



For public health decision-making in a nuclear/radiological response



## Sample Discussion-based Activity

There are five major components to building your discussion-based activity or activities:

1. Complete Checklist to Determine Role of a Public Health Agency in a Nuclear/Radiological Response
2. Define Your Activity Scope
3. Choose Your Discussion Scenario
4. Identify Your Discussion Partners
5. Choose Your Discussion Category(ies) and Prompts

Mix and match components to create activities that best suit your jurisdiction's time, needs, and available resources.

This companion document provides an example of how to use the *Discussion Guide for Public Health Decision-making in a Nuclear/Radiological Response*. For detailed instructions for each component, please refer to the [Discussion Guide for Public Health Decision-making in a Nuclear/Radiological Response](#) webpage.

### Sample Context

The sample is based on Watersville County Health Department (WCHD) in Watersville, [state], 80 miles from urban city [metropolis]. The nearest Power Plant to Watersville is 300 miles east of town. The WCHD emergency coordinator is the lead facilitator for the discussion-based activity.

### Complete Checklist to Determine Role of a Public Health Agency in a Nuclear/Radiological Response

**Note: Use the checklist to help determine potential areas of coordination, support, or management responsibilities for public health agencies in your jurisdiction during a nuclear/radiological emergency. At a minimum, the lead public health agency for the discussion-based activity should complete the checklist.**

The WCHD emergency coordinator fills out the [Checklist to Determine Role of a Public Health Agency in a Nuclear/Radiological Response](#). The coordinator takes the checklist responses and summarizes them with notes and shares it with colleagues in relevant areas of WCHD:

## WCHD Checklist Summary Table with Notes

| Guide Section                                 | Yes  | No   | Maybe  | Planning Notes  |
|---|--|--|--|---|
| <b>EMERGENCY RISK COMMUNICATIONS</b>          | Developing health messages for the public<br><br>Advising leadership on effective messaging for the public   | Issuing protective action recommendations for the public   | Communicating radiation risk to the public<br><br>Determining communication resources for functional and access needs  | Joe, Is this correct? Do we issue protective action in rad/nuc? Who is responsible?               |
| <b>HEALTH SURVEILLANCE &amp; EPIDEMIOLOGY</b> | Other short or long-term surveillance involvement  | Establishing public shelters in radiation emergencies  | Monitoring shelter residents for health issues (non-radiation related)<br><br>Coordinating with partners to establish a population monitoring registry<br><br>Maintaining a population monitoring registry | Need to define what kind of short or long-term surveillance we would do if any and in what cases? |
| <b>MEDICAL RESPONSE COORDINATION</b>          | Distributing medical countermeasures<br><br>Dispensing medical countermeasures<br><br>Providing medical surge support to healthcare systems and coalitions<br><br>Providing information about available non-pharmaceutical interventions | Managing treatment of population with radiation casualties<br><br>Coordinating mortuary services for mass fatalities | Identifying and tracking impacted populations and those at higher risk   | Do we control any relevant medical countermeasures at WCHD that would be distributed?             |
| <b>RADIATION HEALTH ASSESSMENT</b>            | -  | Coordinating environmental sampling (i.e., air, soil, water and crop samples)  | Working with radiation control staff to conduct dose assessment  | Population monitoring registry could move to yes; probably would                                  |

| Guide Section                        | Yes                           | No  | Maybe  | Planning Notes   |
|--------------------------------------|-------------------------------|---|--|--|
|                                      |                               | Coordinating with radiation control to conduct dose reconstruction  | Coordinating (i.e., collecting, packing, and shipping) biological sampling<br><br>Prioritizing people for biological sampling (i.e., blood and urine samples)<br><br>Identifying people that need to be in the population monitoring registry                    | identify people, if registry set up  |
| <b>RESPONDER HEALTH &amp; SAFETY</b> | Providing PPE recommendations | Establishing a worker dosimetry program<br><br>Establishing radiation control zones for responders  | Conducting training for emergency workers/responders   | Have we done training like this before?  |
| <b>LONG-TERM RECOVERY</b>            | -                             | Working with other agencies to determine what areas are safe to return for restricted/unrestricted use<br><br>Working with other agencies to determine what areas are not suitable for return<br><br>Identifying people/locations where people will have to relocate<br><br>Working with partner agencies to identify areas suitable for return<br><br>Collaborating with the radiation control team to interpret | Convening stakeholder groups to participate in the decision-making<br><br>Identifying priorities for return (areas, critical infrastructure, etc.)<br><br>Collaborating with radiation control to determine what food and water sources are safe for consumption | We do convene stakeholders, but would we in this case? What scenarios would we take lead on this if any? |

| Guide Section               | Yes | No  | Maybe   | Planning Notes  |
|-----------------------------|-----|---|---|---|
|                             |     | <p>results from environmental monitoring of food and water</p> <p>Collaborating with the radiation control team to determine what food and water sources are safe for consumption</p> |   |   |
| COMMUNITY RECEPTION CENTERS | -   | <p>Accessing population monitoring equipment and training on its use</p> <p>Monitoring and decontaminating service animals</p> <p>Monitoring and decontaminating pets</p>             | <p>Establishing community reception center plans</p> <p>Providing CRC resources for functional and access needs</p> <p>Coordinating with emergency management and other response partner agencies to operate CRCs</p> | <p>How are we defining access and functional needs at local HD level?</p> <p>Do we need to consider populations outside our service area?</p> |

## Define Your Activity Scope

Next, define your scope. Consider whether you will focus discussions more within public health, include partner agencies, or both. You may choose to focus on one activity within the capabilities and limitations of your local public health department, health department and healthcare coalition, or state health department, and then conduct a second activity with an expanded scope to include partner agencies.

### Discussion-based Activity 1 – Checklist Discussion

1-hour discussion-based activity to discuss the checklist

The WCHD emergency coordinator gathers feedback from colleagues and updates the checklist summary. Gaps and areas of improvement are identified for consideration in broader exercise and evaluation planning.

**Note:** Choose one of these five scenarios for your discussion-based activity or create your own:

1. Small-scale Transportation Incident
2. Nuclear Power Plant Incident
3. Nuclear/Radiological Emergency
4. Healthcare Facility Incident
5. Overexposed Patients Incident

Detailed descriptions of each scenario are available in the guide.

~~~~~Jurisdiction chooses to continue to more in-depth discussion ~~~~~

## Choose Your Discussion Scenario

The Planning Team chooses to focus their discussions using **Scenario 1: Small-scale Transportation Incident** from the discussion guide. They have updated the scenario to fit their needs and have identified objectives of Activity 2 (below).

*In geotechnical engineering, a nuclear soil density gauge is a field instrument used to determine the density of a compacted material. The device uses the interaction of gamma radiation with matter to measure density, either through direct transmission or the backscatter method (i.e., the scattering of radiation or particles in a direction opposite to that of the incident radiation due to reflection from particles of the medium traversed). The device determines the density of material by counting the number of photons emitted by a radioactive source (e.g., cesium-137) that are read by the detector tubes in the gauge base. A 60-second interval is typically used for the counting period.*

*At 3:08 p.m. on October 12, an Acme Road Construction Company crew member uses a portable soil density gauge to check the integrity of Kingston Pike near downtown Watersville. After completing their check, they set the soil density gauge on the tailgate of the truck without securing it. They then merge in with traffic where, after a few*

*minutes, the gauge falls off the back of the truck onto the roadway. The gauge is hit multiple times by cars causing it to crush and damage its housing. The workers are concerned that the housing was breached, and the sealed radioactive source has separated from the gauge, potentially releasing radioactive material (Cs-137) onto the roadway.*

*The construction crew immediately notifies the police of the incident, which results in a hazmat team responding to the scene and closing a quarter-mile radius around the scene while they search for the radioactive source using Geiger counters.*

*Local media outlets quickly learn of the incident and begin broadcasting it on radio, television, and social media. Much of the information being broadcast is incorrect and overblows the threat of radiation exposure. Some of the people in the cars and trucks that struck the soil density gauge on **Kingston Pike** are showing up at **Malliable Hospital** and the **Watersville County Health Department** without symptoms of radiation sickness but nonetheless demanding to be tested for it. People living close by to the accident scene are calling to ask if they are in danger. Local media outlets are asking **Watersville County Health Department** what the public should do.*

**Note: Based on your planning priorities, findings from your checklist, or discussions with your planning team and other partners, select the areas of involvement and discussion prompts that best fit your discussion needs and the objectives of your discussion-based activity or activities.**

## **Identify Discussion Partners/Choose Discussion Categories and Prompts**

Based on their discussion of checklist findings and planning priorities, the Planning Team develops the following sequence of discussion-based activities.

### **Put It All Together**

#### ***Discussion-based Activity 2 – 3-part Discussion Series***

Three 1-hour discussions based on identified objectives and priorities from Activity 1 - Checklist Discussion

The group determines to have a series of discussion-based activities, rather than just one discussion, and incorporates the activities into their exercise and evaluation planning process.

#### **Objective**

Based on the priorities identified from the checklist summary and/or discussions about their preparedness and readiness priorities, the Planning Team develops the following objective for their discussion-based activity series: discuss current registry processes/systems that would be utilized following a radiological event.

#### **Capabilities Addressed**

- Community Preparedness

- Emergency Public Information and Warning
- Information Sharing
- Mass Care

## **Activities Conducted**

- Discussion SeriesWorkshop

### ***Discussion Series – Part 1 Public Health Staff***

One 1.5-hour, in-person meeting with WCHD staff

#### **Discussion Prompts**

- What is our health department's role in population monitoring in this scenario?
- Does a population monitoring registry currently exist in our county? Who is responsible for this registry?
- Is a population monitoring registry needed in this scenario? Who makes this determination?
- What information is necessary to decide if a registry is needed?

### ***Discussion Series – Part 2 Public Health Staff and External Partners***

One 1.5-hour, virtual meeting with WCHD staff and external partners identified during Part 1, including a representative from the department who manages an existing registry in the county

#### **Discussion Prompts**

- When does a registry need to be established in this scenario? Who makes this determination?
- Who is responsible for identifying people that need to be added to the registry?
- Who will take the lead on coordination if more than one agency is involved?
- What information is needed to make this determination? Who has the authority to define registry parameters?

### ***Discussion Series – Part 3 New Scenario***

One 3-hour, virtual meeting with WCHD staff and external partners identified during Parts 1 and 2, including a representative from the department who manages an existing registry in the county.

The scenario has changed. The Planning Team chose Scenario 3 – 10-kiloton Improvised Nuclear Device Detonation. The team decides to focus on receiving evacuated populations from the urban Metropolis. Participants will discuss the same questions from the previous activities, but with a new perspective and scenario with the goal of providing a deeper understanding of the process/approach.

#### **Discussion Prompts**

- What is our health department's role in population monitoring in this scenario?
- Does a population monitoring registry currently exist in our county? Who is responsible for this registry?
- Is a population monitoring registry needed in this scenario? Who makes this determination?
- What information is necessary to decide if a registry is needed?

- When does a registry need to be established in this scenario? Who makes this determination?
- Who is responsible for identifying people that need to be added to the registry?
- Who will take the lead on coordination if more than one agency is involved?
- What information is needed to make this determination? Who has the authority to define registry parameters?

~~~Jurisdiction chooses to continue to more in-depth discussion with a different scenario ~~~

### ***Discussion-based Activity – Workshop***

The group decides to prioritize nuclear/radiation emergency planning for the next exercise cycle and transitions to a Planning Team.

The Planning Team repeats planning and execution of the discussion-based series for additional identified objectives through a half-day, in-person workshop with partners. They plan to develop a Standard Operating Procedure as a result of the workshop.

### **Summary and Next Steps**

After each activity, the notetaker provides a summary of the discussion, including identified gaps, areas for improvement, and post-discussion actions required.

These actions are incorporated into each subsequent activity. They are also incorporated into a broader exercise and evaluation planning for WCHD and their planning partners.