

Tabletop Exercise for Chemical Surge Plans

**After-Action Report and Improvement Plan (AAR/IP)**

**Exercise Date:** Click or tap to enter a date.

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

# Funding Acknowledgements And Disclaimer

Funding Acknowledgements:

The Pediatric Disaster Care Centers of Excellence are supported by the Administration for Strategic Preparedness and Response (ASPR) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling $3M with 0 percent financed with nongovernmental sources.

The Pediatric Pandemic Network is supported in part by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of cooperative agreements U1IMC43532 and U1IMC45814 with 0 percent financed with nongovernmental sources. For more information, visit HRSA.gov.

Disclaimer:

The content presented here and throughout the presentation is that of the authors and does not necessarily represent the official views of, nor an endorsement by ASPR, HRSA, HHS, or the U.S. Government.

# Exercise Overview

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| **Exercise Name** | Click or tap here to enter text. |
| **Host Organization(s)** | Click or tap here to enter text. |
| **Exercise Date and Time** | Click or tap here to enter text. |
| **Scope** | This is a discussion-based Tabletop Exercise.* The primary host will guide the process and environment.
* This exercise by be delivered virtually, in-person, or both.
* There are three modules, each covering different sections of the Plan.
* If breakout groups are used, each breakout group will conduct discussions regarding their section of the Plan. After each breakout session, groups will be asked to share highlights.
* The host and participating organizations determine the scope of an After-Action Report (AAR) which may include a single AAR for the exercise, and/or individual AARs completed by the participating organizations.
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| **Focus Area(s)** | National Preparedness Goal Mission Area: ResponseCore Capability: Public Health, Healthcare, and Emergency Medical Services |
| **Capabilities** | Health Care Preparedness and Response Capabilities* Capability 2. Health Care and Medical Response Coordination
* Capability 4. Medical Surge
 |
| **Objectives** | Players will:* Articulate the content, elements, and integration of the Chemical Emergency Surge Plan, including Pediatric considerations, with other facility and local plans.
* Identify areas for improvement, further development, and linkage between the Chemical Emergency Surge Plans and Pediatric Surge Plans.
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| **Threat or Hazard** | Recent events have brought forth concerns regarding rail accidents and the release of hazardous materials threatening resource constrained areas. Additionally, Pediatric resources are limited and would be strained in a chemical surge. |
| **Scenario** | This scenario is based on a fictional accidental incident. The intent is to use a pediatric MCI scenario with layers of complexity sufficient to highlight capabilities and gaps and to inform the content of plans under development or being revised. |
| **Participating Organizations** | See list in Appendix A |
| **Exercise Host Contact(s)**  | Click or tap here to enter text. |

## Exercise Structure

Players will participate in the following three breakout modules:

* Module Breakout 1 - Activation, Roles & Responsibilities
* Module Breakout 2 - Operations
* Module Breakout 3 - Special Considerations

Each module begins with a scenario inject that summarizes key events occurring within that period. After the updates, players review the situation and engage in their breakout room.

After each breakout, players will engage in a moderated plenary discussion in which a spokesperson from each breakout group will present a synopsis of the group’s actions, based on the scenario and review of their Plan.

## Exercise Guidelines

This exercise will be held in an open, no-fault environment wherein capabilities, plans, systems, and processes will be evaluated. Varying viewpoints, even disagreements, are expected.

Respond to the scenario using your knowledge of current plans and capabilities (i.e., you may use only existing assets) and insights derived from your training.

Decisions are not precedent setting and may not reflect your jurisdiction’s/ organization’s final position on a given issue. This exercise is an opportunity to discuss and present multiple options and possible solutions.

Issue identification is not as valuable as suggestions and recommended actions that could improve planning efforts. Problem-solving efforts should be the focus.

The assumption is that the exercise scenario is plausible, and events occur as they are presented. All players will receive information at the same time.

## Exercise Evaluation

Evaluation of the exercise is based on the exercise objectives and aligned capabilities, capability targets, and critical tasks, which are documented in Evaluation Forms. Additionally, players will be asked to complete participant feedback forms. These documents, coupled with facilitator observations and notes, will be used to evaluate the exercise and compile the After-Action Report (AAR)/Improvement Plan (IP)

# Analysis of Capabilities

| Objective | Capability | Performed without Challenges (P) | Performed with Some Challenges (S) | Performed with Major Challenges (M) | Unable to be Performed (U) |
| --- | --- | --- | --- | --- | --- |
| Articulate the content, elements, and integration of the Chemical Emergency Surge Plan, including Pediatric considerations, with other facility and local plans. | Health Care Preparedness and Response Capabilities* Capability 2. Health Care and Medical Response Coordination
* Capability 4. Medical Surge
 |[ ] [ ] [ ] [ ]
| Identify areas for improvement, further development, and linkage between the Chemical Emergency Surge Plans and Pediatric Surge Plans. |  |[ ] [ ] [ ] [ ]
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**Breakout Module 1 – Activation, Roles, and Responsibilities**

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| **Observations that demonstrated competency** |
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| **Observations that showed areas for improvement** |
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| **Recommendations** |
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| --- | --- | --- | --- | --- |
| **Topic** | **Strength** | **Gap** | **Challenge** | **Not****Addressed** |
| Activation/Notification |[ ] [ ] [ ] [ ]
| Information Sharing |[ ] [ ] [ ] [ ]
| Roles &Responsibilities |[ ] [ ] [ ] [ ]
| Logistics/ResourceManagement |[ ] [ ] [ ] [ ]

**Breakout Module 2 – Operations**

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| **Observations that demonstrated competency** |
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| **Observations that showed areas for improvement** |
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| **Recommendations** |
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| **Topic** | **Strength** | **Gap** | **Challenge** | **Not****Addressed** |
| Decontamination |[ ] [ ] [ ] [ ]
| Triage |[ ] [ ] [ ] [ ]
| Patient Care/Management |[ ] [ ] [ ] [ ]
| Treatment |[ ] [ ] [ ] [ ]
| Safety & Control Measures |[ ] [ ] [ ] [ ]

**Breakout Module 3 – Special Considerations**

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| **Observations that demonstrated competency** |
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| **Observations that showed areas for improvement** |
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| **Recommendations** |
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| **Topic** | **Strength** | **Gap** | **Challenge** | **Not****Addressed** |
| Behavioral Health |[ ] [ ] [ ] [ ]
| At-Risk Populations |[ ] [ ] [ ] [ ]
| Reunification |[ ] [ ] [ ] [ ]
| Fatality Management |[ ] [ ] [ ] [ ]
| Security |[ ] [ ] [ ] [ ]

# Appendix A – Improvement Plan

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| Capability | Issue/Area for Improvement | Corrective Action | Capability Element | Primary Responsible Organization | Organization POC | Start Date | Completion Date |
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# Appendix B – Exercise Acknowledgements

| **Participating Organizations** |
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| **Local** |
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| **Materials kit provided by** |
| Pediatric Pandemic Network |

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| **The Planning Team** |
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# Appendix C – Exercise Participants

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