From Anxiety to Action —
A Glimpse Into Kaiser Permanente Northern California’s Ebola Super Trainer Program

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We Will Talk About …

- What we did
- How we did it
- The challenges we faced
- The lessons we learned
- The tools we developed
2014 Ebola Timeline

- March 23: First confirmed case in West Africa
- July 27: Brantly/Writebol test positive
- Sept. 26: Duncan ED visit #1
- Sept. 28: Duncan ED visit #2
- Sept. 30: Duncan tests positive
- Oct. 8: Duncan dies
- Oct. 12: Pham tests positive
- Oct. 15: Vinson tests positive

Kaiser Permanente Northern California (KPNC) Ebola Response – Goal

To be fully prepared through coordination and standardization to evaluate and treat suspected and identified cases of Ebola virus disease while providing the utmost protection for all of our health care staff, providers and members.
KPNC Ebola Response Plan

- Leadership communications
- Member messaging and signage
- Call center scripts and kp.org
- Infectious disease (ID) alert workflows
- Multiple supporting protocols/guidelines
KPNC Ebola Response Plan (cont.)

- Education/training sessions for all clinical settings
- Regional Super Training Program/site visits
- Super Trainer-facilitated medical center training and simulations
- SharePoint site for all Ebola materials
- Creation of centers of excellence for inpatient care

The What

- KPNC Ebola Training Content
  - Ebola background information
  - Clinical guidelines
  - The four vital behaviors
  - ID alert workflows
  - Tiered PPE guidelines
  - PPE hands-on practice/competency
  - Super Trainer training/competency
The What

- 21 medical centers
- 50-100 ED staff/providers per medical center
- $21 \times 50 = 1,050$
- $21 \times 100 = 2,100$
The How

- KPNC Ebola Training Format/Approach
  - Introductory WebEx sessions
  - Train-The-Trainer session
  - Direct training sessions
  - Regional Super Trainer sessions
  - Sub-Regional Super Trainer sessions
  - Medical center training by Super Trainers
  - ED site visits/ID alert simulations

Week 1 (October 13)
- ID Alert Education for ED and MOB
- Initial ED Trainer Session

Weeks 2-3 (October 20)
- Super Trainer Training
- ID Alert Team Training
- Concurrent Local Training

Weeks 4-5 (November 3)
- Super Trainer Training
- RN Traveler Training
- Concurrent Local and Inpatient Training

Week 6 (November 17)
- Regional Super Trainer Training Completion
- Sub-Regional Super Trainer Training
- Begin Standardized Local Training by Super Trainers Including Simulations
- Concurrent Inpatient Training

Week 7+ (November 24)
- Complete Standardized Local Training
- Maintenance of Competency via PPE Refreshers and Simulations
- Concurrent Inpatient Training
KPNC Ebola Training Plan

- Phase 1:
  - Super Trainer training
- Phase 2:
  - Local ED/medical center training
- Phase 3:
  - Maintenance of competency and simulation training
- Phase 4:
  - Additional training plans
Initial Challenges

- Climate of fear
- Rapidly evolving situation
- Shifting guidelines
- Document distribution/version control
- PPE supply shortage
- Need for intensive small group hands-on PPE training

Ebola Response Training Plan: Phase 1

Lisa Roberts, MAEd
Regional Physician Education
Ebola Response Training Plan: Phase 1

Need:
• Ebola preparedness and PPE training

Target Audience:
• Super Trainer candidates

Location:
• 21 medical centers

Timeline:
• IMMEDIATELY

Ebola Response Training Plan: Phase 1 (cont.)

Strategy:
• Train-the-Trainer Model (TTT)
  • Build a pool of competent instructors who can then teach the material to other people
  • Multiple instructors teaching the same course at the same time
  • Ensures timely simultaneous training to a large diverse group
Super Trainer Selection Criteria:

• Leadership skills

• Works in ED, Infection Prevention or Infectious Disease

• Prior teaching/instructing experience

• Familiar with emergency management

Ebola Response Training Plan:
Super Trainers

Result …

SUPER TRAINERS!
Ebola Response Training Plan: Components

- Ebola response curriculum (content)
- Master trainers (course instructors)
- Core regional Super Trainers (small group PPE instructors)
- Super trainees (learners)

Handouts:
- Clinical guidelines
- ID alert workflows
- Personal protective equipment (PPE) guidelines
Supplies:

- PPE training kits for each Super Trainer

**TRAINING KIT:**
1 Tyvek-like suit
1 surgical gown
1 pair surgical booties
1 Stryker hood
1 face shield
1 N-95 mask equivalent
1 pair sterile surgical gloves
1 pair 12-inch nitrile gloves
1 pair 12-inch heavier blue gloves
2 non-sterile drapes
2 chux
Instructional Design and Aids:

- Lecture (Ebola facts, transmission and management, four vital behaviors, ED-ID alert protocol and ID alert team)
- Super Trainer guidelines
- Instruction delivery guidelines
- PPE video (clinical setting demo)
- Live PPE demonstration (donning and doffing)
- PPE small-group facilitation (super trainers and trainees hands-on practice)
- Competency checklist (success measurement tool)

Ebola Response Training Plan: Components (cont.)

2014:

- A total of 97 individuals were regionally trained and certified as Super Trainers
- Over half of Super Trainers felt “very prepared” to deliver Ebola preparedness training locally
### Results:

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### Comments:

“Great training, I feel competent to support my medical center's efforts.”

“Vallejo had a great lead trainer that day; he gave us good feedback during small group practice.”

“The small group sessions and repeat practicing were the most beneficial.”
Challenges:

- Scheduling
- Changing protocols
- PPE supplies

Resources for ongoing support:

- SharePoint site for document distribution/version control
- Ebola mailbox structure in place to answer questions in standardized manner
Medical Center Ebola PPE Training and Implementation

Adam Landsdorf, MD
Kaiser Redwood City

Delivery of Regional Content at Local Level

Local Training Phases:

- Phase 1:
  - Regional/sub-regional Super Trainer training
- Phase 2:
  - Local ED and Medical Center training
- Phase 3:
  - Training reinforcement/continuous learning
- Phase 4:
  - Medical office training plans
Phase 1: Sub-Regional Super Trainer Training

- Bring regional training back to facility
- Two 8-hour training days
- 7 sub-regional Super Trainers trained and/or updated
- Regional competency required

Phase 2: Local ED and Medical Center Training

- Enough ED nurses to provide 4 nurses every shift, 24/7
- 2 ED nurse managers (minimum)
- Enough ED physicians to provide 24/7 on-site coverage
  - Redwood City trained all ED physicians/RNs
- 2 critical care physicians
- 2 critical care nurses
Phase 2: Local ED and Medical Center Training (cont.)

• All ID physicians
• All infection preventionists
• 5 environmental services personnel
• Consider 2 OB physicians
• Consider 2 labor and delivery nurses
• Consider 1 neonatologist

Phase 2: Local ED and Medical Center Training (cont.)

• Two weeks of training
• Two 4-hour sessions per day
• 1:4-6 Super Trainer/Trainee ratio
• 119 trained by Dec. 12, 2014
Phase 3: Training Reinforcement and Continuous Learning

- ID alert drills
- Unannounced
- 1 per shift per month
- ID alert workflow and PPE donning/doffing in ED environment
- Regional assessment/site visit

Phase 4: Medical Office, ID Alert and Tier 1 PPE Training

- All registration staff
- All RNs
- Identified physician leads
- ID alert response team
Phase 4: Medical Office, ID Alert and Tier 1 PPE Training (cont.)

- Web-based with in-person Escort PPE training for department managers
- 61 outpatient staff trained in Escort PPE
- 653 staff/physicians completed Health Stream Ebola training
- Began to incorporate other emergency management topics
  - Measles, MERS, MCI/HICS

Challenges

- Organization/scheduling/efficiency
- New hospital move Dec. 20, 2014
- Maintenance of competency
Local Lessons Learned

- Leadership support essential
- Administration support essential
- Coordination with regional team and Master Super Trainers essential

How Did We Do?

- We trained a LOT of folks
- We built a LOT of teams
- Although we never saw an actual Ebola patient, we learned a TON preparing
How Did We Do? (cont.)

- We developed a flexible, adaptable, scalable, rapidly executable response plan approach/structure
  - Measles/MERS
- We created a regional training structure that is equally adaptable
  - KPNC Regional Emergency Management Super Trainer Program

Regional Lessons Learned

- Leadership support/project manager essential
- Physician education BEYOND essential
- Use of SharePoint for document distribution, version control and uniform communication extremely valuable
- Use of the Ebola Mailbox to ensure standardized response to questions equally important
Best Practices for All

• Create a systematic response plan template and approach

• Establish comprehensive training structure and Super Trainer program

• Develop document/information sharing strategies in advance

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Questions?

Thank you

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