

Discussion Guide for Ebola Concept of Operations (ConOps) Planning

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Acknowledgments

Listed below are the agencies, departments, and associations that helped to develop this tool.

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Chapter 1 Introduction

This Ebola Discussion Guide is a tool to aid planners in developing an Ebola Concept of Operations (ConOps) Plan using the Ebola ConOps Planning Template¹ that was developed, with the support of several partners, by the U.S. Department of Health and Human Services (HHS) and the Centers for Disease Control and Prevention (CDC).

The purpose of the guide is to

- Encourage the coordination and integration of Ebola ConOps planning among sectors in a jurisdiction as well as in neighboring jurisdictions.
- Assist participants in the discussion to gain an understanding of the processes that are working well, challenges or needs that may or may not be known by all sectors, and expectations or assumptions that may drive planning decisions.
- Identify action steps needed to develop a comprehensive, coordinated, and effective Ebola ConOps Plan or update an existing plan.

By bringing all sectors together, the full range of resources and considerations can be applied to improve a jurisdiction's capability to plan for and safely manage persons under investigation (PUIs) or patients with confirmed Ebola virus disease (Ebola). In addition, following the process may assist participants as they develop ConOps plans for other public health emergencies.

1.1 How to Use This Guide

This discussion guide consists of nine modules, each focusing on a key system element or elements outlined in the Ebola ConOps Template. Not all key elements are covered because they describe equipment needs or sectors that do not require detailed planning efforts. For additional information on the key system elements not included, please refer to the Ebola ConOps Planning Template.

Planners may use this discussion guide to address particular areas of interest to planning team members or use it as a comprehensive guide to aid in the development of an integrated Ebola ConOps plan, regardless of whether they use the Ebola ConOps Planning Template.

¹ A link to the *Ebola Concept of Operations Planning Template* is found in the Planning and Preparedness paragraph at <http://www.cdc.gov/vhf/ebola/docs/ebola-concept-of-operations-planning-template.docx>.

This discussion guide is a source of recommendations and should be adapted to fit your needs because no jurisdiction is exactly like another. Structures, governances, capabilities, and resources vary widely. Key considerations provided throughout the guide are not exhaustive, but rather intended to stimulate discussion among key personnel to enhance planning and sector coordination. Additional considerations may be added prior to or during discussions.

The chapters include the following

- **Chapter 1** provides information on the discussion guide, such as definitions, target audience, and benefits of using the guide.
- **Chapter 2** provides recommendations on preparing for planning discussions and contains modules related to each topic with recommended partners and questions.
- **Appendices** provide acronyms and definitions as well as templates for letters to decision makers and those invited to assist in planning.

This discussion guide is not intended to provide information or guidance on how to evaluate an Ebola ConOps Plan. For exercise guidance, refer to the Ebola ConOps Exercise Guide, which also was created by HHS and CDC.

1.2 Definitions

These words are used throughout this document and are defined here to ensure the reader has a common understanding of their meaning:

- **ConOps:** A conceptual overview of the processes and steps envisioned in the proper functioning of a system or in the proper execution of an operation. Usually includes responsibilities and authorities, available resources, and methods to improve communications and coordination.
- **Jurisdiction:** For the purpose of this document, the term refers to the state, territorial, and major metropolitan area awardees who receive funds through the Epidemiology and Laboratory Capacity for Infectious Diseases (ELC), Public Health Emergency Preparedness (PHEP) cooperative agreement, and the HHS Office of the Assistant Secretary for Preparedness and Response (ASPR) Hospital Preparedness Program (HPP) grants.
- **Sector:** Refers to agencies and organizations with similar services that would respond to or provide support during a response (i.e., public health, healthcare, emergency medical services [EMS]).

1.3 Target Audience

The target audience for this guide is the official(s) or agency responsible for the development and execution of the jurisdiction's preparedness or response plans. This audience would include chief executive officers, state preparedness directors, PHEP and HPP program officials, and state health department leaders.

1.4 Benefits

Coordinated and integrated planning is vital to ensure emergency response plans are in harmony among sectors in your jurisdiction as well as neighboring jurisdictions in order to safely and effectively manage PUIs or patients with confirmed Ebola. Coordinated response planning may include creating memoranda of understanding (MOUs) or mutual aid agreements (MAAs) with agencies and organizations, joint planning or integrating existing plans, and working collaboratively on jurisdiction-wide training and exercise plans.

An inclusive and transparent planning process will help participants gain insight from a comprehensive range of backgrounds and perspectives, identify a realistic and shared view of the current state of response planning in their jurisdiction, and build support and ownership among stakeholders. Planners will gain awareness of the processes that are working well, challenges or needs that may or may not be known by all sectors, and expectations or assumptions that may be driving planning decisions. This knowledge will help in developing or refining the Ebola ConOps Plan as well as plans for other public health emergencies, particularly those involving infectious diseases.

1.5 Providing Feedback

Feedback about *Discussion Guide for Ebola ConOps Planning* can be sent to healthcareprepared@cdc.gov.

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Chapter 2 Discussion Modules

2.1 Preparation

Preparing for the Ebola ConOps discussion involves five primary steps:

1. Enlist Leadership Support

To be successful, public health preparedness and response requires upper management or leadership support. A sample invitation letter (see Appendix C) and executive informational letter (see Appendix D) reinforce the importance of Ebola ConOps planning to leadership.

2. Identify a Facilitator

The facilitator is responsible for leading and guiding the discussion and need not be the principle planner. Prior to selecting a facilitator, make sure the candidate has a working knowledge of each of the participating sectors, including how they interact, and a basic understanding of the jurisdiction's preparedness and response plans.

3. Identify Participating Sectors and Representatives

ConOps planning is most successful when it taps into the guidance, expertise, and passion of the people who play a primary role in preparedness planning within your jurisdiction. All planning should involve the PHEP and HPP personnel working at the jurisdiction level. For many jurisdictions, a collaborative planning committee and transparent planning process includes representation from the following sectors and agencies:

- State/Territory
 - Public health (Health Officer, Epidemiology, and Preparedness Coordinator)
 - Hospital association
 - EMS agency
 - Emergency management agency
 - State legal office
 - State occupational safety and health administration
 - Transportation office

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- Finance department for budget and reimbursement
- Mental health agency
- Family services
- State law enforcement
- Public information office

As needed

- Funeral director association
- County health departments
- Local
 - Health departments (Health Officer, Epidemiology, and Preparedness Coordinator)
 - Hospitals
 - Healthcare coalitions (coordinating link to hospitals, EMS, outpatient ambulatory care, and other partners)
 - 9-1-1/Public Safety Answering Points (PSAPS)
 - EMS agencies (public and private)
 - Emergency management
 - Fire department/hazardous material teams
 - Family services
 - Public information office
 - Pollution control and hazardous waste management agencies
 - Medical examiner or coroner's office/funeral homes
 - Airports

As needed

- Mutual aid partners outside of the jurisdiction
- County health departments

You may want to include other agencies and sectors, such as faith-based organizations, school systems, nonprofit businesses, unions, medical societies, and others, based on planning needs.

While discussion modules focus on the efforts of some key sectors and agencies, holding an integrated and inclusive planning discussion among all representatives may identify assumptions, concerns, or solutions not apparent to the planners in the responsible sector or agency.

4. Coordinate Logistics for an Interactive Discussion

Based on your jurisdiction's needs, decide on the format of the discussion. For example, you may decide on an in-person, full-day workshop(s), virtual meeting(s), short planning discussions as part of planning committee meetings, or brown bag lunch discussions. The format will drive the logistics requirements.

5. Conduct Pre-discussion Preparations

Planners, participants, and the facilitator will need to do some work before the discussion begins to make the best use of the discussion time. This will involve gathering and sharing information with participants and preparing handouts for the actual discussion. Specific preparations include.

- Planners
 - Ensure that participants have copies of current plans or sections of plans related to their area of expertise.
 - Provide participants with a link to the *Ebola ConOps Planning Template* for their review (<http://www.cdc.gov/vhf/ebola/docs/ebola-concept-of-operations-planning-template.docx>).
 - Request that participants provide
 - Their roles and responsibilities
 - A list of key partners

- The flow of communication with their key partners related to the discussion topic (e.g., laboratories generally communicate results using set reporting formats and communication programs).
- Participants
 - Provide planners with
 - Current roles and responsibilities
 - A list of key partners
 - How communication channels flow with these key partners.
 - Review current plans or sections of plans related to their area of expertise and determine if the information is relevant to the upcoming discussion.
 - Review the Ebola ConOps Planning Template and determine if a response will require new procedures or a modification of existing procedures as outlined in current plans.
- Facilitators
 - Review the material provided by planners and participants.
 - Create or modify the discussion questions within the modules to help participants identify gaps and share critical information related to their response.
 - Ensure that all participants are familiar with the terms for use during the discussion.

2.2 Module Overview

The modules in section 2.2 are designed to provide key considerations and information, outlined in the Ebola ConOps Planning Template, to help jurisdictions develop an Ebola ConOps Plan. These modules include

- Module 1: Public Health Monitoring and Movement, Isolation, and Quarantine
- Module 2: EMS Support at the Jurisdictional Level for the Transport of a PUI or Patient with Confirmed Ebola
- Module 3: Implementation of the Healthcare Facility Tiered Strategy

- Module 4: Coordinating with Regional Ebola and Other Special Pathogen Treatment Center
- Module 5: Enhancing Infection Control Procedures and Personal Protective Equipment Use
- Module 6: Laboratory Services Support and Coordination
- Module 7: Waste Management Considerations
- Module 8: Mortuary Affairs

Each module contains sample material for the following categories

- A short description regarding the module
- Discussion topics

Objectives for each module

- Increase awareness of the agency or agencies responsible for developing, updating, and executing this section of the jurisdiction's Ebola ConOps Plan.
- Identify gaps and challenges related to sector coordination, protocols and procedures, resource availability, and communication.
- Increase awareness of key considerations to be included in the jurisdiction's integrated Ebola ConOps Plan or Annex.

Review of discussion

- Did participants discover any need to revise their roles and responsibilities?
- Did participants discover any gaps or challenges related to sector coordination, protocols and procedures, resource availability, or communications?
- What are the next steps needed to improve the plan?

Information included in these sections within the modules is NOT all-inclusive. Planners should use module samples only as a starting point for their discussion design.

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Module 1: Public Health Monitoring and Movement, Isolation, and Quarantine

This module combines two key system elements from the template and is designed to encourage a discussion of current and future processes and procedures for identifying, tracking, isolating, and quarantining persons with a potential or confirmed infectious disease. Participants should know that the monitoring and movement process and procedures generally outlined in Active Monitoring and Direct Active Monitoring programs were added in response to risks posed by potential Ebola carriers. The isolation and quarantine aspects of the system consists of normal procedures for public health and does not generally require further discussion, unless the disease encountered requires more interaction by partners. With all the nations in West Africa declared Ebola-free, the monitoring and movement process has been discontinued². The jurisdiction should plan for triggers to stop and start the program again should it become necessary to respond to other outbreaks. Reviewing the processes and procedures with key partners should also improve the response to other infectious diseases.

Discussion Topics	Key Considerations
Roles and Responsibilities	Conduct a quick review of the roles and responsibilities of the public health agency responsible for drafting or updating this section of the Ebola ConOps Plan.
Sector Coordination	<ul style="list-style-type: none"> • What can public health tell other participants about the system designed for monitoring and movement? Include <ul style="list-style-type: none"> ○ Process for how those monitored will report their status or development of symptoms ○ Protocols to arrange for controlled movement, self-isolation, or self-observation of symptomatic PUIs ○ Procedure in place to address travelers who are noncompliant with monitoring or movement restrictions ○ Contact tracing for those with potential exposure to a person with confirmed Ebola ○ Protocol for notification about a symptomatic PUI (include hospital and EMS notice)

² Interim U.S. Guidance for Monitoring and Movement of Persons with Potential Ebola Virus Exposure at <http://www.cdc.gov/vhf/ebola/exposure/monitoring-and-movement-of-persons-with-exposure.html>.

Discussion Topics	Key Considerations
	<ul style="list-style-type: none"> • How is information (e.g., cell phone, dispatch system) shared with other stakeholders, including 9-1-1, EMS, hospitals, and other healthcare providers? • Does the notification process change if multiple PUIs or special populations present, such as a pregnant woman or child? • How will educational communications regarding the disease be provided to limit panic in the community and avoid stigmatizing the PUI and close contacts?
Communications	<ul style="list-style-type: none"> • Is a notification "call-tree" in place? Are all sectors and key agencies aware of and have access to this list? • Does the media plan include the criteria for press releases and coordination of messages, as well as all forms of social media channels? • Are prewritten messages ready for use to communicate the information about the unnamed PUI to the public? Are follow-up messages for negative and positive tests and next steps also ready?

Module 2: EMS Support for the Transport of a PUI or Patient Confirmed with Ebola

This module focuses only on the key system element from the Ebola ConOps Template that relates to EMS at the jurisdiction level and includes discussion questions related to supporting EMS operations at a local level. Also recommended is the development of processes and procedures that support interstate coordination, which may involve including partners from neighboring jurisdictions and the jurisdiction containing the regional Ebola and other special pathogen treatment centers. Jurisdictions already may have regional EMS plans to support other hazard response. These plans provide a good base with which to begin planning for the transport of PUIs and/or patients with confirmed Ebola.

Discussion Topics	Key Considerations
Roles and Responsibilities	<ul style="list-style-type: none"> • Identify the lead EMS agency responsible for drafting, updating, and executing this section of the Ebola ConOps Template. • Conduct a quick review of agreed-upon responsibilities.
Sector Coordination	<ul style="list-style-type: none"> • Are protocols and processes in place for the transport of a symptomatic PUI from their domicile to an assessment hospital or ETC? • Have procedures been identified to coordinate EMS assets for intrastate transfer from facility to facility (e.g., frontline healthcare facility to assessment hospital or regional Ebola and other special pathogen treatment center)? • Are strategies in place to facilitate coordination with EMS agencies supporting the airport and with airport managers when a PUI or patient with confirmed Ebola is transported using air assets? • Has the jurisdiction considered coordinating with EMS agencies to develop procedures and arrange for a transfer between two EMS vehicles to facilitate long transport times? • Are strategies in place to assist EMS agencies with the disposal of contaminated waste and decontamination of the ambulances? • How does the jurisdiction support a need for mental health services for the PUI, patients with confirmed Ebola, responders, and families?

Discussion Topics	Key Considerations
<p>Protocols and Procedures</p>	<ul style="list-style-type: none"> • Are prescreening protocols in place for 9-1-1/PSAPs? • Has the jurisdiction identified any Ebola-specific protocols for EMS, including on-scene assessment and treatment of PUIs? If so, what are they? • Does the process for transporting PUIs or patients confirmed with Ebola include a specific EMS agency or MAA (e.g., for long distances within a state or for interstate transfer)? • What concerns or issues exist regarding transport across jurisdiction boundaries with interstate transfers? • Do the EMS agencies most likely transporting PUIs or patients with confirmed Ebola <ul style="list-style-type: none"> ○ Have the appropriate personal protective equipment (PPE)? ○ Conduct initial and ongoing training for personnel on how to conduct this transport? ○ Conduct drills and exercises with their hospital partners?
<p>Communication</p>	<ul style="list-style-type: none"> • Are protocols in place to alert and provide awareness information to the responding EMS providers to ensure the proper level of PPE is worn? • What are the steps to notify the designated hospital(s) of incoming PUI or patient confirmed with Ebola?

Module 3: Implementation of the Tiered Healthcare Facility Strategy

This module focuses only on the key system element from the template that relates to the development of the tiered healthcare facility strategy in the jurisdiction. Participants in this discussion will benefit from having leaders or planners from healthcare coalitions and healthcare facilities involved. Participants from these organizations or facilities can best describe any gaps or issues in the plans. Note that issues discussed during this module may carry over to the discussion related to supporting the hospital systems and the regional Ebola and other special pathogen treatment centers.

Discussion Topics	Key Considerations
Roles and Responsibilities	<ul style="list-style-type: none"> • Identify the lead agency responsible for drafting, updating, and executing this section of the jurisdiction's Ebola ConOps Plan. • Define the responsibilities of the lead agency.
Sector Coordination	<ul style="list-style-type: none"> • Has the public health agency identified the healthcare systems or facilities that have agreed to support as regional Ebola and other special pathogen treatment centers, Ebola treatment centers, assessment hospitals, or frontline healthcare facilities? • What coordination is necessary to arrange for interfacility transfers? • How has your jurisdiction leveraged healthcare coalitions to advance comprehensive infectious disease planning for hospitals, outpatient clinics, and EMS? • How will the jurisdiction coordinate between the healthcare facility and CDC for advice on the clinical management of patients? • How will mental health services provide assessment and support for healthcare workers, PUIs, patients with confirmed Ebola, patient family members, and the general public?

Discussion Topics	Key Considerations
<p>Protocols and Procedures</p>	<ul style="list-style-type: none"> • Who within the jurisdiction sets the protocols for determining if healthcare facilities supporting the Ebola response are prepared? • Do plans clearly outline the description of the jurisdiction's <ul style="list-style-type: none"> ○ Evaluation process of tiered healthcare facilities? ○ Reporting requirements for hospitals? <ul style="list-style-type: none"> ▪ Assessing PUIs? ▪ Treating patients with confirmed Ebola? ○ What are the protocols for monitoring staff who are providing care to PUIs or patients with confirmed Ebola? • Have procedures been outlined to track patients from the point they enter the healthcare system through their course of care? • What are the protocols, including the point of contact, for arranging and coordinating interfacility transfers?
<p>Resource Availability</p>	<ul style="list-style-type: none"> • What resources (e.g., PPE, training, funds) do the jurisdiction or healthcare coalitions have available to assist designated hospitals, if any? • What is the process to request and use unapproved medical products (e.g., investigational therapeutics, products authorized for emergency use)?
<p>Communication</p>	<p>Is a plan in place that outlines who will communicate with staff, the public, media, and current patients and their families about the care of a patient with confirmed Ebola in the facility?</p>

Module 4: Coordinating with Regional Ebola and Other Special Pathogen Treatment Centers

This module focuses on how the jurisdiction will coordinate care with the regional center for patients with confirmed Ebola. Again, participants in this discussion will benefit from having leaders or planners from healthcare coalitions and healthcare facilities involved and will also require the participation of planners and decision makers from the regional center and the jurisdiction hosting the center.

Recommended partners

- Public health
- Assessment hospital and Ebola treatment center leaders and planners
- EMS and Fire authorities
- Law enforcement
- Regional center and host jurisdiction leaders and planners

Discussion Topics	Key Considerations
Roles and Responsibilities	Identify the lead agency responsible for drafting, updating, and executing this section of the Ebola ConOps Plan.
Sector Coordination	<ul style="list-style-type: none"> • What is the process outlined in the MOU for sending and receiving patients between the jurisdiction and the regional center? • How will the jurisdiction coordinate with CDC and the ASPR Regional Emergency Coordinator if a patient or healthcare worker tests positive for Ebola? • What coordination is needed if the regional center has multiple patients with laboratory-confirmed Ebola and cannot accept another patient?
Protocols and Procedures	<ul style="list-style-type: none"> • What are the protocols for <ul style="list-style-type: none"> ○ Transferring patients to your jurisdiction's regional center? ○ Requesting, coordinating, and executing air transport transfers, including MOUs with designated EMS agencies and airports?

Discussion Topics	Key Considerations
Resource Availability	<ul style="list-style-type: none"> • What resources are available from the designated regional Ebola and other special pathogen treatment centers? • What resources are available from law enforcement if transporting vehicles need escorts? • What transport mechanisms are available (ground or air) and how are they requested?
Communication	What plans are in place, including risk communication strategies, to increase accurate information sharing to the public and media?

Modules Related to Supporting Healthcare Sectors

The following modules focus on key system elements from the Ebola ConOps Template that support hospitals, EMS, and other healthcare sectors. This discussion often involves a smaller list of partners and includes discussion focused on the requirements outlined in the CDC ELC funding opportunity announcement (FOA). When these discussions are complete, planners may wish to bring key partners together with hospital leaders and planners to discuss how these sections of the Ebola ConOps Plan support their operations.

Module 5: Enhancing Infection Control Procedures and PPE Use

This module focuses on how the jurisdiction will enhance infection control procedures in healthcare settings through assessment, training, and improved oversight. Supplying and conducting training on the proper use of PPE also is included because of its importance in maintaining good infection control procedures. These key system elements benefit daily operations as well as operations involving Ebola. Increased membership from key players in an infection control advisory group helps identify issues that may improve infection control procedures in all healthcare sectors. Additional information on how to enhance infection control procedures is covered in the CDC ELC FOA.

Discussion Topics	Key Considerations
Roles and Responsibilities	Identify the lead agency responsible for drafting, updating, and executing this section of the Ebola ConOps Plan.
Sector Coordination	<ul style="list-style-type: none"> • What steps are being taken to include PHEP and HPP preparedness coordinators, EMS, and mortuary services representation on infection control advisory groups? • What coordination is ongoing to develop infection control improvement plans and strategies to address any gaps? • What plans are in place to share or standardize PPE stocks between coalitions and/or facilities? • What efforts are made to standardize training requirements across sectors for the donning and doffing of PPE?

Discussion Topics	Key Considerations
<p>Protocols and Procedures</p>	<ul style="list-style-type: none"> • Will the jurisdiction coordinate the decontamination of the ambulance with hazardous material teams or is this the responsibility of the ambulance agency? • Are protocols in place to manage cleaning and disinfection of areas within the community, including the residence and automobile of a patient with confirmed Ebola? • Are protocols in place to evaluate, assess, and periodically review infection control practices and competencies in healthcare facilities and for EMS?
<p>Resource Availability</p>	<ul style="list-style-type: none"> • Do all planning committee members, sectors, and agencies have an up-to-date list, including contact information, for infection control points of contact in each healthcare facility as well as the regulatory/licensing oversight authorities? • Does the jurisdiction have a forum or platform to support the sharing of best practices and lessons learned regarding infection control across all applicable sectors (e.g., public health, healthcare, EMS)?

Module 6: Laboratory Services Support and Coordination

This module focuses on how the jurisdiction will assist hospitals in conducting differential diagnostic testing, especially with specific tests for Ebola. Participation from an assessment hospital in this discussion will aid in confirming any assumptions made by state Laboratory Response Network (LRN) personnel regarding current testing capabilities and gaps at those hospitals.

Discussion Topics	Key Considerations
Roles and Responsibilities	Identify the lead agency responsible for drafting, updating, and executing this section of the Ebola ConOps Plan.
Sector Coordination	<ul style="list-style-type: none"> • Is the state LRN laboratory capable of doing Ebola testing for PUIs? • Do the designated assessment hospitals (or in some jurisdictions, the frontline healthcare facilities) have the capability to do all the required testing for differential diagnosis? • Is a plan in place regarding whether Ebola also has to be ruled out if an alternative diagnosis is established (see http://www.cdc.gov/vhf/ebola/healthcare-us/laboratories/safe-specimen-management.html)?
Protocols and Procedures	<ul style="list-style-type: none"> • Are MOUs or MAAs in place with laboratories in neighboring jurisdictions? • Are protocols in place for the transport of specimens if the jurisdiction does not have a laboratory capable of certain tests? • Are the procedures for the collection, packaging, and shipping of specimens to the nearest LRN laboratory clearly defined?
Sector Coordination	<ul style="list-style-type: none"> • Do you have an up-to-date list of contact information for Laboratory Directors or their points of contact for each hospital doing diagnostic workup on a symptomatic PUI? • Is this list accessible to all applicable sectors, agencies, and representatives? • Are procedures in place to notify all relevant partners (public health, ETC, EMS) if the patient is confirmed to have Ebola?

Discussion Topics	Key Considerations
Resource Availability	Is an adequate stockpile available of applicable laboratory-specific supplies needed for specimen collection, transport, and testing as well as training of staff?
Communication	Do you have prepared messages for public media regarding patients undergoing testing and for cases where an Ebola diagnosis is confirmed?

Module 7: Waste Management Coordination

This module focuses on how the jurisdiction will coordinate the shipment and disposal of Category A waste from areas where a patient with confirmed Ebola lives, travels, or receives care. Coordination will involve the waste management companies engaged by assessment and treatment hospitals as well as those companies contracted to assist in disinfecting areas outside the hospital that may be contaminated by a patient with confirmed Ebola. Planning may also involve surrounding jurisdictions if the waste must be transported outside the jurisdiction.

Discussion Topics	Key Considerations
Roles and Responsibilities	Identify the lead agency responsible for drafting, updating, and executing this section of the Ebola ConOps Plan.
Sector Coordination	<ul style="list-style-type: none"> • Have the waste management companies completed all necessary licensing to legally transport Category A waste in the jurisdiction? • How will frontline healthcare facilities arrange for the proper packaging and transport of Category A waste if a patient they initially identified is confirmed to have Ebola (patient presented to frontline facility first)? • When transporting Category A waste, is law enforcement required to be involved? • What are the procedures to request law enforcement assistance to secure an area outside the hospital (e.g., a home or personal vehicle) that contains Category A waste? • What coordination has occurred with waste water and utility companies to ensure they will accept water and waste generated from the care of an Ebola patient?
Protocols and Procedures	<ul style="list-style-type: none"> • What state regulations exist regarding the final disposal of treated and disinfected (e.g., thermal heat, autoclaving, incineration, or a combination thereof) Ebola-associated waste? • What are the waste management procedures for the handling, packaging, and final disposition of Ebola-associated waste in the jurisdiction? • Do designated healthcare facilities have the ability to treat and disinfect Ebola-associated waste? • What are the primary containment and decontamination procedures for settings outside of healthcare facilities?

Discussion Topics	Key Considerations
Resource Availability	<ul style="list-style-type: none"> • Does everyone who may come into contact with Ebola-associated waste have access to the recommended PPE that may be needed during handling, treatment, transport, and disposal? • Do all facilities and agencies that may be involved in handling Ebola-associated waste have access to the proper containers as specified by the U.S. Department of Transportation (DOT) guidance for packaging (http://phmsa.dot.gov/hazmat/packaging-of-ebola-contaminated-waste)?
Communication	Have messages been prepared to educate and reassure the public regarding the safety of treated waste water and the transfer of Category A waste?

Module 8: Mortuary Guidelines

This module focuses on how the jurisdiction will be involved with the disposition of the remains of a person infected with Ebola. Some jurisdictions are coordinating these functions at their level to alleviate the requirement for each hospital to develop plans and enter into contracts with funeral homes and crematoriums.

Discussion Topics	Key Considerations
Roles and Responsibilities	Identify the lead agency responsible for drafting, updating and executing this section of the Ebola ConOps Plan.
Sector Coordination	<ul style="list-style-type: none"> • What is the capability of funeral homes to process Ebola-infected bodies, including hermetically sealed caskets? • Is an MOU or MAA in place with a funeral home(s) to handle the disposition of remains for any Ebola-infected bodies in the jurisdiction? • Is the jurisdiction or the coalition going to purchase the materials (i.e., leak proof body bags that can be permanently sealed) to properly prepare the body for transport or is this going to be the responsibility of each healthcare facility?
Protocols and Procedures	Are protocols set to identify how a healthcare facility will request support from the jurisdiction in the handling of a patient with confirmed Ebola who died in the facility (if the decision is made to manage support material at the jurisdictional level)?
Resource Availability	Is the jurisdiction going to arrange for an adequate supply of body bags necessary for the safe removal and burial of patients with confirmed Ebola or is this a responsibility of the coalitions or facilities?
Communication	Are messages prepared for notifying the media about the death of a patient with confirmed Ebola?

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Module 9: PPE Resources

This module focuses on how the jurisdiction will coordinate stockpiling of resources that can be used by all agencies within the jurisdiction. Again, participants in this discussion will benefit from having leaders or planners from healthcare coalitions or healthcare facilities involved and also will require the participation of planners and decision makers from the Regional Ebola and Other Special Pathogen Treatment Center and the jurisdiction hosting the center.

Discussion Topics	Key Considerations
Roles and Responsibilities	Identify the lead agency responsible for purchasing, stockpiling, and storing resources.
Resource Availability	<ul style="list-style-type: none"> • Does each jurisdiction have a stockpile of PPE? <ul style="list-style-type: none"> ○ If so, what types and how many days of PPE are stockpiled? ○ What are the criteria for distributing PPE? ○ Is PPE information (e.g., dispensing plans, quantity restrictions) communicated to healthcare systems, including EMS? ○ How is the number of PPE materials distributed tracked? • Are plans in place to regionalize/redistribute/reallocate PPE supplies if not enough PPE is available for personnel who are involved in patient care, waste disposal, and decontamination? • How does a coalition or the jurisdiction arrange for material from the Strategic National Stockpile, if it becomes necessary?
Communication	Are messages prepared for healthcare workers to reassure them about availability of resources for their protection?

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Conclusion

Final Note

Your Ebola ConOps Plan is a living document. As gaps become more visible and federal requirements change, the plan must be adapted. Additionally, you may wish to reengage with your discussion partners.

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Appendices

Appendix A: Acronyms

ASPR.....	Office of the Assistant Secretary for Preparedness and Response
CDC	Centers for Disease Control and Prevention
ConOps	Concept of Operations
DOT	U.S. Department of Transportation
ELC	Epidemiology and Laboratory Capacity for Infectious Diseases
EMS	Emergency Medical Services
FOA.....	Funding Opportunity Announcement
HHS.....	U.S. Department of Health and Human Services
HPA.....	Healthcare Preparedness Activity
HPP	Hospital Preparedness Program
LRN.....	Laboratory Response Network
MAA	Mutual Aid Agreement
MOU	Memorandum of Understanding
PHEP.....	Public Health Emergency Preparedness
PPE.....	Personal Protective Equipment
PSAP	Public Safety Answering Point
PUI.....	Person Under Investigation

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Appendix B: Definitions

Active Monitoring

All people with any level of potential exposure to Ebola

<http://www.cdc.gov/vhf/ebola/exposure/monitoring-and-movement-of-persons-with-exposure.html>

Direct Active Monitoring

Direct observation (e.g., in-person visit or video conference) at least once a day for a fever or other symptoms for people in the High and Some Risk levels, and some people in the Low Risk level

<http://www.cdc.gov/vhf/ebola/exposure/monitoring-and-movement-of-persons-with-exposure.html>

Person Under Investigation (PUI)

See CDC case definition

<http://www.cdc.gov/vhf/ebola/healthcare-us/evaluating-patients/case-definition.html>

Frontline Healthcare Facilities

Include acute care hospitals, and other emergency care settings including urgent care clinics and critical access hospitals. Does NOT include primary care offices and other nonemergency ambulatory care settings

<http://www.cdc.gov/vhf/ebola/healthcare-us/preparing/frontline-healthcare-facilities.html>

Ebola Assessment Hospital

Prepared to receive and isolate a PUI for Ebola and care for the patient until an Ebola diagnosis can be confirmed or ruled out

<http://www.cdc.gov/vhf/ebola/healthcare-us/preparing/assessment-hospitals.html>

Ebola Treatment Centers

Prepared to provide comprehensive care to people diagnosed with Ebola for the duration of the patient's illness

<http://www.cdc.gov/vhf/ebola/healthcare-us/preparing/treatment-centers.html>

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Appendix C: Sample Executive Letter

DATE XXX

Dear _____,

Over the next few weeks, _____ will be coordinating the development of our jurisdiction's integrated Ebola Concept of Operations (ConOps) Plan. This plan will guide our jurisdiction's coordinated actions across all applicable sectors and agencies to safely manage persons under investigation (PUIs) or patients confirmed with Ebola.

Coordinated and integrated planning is vital to ensure emergency response plans are in harmony among sectors in our jurisdiction as well as neighboring jurisdictions. Holding an integrated and inclusive planning discussion among all sectors and representatives with a key role in preparedness and response planning should help to identify assumptions, concerns, or solutions that may not be apparent to the responsible sector or agency.

The decision to move forward with the development of this integrated Ebola ConOps Plan is fully supported and endorsed by me and the _____. While this should cause little disruption of the planning committee's daily work, we do ask for designated representatives to attend an in-person or virtual discussion to aid in the planning process. Your support allowing representative participation during this discussion and occasional requests for plan review and input are greatly appreciated. To aid in representative solicitation, we have enclosed a sample letter.

Once complete, the Ebola ConOps Plan will serve as the foundation to help all of us in the event our jurisdiction needs to respond to a PUI or patient confirmed with Ebola. The plan will be reviewed, updated, and improved on a regular basis so that the operations and considerations remain current and relevant.

Thank you in advance for your support.

Sincerely,

NAME

Title

Address

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Appendix D: Sample Invitation Letter

DATE XXX

Dear Colleague,

Over the next few weeks, _____ will be coordinating the development of our jurisdiction's integrated Ebola Concept of Operations (ConOps) Plan. This plan will guide our jurisdiction's coordinated actions across all applicable sectors and agencies to safely manage person under investigation (PUIs) or confirmed with Ebola.

Coordinated and integrated planning is vital to ensure emergency response plans are in harmony among sectors in your jurisdiction as well as neighboring jurisdictions. To aid in this planning _____ will hold an integrated and inclusive planning discussion among all sectors and representatives who have a key role in preparedness and response planning. During the planning discussion, representatives will work to identify assumptions, concerns, or solutions that may not be apparent to the responsible sector or agency. The success of the planning discussion depends on the participation of vested decision makers from various sectors and organizations.

You have been identified as a key partner, and I would like to invite you to represent your organization during this discussion. We understand that conflicts in scheduling can and do occur; therefore, if you cannot attend, I ask you to recommend another representative from your organization. This person should possess relevant knowledge to provide input into the Ebola ConOps planning process.

For planning purposes, we respectfully request that you respond to this invitation with your intent to participate. We look forward to working with you, and thank you for your time and support.

Questions may be directed to _____ at (e-mail address) (phone number).

Sincerely,

NAME

Title

Address

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References

- *Ebola Continuity of Operations (ConOps) Planning Template* (found in the Planning and Preparedness paragraph) at <http://www.cdc.gov/phpr/documents/ebola-concept-of-operations-planning-template-8-20-2015.pdf>.
- Exercise Guide for Ebola ConOps Planning (URL will be added when the document clears).

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