Should I Stay, or Should I Go?

After-Action Report/Improvement Plan

September 12, 2023

The After-Action Report/Improvement Plan (AAR/IP) aligns exercise objectives with preparedness doctrine to include the National Preparedness Goal and related frameworks and guidance. Exercise information required for preparedness reporting and trend analysis is included; users are encouraged to add additional sections as needed to support their own organizational needs.

# Exercise Overview

| **Exercise Name** | Should I Stay, or Should I Go? |
| --- | --- |
| **Exercise Dates** | September 12, 2023, 1:00-3:30pm |
| **Scope** | This exercise is a facilitated, functional, community-wide exercise. The exercise is planned for 2 ½ hours and is to be conducted at the player’s facility in collaboration with virtual scenario updates and injects from the Metro Health and Medical Preparedness Coalition (Metro Coalition). Players will include participation from the Metro Coalition, Clinics, Ambulatory Surgical Centers, Nursing Homes, Assisted Livings, Home Health, Hospice, and other congregate care settings. Exercise play is limited to exercise participants. There will be no role players/actors during this exercise. Any staff or patient/client/resident movement will be simulated only. |
| **Mission Area(s)** | Protection, Mitigation, Response |
| **Core Capabilities** | HPP Capability 2: Health Care and Medical Response Coordination  HPP Capability 3: Continuity of Health Care Delivery |
| **Objectives** | During this exercise participants will:  1) Activate their shelter-in-place plans.  2) Demonstrate processes for internal and external communications during an emergency.  3) Activate their evacuation plans, including:  a. Identifying roles/responsibilities.  b. Describing a triage process for evacuating residents/patients/clients.  c. Identification of transportation resources.  d. Tracking of staff, residents/clients, equipment, etc.  4) Describe resources for receiving situational awareness about the event. |
| **Threat or Hazard** | Chemical spill |
| **Scenario** | An overturned tanker truck is leaking liquid chlorine within the vicinity of your facility/office/service area. |
| **Sponsor** | Metro Health and Medical Coalition/Regional Healthcare Preparedness Coordinator - Hospital Preparedness Program (HPP) grant. |
| **Participating Organizations** | Participants will be from the public and private sector. Participating facilities include Long-term Care, Assisted Living, Home Health, Hospice, Clinics, Ambulatory Surgical Centers and the Metro Coalition.  Anticipated total number of participants: 498   * Facility Type:   + Skilled Nursing Facilities: 191   + Assisted Living Facilities: 190   + Group Home Facility: 18   + Home Care/Hospice: 71   + Clinics: 17   + Ambulatory Surgical Centers:1   + Other: 10 * Number of Regional Exercise Controller: 1 * Number of Regional Exercise Director: 1   *A roster of participants registered for the exercise can be accessed upon request.* |
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# Analysis of Objectives

Aligning exercise objectives and core capabilities provides a consistent taxonomy for evaluation that transcends individual exercises to support preparedness reporting and trend analysis. Table 1 includes the exercise objectives, aligned core capabilities, and performance ratings for each core capability as observed during the exercise and determined by the evaluation team.

| Objective | Core Capability | Performed without Challenges (P) | Performed with Some Challenges (S) | Performed with Major Challenges (M) | Unable to be Performed (U) |
| --- | --- | --- | --- | --- | --- |
| **Objective 1:** Activate shelter-in-place plans | HPP Capability 3: Continuity of Health Care Delivery |  |  |  |  |
| **Objective 2:** Demonstrate processes for internal and external communication during an emergency. | HPP Capability 2: Health Care and Medical Response Coordination |  |  |  |  |
| **Objective 3:** Activate their evacuation plans, including:  a. Identifying roles/responsibilities.  b. Describing a triage process for evacuating residents/patients/clients.  c. Identification of transportation resources.  d. Tracking of staff, residents/clients, equipment, etc. | HPP Capability 3: Continuity of Health Care Delivery |  |  |  |  |
| **Objective 4:** Describe resources for receiving situational awareness about the event. | HPP Capability 2: Health Care and Medical Response Coordination |  |  |  |  |

Table 1. Summary of Core Capability Performance

Ratings Definitions:

Performed without Challenges (P): The targets and critical tasks associated with the core capability were completed in a manner that achieved the objective(s) and did not negatively impact the performance of other activities. Performance of this activity did not contribute to additional health and/or safety risks for the public or for emergency workers, and it was conducted in accordance with applicable plans, policies, procedures, regulations, and laws.

Performed with Some Challenges (S): The targets and critical tasks associated with the core capability were completed in a manner that achieved the objective(s) and did not negatively impact the performance of other activities. Performance of this activity did not contribute to additional health and/or safety risks for the public or for emergency workers, and it was conducted in accordance with applicable plans, policies, procedures, regulations, and laws. However, opportunities to enhance effectiveness and/or efficiency were identified.

Performed with Major Challenges (M): The targets and critical tasks associated with the core capability were completed in a manner that achieved the objective(s), but some or all of the following were observed: demonstrated performance had a negative impact on the performance of other activities; contributed to additional health and/or safety risks for the public or for emergency workers; and/or was not conducted in accordance with applicable plans, policies, procedures, regulations, and laws.

Unable to be Performed (U): The targets and critical tasks associated with the core capability were not performed in a manner that achieved the objective(s).

The following sections provide an overview of the performance related to each exercise objective and associated core capability, highlighting strengths and areas for improvement.

**Objective 1: Activate shelter-in-place plans.**

The strengths and areas for improvement for each core capability aligned to this objective are described in this section.

### Strengths

The [full or partial] capability level can be attributed to the following strengths:

Strength 1: [Observation statement]

Strength 2: [Observation statement]

Strength 3: [Observation statement]

### Areas for Improvement

The following areas require improvement to achieve the full capability level:

Area for Improvement 1: [Observation statement. This should clearly state the problem or gap; it should not include a recommendation or corrective action, as those will be documented in the Improvement Plan.]

Reference: [List any relevant plans, policies, procedures, regulations, or laws.]

Analysis: [Provide a root cause analysis or summary of why the full capability level was not achieved.]

Area for Improvement 2: [Observation statement]

Reference: [List any relevant plans, policies, procedures, regulations, or laws.]

Analysis: [Provide a root cause analysis or summary of why the full capability level was not achieved.]

## Objective 2: Demonstrate processes for internal and external communications during an emergency.

### Strengths

The [full or partial] capability level can be attributed to the following strengths:

Strength 1: [Observation statement]

Strength 2: [Observation statement]

Strength 3: [Observation statement]

### Areas for Improvement

The following areas require improvement to achieve the full capability level:

Area for Improvement 1: [Observation statement. This should clearly state the problem or gap; it should not include a recommendation or corrective action, as those will be documented in the Improvement Plan.]

Reference: [List any relevant plans, policies, procedures, regulations, or laws.]

Analysis: [Provide a root cause analysis or summary of why the full capability level was not achieved.]

**Objective 3: Activate evacuation plans.**

The strengths and areas for improvement for each core capability aligned to this objective are described in this section.

### Strengths

The [full or partial] capability level can be attributed to the following strengths:

Strength 1: [Observation statement]

Strength 2: [Observation statement]

Strength 3: [Observation statement]

### Areas for Improvement

The following areas require improvement to achieve the full capability level:

Area for Improvement 1: [Observation statement. This should clearly state the problem or gap; it should not include a recommendation or corrective action, as those will be documented in the Improvement Plan.]

Reference: [List any relevant plans, policies, procedures, regulations, or laws.]

Analysis: [Provide a root cause analysis or summary of why the full capability level was not achieved.]

Area for Improvement 2: [Observation statement]

Reference: [List any relevant plans, policies, procedures, regulations, or laws.]

Analysis: [Provide a root cause analysis or summary of why the full capability level was not achieved.]

**Objective 4: Describe resources for receiving situational awareness about the event.**

The strengths and areas for improvement for each core capability aligned to this objective are described in this section.

### Strengths

The [full or partial] capability level can be attributed to the following strengths:

Strength 1: [Observation statement]

Strength 2: [Observation statement]

Strength 3: [Observation statement]

### Areas for Improvement

The following areas require improvement to achieve the full capability level:

Area for Improvement 1: [Observation statement. This should clearly state the problem or gap; it should not include a recommendation or corrective action, as those will be documented in the Improvement Plan.]

Reference: [List any relevant plans, policies, procedures, regulations, or laws.]

Analysis: [Provide a root cause analysis or summary of why the full capability level was not achieved.]

Area for Improvement 2: [Observation statement]

Reference: [List any relevant plans, policies, procedures, regulations, or laws.]

Analysis: [Provide a root cause analysis or summary of why the full capability level was not achieved.]

1. Improvement Plan

| Objective | Issue/Area for Improvement | Corrective Action | Primary Responsible Organization | Organization POC | Start Date | Completion Date |
| --- | --- | --- | --- | --- | --- | --- |
| **Objective 1:** Activate Shelter-in-Place plans | 1. [Area for Improvement] | [Corrective Action 1] |  |  |  |  |
| **Objective 2:** Demonstrate processes for internal and external communications during an emergency | 1. [Area for Improvement] | [Corrective Action 1] |  |  |  |  |
| **Objective 3:** Activate evacuation plans. | 1. [Area for Improvement] | [Corrective Action 1] |  |  |  |  |
| **Objective 4:** Describe resources for receiving situational awareness about the event. | 2. [Area for Improvement] | [Corrective Action 1] |  |  |  |  |

This IP has been developed specifically for [Organization or Jurisdiction] as a result of Should I Stay, or Should I Go? conducted on September 12, 2023.

# Appendix B: Exercise Participants

You may use this table to list the names of staff who participated in the exercise at your organization.

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| Participants |
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*\*A full roster of attendees from all participating organizations can be requested through the Metro Coalition.*