

2013 HURRICANES “KIRK AND LAY” FULL SCALE EXERCISE

Exercise conducted May 19 – 24, 2013



After Action
Report/
Improvement
Plan

The 2013 Hurricanes "Kirk and Lay" Full Scale Exercise After Action Report and Improvement Plan is in compliance with Homeland Security's Exercise and Evaluation Program (HSEEP) and will be used to enhance future Department of Health response plans, trainings, exercises, and event responses.

Adopted on 8-8-15
By: Kirby

HANDLING INSTRUCTIONS

1. The title of this document is the 2013 Hurricanes "Kirk and Lay" Full Scale Exercise After Action Report/Improvement Plan.
2. This is a public document – no special handling instructions are required.
3. For more information, please consult the following points of contact (POCs):

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CONTENTS

Handling Instructions	2
Contents	4
Section 1: Executive Overview	5
Exercise Details	5
Section 2: Exercise Design Summary	6
Exercise Design and Purpose	6
Exercise Capabilities and Activities	8
Exercise Objectives	9
Scenario Summary	12
Section 3: Analysis of Core Capabilities	13
Operational Communications	13
Intelligence and Information Sharing	14
Public Health and Medical Services	16
Operational Coordination	19
Public and Private Services and Resources	28
Environmental Health	32
Public Information and Warning	33
Mass Care Services	36
Section 4: Conclusion	37
Appendix A: Improvement Plan	A-1
Appendix B: Player Organization Chart	B-1
Appendix C: Acronyms	C-1

EXERCISE OVERVIEW

Exercise Name 2013 Florida Hurricanes "KIRK and LAY" Exercise

Type of Exercise Full Scale Exercise (Hurricane Scenario)

Exercise Start Date May 19, 2013

Exercise End Date May 23, 2013

Location State Emergency Operations Center in Tallahassee
Florida Department of Health Headquarters in Tallahassee
Department of Health Walton County

Sponsor State of Florida, Division of Emergency Management

Mission Response and Recovery

Capabilities

- Operational Communications
- Community Resilience
- Intelligence and Information Sharing
- Public Health and Medical Services
- Operational Coordination
- Public and Private Services and Resources
- Environmental Health
- Public Information and Warning
- Mass Care Services
- Situational Assessment

Scenario Type Major Hurricane

Number of Participants

- Players - 135
- Controllers - 2
- Evaluators - 12

EXERCISE DESIGN SUMMARY

Purpose

The purpose of this exercise was to evaluate the Division of Emergency Management and SERT response to multiple storm impacts. The activation of the State Logistics Response Center (SLRC) was also exercised. This exercise was used to train, and acquaint new employees and existing SERT members on their mission essential emergency support functions.

Scope

The exercise scenario was designed to impact the entire State of Florida. The 2013 Hurricane Exercise dove tailed into the National Guard Vigilant Guard Exercise that was being conducted concurrently with Federal Department of Defense assets. The exercise extended over the week of May 20 - 24, 2013. The Florida Department of Health intended to utilize the opportunity to exercise the core capabilities of Environmental Health, Emergency Public Information and Warning, Medical Surge, Logistics, Healthcare Preparedness, Community Preparedness, Emergency Operations Coordination, Special Needs Sheltering and Public Health Lab Testing. This exercise was the first time the FDOH has deployed a Forward Operating Base (FOB) and tested the concept of a Healthcare Facility Assessment Team (HFAT). Previous coordination with Walton County, specifically in Defuniak Springs, facilitated the ability to deploy the FOB and HFAT which were successful.

Core Capabilities

Operational Communications:

1. Plan Personnel Movements.
2. Plan Resource Movements.
3. Identify and Provide Technical Personnel.

Community Resilience

Intelligence and Information Sharing:

1. Team Establishment and Coordination.
2. Collect, Analyze and Disseminate Information.
3. Forecast Needs and Develop Strategies.
4. Coordinate Documentation and Records.

Public Health and Medical Services:

1. Collect bed availability data from hospitals, nursing homes, and ALF's.
2. Report bed availability data via HAVBED system.
3. Report hospital bed availability data to HAVBED.
4. Identify and prioritize all Essential Functions to enable the agency to provide vital services, exercise civil authority, maintain the safety of the general public, and sustain the industrial/economic base during any emergency.

5. Identify and consider the interdependencies needed to perform all organizational Essential Functions to enable the organization to provide vital services, exercise civil authority, maintain the safety of the general public, and sustain the industrial/economic base during any emergency.
6. Identify and document a clear line of succession in the absence of leadership during the course of any emergency to enable an orderly and predefined transition of leadership within the agency in accordance with applicable laws.

Operational Coordination:

1. Assemble ESF 8 Public Health Emergency Operations Center.
2. Develop an Incident Response Strategy.
3. Authorized Purchasing.
4. Provide Accounting Codes.
5. Maintain Records and Collect Documentation.
6. Develop an Incident Response Strategy.
7. Implement an Incident Response Strategy.
8. Direct Critical Resource Logistics (CRL) and Distribution.
9. Activate Critical Resource Logistics and Distribution.
10. Acquire Resources.
11. Transport, Track and Manage Resources.
12. Demobilize and evaluate public health emergency operations.
13. Demobilize FOB.
14. Maintain and Recover Resources.
15. Demobilize Critical Resource Logistics and Distribution.
16. Demobilize IT FOB Support Services in Accordance to FOB Mission Requirements.

Public and Private Services and Resources:

1. Forward Operating Base (FOB).
2. Activate and deploy FOB and team.
3. Mobilize Public Health Response Teams.
4. Activate & Deploy FOB Information Technology (IT) Support.
5. Provide Local Field and Field to CCOC/SEOC Communications.

Environmental Health:

1. Coordinate the environmental health function into response activities.
2. Provide input on forecasting and planning aspects as part of the Incident Command System (ICS) for environmental health needs in the subsequent operation period.
3. Provide support and coordinate environmental health resources to address potable water supply issues.
4. Provide support and coordinate environmental health resources to address wastewater issues.
5. Provide support and coordinate environmental health resources to address mass care issues.
6. Provide support and coordinate environmental health resources to address debris and waste management issues.
7. Provide support and coordinate environmental health resources to address responder safety and health (link to capability).
8. Provide support and coordinate environmental health resources to address HAZMAT (chemical, biological, radiological, and high yield explosives [CBRNE]) issues.

9. Provide support and coordinate environmental health resources to address vector control response issues.
10. Provide support and coordinate environmental health resources to address medical care issues including exposure assessment, toxicological consultation, dose assessment, secondary exposure, medical waste management.
11. Provide support and coordinate environmental health resources to address food and agricultural safety and defense.
12. Provide support and coordinate environmental health resources to address animal health emergency support issues.
13. Provide support and coordinate environmental health resources to address food supply issues.
14. Provide support and coordinate environmental health resources to address outdoor environmental issues.

Public Information and Warning:

1. Manage Emergency Public Information and Warnings.
2. Activate Emergency Public Information, Alert/Warning, and Notification Plans.
3. Establish JIS.
4. Issue Emergency Warnings.
5. Conduct Media Relations.
6. Provide Public Rumor Control.
7. Demobilize Emergency Public Information and Warning.

Mass Care Services:

1. Initiate Call Center.
2. Conduct Pre or Post Storm Facility Assessments.
3. Respond to Needs Assessment and Inventory.

Situational Assessment:

1. Coordinate Public Information.

Objectives:

The 2013 Statewide Hurricane exercise planning team selected objectives that focus on evaluating emergency response procedures, identifying areas for improvement, and achieving a collaborative attitude. This exercise focused on the following objectives:

Objective 1: Demonstrate the ability to activate and deploy strike teams and supporting elements including integration into the state and local response structures.

Objective 2: Demonstrate the ability of ESF 8 to coordinate emergency operations and the ability to direct and support an event or incident with public health or medical implications by establishing a standardized, scalable system of oversight, organization, and supervision consistent with Florida standards and practices and with the National Incident Management System.

Objective 3: Establish/participate in a Joint and Virtual Information Centers which ensures effective and timely information processing and dissemination.

Objective 4: Demonstrate the ability to exchange information to determine a common operating picture.

Objective 5: Before, during, and after an incident utilize coordinated information sharing protocols to receive and transmit timely, relevant, and actionable incident specific healthcare information to incident management during response and recovery.

Objective 6: Provide public health surveillance and epidemiological investigations in order to create, maintain, support, and strengthen routine surveillance and detection systems and epidemiological investigation processes, as well as to expand these systems and processes in response to incidents of public health significance.

Objective 7: Execute the alerting and notification process of the Neighborhood Emergency Preparedness Program, mobilize members, establish a command structure, rally and discuss neighborhood preparedness activities.

Objective 8: Execute the ability to COOP DOH laboratory mission essential functions to an alternate location within 12 hours.

Objective 9: Environmental Health Strike Teams demonstrate emergency sampling and inspection procedures utilizing appropriate assessment forms and technological field equipment.

Objective 10: Demonstrate the capacity for timely communications in support of security, situational awareness, and operations by any and all means available, among and between affected communities in the impact area and all response forces (DPC).

Objective 11: Demonstrate the ability to activate key staff within the timeline requirements as outlined in by the CDC PHEP, Capability 3.

Objective 12: Demonstrate ability to maintain and refine an operational bed tracking, accountability/ availability system compatible with the HAvBED data standards and definitions.

Objective 13: Demonstrate the ability to submit required data to the HHS Secretary's Operations Center (HHS SOC) using either the HAvBED Web portal or the HAvBED Communication Schema.

Objective 14: Evaluate the process and assess the ability of local and state partners to coordinate the healthcare response through analysis of data. Define the needs of the incident and the available healthcare staffing and resources upon notification of the incident.

Objective 15: Demonstrate the ability to support healthcare coalitions and response partners in the expansion of the jurisdictions healthcare system (includes additional beds, staff & Equipment) to provide access to additional healthcare services (e.g. call centers, alternate care systems, EMS, emergency department services and inpatient services).

Objective 16: Evaluate the ability to demobilize operations.

Objective 17: Demonstrate the ability to conduct financial tracking and analysis of the ESF 8 response through incident closeout.

Major Strengths

- A task force of Healthcare Facility Assessment members was successfully deployed by ESF 8 to an area to support the assessment and status of healthcare facilities.
- Staffing process was performed efficiently and effectively.
- Staffing unit had folders established for 2013 Incidents in the Hurricane Season prep shared folder.
- Procurement established a new oxygen supply vendor.
- State Agency Disaster Projections Reporting Summary Form to DEM was completed.
- Healthcare Facility Assessment Team and Environmental Health Strike Team coordinated to visit the same facilities post disaster.
- State and Federal ESF 8 were co-located in SEOC which streamlined the process of utilizing federal assets for missions.
- The Florida Department of Health conducted a patient movement workshop in conjunction with federal partners the week prior to the hurricane exercise kickoff.

Primary Areas of Improvement

- The Bureau of Public Health Laboratories (BPHL) has not fully identified the Essential Functions that provide interdependent support to an Essential Function performed by another organization or to an Emergency Support Function (ESF).
- No coordinated unified resource tracking strategy between the different ESF 8 units.
- Notification for Strike Teams came through unrecognized method of notification.
- Unable to fill Strike Team Missions.
- ESF 8 Procurement could not update mission in EM Constellation
- The Bureau of Public Health Laboratories (BPHL) COOP has insufficient documentation and contingency plans.
- Members in SERVFL were contacted for volunteer call center duty despite already being activated in three-deep roster roles.
- Med 82 did not have sufficient coverage for field operations.
- Communications between CCOC and Deployed personnel was inefficient.
- Utilization of MRC volunteers to fill strike team positions.
- ESF14 unsure of DOH Office of Communications, ESF8 Public Information Officers' role, expectations, needs during emergency incidents, events.
- ESF8 personnel do not have copy of DOH-specific media relations guidance / protocol.

Scenario Summary

The 2013 Florida Hurricanes "KIRK" and "LAY" Exercise was sponsored by the Division of Emergency Management. This was a multi-storm event that began with the development of a tropical wave on May 12, 2013 in the central North Atlantic Ocean. This wave strengthened into a hurricane by May 15, 2013 known as Kirk, reaching strengths as high as Category 4 in the Caribbean. Kirk skirted within 30-50 miles of the east coast of Florida from May 19-20th until eventually making landfall near Savannah Georgia as a Category 2.

Subsequently, a weak tropical storm developed on May 14, 2013 also in the central North Atlantic Ocean. The tropical storm began strengthening and became a Category 3 hurricane on May 18, 2013 known as Lay. Lay made landfall in Brevard County as a Category 4 on May 19, 2013 and moved across central Florida emerging back into the northeastern Gulf of Mexico near Hernando County as a Category 1. Lay regained strength in the gulf and made a second landfall in Gulf County on May 20, 2013 crossing back into the gulf overnight. On May 21, 2013, Lay made final landfall at Okaloosa County.

Resource requests for medical support and compounding weather events and warnings in other counties drove the State Emergency Operations Center to activate to Level 1. During the event a tornado touched down in Gainesville impacting Alachua County on day two of the exercise. The Florida ESF 8 deployed a Healthcare Facility Assessment Team and Forward Operating Base to assist in Defuniak Springs on day two of the exercise. Federal Medical Stations were emplaced across the State as well as State level assets being requested for Special Needs, Environmental Health and Epidemiology.

ANALYSIS OF CORE CAPABILITIES

This section of the report reviews the performance of the exercised capabilities, activities, and tasks. In this section, observations are organized by core capability.

Operational Communications

Objective 10 - Demonstrate the capacity for timely communications in support of security, situational awareness, and operations by any and all means available, among and between affected communities in the impact area and all response forces (Disaster Preparedness Coordinators DPC).

Areas for Improvement

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

Activity 10.3 – Identify and Provide Technical Personnel.

Area for Improvement 10.3.1: Strike Team Technical Specialist was not contacted for notification.

Reference: FDOH Regional Public Health Response Teams Team Leader Guide

Analysis: A mission request for a Strike Team was generated by an impacted county. The mission was vetted and assigned to the Staffing Unit for recruitment purposes. The Regional Public Health Response Teams Recruitment and Deployment Guidelines for County Health Departments states "in order to facilitate team recruitment and deployment, a regional point of contact (POC) and a back-up will be identified for each of the seven Domestic Security Taskforce regions. The ESF8 Logistics Staffing Unit and technical specialists will coordinate all team recruitment and deployment through these points of contact". Lack of involvement by the Technical Specialist may have led to this mission not being filled by assigned DOH personnel.

Recommendation:

1. Review and de-conflict existing guidelines.
2. Revise and update or comply with guidelines.
3. Train all ESF 8 Logistics Section and Technical Specialists on the appropriate process.

Intelligence and Information Sharing

Objective 4 - Demonstrate the ability to exchange information to determine a common operating picture.

Areas for Improvement

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

Activity 4.1 – Team Establishment and Coordination

Area for Improvement 4.1.1: The three deep roster identifies new employees (who lack training and experience) to perform roles of high responsibility.

Reference: ESF 8 State SOP

Analysis: Six personnel were assigned to the Situation Unit, five of which were new to their positions and had only received awareness training. Job Action Sheets were not available since they are still in a work in process status. The Situation Unit Leader was faced with training on the job which took away from their duties. This caused the first situation report to be missed and the subsequent reports to be late.

Recommendation:

1. Utilize scheduled training (First Friday Training) to provide technician level training and exercise drills for all employees.
2. Review, revise and publish Situation Unit Job Action Sheets/checklists.

Activity 4.2 - Collect, Analyze and Disseminate Information

Area for Improvement 4.2.1: The DOH map service was down for 3.5 hours.

Reference: ESF 8 State SOP

Analysis: It was noticed that the DOH ArcGIS map service was down and needed to be rebooted. The DOH GIS database Coordinator could not log on to the server and initiated a work request for the SRCC. The service was finally restored at 1:50 PM. This interruption impeded access to Healthcare Facility data that is essential to response planning.

Recommendation:

1. Pursue access to DOH GIS server by GIS administration.
2. Pursue fail over service for the GIS production server.
3. Download necessary map files to a shared/hard drive as tertiary back up means.

Area for Improvement 4.2.2: The Situation Unit could not update the Electronic Status Board (ESB) in an accurate manner.

Reference: ESF 8 State SOP

Analysis: Responsibility for posting and documenting reports was not communicated. The Situation Unit began to manage the reports, however data provided from other reports input into the dashboard was inaccurate or old. This could be mitigated by clearly assigning the reporting responsibility to one unit and training on it prior to an event.

Recommendation:

1. Evaluate the strategy of using the ESB for a common operating picture that includes timeliness, accuracy, and content.
2. Explore the option of submitting data elements to a single point of contact within the Situation Unit for dashboard updates.
3. Update guidance and communicate expectations regarding the dashboard use and maintenance.

Activity 4.3 Forecast Needs and Develop Strategies.

Area for Improvement 4.3.1: Delayed development of the area of operations map from a preformatted PDF.

Reference: ESF 8 State SOP

Analysis: The primary ArcGIS subject matter expert was unavailable for the exercise. A person without ArcGIS availability was assigned to execute the task of updating the area of operations map PDF utilizing a less efficient program which caused a significant delay in production and publishing. The caused a delay in updating the dashboard used in forming the common operating picture and impacted response planning.

Recommendation:

1. Ensure the three-deep roster reflects ArcGIS subject matter expert redundancy.
2. A GIS analyst should be designated to the Situation Unit with ArcGIS availability when activated, consider placing a projected or observed wind overlay on the area of operations map.
3. Provide ESF 8 ArcGIS training to designated personnel in the Situation Unit three-deep roster.

Public Health and Medical Services

Objective 8 - Execute the ability to COOP DOH laboratory mission essential functions to an alternate location within 12 hours.

Strength

Observation 1: The Bureau of Public Health Laboratories (BPHL) has alternate facilities for the relocation of a limited number of key leaders and staff with sufficient distance between each facility.

Reference: FEMA Continuity Guidance Circular 1, Annex G, Page G 1 (2009)

Analysis: The BPHL COOP has identified alternative facilities which would be able to support the essential functions of public health laboratory testing services after activation of the COOP. Locations are viable alternate sites where the potential for disruption of the agency's ability to initiate and sustain operations is minimized. The agency's alternate facilities have sufficient distance between each facility location or threatened area and other facilities (hazardous materials sites, nuclear power plants) or locations (areas subject to natural disasters such as hurricanes and earthquakes) that are potential sources of disruptions or threats, as determined by an all hazards risk assessment of each facility.

Areas for Improvement

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

Activity 8.2 - Identify and consider the interdependencies needed to perform all organizational Essential Functions to enable the organization to provide vital services, exercise civil authority, maintain the safety of the general public, and sustain the industrial/economic base during any emergency.

Area for Improvement 8.2.1: The Bureau of Public Health Laboratories (BPHL) has not fully identified the Essential Functions that provide interdependent support to an Essential Function performed by another organization or to an Emergency Support Function (ESF).

Reference: Continuity Guidance Circular 1, Annex D, Page D 3 (2009)

Analysis: The BPHL Laboratory Directors, Supervisors, and COOP Coordinators will need to identify those Essential Functions that provide interdependent support to an Essential Function performed by another organization or to an Emergency Support Function (ESF). Mission essential functions and their identification are critical in the continuation of operations, by not clearly defining roles and responsibilities there is a great possibility of essential function failure.

Recommendation:

1. Develop and communicate additional Essential Functions as required by the State and Federal guidelines.
2. Train and exercise BPHL Laboratory Directors, Supervisors and COOP Coordinators on interdependent support requirements.

Activity 8.3 Identify and document a clear line of succession in the absence of leadership during the course of any emergency to enable an orderly and predefined transition of leadership within the agency in accordance with applicable laws.

Area for Improvement 8.3.1: Insufficient communication methods for real world event in the Bureau of Public Health Laboratories (BPHL) COOP.

Reference: FEMA Continuity Guidance Circular 1, Annex D, Page D 4 (2009)

Analysis: Although the Laboratory Directors were able to effectively communicate by email during the exercise regarding COOP activation, in a real event this might not be sufficient.

Recommendation:

1. It is recommended that in future exercises each laboratory initiate a conference call when activating their COOP and requesting assistance.

Area for Improvement 8.3.2: The Bureau of Public Health Laboratories (BPHL) COOP has insufficient documentation and contingency plans.

Reference: FEMA Continuity Guidance Circular 1, Annex A, Page A 3 (2009)

Analysis: The BPHL COOP needs to add contingency plans in the event that key resources are not available. Inclusion of a formal contingency plan in the updated BPHL COOP document will ensure efficient continuity of operations when an event where key laboratory resources are not available and instate laboratory services cannot be provided. This contingency plan should include rabies testing as well as tuberculosis (TB) testing and New Born Screening.

Recommendation:

1. Develop a formal contingency plan in the updated BPHL COOP document.
1a. Include contingency rabies testing; TB and New Born Screening.

Objective 12 - Demonstrate ability to maintain and refine an operational bed tracking, accountability/availability system compatible with the HAVBED data standards and definitions.

Areas for Improvement

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

Activity 12.1- Collect bed availability data from hospitals, nursing homes, and ALF's.

Area for Improvement 12.1.1: Call Center support for ESS event activation was not established.

Reference: None

Analysis: An event was initiated in ESS which in turn initiates a call center through DOH that reaches out to facilities required to report bed availability. The activation of support personnel to man a call center was initially delayed and when sent, still was unable to garner the manpower needed to execute the required activities. There is no standard operating procedure for the DOH once the event is initiated in ESS. Coordination for a future proof of concept can be done to test this capability.

Recommendation:

1. Establish a standard operating procedure once notification is received and call center is activated.
2. Ensure notification to hospitals, nursing homes and alternate living facilities for requirement to report is completed.
3. Pre-identify call center personnel that can be activated to conduct healthcare facility surveys.
4. Coordinate in future exercises to test capability of call center.

Objective 13 Demonstrate the ability to submit required data to the HHS Secretary's Operations Center (HHS SOC) using either the HAvBED Web portal or the HAvBED EDXL Communication Schema.

Activity 13.1 - Report hospital bed availability data to HAvBED.

Area for Improvement 13.1.1: HAvBED was not activated.

Reference: ESF 8 State SOP

Analysis: An email requesting the HAvBED was sent to a person who was present in the Situation Unit but not activated. This email was forwarded to the Situation Unit Leader's personal email. No subsequent action was taken. No formal SOG has been established for the activation procedure of HAvBED. There is a requirement to report to the HHS SOC within four hours of activation; however the process to report has not been defined by DOH. Developing an SOP/SOG would eliminate confusion of what to include in a report, who to report to and the timeline required.

Recommendation:

1. Train in Florida reporting systems and procedures including authority to request status from AHCA and the utilization of HAvBED to include processes ESS/EM Resources.
2. Establish FDOH written guidance for responding to HHS requests and reporting in HAvBED.

Operational Coordination

Objective 2 - Demonstrate the ability of ESF-8 to coordinate emergency operations and the ability to direct and support an event or incident with public health or medical implications by establishing a standardized, scalable system of oversight, organization, and supervision consistent with Florida standards and practices and with the National Incident Management System

Strength

Observation 1: The Florida Department of Health conducted a patient movement workshop in conjunction with federal partners the week prior to the hurricane exercise kickoff.

Reference: ESF 8 Draft Patient Movement SOP

Analysis: The FDOH and ESF 8 conducted a patient movement workshop which included multiple federal partners including: DHHS, FEMA and the DOD. Discussions established the framework and base-lined assumptions for patient movement and allowed for cross-jurisdictional feedback. This event allowed for successful collaboration during the hurricane exercise and established expectations in the event that future patient movement operations are required.

Observation 2: Staffing unit had folders established for 2013 Incidents in the Hurricane Season prep shared folder.

Reference: None

Analysis: Staffing unit prepared for Hurricane Season ahead of time with internal network folders containing necessary templates. This provided a quick reference for all ESF 8 personnel and streamlined documentation.

Observation 3: Procurement established a new oxygen supply vendor.

Reference: ESF 8 State SOP

Analysis: During the exercise a mission was received for oxygen support at a SpNS. Procurement was tasked with the mission to source oxygen supply source and successfully located a vendor that would meet the needs of the mission. This has been a gap for ESF 8 in the past.

Areas for Improvement

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

Activity 2.1 - Develop an Incident Response Strategy

Area for Improvement 2.1.1: No safety analysis provided in the Incident Action Plan or Safety Officer assigned to the FOB.

Reference: ESF 8 State SOP, PHEP 3.2

Analysis: The safety analysis is normally conducted by the Safety Officer in a field Incident Command. While there is no safety officer in State ESF 8, safety analysis should be conducted to ensure responder safety and health. Additionally a Safety Officer shall be assigned in the field. The field Safety Officer would be responsible for developing the field safety message in conjunction with the IAP. When State ESF 8 is undertaking a direct operational role by providing a forward operating base, disaster preparedness coordinators and assessment teams directly under the control of the State ESF 8, the state has a responsibility to ensure that field operations under their control are conducted safely.

Recommendation:

1. State ESF 8 should conduct a safety analysis at beginning of event.
2. Identify within the ESF 8 SOP and supporting documentation responder safety and health analysis.
3. Revisit staffing at FOB and field operations to include safety officer.

Activity 2.2 – Implement an Incident Response Strategy

Area for Improvement 2.2.1: ESF 8 Procurement could not update mission in EM Constellation.

Reference: ESF 8 State SOP

Analysis: ESF 8 Procurement did not update EM Constellation because none of the personnel had access to EM Constellation. This leaves missions incomplete in EM Constellation, impedes an effective common operating picture, and creates an additional workload for the mission specialists to close out missions before deactivation.

Recommendation:

1. Provide ESF 8 Procurement personnel with operational access to EM Constellation.
2. Train ESF 8 Procurement personnel on the process of updating missions in EM Constellation.

Area for Improvement 2.2.2: Mission execution was delayed or otherwise unmet.

Reference: ESF 8 State SOP

Analysis: On Day 1 of the mission, ESF 8 logistics section was overwhelmed with missions in EM Constellation. The section worked to triage the missions as quickly as possible, but due to several factors there was an observed delay in mission management. The mission specialists working on Day 1 of the exercise in the SEOC did not have previous training on resources for mission management. Assigning missions became a task greater than expected due to the lack of experience and training of assigned team members. Exercise artificialities may have also been a contributing factor in determining mission assignment. It was unclear which missions coming in were notional or actual deployments. In addition to the inexperienced personnel, the logistics section could not obtain additional manpower to aid in triaging and managing the missions being requested due to the lack of available staff.

Recommendation:

1. Conduct resource training for all personnel working as mission specialists.
2. Continue exercising less experienced employees with mentorship from experienced employees.
3. Develop templates for common requests (oxygen, sanitation packages, etc.) for mission specialists to use during activation.

4. Identify triggers when staff members begin to become overwhelmed to assist in determining when to request additional staff.

Area for Improvement 2.2.3: The designated CCOC had insufficient equipment for personnel.

Reference: ESF 8 State SOP

Analysis: The requested configuration did not provide the needed amount of equipment for the staff identified to occupy the designated CCOC for the exercise. The gap was not identified until after activation and was short about 14 phones and needed a color copy machine. Personnel acquired a color copier however the phones remained an outstanding issue. Activating at the highest level and adjusting as needed, as per current guidance, can prevent future gaps.

Recommendation:

1. Comply with current guidance.

Activity 2.3 - Direct Critical Resource Logistics (CRL) and Distribution

Area for Improvement 2.3.1: SEOC staff shortages on the first day of the exercise.

Reference: ESF 8 State SOP, Emergency Duty Policy, Three-Deep Roster

Analysis: During the first day of the exercise Logistics was unable to recruit the usual and customary personnel to work the SEOC in Logistics. This action allowed for the opportunity for the Logistics Coordinator to train and utilize two inexperienced personnel as Mission Specialists. The issue was resolved by the second day with the addition of trained staff at the SEOC, however if it had gone unresolved the SEOC would be less efficient.

Recommendation:

1. Review three-deep roster positions for ESF 8 Logistics to validate skill levels needed and assigning appropriate personnel.

Activity 2.4 - Activate Critical Resource Logistics and Distribution.

Area for Improvement 2.4.1: No ESF 8 logistics strategy in prioritizing missions was observed.

Reference: ESF 8 State SOP

Analysis: No logistics strategy was observed in prioritizing or managing missions. This may have been in part due to personnel assigned not having enough experience and training in the roles. Exercise artificialities also influenced the ability to triage missions because there was a failure point in the SIMCELL with regard to developing out injects.

Recommendation:

1. Document in appropriate guidance mission triage/prioritization process.
2. Create checklists for staff members to follow that can be used to execute tasks for new personnel or as a memory tool for experienced staff members.
3. Test training during scheduled training (First Friday Training) and future exercises.

Activity 2.5 - Acquire Resources

Area for Improvement 2.5.1: Logistics did not make use of the Inventory Resource Management System (IRMS).

Reference: ESF 8 State SOP

Analysis: Staff did not follow the intended process, prior to ordering mission related commodities or equipment, Logistics should check the IRMS to confirm whether or not the items are in stock and communicate with Procurement. If the items are in stock, a decision needs to be made to order from a vendor or ship from the DOH warehouse that contains the item. Not utilizing the IRMS could result in incurring unnecessary costs and slow down the movement of requested resources and impeding the accomplishment of mission needs.

Recommendation:

1. Train all Logistics staff on use of IRMS.
2. Provide a checklist cheat sheet on the correct process for the logistics desk at ESF 8.
3. Update the Mission Processing Checklist to include utilization of IRMS.

Activity 2.6 - Transport, Track and Manage Resources.

Area for Improvement 2.6.1: ESF 8 was unable to fully demonstrate the ability to operationalize a comprehensive resource tracking process.

Reference: ESF 8 State SOP, All-Hazards Specific Resources Unit Leader Job Aid

Analysis: The ESF 8 Resource Unit has poor visibility on all activated personnel but is able to produce a daily ICS 203 of activated personnel which is attached to the IAP. DOH equipment is checked out of the warehouse inventory and tracked through an electronic inventory resource management. Equipment purchased is accounted for by the procurement unit. The Resource Unit is unable to project or track resources in a single system. Stove piped resource information by various units does not allow for a centralized resource tracking system. The unit does provide a list of "critical resources" developed by scanning missions for multiple requests. There is no tally of critical resources available and critical resources requested.

Recommendation:

1. Develop the resource tracking process to include personnel and equipment in one common accountability system.
2. Identify and clarify the Forward Operating Base Resource Unit versus Central Resource Unit expectations.

Area for Improvement 2.6.2: No coordinated unified resource tracking strategy between the different ESF 8 units.

Reference: ESF 8 State SOP

Analysis: No common accountability process was established because different units were using different forms of tracking and failing to communicate the information effectively. The process could be improved by establishing a unified procedure for reporting with one unit designated to capture all data from the other units and push it back out for common accountability and visibility. Lack of resource tracking can lead to duplication of efforts, resource mismanagement, life safety issues, impedes mission management and has the potential for creating budget pitfalls.

Recommendation:

1. Develop a strategy of common resource accountability to include identification of responsible unit and expectations as well as deliverables.
2. Centralize the resource tracking of assigned assets to the Resource Unit.
3. Resource Unit provides visibility to the ESF 8 Staff on the status of resources (equipment and personnel) on a schedule as defined by the ECO.
4. Train and exercise system during First Friday Training.

Area for Improvement 2.6.3: Section Coordinators did not submit a list of surplus resources to the Resource or Demobilization Unit leaders.

Reference: ESF 8 State SOP, Team Leader Guide

Analysis: The demobilization unit produced a demobilization plan and demobilization documents for staff in the SEOC and in the field. Demobilization materials provided needed to be customized due to differences in field versus EOC activated personnel. Demobilization material that can be provided prior to a response was out of date in a Team Leaders Guide online. Current materials were not sent ahead to replace the old materials. The Demobilization unit leader had poor visibility of activated staff and equipment. Unit leaders not reporting what resources are being demobilized to the Demobilization section which can impact visibility on resource availability for sustained operations.

Recommendation:

1. Update the Team Leaders Guide.
2. Review all the demobilization forms and update.
3. Sort demobilization materials by Field versus ESF 8 SEOC activated personnel.
4. Increase communications between the Resource Unit and Demobilization Unit.

Objective 11 - Demonstrate the ability to activate key staff within the timeline requirements as outlined in by the CDC PHEP, Capability 3

Areas for Improvement

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

Activity 11.1 - Assemble ESF 8 Public Health Emergency Operations Center.

Area for Improvement 11.1.1: ESF 8 was unable to assemble key personnel according to the PHEP standards within 60 minutes of notification.

Reference: ESF 8 State SOP, PHEP 3.2

Analysis: Historically, this has not been a problem area for the ESF 8 team, however on this occasion the notification went out on 5/17/13 at 1:49pm to assemble through SERVFL with 14% no response, with one core member failing to respond to the notification. Primary and secondary measures of notification can be in place for notification and during assembly attendance should be taken, recorded and documentation provided to the ECO.

Recommendation:

1. Clearly define and communicate responsibility of roster for activation.
2. Assign staff to record and provide evidence to verify assembly.
3. Train and exercise activation procedures at a minimum of quarterly.

Area for Improvement 11.1.2: The State Emergency Responders and Volunteers of Florida (SERVFL) system failed during the Hurricane Exercise.

Reference: ESF 8 State SOP

Analysis: The SERVFL system is a critical tool to the recruitment, management, tracking, deploying and the medical licensing verification of ESF 8 and volunteers statewide. During day two of the exercise, the system underwent a nationwide system upgrade. When the system was restored, visibility of all assigned or available personnel and license status was lost and was not recovered during the remainder of the exercise. Loss of this system had statewide negative impacts from local County Health Departments, Medical Reserve Corps units and State ESF 8 operations. Loss of data had a direct impact on the ability of ESF 8 at all levels to support state mission requirements.

Recommendation:

1. Review the continued viability of the SERVFL system.
2. Ensure all SERVFL Administrators have a manual back-up procedure in place.

Objective 14 - Evaluate the process and assess the ability of local and state partners to coordinate the healthcare response through analysis of data. Define the needs of the incident and the available healthcare staffing and resources upon notification of the incident.

Strength

Observation 1: State and Federal ESF 8 were co-located in SEOC which streamlined the process of utilizing federal assets for missions.

Reference: ESF 8 State SOP

Analysis: When multiple hurricanes hit Florida during the 2013 Statewide Hurricane Exercise, Public Health and Healthcare resources quickly were depleted. Each local entity across the state was impacted and unable to muster resources to send to aid elsewhere. The ESF 8 Federal partnerships were called upon in Mission #427 and 430 to establish a Federal Medical Station. By having representation for Federal ESF 8 assets at the State EOC ESF 8 desk, State ESF 8 was able to facilitate an instantaneous and effective response to missions. The DHHS Regional Emergency Coordinator and ESF 8's seamless collaboration resulted in a timely response for a necessary capability.

Objective 16 - Evaluate the ability to demobilize operations.

Areas for Improvement

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

Activity 16.1 - Demobilize and evaluate public health emergency operations.

Area for Improvement 16.1.1: ESF 8 was unable to fully demonstrate the ability to demobilize staff effectively.

Reference: Team Leader Guide

Analysis: The Demobilization Unit produced a demobilization plan and demobilization documents for staff in the SEOC and in the field. Demobilization materials provided needed to be customized due to differences in field versus EOC activated personnel. Demobilization material that can be provided prior to a response was out of date in a Team Leaders Guide online. Current materials were not sent ahead to replace the old materials. The Demobilization unit leader had poor visibility of activated staff and equipment. Unit leaders not reporting what resources are being demobilized to the Demobilization section which can impact visibility on resource availability for sustained operations.

Recommendation:

1. Update the Team Leaders Guide.
2. Review all the demobilization forms and update.
3. Sort demobilization materials by Field versus ESF 8 SEOC activated personnel.
4. Increase communications between the Resource Unit and Demobilization Unit.

Activity 16.2 - Demobilize FOB.

Area for Improvement 16.2.1: FOB Demobilization roles and responsibilities.

Reference: ESF 8 State SOP, Logistics Support Annex

Analysis: The demobilization plan was too extensive for different resource units (such as deployed team). Demobilization Team leaders experienced confusion on expectations for their role on the demobilization of forward deployment versus headquarter teams. Teams/personnel were not effectively demobilized based on the confusion.

Recommendation:

1. Make the demobilization plan scalable (tailored to individual resources).
2. Provide training to FOB Team Leaders on expectations for demobilization planning.
3. Provide appropriate documents for demobilization in mobilization packet (individual evaluation ICS forms 221, 225).
4. Clearly identify and delineate FOB versus CCOC demobilization roles and responsibilities.

Activity 16.5 - Demobilize IT FOB Support Services in Accordance to FOB Mission Requirements.

Area for Improvement 16.5.1: Mobilization/Demobilization plan for FOB did not include IT DPC specific instructions.

Reference: None

Analysis: A demobilization plan was prepared but was not used. A standardized field demobilization plan needs to be developed for easily and repeatable implementation in the field. This will ensure a more coordinated demobilization plan when deployed as a stand-alone resource.

Recommendation:

1. Follow up with deployed personnel to document demobilization and ensure that all personnel return safely.
2. Update SOP to reflect a comprehensive demobilization plan unit specific.
3. Train and exercise plans/procedures.

Objective 17 - Demonstrate the ability to conduct financial tracking and analysis of the ESF 8 response through incident closeout.

Strength

Observation 1: State Agency Disaster Projections Reporting Summary Form to DEM was completed.

Reference: FL Resource and Financial Management Policies and Procedures for EM

Analysis: The State Agency Disaster Projections Reporting Summary Form is a tool that Recovery Finance used during the exercises for reporting a daily and 15 day projection cost to DEM. The spread sheet is a breakdown of cost of our Agency during this exercise. Consistent daily communication between local and CHD partners made the delivery and accuracy of this report happen.

Areas for Improvement

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

Activity 17.1 - Authorized Purchasing.

Area for Improvement 17.1.1: Mission #441 in EM Constellation mission folder was insufficient.

Reference: FL Resource and Financial Management Policies and Procedures for EM

Analysis: On the last day of the Exercise ESF 8 Materials had a Mission folder for review, the information was received from the Purchasing Officer. Review of the documents found Mission 441 incomplete because the requisition was insufficient. The requisition lacked pertinent information required to complete the purchase. Developing a checklist and providing training will prevent future incompletions by providing guidance on what information is necessary to complete a requisition. This caused confusion and the potential for expending unnecessary funds along with wasting time.

Recommendation:

1. Review and revise the existing checklist for each mission folder with resource description information from EM Constellation.
2. Establish a review process for mission folders before the purchase is made.
3. Attach or include individual checklists to each mission folder.
4. Provide training on mission folder management.

Activity 17.2 - Provide Accounting Codes.

Area for Improvement 17.2.1: Payroll codes were not received in the appropriate or timely manner.

Reference: FL Resource and Financial Management Policies and Procedures for EM

Analysis: On 5/15/13, Thursday, and then 5/20/13, Monday, the ECO notified all of Division of Administration Sections of the Hurricane Exercise by email. Only two people were notified within the Budget Office and both were out of the office for the duration of the event. The out of office notification function was not used by the absent employees, thus the Recovery Finance Section was not notified of the need for coding. The issue was resolved between ESF 8 Materials and Budget on codes on Tuesday 5/21/13. Coding is a necessary element needed to track funding and to gain federal reimbursement. It was subsequently determined that all needed DOH entities were not engaged in the exercise play.

Recommendation:

1. Coordinate and encourage the participation of all DOH Divisions, Bureaus, Units and CHDs to the extent of play anticipated.
2. Include appropriate verbiage in the ECO checklist for addressing both central office and CHDs.

Activity 17.3 - Maintain Records and Collect Documentation.

Area for Improvement 17.3.1: Finance and Administration and the ECO reported different numbers to SERT.

Reference: ESF 8 State SOP

Analysis: Finance and Administration Coordinator reported a portion of the financial impact to ECO and Logs coordinator. Recovery section reported entire statewide impact to SERT, not copying the ESF 8 mailbox. New personnel serving in role of F&A Coordinator was unclear on what to report. The Recovery section was not on the ICS 203 form, but was attending SERT calls and compiling statewide financial impact reports. The Recovery Section operates independently of the ESF 8 Incident Management Structure which can cause a duplication of effort and miscommunications.

Recommendation:

1. Clearly identify and document roles and responsibilities of the Recovery Section which is complimentary to the efforts of the ESF 8 Finance and Administration (F&A) Section within a Standard Operating Procedure/Guide.
2. Identify and document when the Recovery section is activated, by whom and when during an event.
3. Identify what F&A reports to whom and when during an event.
4. Review the notification and activation sequence with both sections.
5. Train and exercise the Finance and Administration Section and Recovery Section personnel on plans, policies and procedures.

Public and Private Services and Resources

Objective 1 - Demonstrate the ability to activate and deploy strike teams and supporting elements including integration into the state and local response structures.

Strength

Observation 1: A Task Force of Healthcare Facility Assessment Team members was successfully deployed by ESF 8 to an area to support the assessment and status of healthcare facilities.

Reference: Logistics Support Annex, Proof of Concept, Demonstration of HFAT

Analysis: This demonstration shows the ability of ESF 8 to close any gap in healthcare facility status reporting. The joint task force team consisted of members from the FDOH, Agency for Healthcare Administration (AHCA) and Agency for People with Disabilities (APD) and other community partners. In conjunction with the Walton County emergency management structure, the assessments were divided into geographic areas and the teams were able to contact facility operators in order to determine the status. This information was provided back to the County EOC and State EOC to provide status updates and source resource requests. By tasking all deployed ESF 8 and task force teams out of a centralized field location, duplication of coverage and site visits can be avoided and coordination/consolidation of efforts are increased. The utilization of this assessment task force provides a force multiplier to the local emergency management and ESF 8 structure.

Areas for Improvement

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

Activity 1.1 - Forward Operating Base (FOB).

Area for Improvement 1.1.1: Communications between CCOC and Deployed personnel was inefficient.

Reference: ESF 8 Communications Procedures

Analysis: The communication services were made available and tested in adequate time, but due to system failures late in the afternoon on day two of the exercise, multiple services were offline for approximately 1.5 hours until regional resources were brought onsite to restore all capabilities. The satellite phones were still operational and the numbers were provided to parts of ESF 8, however not all of the units had visibility of these contact numbers. The IT DPC Team currently is not completely imbedded into the ESF 8 reporting process.

Recommendation:

1. Participation of deployed DPC Team lead in event/incident regularly scheduled status update meetings.
2. Provide regular onsite status update meetings for deployed teams.

Activity 1.2 - Activate and deploy FOB and team.

Area for Improvement 1.2.1: Command and control of Field Operations were unclear.

Reference: ESF 8 State SOP

Analysis: The State ESF 8 undertook, under a proof of concept, a direct operational role by providing a Forward Operating Base, Disaster Preparedness Coordinators (DPC) and assessment teams directly under the control of the State ESF 8. Command and control of these field based assets were not clearly identified. This led to confusion over who was in charge in the field and who deployed personnel were accountable to. Without an Operations Section within ESF 8, the duties revert to the Emergency Coordinating Officer who will have competing demanding priorities during a disaster.

Recommendation:

1. Clearly define within appropriate documentation command and control roles and responsibilities.
2. Explore the expansion of the ESF 8 Incident Management Structure to include an Operations Section when deploying field based personnel under the direct control of the State ESF 8 and include in appropriate documentation.
3. Train and exercise any changes that include expansion of the Incident Management Structure.

Activity 1.3 - Mobilize Public Health Response Teams.

Area for Improvement 1.3.1: Notification for Strike Teams came through unrecognized method of notification.

Reference: FDOH Regional Public Health Response Teams Team Leader Guide

Analysis: The historical method of communication has been an email or a phone call from the Staffing Unit to begin the request process of a strike team through the Regional POCs. In an innovative attempt to utilize the full capabilities of SERVFL, the Staffing Unit abandoned the traditional means of notification. The utilization of SERVFL with the full participation of DOH personnel greatly streamlines the notification and recruitment process. Regional POCs and/or other staff were not notified of the change in the communication process nor were all Regional POCs and/or other staff registered within SERVFL. After recognizing the issue in the communication process the Staffing Unit reengaged the traditional method. Although innovative, the utilization of SERVFL hampered the fulfillment of mission requests.

Recommendation:

1. Communicate across all ESF 8 personnel the intended primary method of contact for notification.
2. Follow up with a secondary method of communication.
3. All Group 1 and 2 personnel, as identified in the Emergency Duty Policy, register in SERVFL.

Area for Improvement 1.3.2: Unable to fill Strike Team Missions.

Reference: ESF 8 State SOP, Team Typing Matrices

Analysis: On day 1 of the exercise a mission request was submitted for Strike Teams. There were multiple factors involved which prevented fulfilling the strike team requests; 1) Newly assigned staff to the mission specialist positions, 2) communications between mission management and the staffing unit, 3) the challenge of deploying personnel in a multi-storm environment, 4) utilization of SERVFL for Regional POC notification, 5) confusion on response timelines by Regional POCs and technical specialists. Although outside of the deployment window, the Staffing Unit with no other resources available, the teams staffing utilized the Medical Reserve Corps.

Recommendation:

1. Review processes and procedures for communicating mission status and appropriate follow up between the ECO, Logistics Section Chief and Planning Section Chief.
2. Review and revise (as needed) communications methodology for recruiting through SERVFL.
3. Validate strike team notification/activation in deployment timelines.
4. Train ESF 8 staff, Regional POCs, and strike team personnel on deployment timeline expectations.

Area for Improvement 1.3.3: Utilization of Medical Reserve Corps (MRC) volunteers to fill strike team positions.

Reference: FDOH Regional Public Health Response Teams Team Leader Guide

Analysis: The Staffing Unit was tasked with sourcing strike teams in support of various missions. Unable to fill with existing DOH resources the Staffing Unit simulated filling teams with Medical Reserve Corps personnel. Currently there are no defined plans, policies or procedures which define when and under what capacity the MRC can or should be used in an emergency. Although the mission was filled, there remains question on the viability, reliability and training standards for MRC personnel. When the credentialing efforts have been completed, this will help eliminate some of the questions.

Recommendation:

1. Determine what the process is and the approval authority for utilization of Medical Reserve Corps personnel that may be deployed by State ESF 8.
2. Determine trigger points for when MRC should be recruited to fill missions.
3. Identify and adopt job qualifications required for deployed Public Health team members to fill strike team positions.
4. Determine back up personnel such as MRC, EMAC or other sources and the order of priority when they would be used.

Activity 1.4 - Activate & Deploy FOB IT Support.

Area for Improvement 1.4.1: IT DPC support operated without formal SOP/SOG.

Reference: None

Analysis: The IT DPC Team does not have any written and formal standard operating guidelines/procedure. Absent guidance can cause a large scope creep and easily distract teams from mission specific tasks. A SOP/SOG to supplement the current FOB policies would provide necessary direction to deployed personnel and prevent duplication of efforts or miscommunications.

Recommendation:

1. Develop an IT DPC annex/insert to current FOB SOP to include mission, equipment capability, chain of command, concept of operations, personnel roles and responsibilities.
2. Incorporate subject matter expert and hot-wash/AAR comments to develop a guideline for IT DPC Team deployment.

Area for Improvement 1.4.2: Deployed radio equipment (Med 82) did not have sufficient coverage for field operations.

Reference: None

Analysis: Med 82 lacked sufficient coverage for the Area of Operations (AO), staff could only communicate within 10 mile radius, but AO exceeded 30 miles. Each CHD has a Med 82 however not all use them. In order to increase the coverage the equipment should be used, and more rural counties may require more equipment to cover the entire area.

Recommendation:

1. Provide additional communication support with Med 82 when Area of Operations exceeds the communication range.
2. Provide alternative radio communication recommendation.
3. Develop a communications plan and post the radio frequency to the FOB status board.

Environmental Health

Objective 9 - Environmental Health Strike Teams demonstrate emergency sampling and inspection procedures utilizing appropriate assessment forms and technological field equipment.

Strength

Observation 1: Healthcare Facility Assessment Team and Environmental Health Strike Team coordinated to visit the same facilities post disaster.

Reference: None

Analysis: The Healthcare Facility Assessment Team and the Environmental Health Strike Team were scheduled to visit Alternate Living Facilities (ALFs) post disaster. No prior communication was established thus potentially overwhelming facilities if multiple teams are coming in at different times. The teams identified the potential to coordinate visits together and collaborated to work together on site visits, reducing the amount of time focused on working with assessment teams by facility staff.

Public Information and Warning

Objective 3 - Establish/participate in a Joint and Virtual Information Centers which ensures effective and timely information processing and dissemination.

Areas for Improvement

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

Activity 3.1 - Manage Emergency Public Information and Warnings.

Area for Improvement 3.1.1: ESF 8 Communication mailbox was not update to date.

Reference: Crisis and Emergency Risk Communications Annex

Analysis: Public Information Officers staffing the Information Management Branch / Unit, participating in exercise were unable to access incoming information and requests to the internal mailbox(ESF8_Comms mailbox), hindering flow of information for receipt and processing of public information requests.

Recommendation:

1. Provide designated Information Management Branch/Unit (IMB/U) staff access to internal mailbox (ESF8_Comms mailbox).

Activity 3.2 - Activate Emergency Public Information, Alert/Warning, and Notification Plans.

Area for Improvement 3.2.1: No process available to contact county health department public information officers during emergency response.

Reference: CERC Annex, Draft DOH Media Relations Standard Operating Procedures

Analysis: Information Management Branch / Unit Deputy Director unable to locate a process for setting up, conducting regular schedule of conference calls with county health department public information officers.

Recommendation:

1. Develop CHD PIO conference call process for Office of Communications, ESF-8 PIO.

Activity 3.3 - Establish JIS.

Area for Improvement 3.2.1: Approval process for DOH messaging products is inefficient.

Reference: Crisis and Emergency Risk Communications Annex; Draft DOH Media Relations Standard Operating Procedures

Analysis: On first day, DOH PIOs received inject to develop public health messaging news release to be disseminated through ESF14. PIOs retrieved pre drafted, approved templates from CERC Portal, developed/tweaked news release, and then forwarded to the DOH Communications Office for final approvals. There was a tremendous time delay between the time the draft was sent to the Communications Office, and when it was received back to share with ESF14. The ESF14 lead PIO contacted the DOH PIOs to determine why there was a delay, and the PIOs shared the Surgeon General and Communications Office required additional time to review, approve products. Again, this caused a major delay in distribution of messaging to the "public" and stakeholders. After the exercise, the Evaluator, ECO, Division Director, and Bureau Chief met with the Surgeon General to discuss and it was determined the delay was not the approval process that was the delay, yet the Surgeon General's news release quote that required revision. In addition, the Surgeon General requested all products are structured to begin with three major points and then list supporting information.

Recommendation:

1. Clarify approval process in CERC Annex and DOH Media Relations Standard Operating Procedures (SOP).
2. Revise all news release products in the CERC Portal to reflect the Surgeon General's request.

Area for Improvement 3.2.2: DOH HQ and CHD PIOs were not fully versed in, comfortable with use of FDENS Document Center as Virtual JIC. Resulted in inadequate use of designated FDENS Virtual JIC during exercise.

Reference: Crisis and Emergency Risk Communications Annex; Attachment: Virtual Joint Information Center Standard Operating Guidelines

Analysis: This is the second time utilizing the FDENS Document Center as the official DOH Virtual JIC. Although each DOH and contract employee is asked to complete an orientation upon hire, there still are gaps in how to effectively move around in and use the tool – not just as a V JIC, but also during daily alerting activities.

Recommendation:

1. Provide PIO specific FDENS training for daily and emergency use and incorporate training module into the new FNRMS system.

Activity 3.5 - Conduct Media Relations.

Area for Improvement 3.5.1: ESF14 unsure of DOH Office of Communications, ESF8 Public Information Officers' role, expectations, needs during emergency incidents, events.

Reference: CERC Annex, ESF14 SOP

Analysis: Due to lengthy approval process for public health messaging, ESF14 lead approached Emergency Coordinating Officer and IMB/U Evaluator regarding DOH public information capabilities and response partner coordination processes.

Recommendation:

1. Meet with Information Management Branch / Unit Lead and DOH Communications Director to discuss.

Area for Improvement 3.5.2: ESF8 personnel do not have copy of DOH specific media relations guidance / protocol.

Reference: CERC Annex, DOH Media Relations Standard Operating Procedures

Analysis: Forward Operating Base personnel provided real world interview to local TV station without consulting ESF8, DOH Office of Communications. This can potentially cause confusion, unintentionally misleading the media or providing incorrect information. In order for the IMU to mitigate and prevent rumors, all DOH personnel should consult the Office of Communications prior to giving interviews to the media.

Recommendation:

1. Provide basic media relations training, copy of process to ESF8 personnel.

Mass Care Services

Objective 15 - Demonstrate the ability to support Healthcare Coalitions and response partners in the expansion of the jurisdictions healthcare system (includes additional beds, staff & Equipment) to provide access to additional healthcare services (e.g. call centers, alternate care systems, EMS, emergency department services and inpatient services)

Strength

Observation 1: Staffing process was performed efficiently and effectively.

Reference: None

Analysis: On Day 2 of the exercise, the SERVFL system was taken down for system upgrades, when it was brought back online there was complete loss of visibility of responder and assigned ESF 8 personnel within the system. The Staffing Unit executed down time procedures and was effectively able to recapture accountability of personnel without use of SERVFL.

Areas for Improvement

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

Activity 15.1 - Initiate Call Center.

Area for Improvement 15.1.1: Members in SERVFL were contacted for volunteer call center duty despite already being activated in three deep roster roles.

Reference: ESF 8 State SOP

Analysis: Members of the three deep ESF 8 roster had previously been activated in their designated roles. When seeking volunteers to fill Call Center personnel requirements a SERVFL notification was sent Bureau-wide regardless of activation status. This caused confusion on whether personnel were being reassigned roles. Eligible employees were not pre identified for Call Center duties. Pre-identifying Call Center personnel before activation will alleviate confusion and speed the recruitment process.

Recommendation:

1. Pre-identify Call Center personnel from all DOHCCOC resources.

CONCLUSION

The exercise established a baseline of capabilities and identified gaps to improve capabilities. The deployment of the FOB proved that FDOH is capable of a self-sustaining field asset. The Healthcare Facility Assessment Teams are a viable capability and proves to be a positive addition for regions and counties. The continued cooperation at the local and regional levels with the State ESF 8 function led to the overall success in the Statewide Hurricane Exercise.

Although some objectives were not met, the exercise was hugely successful in showing where opportunities for growth and system maturity can occur at the State ESF-8 level. Overwhelmingly both participants and the exercise evaluation team identified the need and desire for additional position specific and a systems approach to training. Planning was an additional area that requires attention. Generally, there was confusion as to what plans were current, where to locate approved plans, the availability of supporting tools and the status of plans being developed. Some of these items are in progress or are waiting in a queue, while others warrant development as they will provide added value by either reducing time or providing a process improvement. Staffing and the three-deep roster was also a point of confusion as the current approved list is not up to date and contains shortfalls in staffing positions.

Exercise strengths, dedication, expertise and experience, are the characteristics that will drive the teams to overcome obstacles and the uncertainty that is typical of a disaster environment. The State ESF 8 participation in the 2103 Hurricanes "Kirk and Lay" showed an overall success of the activation and execution of missions and displays the overall preparedness of the Florida Department of Health to continue assisting the public during natural disasters.

APPENDIX A: IMPROVEMENT PLAN

This IP has been developed specifically for Florida Department of Health as a result of 2013 Hurricane “Kirk and Lay” Exercise conducted on 19 – 24 May, 2013. The capabilities are organized in ascending alphabetical order.

Core Capability	Issue/Area for Improvement	Corrective Action	Capability Element ¹	Primary Responsible Organization	Organization POC	Start Date	Completion Date
Core Capability 1: Intelligence and Information Sharing	1. The three deep roster identifies new employees (who lack training and experience) to perform roles of high responsibility.	Utilize First Friday Training to provide technician level training and exercise drills for all employees.	Training	ESF 8 Unit	Planning Coordinator	7-25-13	9-15-13
		Review, revise and publish Situation Unit Job Action Sheets/checklists.	Planning	ESF 8 Unit	Planning Coordinator	7-25-13	9-15-13
	2. The DOH map service was down for 3.5 hours.	Pursue access to DOH GIS server by GIS administration.	Planning	Situation Unit	Information Unit Manager	7-25-13	12-1-13
		Pursue fail over service for the GIS production server.	Equipment	Situation Unit	Information Unit Manager	7-25-13	5-1-14
		Download necessary map files to a shared/hard drive as tertiary back up means.	Planning	Situation Unit	Information Unit Manager	7-25-13	8-15-13

¹ Capability Elements are: Planning, Organization, Equipment, Training, or Exercise.

Core Capability	Issue/Area for Improvement	Corrective Action	Capability Element ¹	Primary Responsible Organization	Organization POC	Start Date	Completion Date
	3. The Situation Unit could not update the Electronic Status Board (ESB) in an accurate manner.	Evaluate the strategy of using the ESB for a common operating picture that includes timeliness, accuracy, and content.	Planning	Situation Unit	Information Unit Manager	7-25-13	9-15-13
		Explore the option of submitting data elements to a single point of contact within the Situation Unit for dashboard updates.	Planning	Situation Unit	Information Unit Manager	7-25-13	9-15-13
		Update guidance and communicate expectations regarding the dashboard use and maintenance.	Planning	Situation Unit	Information Unit Manager	7-25-13	9-15-13
	4. Delayed development of the area of operations map from a preformatted PDF.	Ensure the three-deep roster reflects ArcGIS subject matter expert redundancy.	Organization	Situation Unit	Information Unit Manager	7-25-13	10-15-13
		A GIS analyst should be designated to the Situation Unit with ArcGIS availability when activated. Consider placing a projected or observed wind overlay on the area of operations map.	Planning	Situation Unit	Information Unit Manager	7-25-13	8-15-13
		Provide ESF 8 ArcGIS training to designated personnel in the Situation Unit three-deep roster.	Training	Situation Unit	Information Unit Manager	7-25-13	1-1-14

Core Capability	Issue/Area for Improvement	Corrective Action	Capability Element ¹	Primary Responsible Organization	Organization POC	Start Date	Completion Date
2. Mass Care Services	1. Members in SERVFL were contacted for volunteer call center duty despite already being activated in three deep roster roles.	Pre identify Call Center personnel from all DOH CCOC resources.	Planning	Responder Management	Responder Management Coordinator	7-25-13	8-15-13
3. Operational Communications	1. Strike Team Technical Specialist was not contacted for notification.	Review and de-conflict existing guidelines.	Planning	Responder Management	Responder Management Coordinator	7-25-13	1-1-14
		Revise and update or comply with guidelines.	Planning	Responder Management	Responder Management Coordinator	7-25-13	1-1-14
		Train all ESF 8 Logistics Section and Technical Specialists on the appropriate process.	Training	Responder Management	Responder Management Coordinator	7-25-13	4-1-14
4. Operational Coordination	1. ESF 8 was unable to assemble key personnel according to the PHEP standards within 60 minutes of notification.	Clearly define and communicate responsibility of roster for activation.	Organization	ESF 8 Unit	Planning Coordinator	7-25-13	10-1-13
		Assign staff to record and provide evidence to verify assembly.	Planning	ESF 8 Unit	Planning Coordinator	7-25-13	10-1-13
		Train and exercise activation procedures at a minimum of quarterly.	Training, Exercise	ESF 8 Unit	Planning Coordinator	7-25-13	10-1-13

Core Capability	Issue/Area for Improvement	Corrective Action	Capability Element ¹	Primary Responsible Organization	Organization POC	Start Date	Completion Date
	2. The State Emergency Responders and Volunteers of Florida (SERVFL) system failed during the Hurricane Exercise.	Review the continued viability of the SERVFL system.	Organization	Responder Management	Responder Management Coordinator	7-25-13	8-15-13
		Ensure all SERVFL Administrators have a manual back up procedure in place.	Planning	Responder Management	Responder Management Coordinator	7-25-13	8-15-13
	2. Mission Folder #441 was insufficient.	Review and revise the existing checklist for each mission folder with resource description information from EM Constellation.	Planning	Finance and Administration Unit	F&A Coordinator	7-25-13	10-1-13
		Establish a review process for mission folders before the purchase is made.	Planning	Finance and Administration Unit	F&A Coordinator	7-25-13	10-1-13
		Attach or include individual checklists to each mission folder.	Planning	Finance and Administration Unit	F&A Coordinator	7-25-13	10-1-13
		Provide training on mission folder management.	Training	Finance and Administration Unit	F&A Coordinator	7-25-13	10-1-13
	3. Payroll codes were not received in the appropriate or timely manner.	Coordinate and encourage the participation of all DOH Divisions, Bureaus, Units and CHDs to the extent of play anticipated.	Planning	Training, Exercise and Evaluation Unit	TE&E Unit Manager	7-25-13	10-1-13

Core Capability	Issue/Area for Improvement	Corrective Action	Capability Element ¹	Primary Responsible Organization	Organization POC	Start Date	Completion Date
		Include appropriate verbiage in the ECO checklist for addressing both central office and CHDs.	Planning	Training, Exercise and Evaluation Unit	TE&E Unit Manager	7-25-13	10-1-13
	4. Finance and Administration and the ECO reported different numbers to SERT.	Clearly identify and document roles and responsibilities of the Recovery Section which is complimentary to the efforts of the ESF 8 Finance and Administration (F&A) Section within a Standard Operating Procedure/Guide.	Planning	Finance and Administration Unit	F&A Coordinator	7-25-13	1-1-14
		Identify and document when the Recovery section is activated, by whom and when during an event.	Planning	Finance and Administration Unit	F&A Coordinator	7-25-13	1-1-14
		Identify what F&A reports to whom and when during an event.	Planning	Finance and Administration Unit	F&A Coordinator	7-25-13	1-1-14
		Review the notification and activation sequence with both sections.	Planning	Finance and Administration Unit	F&A Coordinator	7-25-13	1-1-14
		Train and exercise the Finance and Administration Section and Recovery Section personnel on plans, policies and procedures.	Training, Exercise	Finance and Administration Unit	F&A Coordinator	7-25-13	1-1-14

Core Capability	Issue/Area for Improvement	Corrective Action	Capability Element ¹	Primary Responsible Organization	Organization POC	Start Date	Completion Date
	5. No safety analysis provided in the Incident Action Plan or Safety Officer assigned to the FOB.	State ESF 8 should conduct a safety analysis at beginning of event.	Planning	ESF 8 Unit	Planning Coordinator	7-25-13	1-1-14
		Identify within the ESF 8 SOP and supporting documentation responder safety and health analysis.	Planning	ESF 8 Unit	Planning Coordinator	7-25-13	1-1-14
		Revisit staffing at FOB and field operations to include safety officer.	Planning	ESF 8 Unit	Planning Coordinator	7-25-13	8-15-13
	6. ESF 8 Procurement could not update mission in EM Constellation	Provide ESF 8 Procurement personnel with operational access to EM Constellation.	Equipment	Responder Management	Responder Management Coordinator	7-25-13	8-15-13
		Train ESF 8 Procurement personnel on the process of updating missions in EM Constellation.	Training	Responder Management	Responder Management Coordinator	7-25-13	8-15-13
	7. Mission execution was delayed or otherwise unmet.	Conduct resource training for all personnel working as mission specialists	Training	Medical Logistics/Responder Management	Medical Logistics Unit Manager	7-25-13	5-1-14
		Continue exercising less experienced employees with mentorship from experienced employees.	Exercise	Medical Logistics/Responder Management	Medical Logistics Unit Manager	7-25-13	5-1-14

Core Capability	Issue/Area for Improvement	Corrective Action	Capability Element ¹	Primary Responsible Organization	Organization POC	Start Date	Completion Date
		Develop templates for common requests (oxygen, sanitation packages, etc.) for mission specialists to use during activation.	Planning	Medical Logistics/Responder Management	Medical Logistics Unit Manager	7-25-13	5-1-14
		Identify triggers when staff members begin to become overwhelmed to assist in determining when to request additional staff.	Planning	Medical Logistics/Responder Management	Medical Logistics Unit Manager	7-25-13	5-1-14
	8. Room 301 had insufficient equipment for personnel.	Comply with current guidance.	Planning	ESF 8 Unit	Planning Coordinator	7-25-13	11-30-13
	9. SEOC staff shortages on the first day of the exercise.	Review "Three Deep" positions for ESF 8 Logistics to validate skill levels needed and assigning appropriate personnel.	Planning	Medical Logistics	Medical Logistics Unit Manager	7-25-13	8-15-13
	10. No ESF 8 logistics strategy in prioritizing missions was observed.	Document in appropriate guidance mission triage/prioritization process.	Planning	Medical Logistics	Medical Logistics Unit Manager	7-25-13	1-1-14
		Create checklists for staff members to follow that can be used to execute tasks for new personnel or as a memory tool for experienced staff members.	Planning	Medical Logistics	Medical Logistics Unit Manager	7-25-13	8-15-13

Core Capability	Issue/Area for Improvement	Corrective Action	Capability Element ¹	Primary Responsible Organization	Organization POC	Start Date	Completion Date
		Test training during First Fridays and future exercises.	Training	Medical Logistics	Medical Logistics Unit Manager	7-25-13	8-15-13
	11. Logistics did not make use of the Inventory Resource Management System (IRMS).	Train all Logistics and Procurement staff on use of IRMS.	Training	Medical Logistics	Medical Logistics Unit Manager	7-25-13	10-1-13
	Resource Management System (IRMS).	Provide a checklist cheat sheet on the correct process for the logistics desk at ESF 8.	Planning	Medical Logistics	Medical Logistics Unit Manager	7-25-13	10-1-13
		Update the Mission Processing Checklist to include utilization of IRMS.	Planning	Medical Logistics	Medical Logistics Unit Manager	7-25-13	10-1-13
	12. ESF 8 was unable to fully demonstrate the ability to operationalize a comprehensive resource tracking process.	Develop the resource tracking process to include personnel and equipment in one common accountability system.	Planning	ESF 8 Unit	Planning Coordinator	7-25-13	9-15-13
		Identify and clarify the Forward Operating Base Resource Unit versus Central Resource Unit expectations.	Planning	ESF 8 Unit	Planning Coordinator	7-25-13	9-15-13
	13. No coordinated unified resource tracking strategy between the different ESF 8 units.	Develop a strategy of common resource accountability to include identification of responsible unit and expectations as well as deliverables.	Planning	Emergency Coordination Officer	Mike McHargue	7-25-13	7-25-13

Core Capability	Issue/Area for Improvement	Corrective Action	Capability Element ¹	Primary Responsible Organization	Organization POC	Start Date	Completion Date
		Centralize the resource tracking of assigned assets to the Resource Unit.	Planning	ESF 8 Unit	Planning Coordinator	7-25-13	1-1-14
		Resource Unit provides visibility to the ESF 8 Staff on the status of resources (equipment and personnel) on a schedule as defined by the ECO.	Planning	ESF 8 Unit	Planning Coordinator	7-25-13	1-1-14
		Train and exercise system during First Friday Training.	Training, Exercise	ESF 8 Unit	Planning Coordinator	7-25-13	1-1-14
	14. Section Coordinators did not submit a list of surplus resources to the Resource or Demobilization Unit leaders.	Develop a system of common resource accountability to include identification of responsible unit and expectations as well as deliverables.	Planning	Responder Management	Responder Management Coordinator	7-25-13	11-1-13
		Continue to focus on improving the preparedness cycle for the RESL, DEML, and the Staffing Unit Leader to enforce effective communication and accountability of resources.	Planning	Responder Management	Responder Management Coordinator	7-25-13	11-1-13
		Train and exercise system during First Friday Training.	Training, Exercise	Responder Management	Responder Management Coordinator	7-25-13	11-1-13

Core Capability	Issue/Area for Improvement	Corrective Action	Capability Element ¹	Primary Responsible Organization	Organization POC	Start Date	Completion Date
	15. ESF 8 was unable to fully demonstrate the ability to demobilize staff effectively.	Update the Team Leaders Guide.	Planning	ESF 8 Unit	Planning Coordinator	7-25-13	4-30-14
		Review all the demobilization forms and update.	Planning	ESF 8 Unit	Planning Coordinator	7-25-13	9-15-13
		Sort demobilization materials by Field versus ESF 8 SEOC activated personnel.	Organization	ESF 8 Unit	Planning Coordinator	7-25-13	9-15-13
		Increase communications between the Resource Unit and Demobilization Unit.	Planning	ESF 8 Unit	Planning Coordinator	7-25-13	9-15-13
	16. FOB Demobilization roles and responsibilities.	Make the demobilization plan scalable (tailored to individual resources).	Planning	ESF 8 Unit	Planning Coordinator	7-25-13	9-15-13
		Provide training to FOB Team Leaders on expectations for demobilization planning.	Training	ESF 8 Unit	Planning Coordinator	7-25-13	9-15-13
		Provide appropriate documents for demobilization in mobilization packet (individual evaluation ICS forms 221, 225).	Planning	ESF 8 Unit	Planning Coordinator	7-25-13	9-15-13
		Clearly identify and delineate FOB versus CCOC demobilization roles and responsibilities.	Organization	ESF 8 Unit	Planning Coordinator	7-25-13	9-15-13

Core Capability	Issue/Area for Improvement	Corrective Action	Capability Element ¹	Primary Responsible Organization	Organization POC	Start Date	Completion Date
	17. Mobilization/Demobilization plan for FOB did not include IT DPC specific instructions.	Follow up with deployed personnel to document demobilization and ensure that all personnel return safely.	Planning	IT DPC Team Manager	Bryan Chrisp	7-25-13	1-1-14
		Update SOP to reflect a comprehensive demobilization plan (IT annex) unit specific.	Planning	IT DPC Team Manager	Bryan Chrisp	7-25-13	1-1-14
		Train and exercise plans/procedures.	Training, Exercise	IT DPC Team Manager	Bryan Chrisp	7-25-13	1-1-14
5. Public and Private Services and Resources	1. Communications between CCOC and Deployed personnel was inefficient.	Participation of deployed DPC Team lead in event/incident regularly scheduled status update meetings.	Organization	IT DPC Team Manager	Bryan Chrisp	7-25-13	1-1-14
		Provide regular onsite status update meetings for deployed teams.	Exercise	IT DPC Team Manager	Bryan Chrisp	7-25-13	1-1-14
	2. Command and control of Field Operations were unclear.	Clearly define within appropriate documentation command and control roles and responsibilities.	Planning	ESF 8 Unit	Planning Coordinator	7-25-13	9-15-13

Core Capability	Issue/Area for Improvement	Corrective Action	Capability Element ¹	Primary Responsible Organization	Organization POC	Start Date	Completion Date
		Explore the expansion of the ESF 8 Incident Management Structure to include an Operations Section when deploying field based personnel under the direct control of the State ESF 8 and include in appropriate documentation.	Organization	ESF 8 Unit	Planning Coordinator	7-25-13	9-15-13
		Train and exercise any changes that include expansion of the Incident Management Structure.	Training, Exercise	ESF 8 Unit	Planning Coordinator	7-25-13	9-15-13
	3. Notification for Strike Teams came through unrecognized method of notification.	Communicate across all ESF 8 personnel the intended primary method of contact for notification.	Planning	Responder Management	Responder Management Coordinator	7-25-13	8-15-13
		Follow up with a secondary method of communication.	Planning	Responder Management	Responder Management Coordinator	7-25-13	8-15-13
		All Group 1 and 2 personnel, as identified in the Emergency Duty Policy, register in SERVFL.	Planning	Responder Management	Responder Management Coordinator	7-25-13	8-1-13

Core Capability	Issue/Area for Improvement	Corrective Action	Capability Element ¹	Primary Responsible Organization	Organization POC	Start Date	Completion Date
	4. Unable to fill Strike Team Missions.	Review processes and procedures for communicating mission status and appropriate follow up between the ECO, Logistics Section Chief and Planning Section Chief.	Planning	Responder Management	Responder Management Coordinator	7-25-13	1-1-14
		Review and revise (as needed) communications methodology for recruiting through SERVFL.	Planning	Responder Management	Responder Management Coordinator	7-25-13	1-1-14
		Validate strike team notification/activation in deployment timelines.	Planning	Responder Management	Responder Management Coordinator	7-25-13	1-1-14
		Train ESF 8 staff, Regional POCs, and strike team personnel on deployment timeline expectations.	Training	Responder Management	Responder Management Coordinator	7-25-13	1-1-14
	5. Utilization of MRC volunteers to fill strike team positions.	Determine what the process is and the approval authority for utilization of Medical Reserve Corps personnel that may be deployed by State ESF 8.	Planning	Responder Management	Responder Management Coordinator	7-25-13	4-30-14
Determine trigger points for when MRC should be recruited to fill missions.		Planning	Responder Management	Responder Management Coordinator	7-25-13	4-30-14	

Core Capability	Issue/Area for Improvement	Corrective Action	Capability Element ¹	Primary Responsible Organization	Organization POC	Start Date	Completion Date
		Identify and adopt job qualifications required for deployed Public Health team members to fill strike team positions.	Planning	Responder Management	Responder Management Coordinator	7-25-13	4-30-14
		Determine back up personnel such as MRC, EMAC or other sources and the order of priority when they would be used.	Planning	Responder Management	Responder Management Coordinator	7-25-13	4-30-14
	6. IT DPC support operated without formal SOP/SOG.	Develop an IT DPC annex/insert to current FOB SOP to include mission, equipment capability, chain of command, concept of operations, personnel roles and responsibilities.	Planning	IT DPC Manager	Bryan Chrisp	7-25-13	1-1-14
		Incorporate subject matter expert and hot wash/AAR comments to develop a guideline for IT DPC Team deployment.	Planning	IT DPC Manager	Bryan Chrisp	7-25-13	1-1-14
	7. Med 82 did not have sufficient coverage for field operations.	Provide additional communication support with Med 82 when Area of Operations exceeds the communication range.	Equipment	IT DPC Manager	Bryan Chrisp	7-25-13	1-1-14
		Provide alternative radio communication recommendation.	Planning	IT DPC Manager	Bryan Chrisp	7-25-13	1-1-14

Core Capability	Issue/Area for Improvement	Corrective Action	Capability Element ¹	Primary Responsible Organization	Organization POC	Start Date	Completion Date
		Develop a communications plan and post the radio frequency to the FOB status board.	Planning	IT DPC Manager	Bryan Chrisp	7-25-13	1-1-14
6. Public Health and Medical Services	1. Call Center support for ESS event activation was not established.	Establish a standard operating procedure once notification is received and call center is activated.	Planning	ESF 8 Unit	Planning Coordinator	7-25-13	8-15-13
		Ensure notification to hospitals, nursing homes and alternate living facilities for requirement to report is completed.	Planning	ESF 8 Unit	Planning Coordinator	7-25-13	8-15-13
		Pre-identify call center personnel that can be activated to conduct healthcare facility surveys.	Planning	ESF 8 Unit	Planning Coordinator	7-25-13	8-15-13
		Coordinate in future exercises to test capability of call center.	Exercise	ESF 8 Unit	Planning Coordinator	7-25-13	8-15-13
	2. HAvBED was not activated.	Train in Florida reporting systems and procedures including authority to request status from AHCA and the utilization of HAvBED to include processes ESS/EM Resources.	Training	Medical Surge Unit	Medical Surge Unit Manager	7-25-13	9-15-13

Core Capability	Issue/Area for Improvement	Corrective Action	Capability Element ¹	Primary Responsible Organization	Organization POC	Start Date	Completion Date
		Establish FDOH written guidance for responding to HHS requests and reporting in HAvBED.	Planning	Medical Surge Unit	Medical Surge Unit Manager	7-25-13	9-15-13
	3. Insufficient communication methods for real world event in the Bureau of Public Health Laboratories (BPHL) COOP.	In future exercises each laboratory initiate a conference call when activating their COOP and requesting assistance.	Exercise	Bureau of Public Health and Laboratories	Dr. Richard France	7-25-13	12-31-13
	4. The Bureau of Public Health Laboratories (BPHL) COOP has insufficient documentation and contingency plans.	Develop a formal contingency plan in the updated BPHL COOP document. Include contingency rabies testing, TB and New Born Screening.	Planning	Bureau of Public Health and Laboratories	Dr. Richard France	7-25-13	12-31-13
	5. BPHL has not fully identified the Essential Functions that provide interdependent support to an Essential Function performed by another organization or to an Emergency Support Function (ESF).	Develop and communicate additional Essential Functions as required by the State and Federal guidelines.	Planning	Bureau of Public Health and Laboratories	Dr. Richard France	7-25-13	12-31-13
		Train and exercise BPHL Laboratory Directors, Supervisors and COOP Coordinators on interdependent support requirements.	Training, Exercise	Bureau of Public Health and Laboratories	Dr. Richard France	7-25-13	12-31-13

Core Capability	Issue/Area for Improvement	Corrective Action	Capability Element ¹	Primary Responsible Organization	Organization POC	Start Date	Completion Date
7. Public Information and Warnings	1. Approval process for DOH messaging products is inefficient.	Develop plan within the CDC 2013 14 Crisis and Emergency Risk Communications Capability Sustainment Project to revise messaging products.	Planning	Information Management Unit	IMU Coordinator	7-25-13	4-30-14
		Coordinate with Office of Communications to review, align approval process in CERC Annex and DOH Media Relations SOP.	Planning	Information Management Unit	IMU Coordinator	7-25-13	4-30-14
	2. DOH HQ and CHD PIOs were not fully versed in, comfortable with use of FDENS Document Center as Virtual JIC. Resulted in inadequate use of designated FDENS V JIC during exercise.	Develop PIO specific drill to test knowledge of FDENS and capabilities related to use of tool as V JIC.	Training	Information Management Unit	IMU Coordinator	7-25-13	4-30-14
		3. ESF 8 Communication mailbox was not update to date.	Contact IT Section to create NARF for each IMB/U designated staff members to begin process to gain access to ESF8_Comms mailbox.	Planning	Information Management Unit	IMU Coordinator	7-25-13

Core Capability	Issue/Area for Improvement	Corrective Action	Capability Element ¹	Primary Responsible Organization	Organization POC	Start Date	Completion Date
	4. ESF14 unsure of DOH Office of Communications ESF8 PIOs' role, expectations, needs during emergency incidents, events.	Coordinate with DOH Executive Office and Office of Communications to streamline public information response practices.	Planning	Information Management Unit	IMU Coordinator	7-25-13	7-25-13
	5. ESF8 personnel do not have copy of DOH specific media relations guidance / protocol.	Schedule media relations training for ESF8 spokespersons, personnel during 2013 Hurricane Season.	Training	Information Management Unit	IMU Coordinator	7-25-13	8-15-13
	6. No process available to contact county health department public information officers during emergency response.	Draft process for CHD PIO conference calls.	Planning	Information Management Unit	IMU Coordinator	7-25-13	9-15-13

APPENDIX B: EXERCISE PARTICIPANTS

Participating Agencies and Organizations	
State	
Division of Emergency Management	Florida Counties
Department of Revenue	Department of Transportation
Department of Health	Department of Environmental Protection
Department of Law Enforcement	Division of Financial Services
Department of Business and Professional Regulations	Department of Management Services
Department of Military Affairs	Department of Children and Families
Department of Agriculture & Consumer Services	South Florida Water Management District
Public Service Commission	Department of Economic Opportunity
Walt Disney World Emergency Management	State Fire Marshal's Office
Executive Office of the Governor	Fish & Wildlife Commission
Department of Lottery	American Red Cross
Florida Power & Light	Association of Counties
Highway Safety and Motor Vehicles	Department of Education
Department of Elder Affairs	The Salvation Army
Department of Corrections	Department of Juvenile Justice
Agency for Healthcare Administration	Office of Policy and Budget
Florida Sheriff's Association	Florida National Guard
Volunteer Florida	
Federal	
Federal Emergency Management Agency	Department of Defense
Department of Homeland Security	United States Army
United States Coast Guard	United States Navy
National Oceanic Atmospheric Administration	US Army Corp of Engineers
Environmental Protection Agency	Health and Human Services
Federal Highway Administration	Transportation Security Administration
Department of Agriculture	Department of Energy
Civil Air Patrol	Department of Justice
National GeoSpatial Intelligence Agency	US Northern Command
Other Agencies	
Georgia State Emergency Management	Alabama State (ESF 6)
North Carolina (ESF 6)	Maine (ESF 6)
Washington State (ESF 6)	California State (ESF 6)
Texas State (ESF 6 and GIS)	Oklahoma State (ESF 6)
New York State (ESF 6)	Iowa (GIS)

APPENDIX C: ACRONYMS

Acronym	Definition
A	
AAR	After Action Report
AO	Area of Operation
ArcGIS	Geographic Information System used by DOH
AHCA	Agency for Healthcare Administration
ALFs	Alternate Living Facilities
APD	Agency for People with Disabilities
B	
BPR	Bureau of Preparedness and Response
BPHL	Bureau of Public Health Laboratories
C	
CBRNE	Chemical, Biological, Radiological, Nuclear, Explosives
CCOC	Command Control Operations Center
CDC	Center for Disease Control
CEMP	Comprehensive Emergency Management Plan
CERC	Crisis and Emergency Risk Communication
CHD	County Health Department
COOP	Continuity of Operations Plan
D	
DEM	Division of Emergency Management
DOD	Department of Defense
DOH	Department of Health
DHS	Department of Homeland Security
DHHS	Department of Health and Human Services
DPC	Disaster Preparedness Coordinators (Consultants)
E	
ECO	Emergency Coordinating Officer
EH	Environmental Health
EM	Emergency Management
EMS	Emergency Medical Services
EOC	Emergency Operations Center
EMAC	Emergency Management Assistance Compact
ESF	Emergency Support Function
ESS	Emergency Status System
F	
FDEM	Florida Division of Emergency Management
FDENS	Florida Department of Health Emergency Notification System

FDOH	Florida Department of Health
FEMA	Federal Emergency Management Agency
FLNG	Florida National Guard
FNRMS	Florida Notification of Responders Management System
FOB	Forward Operating Base
G	
GIS	Graphical Information System
H	
HAZMAT	Hazardous Materials
HAvBED	Hospital Available Beds for Emergencies and Disasters
HFAT	Healthcare Facility Assessment Team
HSEEP	Homeland Security Exercise Evaluation Program
I	
IAP	Incident Action Plan
ICS	Incident Command System
IMB/U	Information Management Branch/Unit
IP	Improvement Plan
IRMS	Inventory Resource Management System
IRT	Incident Response Team
IT	Information Technologies
J	
JIC	Joint Information Center
JIS	Joint Information System
M	
MOU	Memorandum of Understanding
MRC	Medical Reserve Corps
N	
NIMS	National Incident Management System
NRF	National Response Framework
P	
PDF	Portable Document Format
PIO	Public Information Officer
PHEP	Public Health Emergency Preparedness
POC	Point of Contact
R	
RDSTF	Regional Domestic Security Task Force
S	
SEOC	State Emergency Operations Center
SERVFL	State Emergency Responders and Volunteers of Florida
SERT	State Emergency Response Team

SITREP	Situation Report
SLRC	State Logistical Resource Center
SMRT	State Medical Response Team
SOG	Standard Operating Guidelines
SOP	Standard Operating Procedure
SpNS	Special Needs Shelter
SRCC	State Regional Coordination Center