Survey & Certification

Emergency Preparedness & Response

Name of Organization/Facility

Health Care

After Action Report/Improvement Plan

Active Shooter Scenario Tabletop Exercise

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

Exercise Date: February 25, 26 & 27, 2020

Publication Date: MM/DD/YYYY

# Executive Summary

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| **Enter a brief overview of the exercise** |
| **This exercise was performed to bring together healthcare providers from a multi-jurisdictional, multi-discipline region with regional healthcare coalition staff to discuss test and discuss the preparation and response concerns in an isolated agency active shooter incident.** |
| **Enter the capabilities tested by the exercise (reference Targeted Capabilities List on pages 3-4 of AAR/IP Instruction packet)** |
| * **Communications** * **Community Preparedness and Participation** * **Planning** |
| **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: Active Shooter Scenario Tabletop Exercise

Exercise/Event Start Date: *February 00, 2020*

**Exercise/Event End Date:** *3.0-4.0 HOUR EXERCISE – SAME AS START DATE*

**Duration (insert the total length of the exercise or event in terms of days or hours, as appropriate):** *3.0 – 4.0 hours*

**Type of Exercise/Event Completed:**

Check the type of exercise completed, as listed below (see key terms included on pages 4-5).

*Discussion-Based Exercise*

Seminar  Workshop

Tabletop  Games

*Operations-Based Exercise*

Drill  Full-Scale Exercise

Functional Exercise

*Emergency Event*

Event

**Capabilities:****List the appropriate targeted capabilities of the exercise/event (refer to AAR/IP Instruction Packet, pages 3-4, TCL capabilities identified in red, e.g., medical surge, isolation & quarantine, etc.):**

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| * Planning * Communications * Community Preparedness and Participation |

**Scenario:****Describe the exercise scenario type (e.g., flood, hurricane, etc.)**

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| Isolated agency active shooter event. Significant impact due to active shooter event in facility. Hostile intruder has shot multiple patients and barricaded himself with hostages. Additional stress on victim and personnel accountability and facility isolation with a focus on information sharing between facility staff, responding outside agencies, and interactions with the media. |

**Location:**

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| Your physical address |

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

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| * None. CVHC was the 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:**

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| List the total number of:   * Players: 0 * Victim role players: 0 * Controllers: 0 * Evaluators: 0 * Facilitators: 2 * Observers:       0 |
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# Section 2: Exercise Design Summary

**Exercise Purpose and Design:**

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| This exercise was conducted to test the facility-based, community-based and regional preparedness and response to an active shooter event because this type of incident has been identified as a high-risk, high impact in both facility and community-based all-hazards risk assessments.  The exercise was organized by the regional healthcare coalition, the Central Virginia Healthcare Coalition. CVHC designed the exercise with simplicity and fundamental emergency management principles in mind as emergency operations exercises are somewhat new to many healthcare providers. |

**Exercise Objectives and Capabilities:**

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| Objective 1: Examine the ability of personnel to implement its existing emergency operations plan processes in response to cascading events initiated by a hostile intruder at the site  Objective 2: Review of local response agencies ability to implement victim and personnel accountability and facility isolation in response to cascading events initiated by a hostile intruder at the site  Objective 3: Exercise the information sharing and integration between facility staff and responding outside agencies to include warning information systems and interaction with the media  All of these relate to the Core Capability of Intelligence & Information Sharing; Operational Communications; Operational Coordination; Public Information & Warning |

**Scenario Summary:**

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| Module 1 presented participants with an active shooter who has entered the facility, blocking the doors and shooting residents and patients. Suspect has barricaded himself with two residents inside the facility. Participants answered various questions pertaining to their operational communications, information sharing practices, and operation coordination prior to the event.  Module 2 presented exercise participants with key response decisions during the hours the suspect has barricaded himself in the facility. Participants answered questions pertaining to their ability to continue to deal with an ongoing hostage situation, non-event related medical calls in their facility, and information sharing with outside agencies.  Module 3 challenged facilities with an extended facility downtime due to forensics, media enquiries, and long term emotional and physical recovery for the staff, residents, and families. Secen recovery would take at least 24-48 hours. |

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

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

| Lesson Learned | Top 3  Recommendations | 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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