**Exercise Vector SCOPING DOCUMENT**

1. **Purpose of document**

The purpose of this document is to establish the project approach and scope for the exercise. Once reviewed and signed off this document will form the definitive description of the exercise scope, approach and governance.

1. **Background**

This exercise is a European Centre for Disease Prevention and Control (ECDC) initiative, designed to provide participants with knowledge and skills to conceptualise, plan, conduct and evaluate simulation exercises in their countries as part of the request under Lot 5 for a 2 day practical training course on how to design, conduct and evaluate simulation exercises, followed by a 2 day table-top simulation exercise on an outbreak of a mosquito-borne disease.

Exercise Vector is being conducted by Public Health England of the United Kingdom under a framework service contract to ECDC. The simulation exercise will take place at a hotel venue in a MS capital city. It will be conducted, on 19-20 May 2016, as a walk through “learning by practice” exercise and will last up to a maximum of 16 hours.

1. **Aim of the Exercise**

To exercise the public health emergency preparedness of the participating countries to a major outbreak of mosquito-borne viral disease, of both national and international dimensions.

1. **Exercise Objectives**

The objectives of the exercise are:

* In-country emergency recognition and management: detect and risk assess the situation, activate emergency organisation and plans, manage and monitor the emergency;
* Inter-sectoral collaboration: work effectively between the health and key related sectors, to assess the risks and manage the emergency;
* International collaboration: interact effectively with contiguous and other countries in the wider region, and international authorities, to assess, manage, communicate and work collaboratively to address, mitigate and resolve the international emergency;
* Risk communication: to communicate effectively regarding the health risks, between stakeholders, professionals and the public.

Important to review and evaluate: for each country to reflect on potential lessons from the exercise relating to their present state of preparedness for public health

emergencies, involving mosquito borne viral diseases in particular, and for communicable disease events more generally (but this is not an objective)

1. **Exercise Scenario**

Participants in the exercise will be given a scenario which they will have to respond to using the plans and protocols that ECDC has in place for PHE management. The scenario will be based on an outbreak(s) of a mosquito-borne disease that will address the aim and objectives of the exercise.

1. **Exercise project scope**
   1. In scope

The scope will include elements which will enable the group to exercise the public health emergency preparedness of the participating countries to a major national and international communicable disease event/situation, including partcular reference to both inter-sectoral and cross border event management. European and international agencies including DG SANTE, WHO EURO and WHO EMRO, and ECDC will also play their part in the exercise.

* 1. Out of scope

The following aspects will be outside the scope of this exercise:

* There will be no live exercise play
* There will be no real media participation

Exercise Control will simulate any participation by external agencies or organisations that would normally be involved in the PHE response activities.

* 1. Assumptions

It is assumed that exercise players will respond in accordance with their existing countries’ plans, procedures, and policies. In the absence of applicable plans, procedures, or policies, players will be expected to apply individual and/or team initiative to satisfy response requirements. Players will be briefed on which exercise assumptions are made outside of plans/policies.

1. **Timing and location of exercise**

The exercise will be conducted on 19-20 May 2016 in a hotel venue in a MS capital city during normal working hours (08:00 – 18:00).

1. **Key References**

* Handbook on simulation exercises in EU public health settings

1. **Exercise Planning**
   1. Exercise Planning Team

The planning team for the exercise will be led by Public Health England, Porton Down. The lead planning team will comprise the following representatives, supported by other PHE and ECDC staff as appropriate.

|  |  |  |
| --- | --- | --- |
| Name | Job title | Organisation |
|  | Senior Scientific Adviser | PHE |
|  | Exercise Project Manager | PHE |
|  | Senior Expert Health Systems and Preparedness (Project Contract Manager) | ECDC |
|  | Expert, Emerging and Vector-borne Diseases | ECDC |

The planning team is collectively responsible for the planning and design of the exercise and will meet regularly as agreed in the exercise schedule. PHE will develop the scenario and injects in liaison with ECDC project manager and experts. PHE will administer the exercise, supported by ECDC and MS experts.

1. **Exercise structure**

The structure for the simulation exercise will involve six to eight tables made up of three to four countries each to enable interactions with other countries in the wider region. The European and international agencies will be an intrinsic part of the exercise and will have their own tables. See Appendix A.

1. **Exercise Design**

This exercise will be run as a table top exercise and will be controlled by Exercise Control and through the Facilitation team.

1. **Exercise delivery**

Delivery of the exercise material will be via pre-prepared paper and messaging injects, telephone calls and updates. Where possible, use will be made of technology for appropriate injects (mock media broadcasts, etc)

1. **Media**

Real media will not be invited to the exercise, although the host country may wish to draw attention to the event in their country.

Pseudomedia play will be introduced into the exercise through mock news articles and social media feeds.

1. **Evaluation**

Evaluation of the exercise will be based on participants’ and observers’ feedback as well as reports and observations from facilitators. Facilitators will record issues and learning points

and critically analyse the performance of their respective syndicates and feedback to the exercise project manager through a formal report. Participants will participate in hot debriefs throughout the exercise presenting two to three key points/issues at sequential stages of the emergency response, and in a systematic evaluation session focusing on collective learning for the exercise, including in particular inter-sectoral and cross border issues.

**Report**

Public Health England will produce a draft report to be shared with the exercise planning team. A cold debrief teleconference with ECDC and MS observers will be convened as part of the report preparation process. A final report will be delivered to ECDC.

Appendix A

ECDC

WHO

EC

DRAFT Exercise structure

3 participants per country

Egypt

Jordan

Lebanon

Israel

Romania

Moldova

Ukraine

Serbia

Bosnia and Herzegovina

Montenegro

Turkey

Armenia

Georgia

Morocco

Tunisia

Algeria

Greece

Kosovo

Albania

Croatia

Hungary

Bulgaria

Macedonia

Spain

France

Portugal

Italy