policies or Guidance
- Resources
- Personnel
- Processes
- Education/training
- Exercise
- Evaluation
- Organizational learning

Capability Measurement

- Exemplary: The facility often performs at a higher level than industry standards call for.
- Excellent: The facility often goes above and beyond the required standards.
- Developed: When present, the facility meets industry standards relative to that capability.
- Being developed: The capability is in its infancy, and initial attempts to build the capability are underway.
- Needs attention: There is no evidence the capability exists.

Analysis and Application to Quality Improvement

- Final reports for VAMCs and VISN Offices become the basis for improvement plans.
- Descriptive analysis is used to aggregate findings and other evaluations inform national level quality improvement efforts, that include:
 - Operational system description
 - Standards and requirements integrated into guidance, templates and strong practices
 - Glossary, competency framework, curricula and certification

Analysis and Application to Quality Improvement (con't)

- Program and performance evaluation
- Improvement process, tracking and funding
- Policy development and coordination
- Strategic planning and budgeting
- Performance measures and annual work plans
- On-going inter-disciplinary, inter-agency, inter-governmental information sharing.

“Capability Assessment Program”
documents are available at:

www.va.gov/emshg

Thank You!

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