Department of Veterans Affairs

Memorandum

- Date: February 3, 2003
- From: Chief Officer, Office of Public Health & Environmental Hazards (13)
- Subj: Notification of Selection for VA's Mass-Casualty Decontamination Program
- To: Medical Center Directors
- Thru: Deputy Under Secretary for Health for Operations and Management (10N)
 - Seventy-eight medical centers have been selected for implementation of VHA's mass-casualty decontamination program during the next 12 months (see attached spreadsheet for a listing of select medical centers).
 - 2. This selection was based upon the decon plan developed by your medical center in response to the June 5, 2002 VHA Directive 2002-033 "Steps Required to Establish a Practical Medical Center Emergency Mass-Casualty Decontamination Capability."
 - 3. All plans were evaluated by a VHA technical expert review committee, and their recommendations were subsequently reviewed by the VISN offices. Based on that process, 78 medical centers were selected. Please notify your VISN AEMs if your medical center has been selected for this program.
 - 4. To support the implementation of this program at your medical center, if you are one of the selected facilities, VACO will supply the:
 - required temporary/portable decon shower facilities,
 - appropriate personal protective equipment, and
 - decontamination operations training for the core staff that will support this program at your facility.
 - 5. To complete the implementation, your medical facility will be required to supply other key items, including
 - any permanent facilities that will be part of your decon program,
 - equipment not provided by VACO (e.g., trash containers, soap, towels, temporary clothing),
 - · record keeping,
 - training the additional staff needed to complete your program,
 - · conducting regular exercises and drills to assure readiness, and
 - compliance with JCAHO, OSHA and EPA regulations.

6. In addition, this letter provides guidance on the critical steps that your facility must take to be prepared to implement this program.

The overall sequence of events for implementing this program are as follows:

- A. Individual medical facilities will be notified by VACO of their selection (via this letter).
- B. The notified facility will respond within 30 days with a list of four core decontamination team members who will receive a one-week training course on decontamination operations, and on how to provide that training upon return to their home facility to the other decontamination team members that will make up the overall decontamination team.¹
- C. VACO will respond with a date when the facility's core staff can receive the one-week training course (at either the Bay Pines, FL, or Little Rock, AR VAMCs).
- D. Upon completion of the core training program, facilities will be expected to request in a letter to VACO the type and amount of temporary/portable decon units, and the personal protective equipment that they will need for their program. The core training will include guidance necessary to evaluate and identify the range of equipment supplied by VACO relative to individual medical center needs.
- E. The facility's letter requesting decontamination equipment will also include a summary of the facility's preparation to implement the program, including:
 - a. Steps to coordinate with medical center law-enforcement staff for the decontamination plan.
 - b. Identification of appropriate storage site for PPE and temporary/portable decon facilities (if used).
 - c. Identification of appropriate water and power needs and capabilities.
 - d. Description of how the decontamination patient flow plan will make possible required segregated sex decontamination operations.
 - e. Evaluation of the physical location of the decontamination facility relative to medical center HVAC and other building air intakes.
 - f. Evaluation and submission of the total decon staff requirements.²

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¹ Staff nominated for training should be medically cleared to use level C PPE by their Occupational Health Unit, according to OSHA Respiratory Protection Standard 29 CFR 1910.134. For suggested decontamination staff requirements, see "Estimated Emergency Decontamination Staffing Requirements," at vaww.va.gov/environagents. Our review committee recommends that one or more trainees should be H/Safety/Emergency Coordinators.

² Reserve and National Guard staff might make excellent candidates for medical center decon staff – however, experience shows that you have to have about 50% more of them to compensate for their military duties.

- g. Notification of on-site employee medical staff of the necessary physical examination of candidate staff, and required occupational health documentation (as defined in footnote 1 above).
- h. Steps for implementing management awareness, including the medical center's COS, on the steps required by the medical center to successfully implement this program.
- i. A budget for the recurring costs that addresses:
 - i. Costs for consumables other than the decon shelter and PPE necessary for operation of a decon program.³
 - ii. Costs for regular training of decon staff.
 - iii. Costs for each drilling exercise (2 required per year).
- F. VACO will review the letter request from the VAMC, as outlined above. Upon approval, VACO will arrange to have the requested decontamination equipment and PPE sent to the medical center.
- G. Follow-up will be essential to guarantee successful implementation. After the medical center has received all materials, the medical center Director is expected to provide quarterly reports *on implementation* that covers:
 - Number of staff trained and certified by VA Employee Education System (EES).
 - b. Documentation of appropriate storage of the decontamination equipment.
 - c. Documentation of the successful implementation of the decontamination facility.
- H. Drills and exercises are necessary to ensure and to document that a medical center has the specified decontamination competency.
 - a. Most experts recommend a minimum of two full scale exercises per year, but more may be appropriate under some circumstances, such as at particularly large facilities. Exercises should be coordinated with JCAHO requirements.
 - These full-scale exercises will involve a full decontamination dress rehearsal with decontamination staff, and will require full set-up and deployment of the facility.
 - c. Results of these exercises must be documented by the Medical Center Director, including size of staff involved, number suiting up in protective equipment, time for deployment of the decon facility, coordination with community emergency planners, and other details.

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³ Attached to this document is an itemized list of general consumables that are needed in the actual operation of a decon exercise – this list was developed out of the practical experience of a civilian hospital with an operational decon program.

- d. The report template and reporting schedule will be provided at a subsequent date.
- Medical centers not selected for this first year decon program implementation may elect to submit a decon plan to VACO for review.
 Upon approval, the medical center can purchase approved PPE and other decon equipment through VACO, using the medical center's budget.
- J. If you have any questions about this program and schedule, please contact Dr. Mark Brown, Director Environmental Agents Service, at mbrown1@vhq.med.va.qov or at 202/273-8579.