Enter Organization Name

Health Care Provider

After Action Report/Improvement Plan

Tabletop Exercise

Facility Fire

Prepared by

Date of Exercise

September 28, 2021

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# Introduction

The Tabletop Exercise for a Facility Fire Event was developed to test the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Emergency Operations Plan. The exercise was developed by Nicole Peace Coarsey (LDH/OPH/BCDPHA). This exercise will test the viability of the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_’s Emergency Operations Plan.

Planning for the exercise began mid-November 2020, where the exercise objectives, scope and scenario were developed. This exercise focused on key aspects of the emergency management plan with regards to the response of health center staff to the crisis, responder coordination, critical decisions, and the integration of health center assets to perform based on planning practices. This exercise was not an inspection and was conducted in a no-fault atmosphere.

The purpose of this report is to analyze exercise results, identify strengths to be maintained and built upon, identify potential areas for further improvement, and support the development of corrective actions that will guide future emergency preparedness initiatives to advance overall emergency preparedness within each facility.

By completing this facility-based exercise, this facility will have met one of the testing/training requirements mandated. This facility understands that they are to comply with the other requirement of completing a second full-scale exercise that is community-based, individual, facility-based, or a tabletop exercise.

Utilizing the [Target Capabilities List (TCL)](https://www.fema.gov/pdf/government/training/tcl.pdf) as prescribed by the Department of Homeland Security, the capability that was evaluated was Communications in response to hypothetical natural gas leak causing the facility to close.

# Section 1: Exercise Overview

Exercise Name: Facility Fire

**Exercise Date:** September 28, 2021

**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 [x]  Tabletop [ ]  Games

The goals and objectives of the exercise were to:

**Exercise Goals**

1. Discuss a hazard-specific scenario to determine how your facility would respond during the event, paying special attention to your emergency response plan, capabilities, and staff responsibilities.
2. Identify any weaknesses in your plan, consider the best ways to respond to your employees’ and patients’ needs, and ensure the facility is operational as soon as possible after the event.
3. Debrief after the scenario to improve your response to emergencies and disasters and trouble shoot any other unresolved questions.

**Exercise Objectives**

1. Reveal planning weaknesses in the Emergency Operations Plan and it standard operating procedures or to test or validate recently changed procedures.
2. Identify current capabilities.
3. Improve the coordination between and among various response personnel.
4. Identify deficiencies and/or validate training on the critical elements of emergency response.
5. Increase the general awareness and understanding of the potential hazard.

**Capabilities:**

**Target Capability - Planning:** Planning is the mechanism through which Federal, State, local and tribal governments, non-governmental organizations (NGOs), and the private sector develop, validate, and maintain plans, policies, and procedures describing how they will prioritize, coordinate, manage, and support personnel, information, equipment, and resources to prevent, protect and mitigate against, respond to, and recover from Catastrophic events.

Activity: Validate Plans Definition: Evaluate operational plans through exercising, training, and real world events, and use after-action reports (AARs) to support validation and revision of operational and strategic plans

Critical Task: ComA 3.5 Develop, review, evaluate and update emergency management and/or preparedness plans based on lessons learned and/or AARs to address problems/gaps and needed corrective actions

**Location:**

This virtual tabletop exercise took place utilizing GoToWebinar and was conducted virtually. Each participant was able to access multiple handouts and templates, participate in small group activities at their respective locations, and respond utilizing the functions within the web application.

This AAR/IP is specific to the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ located at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Partners and participants who participated in the tabletop exercise include:

(Add to the list as needed)

* Louisiana Department of Health/Office of Public Health/Bureau of Chronic Disease Prevention and Healthcare Access
* Louisiana Rural Health Association

**Scenario Summary:**

It is Sunday, November 18 at 2AM. A fire breaks out in the mechanical room of your building or facility and spreads to the structure itself. Sprinkler systems partially fail. No one is in the building at the time of the fire. Damage is contained mainly to the mechanical room area, but there is significant smoke damage throughout much of the building, as well as water damage in the areas near the fire. The Fire Department has extinguished the fire and determined that it is safe to enter the building.

It is now Sunday, November 18 at 11AM. Initial damage assessments have been done, finding extensive damage to the mechanical room itself. Electrical, plumbing, and HVAC service to the rest of the building are lost. The building has smoke and water damage, especially concentrated near the mechanical room. The building will be unusable for an undetermined amount of time. Further damage assessment is continuing.

It is Monday, November 19 at 10AM. A full damage assessment has been completed. Repairs will take 6 weeks, during which time your building will be unusable for normal operations.

What if this happened during business hours?

1. Who is responsible for leading the evacuation?
2. What are the assigned responsibilities for staff?
3. Which agencies will you notify? What are their numbers?
4. How would you communicate with your patients; staff; facility leadership/owner/CEO?
5. If our primary means of communication goes down, what is our alternate method?
6. What actions would need to occur to secure the facility, including medical records?

**Number of Participants:**

* Players: \_\_\_\_\_\_
* Facilitators: 1

**Analysis of Critical Objectives Performance**

This section of the report reviews the performance of the exercised capabilities, activities, and tasks. In this section, observations are organized by capability and associated activities. The capabilities linked to the exercise objectives of this exercise are listed below, followed by the corresponding activities. Each activity is followed by related observations, which include references, analysis, and recommendations. Activity/task assessments will follow.

EXAMPLE

You should have AT LEAST three (3) observations for each capability.

Once you complete this section of the AAR/IP, translate this information to the chart on the next section of the AAR/IP.

Observation: WHAT GAP DID YOU IDENTIFY DURING THE EXERCISE?

Example:

The current version of the Eternal Wellness Clinic’s Emergency Operations Plan’s procedure on contacting patients in the event of an office closure does not provide enough detail for completion of this task.

Analysis: IF THAT GAP IS NOT ADDRESSED, WHAT COULD BE THE CONSEQUENSES?

Example:

By not strengthening the procedure on contacting patients in the event of an office closure, patients may show up for appointments that have been scheduled, causing patient dissatisfaction and potentially the patient not re-scheduling.

Recommendations: WHAT ARE YOUR RECOMMENDATIONS TO ADDRESS THE GAP?

Example:

Working with the front-office staff and scheduling staff, develop a procedure detailing the steps necessary to contact all scheduled patients. Ensure all staff are trained on the newly developed annex.

**Capability 1 Planning:** Planning is the mechanism through which Federal, State, local and tribal governments, non-governmental organizations (NGOs), and the private sector develop, validate, and maintain plans, policies, and procedures describing how they will prioritize, coordinate, manage, and support personnel, information, equipment, and resources to prevent, protect and mitigate against, respond to, and recover from Catastrophic events.

Activity: Validate Plans Definition: Evaluate operational plans through exercising, training, and real-world events, and use after-action reports (AARs) to support validation and revision of operational and strategic plans

Observation 1:

Analysis:

Recommendation:

Observation 2:

Analysis:

Recommendation:

Observation 3:

Analysis:

Recommendation:

# Section 3: Improvement Plan

This Improvement Plan (IP) should include the top three key recommendations and corrective actions (at a minimum) identified in the Critical Objectives Performance section. Insert additional rows to the table if more than three recommendations and corrective actions have been identified.

EXAMPLE

| Capability | Top 3 Observations | Top 3Recommendations | Corrective Action Description | Responsible Facility | Start Date | Completion Date |
| --- | --- | --- | --- | --- | --- | --- |
| Planning | Observation 1Weak procedure – contacting patients in the event of an office closure. | Recommendation 1Working with the front-office staff and scheduling staff, develop a procedure detailing the steps necessary to contact all scheduled patients. | 1. Front office staff and scheduling staff will conduct a meeting to review the current procedure.
2. Recommendations will be made to strengthen this procedure and provided to the Office Manager.
3. Office Manager will edit/approve/deny the recommendations.
4. All staff will be trained on the new procedure at the next weekly meeting and training will be documented with a sign-in sheet.
5. A second facility drill testing the new procedure will be conducted within 90 days to ensure the new procedure will address issues identified during this exercise.
 | Jane Deaux – ReceptionistDorothy Smith – Scheduling Supervisor | 1/1/2999 | 2/1/2999 |
| Observation 2 | Recommendation 2 |  |  |  |  |
| Observation 3 | Recommendation 3 |  |  |  |  |

| Capability | Top 3 Observations | Top 3Recommendations | Corrective Action Description | Responsible Facility | Facility POC | Start Date | Completion Date |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Planning | Observation 1 | Recommendation 1 |  |  |  |  |  |
| Observation 2 | Recommendation 2 |  |  |  |  |  |
| Observation 3 | Recommendation 3 |  |  |  |  |  |

# Section 4: Conclusion

Major Strengths

Enter the major strengths identified during the exercise (include the top 3 strengths, at a minimum)

1.
2.
3.

Areas of Improvement

Enter areas for improvement identified during the exercise, including recommendations (include the top 3 areas, at a minimum)

1.
2.
3.

Exercise Success

Describe the overall exercise as successful or unsuccessful, and briefly state the areas in which subsequent exercises should focus

1.
2.
3.

# APPENDIX A: ACRONYMS

Any acronym used in the AAR/IP should be listed alphabetically and spelled out.

|  |
| --- |
| **ACRONYMS** |
| **Acronym** | **Meaning** |
|  |  |
|  |  |
|  |  |
|  |  |

# APPENDIX B: DOCUMENTATION

Attach copies of notes gathered during the table top exercise.

Attach any other documentation you feel necessary to validate this AAR/IP