Survey & Certification

Emergency Preparedness & Response

Facility/Organization Name Here

Health Care Provider

After Action Report/Improvement Plan

Central Virginia Healthcare Coalition Medically Vulnerable Populations Winter Weather Community-Based, Full-Scale Exercise

Prepared by the Central Virginia Healthcare Coalition in collaboration with the above-named facility.

Exercise Date: March 21, 2018

Publication Date: March 27, 2018

# Executive Summary

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| **Enter a brief overview of the exercise** |
| **This exercise was performed to test and demonstrate the capability of healthcare facilities across the region to enhance region-wide situational awareness by receiving and responding to an alert requesting facility-specific information. Each facility was required to demonstrate an operational component of their emergency plan: namely, the ability to communicate critical, facility specific information with local and state emergency management professionals as well other facilities from across the healthcare sector.** |
| **Enter the capabilities tested by the exercise**  |
| * **Communications**
* **Community Preparedness and Participation**
* **Intelligence & Information Sharing & Dissemination**
 |
| **Enter the major strengths identified during the exercise (include the top 3 strengths, at a minimum)** |
| * **ENTER YOUR THREE STRENGTHS HERE**
 |
| **Enter areas for improvement identified during the exercise, including recommendations (include the top 3 areas, at a minimum)** |
| * **ENTER YOUR THREE AREAS FOR IMPROVEMENT HERE**
 |
| **Describe the overall exercise as successful or unsuccessful, and briefly state the areas in which subsequent exercises should focus** |
| * **COMPLETE THIS WITH YOUR OWN THOUGHTS ABOUT YOUR FACILITY’S OUTCOME – NOT “THE ROOM WAS TOO COLD” BUT “THE OVERALL EXERCISE WAS A SUCCESS BECAUSE WE TESTED OUR PLAN AND FOUND GAPS…” OR SIMILAR**
 |

# Section 1: Exercise/Event Overview

Exercise/Event Name: CVHC MEDICALLY VULNERABLE POPULATIONS WINTER WEATHER COMMUNITY-BASED, FULL-SCALE EXERCISE

Exercise/Event Start Date: *March 21st, 2018*

**Exercise/Event End Date:** *March 21st, 2018*

**Duration (insert the total length of the exercise or event in terms of days or hours, as appropriate):** *1.5 hours*

**Type of Exercise/Event Completed:**

*Discussion-Based Exercise*

[ ]  Seminar [ ]  Workshop

[ ]  Tabletop [ ]  Games

*Operations-Based Exercise*

[ ]  Drill [x]  Full-Scale Exercise

[x]  Functional Exercise

*Emergency Event*

[ ]  Event

**Capabilities:****List the appropriate targeted capabilities of the exercise/event:**

|  |
| --- |
| * Communications
* Community Preparedness and Participation
* Intelligence & Information Sharing & Dissemination
 |

**Scenario:**

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| Region-wide winter storm event disabling travel across the region. |

**Location:**

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| This exercise, being based in reality, was conducted from multiple locations across the 27-county region of the Central Virginia Healthcare Coalition. The Regional Healthcare Coordinating Center response was conducted from 830. E. Main Street, Suite 2000, Virignia, VA. Facility participation happened at LIST ADDRESS. |

**Partners: List all partners, contractors, supporting/co-sponsoring organizations:**

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| * None. CVHC was the sole sponsor for this exercise. CVHC is a regional healthcare coalition under the ASPR HPP program.
 |

**Participants: List all individual participating organizations or agencies**

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| See attached event roster for facility representation at the event. |

**Number of Participants:**

|  |
| --- |
| List the total number of:* Players: X
* Victim role players: N/A
* Controllers: 1
* Evaluators: N/A
* Facilitators: 1
* Observers:       N/A
 |

# Section 2: Exercise Design Summary

**Exercise Purpose and Design:**

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| Severe weather ranks universally high on both facility-based and community-based all-hazards risk assessments. Further, communication is almost universally noted in after-action reports from real events as one of, if not the largest challenge faced by responding agencies. Most recently after Hurricane Irma in Broward County, Florida, a nursing facility had more than a dozen fatalities due to their inability to maintain appropriate temperature levels in the facility. Early after-action reports from the incident indicate that the facility had minimal communication with community partners that may have been able to assist. Certainly, it is not the position of CVHC to criticize the nursing home or Broward County, Florida’s response. Rather, CVHC desired to design an exercise to demonstrate the information sharing that may very well have made a difference in similar incidents.This exercise was designed to test and demonstrate the ability of many healthcare facilities of varying specialty and provider type to share critical information with local and state emergency preparedness officials in a rapid fashion and in response to a regional alert requesting information.The exercise was organized by the regional healthcare coalition, the Central Virginia Healthcare Coalition. CVHC designed the exercise with the real-world nature of alert response in mind utilizing the VHASS platform. This type of response is integral to CVHC’s Regional Healthcare Emergency Operation Plan and is routinely performed for real events affecting healthcare entities in the region.The exercise was funded by the Central Virginia Healthcare Coalition using funding from HHS/ASPR – Hospital Preparedness Program. All healthcare providers within the Central Region who had completed the preparatory tabletop exercise were invited to attend. |

**Exercise Objectives and Capabilities:**

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| 1. Test and demonstrate the ability to receive disaster alerts from the regional healthcare coalition through the Virginia Healthcare Alerting and Status System (VHASS).
2. Test and demonstrate the ability of facility-based emergency management teams to utilize the VHASS platform to provide critical information about their facility to local and state emergency management officials and to other healthcare facilities across the region.
3. Test an additional aspect of the facility emergency response plan in an operational fashion based on the needs of each individual facility.

All of these relate to the Core Capability of Health and Medical Services and the above-mentioned capabilities of communication, community participation and preparedness and intelligence and information sharing & dissemination. |

**Scenario Summary:**

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| The following alert was sent to multiple individuals from each participating facility via the VHASS Text Alerting Platform:**CTRL: EXERCISE, EXERCISE - CVHC Winter Storm Impact.****See VHASS Event: CVHC Winter Weather Exercise and follow instructions there.**Each facility then activated their incident management team in response to the alert.Upon navigating to the VHASS Event Module, as instructed, participants were given the following message:(Attached Document)Facilities developed their own response to the alert and posted it in the Event Log (Also attached) |

**CMS Defined AAR Requirements**

* The Interpretive Guidance for the CMS Rule for Emergency Preparedness notes the following requirements for the After-Action Report:
	+ What was supposed to happen
	+ What occurred
	+ What went well
	+ What the facility needs to improve
	+ An improvement plan for the areas needing improvement
* This section provides a place for the facility to give a brief narrative description of the lessons learned throughout this exercise.
* More time and detail should be used in describing gaps in planning and needed improvements than areas where the exercise went according to plan.
* Utilize the below format to describe at least three lessons learned:
1. Lesson Learned
	1. What would have been ideal?
	2. What actually happened?
	3. What parts of our plan worked well?
	4. What areas need to improve?

Example:

1. Facility Generator Fuel Inadequate for Long-Term Response
	1. Ideally, our facility would have enough fuel to power the facility generator for 96 hours.
	2. During the exercise, we discovered our generator fuel tank only holds enough fuel to power the generator for 72 hours.
	3. We have plans for decreasing fuel burn-rates during response if need be.
	4. We need a better plan for an alternate fuel storage solution to increase the length of time we can operate without a fuel delivery.

Facility-based Lessons Learned:

(utilize the above format to document the three lessons learned that you documented at the TTX)

# SECTION 3: IMPROVEMENT PLAN

| Lesson Learned | Top 3Recommendations | Corrective Action Description | Responsible Individual | Title | Start Date | Completion Date |
| --- | --- | --- | --- | --- | --- | --- |
| #1 - Name | Recommendation 1 |  |  |  |  |  |
| Recommendation 2 |  |  |  |  |  |
| Recommendation 3 |  |  |  |  |  |

| Lesson Learned | Top 3Recommendations | Corrective Action Description | Responsible Individual | Title | Start Date | Completion Date |
| --- | --- | --- | --- | --- | --- | --- |
| #2 - Name | Recommendation 1 |  |  |  |  |  |
| Recommendation 2 |  |  |  |  |  |
| Recommendation 3 |  |  |  |  |  |

| Lesson Learned | Top 3Recommendations | Corrective Action Description | Responsible Individual | Title | Start Date | Completion Date |
| --- | --- | --- | --- | --- | --- | --- |
| #3 - Name | Recommendation 1 |  |  |  |  |  |
| Recommendation 2 |  |  |  |  |  |
| Recommendation 3 |  |  |  |  |  |

# Section 4: Conclusion

This section is a conclusion for the entire document, and should be used as a summary of all the sections of the AAR/IP. The Conclusion should include the following:

* Participants demonstrated capabilities
* Lessons learned
* Top 3 recommendations (at a minimum)
* Summary of what steps should be taken to ensure that the concluding results will help to further refine plans, procedures and training for this type of incident.

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