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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