



Alternate Care Site

Tabletop Exercise

Initial Planning Meeting

3/7/2016 9am

Agenda

- **Welcome/Introductions**
 - **Exercise overview – deliverable's, timeline, scope of work**
 - **Discussion of exercise scenario and core capabilities**
 - **Discussion of participating agencies/community partners**
 - **Discussion of exercise logistics**
 - **Review of responsibilities**
 - **Establish dates for Mid-term and Final Planning meetings**
 - **Adjourn**
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Alternate Care Site

Tabletop Exercise

Initial Planning Meeting Minutes

3/7/2016 9am

- Denise Heady welcomed everyone to the meeting. Participants introduced themselves. Terry Schenk gave an overview of previous alternate care site exercises around the state.
- Denise discussed the draft Pasco County Alternate Care Site (ACS) plan. The plan was developed following a community partner planning workshop held in December 2015. Denise has transmitted the plan to the participating agencies for feedback & comment. Some comments have been received however DOH welcomes additional input from stakeholders. The plan considers three potential scenarios for the activation of an alternate care site: mass casualty incident, hospital system surge or facilities on long term divert status, or a public health emergency/infectious disease outbreak.
- The purpose of the exercise is to test the draft ACS plan, receive stakeholder input, and use that input to make additional updates to the plan.
- Denise Heady will be the DOH exercise manager assisted by Terry Schenk. The alternate care site tabletop exercise is being funded by DOH grant funding. Blue Skies Professional Services was selected following a competitive bid process. Paul Womble will be the Blue Skies program manager for the development of the exercise including planning meetings and HSEEP written documentation. Judd Wright and Bob King along with other controllers and evaluators will facilitate the tabletop exercise. Dates/times for exercise planning and conduct are already scheduled:
 - Mid-term Planning Meeting: March 21st 9am via conference call
 - Final Planning Meeting: April 4th, 9am at Pasco County DOH 10841 Little Rd, New Port Richey, FL 34654
 - Tabletop Exercise: April 19th, 2pm – 430pm, Rasmussen College room 212, 8661 Citizens Dr, New Port Richey, FL 34654
 - After Action Meeting: April 25th, 9am, Pasco County DOH 10841 Little Rd, New Port Richey, FL 34654
- Discussion occurred about the plan and what type of incident would most likely activate the plan. The importance of a realistic exercise scenario was discussed and the group agreed a mass casualty incident would not be the best scenario. Dirk Palmer and Glenn Baker discussed seasonal visitors and other factors that

keep their facility census high. They do not see a peak or dip in the number of patients in their facilities. They remain busy all year. The group agreed that the best scenario to test the initial ACS plan would be Category 4 hurricane impacting Pasco County and the Tampa Bay Region. The exercise will focus on ACS treatment of minor injuries and illnesses that would most likely occur in a community during the first few days following a major hurricane. Hospitals and other medical facilities would not only have a large census but would also be impacted by electricity and other infrastructure impacts resulting in a need for a local resource to treat a large number of citizens. Adequate State and Federal resources would take several days to be mobilized and be operational in the county.

- The exercise will last 2.5 hours. In this timeframe two modules of exercise play will occur:
 - Module 1 will test the ACS plan activation process.
 - Module 2 will test the setup, operations, and logistical support of one ACS including sites, staff, and supplies.
 - Exercise facilitators will have to keep exercise discussion focused in order to remain on schedule. A parking lot will be used to capture issues/items for future discussion and planning. The exercise planning team is aware not all planning issues will be resolved during the exercise time period.
- Discussion occurred about local resources and potential resource shortfalls including ACS sites, staffing issues, and medical supplies. The ACS plan identifies responsibilities of multiple agencies. These responsibilities will be validated during the exercise. If local resources are not available then what? A hurricane scenario would simplify funding/reimbursement of an ACS. Other types of incidents (infectious disease) would complicate funding/reimbursement. These types of scenarios will be considered for future exercises.
- Denise Heady has transmitted a “save the date” notice of the exercise to the appropriate agencies including the West Central Florida Medical Reserve Corps and home health agencies.
- Blue Skies will have a draft HSEEP formatted exercise Situation Manual to Denise Heady by March 14th. Denise will transmit the most current version of the ACS Plan and the Situation Manual to the exercise planning team by March 18th before the Mid-term Planning Meeting conference call on March 21st.
- Denise will transmit the ACS Plan and the final Situation Manual to the exercise Situation Manual to all exercise participants in order for them to read/review the plan before the exercise.

Participating Agencies	
Denise Heady	Florida Department of Health in Pasco County
Terry Schenk	Florida Department of Health
Jim Johnston	Pasco County EM
Amanda Woodward	Pasco County EM
Christine Abarca	Florida Department of Health in Pasco County
Nina Matti	Florida Department of Health in Hernando County
Dirk Palmer	Morton Plant Mease Hospital
Christine McGuire – Wolfe	Pasco County Fire Rescue
Tracy Armas	Morton Plant North Bay Recovery Center - Baycare
Kevin Guthrie	Pasco County EM
Glenn Baker (teleconference)	Bayfront Health – Dade City
Paul Womble	Blue Skies Professional Services



Alternate Care Site

Tabletop Exercise

Mid Planning Meeting

3/21/2016 10am

Agenda

- **Welcome/Introductions**
- **Comments & Approval of Initial Planning Meeting minutes**
- **Comments on ACS Plan**
- **Comments on Situation Manual**
- **Review of responsibilities**
- **Exercise Timeline:**
 - **Final Planning Meeting: April 4th, 9am at Pasco County DOH 10841 Little Rd, New Port Richey, FL 34654**
 - **Tabletop Exercise: April 19th, 2pm – 430pm, Rasmussen College room 212, 8661 Citizens Dr, New Port Richey, FL 34654**
 - **After Action Meeting: April 25th, 9am, Pasco County DOH 10841 Little Rd, New Port Richey, FL 34654**
- **Other Business**
- **Adjourn**



Alternate Care Site

Tabletop Exercise

Mid Planning Meeting Minutes

3/29/2016 9am

- Denise Heady welcomed everyone to the teleconference. Participants introduced themselves.
- Denise discussed the Initial Planning Meeting minutes previously distributed via email. The minutes were approved.
- Denise discussed the draft Alternate Care Site plan previously distributed via email. Dirk Palmer discussed the licensed bed counts currently listed in the plan. Changes are in process at North Bay Hospital which will change their bed count. Their bed count should be changed to 130 licensed beds.
- Denise will continue to accept comments on the draft ACS plan through the Final Planning Meeting on 4/4/16. At that point any additional plan comments will be incorporated into future plan updates following the exercise.
- Remaining dates/times for exercise activities were reviewed:
 - Final Planning Meeting: April 4th, 9am at Pasco County DOH 10841 Little Rd, New Port Richey, FL 34654
 - Tabletop Exercise: April 19th, 2pm – 430pm, Rasmussen College room 212, 8661 Citizens Dr, New Port Richey, FL 34654
 - After Action Meeting: April 25th, 9am, Pasco County DOH 10841 Little Rd, New Port Richey, FL 34654
- Terry Schenk discussed incorporating lessons learned from a recent Pasco County medical surge situation into the ACS exercise. Dirk Palmer discussed one of the outcomes from this exercise was additional discussion about triggers for activation of medical surge/ACS plans. We will have an exercise agenda item in Module 1 to discuss some of these potential triggers. Future planning efforts will be needed to develop and validate all possible triggers and scenarios.

Participating Agencies	
Denise Heady	Florida Department of Health in Pasco County
Terry Schenk	Florida Department of Health
Dr. Jenifer Chatfield	Florida Department of Health in Pasco County
Glen Baker	Bayfront Health – Dade City
Nina Mattei	Florida Department of Health in Hernando County
Christine Abarca	Florida Department of Health in Pasco County
Dirk Palmer	Morton Plant Mease Hospital (North Bay Hospital)
Chief Tim Reardon	Pasco County Fire Rescue
Lt. Tait Sanborn	Pasco County Sheriff's Office
Judy Silverstein	Region 4 Special Needs Consultant
Paul Womble	Blue Skies Professional Services



Alternate Care Site

Tabletop Exercise

Final Planning Meeting

4/4/2016 9am

Agenda

- **Welcome/Introductions**
 - **Comments & Approval of Mid Planning Meeting minutes**
 - **Final Comments on ACS Plan**
 - **Comments & Approval of Situation Manual**
 - **Review of responsibilities**
 - **Exercise Timeline:**
 - **Tabletop Exercise: April 19th, 2pm – 430pm, Rasmussen College room 212, 8661 Citizens Dr, New Port Richey, FL 34654**
 - **After Action Meeting: April 25th, 9am, Pasco County DOH 10841 Little Rd, New Port Richey, FL 34654**
 - **Other Business**
 - **Adjourn**
-



Alternate Care Site

Tabletop Exercise

Final Planning Meeting Minutes

4/4/2016 9am

- Denise Heady welcomed everyone to the meeting. Participants introduced themselves.
- Denise discussed the Mid Planning Meeting minutes previously distributed via email. The minutes were approved.
- Denise discussed the draft Alternate Care Site plan previously distributed via email. No additional comments have been provided to Denise. Additional changes to the plan will be made after the exercise is complete.
- Hospitals are continuing to discuss when the ACS plan would be activated. The key issue is the amount of time necessary to activate an ACS. Hospitals and PCFR will continue to discuss for future planning efforts.
- Remaining dates/times for exercise activities were reviewed:
 - Tabletop Exercise: April 19th, 2pm – 430pm, Rasmussen College room 212, 8661 Citizens Dr, New Port Richey, FL 34654
 - After Action Meeting: April 25th, 9am, Pasco County DOH 10841 Little Rd, New Port Richey, FL 34654
- The planning group agreed to name the exercise “Operation Snowbird”.
- Discussion occurred about the final exercise Situation Manual. The planning committee agreed to remove the sample ESF table. During the exercise the ESF responsibilities outlined in the ACS plan will be reviewed during Module 2.
- Denise will ask for RSVP’s for all exercise participants via email.
- Blue Skies and Denise visited the exercise venue following the planning meeting. Exercise logistics including sign-in table, use of AV system, and layout/seating of exercise participants were discussed and a plan is in place.

Participating Agencies	
Denise Heady	Florida Department of Health in Pasco County
Terry Schenk	Florida Department of Health
Judy Silverstein	Region 4 Special Needs Consultant
Glen Baker	Bayfront Health – Dade City
Nina Mattei	Florida Department of Health in Hernando County
Christine Abarca	Florida Department of Health in Pasco County
Christine McGuire-Wolf	Pasco County Fire Rescue
Amanda Woodward	Pasco County Emergency Management
Vicki Buchanan	Florida Hospital Zephyrhills
Judd Wright	Blue Skies Professional Services
Bob King	Blue Skies Professional Services
Paul Womble	Blue Skies Professional Services



Operation Snowbird

Situation Manual

4/19/2016

This Situation Manual (SitMan) provides exercise participants with all the necessary tools for their roles in the exercise. Some exercise material is intended for the exclusive use of exercise planners, facilitators, and evaluators, but players may view other materials that are necessary to their performance. All exercise participants may view the SitMan.

EXERCISE OVERVIEW

Exercise Name	Operation Snowbird
Exercise Dates	April 19, 2016
Scope	This exercise is a discussion based exercise planned for 2.5 hours at Rasmussen College room 212, 8661 Citizens Dr, New Port Richey, FL 34654. The exercise is designed to be the first test of the draft Florida Department of Health in Pasco County Alternate Care Site plan.
Mission Area(s)	Protection, Response, Recovery
Core Capabilities	Planning, Public Health and Medical Services, Operational Coordination
Objectives	<p>Evaluate the familiarity of the Florida Department of Health in Pasco County Alternate Care Site plan by agencies with responsibilities defined in the plan.</p> <p>Observe and evaluate Pasco County Emergency Operations processes necessary for a coordinated response requiring activation of the Alternate Care Site plan.</p> <p>Identify areas in the draft Alternate Care Site plan requiring updates or additional planning meetings with stakeholder agencies.</p> <p>Identify resource shortfalls based on the draft Alternate Care Site plan and determine strategies to obtain resources or identify mutual aid resources.</p>
Threat or Hazard	Medical surge from a major hurricane.
Scenario	Following landfall of a Category 4 hurricane impacting Pasco County and the Tampa Bay Region, hospitals and other medical facilities would not only have a large census, but would also be impacted by power outages and other infrastructure failures. Treatment of the minor injuries and illnesses that would most likely occur in a community during the first few days following a major hurricane would require the activation of an Alternate Care Site. Local resources would be required initially to treat a large number of citizens. Adequate State and Federal resources would take several days to mobilize, deploy, and be operational in the impacted area.
Sponsor	Florida Department of Health in Pasco County

**Participating
Organizations**

A full list of participating agencies in Appendix B.

Point of Contact

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GENERAL INFORMATION

Exercise Objectives and Core Capabilities

The following exercise objectives in Table 1 describe the expected outcomes for the exercise. The objectives are linked to core capabilities, which are distinct critical elements necessary to achieve the specific mission area(s). The objectives and aligned core capabilities are guided by elected and appointed officials and selected by the Exercise Planning Team.

Exercise Objective	Core Capability
Evaluate the familiarity of the Florida Department of Health in Pasco County Alternate Care Site plan by agencies with responsibilities defined in the plan.	Planning, Public Health and Medical Services,
Observe and evaluate Pasco County Emergency Operations processes necessary for a coordinated response requiring activation of the Alternate Care Site plan.	Public Health and Medical Services, Operational Coordination
Identify areas in the draft Alternate Care Site plan requiring updates or additional planning meetings with stakeholder agencies.	Planning, Operational Coordination
Identify resource shortfalls based on the draft Alternate Care Site plan and determine strategies to obtain resources or identify mutual aid resources.	Planning, Public Health and Medical Services, Operational Coordination

Table 1. Exercise Objectives and Associated Core Capabilities

Participant Roles and Responsibilities

The term *participant* encompasses many groups of people, not just those playing in the exercise. Groups of participants involved in the exercise, and their respective roles and responsibilities, are as follows:

- **Players.** Players are personnel who have an active role in discussing or performing their regular roles and responsibilities during the exercise. Players discuss or initiate actions in response to the simulated emergency.
- **Observers.** Observers do not directly participate in the exercise. However, they may support the development of player responses to the situation during the discussion by asking relevant questions or providing subject matter expertise.

- **Facilitators.** Facilitators provide situation updates and moderate discussions. They also provide additional information or resolve questions as required. Key Exercise Planning Team members also may assist with facilitation as subject matter experts (SMEs) during the exercise.
- **Evaluators.** Evaluators are assigned to observe and document certain objectives during the exercise. Their primary role is to document player discussions, including how and if those discussions conform to plans, polices, and procedures.

Exercise Structure

This exercise will be a multimedia, facilitated exercise. Players will participate in the following two modules:

- Module 1: ACS Plan Activation
- Module 2: ACS Operations

Each module begins with a multimedia update that summarizes key events occurring within that time period. After the updates, participants review the situation and engage in functional discussions of appropriate prevention/response/recovery issues.

Exercise facilitators will ask a series of questions designed to encourage discussion among the exercise participants. A “parking lot” will be used to document issues identified during exercise discussion that will require additional planning efforts.

Exercise Guidelines

- This exercise will be held in an open, low-stress, no-fault environment. Varying viewpoints, even disagreements, are expected.
- Respond to the scenario using your knowledge of current plans and capabilities (i.e., you may use only existing assets) and insights derived from your training.
- Decisions are not precedent setting and may not reflect your organization’s final position on a given issue. This exercise is an opportunity to discuss and present multiple options and possible solutions.
- **Issue identification is not as valuable as suggestions and recommended actions that could improve prevention/response/recovery efforts. Problem-solving efforts should be the focus.**

Exercise Assumptions and Artificialities

In any exercise, assumptions and artificialities may be necessary to complete play in the time allotted and/or account for logistical limitations. Exercise participants should accept that assumptions and artificialities are inherent in any exercise, and should not allow these considerations to negatively impact their participation. During this exercise, the following apply:

- The exercise is conducted in a no-fault learning environment wherein capabilities, plans, systems, and processes will be evaluated.

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

Exercise Evaluation

Evaluation of the exercise is based on the exercise objectives and aligned capabilities. A hot wash will be held immediately following the exercise with all participants. Additionally, players will be asked to complete participant feedback forms following the exercise. These documents, coupled with facilitator observations and notes, will be used to evaluate the exercise and compile the After-Action Report (AAR).

An After Action Meeting will be held on April 25th, 9am, Pasco County DOH 10841 Little Rd, New Port Richey, FL 34654.

MODULE 1: ACS PLAN ACTIVATION

August 13, 2016 9am

Category 4 Hurricane Marilyn made landfall at the Pinellas/Pasco County line near Tarpon Springs about 48 hours ago. Initial assessments are still being compiled however reports indicate significant damage throughout West Central Florida. Shelters are still operational, initial debris “pushes” have begun, and search and rescue operations are mostly complete. Several fatalities occurred due to flooding and injuries have been reporting as people begin to clean up. Power companies estimate many repairs will take at least 7 to 10 days with isolated areas requiring up to 3 weeks before 100% restoration is complete.

The Pasco County EOC was activated to Level 1 in the days before landfall. Impact assessments are still being finalized. At the direction of the Pasco County Policy Group planning has begun for operations over the next week. The State EOC has stated that State and Federal resources are being assigned to priority missions based on life-safety and restoring critical life-sustaining systems in the hardest hit areas.

Elected officials are being contacted by citizens about the long waits at medical facilities for treatment of minor injuries and illnesses. Hospitals are doing everything they can but high census counts from the flu and normal patient levels were near capacity before the hurricane.

Key Issues

- The Pasco County EOC is activated at Level 1. A local State of Emergency has been declared by the Pasco County BoCC. Governor Scott has issued an Executive Order covering all of West Central Florida and has requested a Presidential Disaster Declaration from FEMA.
- Field units are reporting a large number of citizens with minor injuries and illness seeking treatment at local hospitals and medical clinics. The facilities are overwhelmed with a large number of patients and wait times are at least 10-12 hours for non-critical patients. Hospitals are reporting staffing shortages. Pasco County Fire Rescue has requested additional EMS mutual aid due to the very large increase in call volume.
- Local medical clinics are limited in capabilities or non-operational because they do not have generators and most of their staff has not reported to work.
- Electrical restoration estimates throughout Pasco County are 7 to 10 days with some outages up to 3 weeks in isolated areas.

Questions

Based on the information provided, participate in the discussion concerning the issues raised in Module 1. Identify any critical issues, decisions, requirements, or questions that should be addressed at this time.

The following questions are provided as suggested subjects that you may wish to address as the discussion progresses. These questions are not meant to constitute a definitive list of concerns to be addressed, nor is there a requirement to address every question.

Activation Process

1. The draft ACS plan activation process includes the “Executive Policy Group” and the “Threat Advisory Committee” with defined members of senior county officials. Are these groups properly defined in the plan? If not what changes need to be made to the plan?
2. What information will need to be provided to decision makers during the ACS plan activation process?
3. Does a local state of emergency declaration need to include specific ACS language?

ACS Plan Roles & Responsibilities

1. According to the ACS plan medical direction/protocols can be assigned to DOH-Pasco or the Pasco County Fire Rescue. Who will be responsible for oversight and support of patient care and site protocols in this scenario?
2. Many Emergency Support Functions (ESF’s) are delegated responsibilities in the ACS plan pages 12-14. Are these correct? Discussion during this module will be used to update the ACS plan.

MODULE 2: ACS OPERATIONS

August 13, 2016 11am

Key Issues

- A policy group decision called for the activation of one ACS.
- State and Federal resources will take several days to be mobilized and be operational in the county requiring initial ACS operations to be supported only by local resources.
- Based on current impact assessment the ACS is anticipated to be operational for up to 7 days.
- Hospital staff are already on recall status and are not available for assisting with the ACS.

Questions

Based on the information provided, participate in the discussion concerning the issues raised in Module 2. Identify any critical issues, decisions, requirements, or questions that should be addressed at this time.

The following questions are provided as suggested subjects that you may wish to address as the discussion progresses. These questions are not meant to constitute a definitive list of concerns to be addressed, nor is there a requirement to address every question.

General questions

1. How much time is required to mobilize and make an ACS operational?
2. What gaps or shortfalls exist?
3. Who facilitates the overall ACS mobilization and operations process?
4. What information from ACS operations is required by the EOC for Incident Action Plans, Situation Reports, or other reporting and documentation processes?
5. Is there a pre-scripted plan for ACS public information including level of care, services available, operational hours, and other necessary information? How is this information distributed to hospitals and medical facilities?

Facilities

3. What facilities are pre-identified in the ACS plan? Are adequate written agreements/MOU's in place for their use?
4. What factors will play a key role in the determination of which facility to choose for an ACS?
5. Does Pasco County have adequate resources to open and operate multiple ACS sites?
6. Who pays for the use of sites including utilities, damage, and repairs?

Staffing

1. With medical facilities already reporting staff shortages what are some options for staff to work at an Alternate Care Site?
2. Who is responsible for payment, liability, and workers comp of these staff?
3. What role does the West Central Florida Medical Reserve Corps (WCFMRC) have in the Alternate Care Site plan?
4. If volunteers are utilized who is responsible for verification of credentials and certifications for volunteers? How long does that process take before a volunteer is cleared to work?
5. Has just-in-time ACS training for staff and volunteers been developed? How will this training be delivered during an ACS operation?

Equipment and Supplies

1. What pre-existing equipment and supplies are available for use at an ACS? How will these resources be mobilized, deployed, tracked, and replaced?
2. How long would existing equipment and supplies last before additional resources are needed? Who is responsible to monitor burn rates of supplies?
3. Who is responsible for contracting and procuring additional equipment or supplies? Who pays for them?
4. What other local resources are available outside of “normal” agencies?
5. Is there a demobilization plan

APPENDIX A: EXERCISE SCHEDULE

Time	Activity
April 19, 2016	
1330 - 1400	Registration
1400 - 1410	Welcome and Opening Remarks
1410 - 1500	Module 1: Briefing, Caucus Discussion, and Brief-Back
1500 - 1600	Module 2: Briefing, Caucus Discussion, and Brief-Back
1600 - 1630	Hot Wash
1630	Closing Comments

APPENDIX B: EXERCISE PARTICIPANTS

Participating Organizations
State Agencies
Florida Department of Health in Pasco County
Florida Department of Health in Hernando County
Pasco County Agencies
Pasco County Fire Rescue
Pasco County Emergency Management
Pasco County Sheriff's Office
Bayfront Health – Dade City
Morton Plant Mease Hospital
North Bay Hospital



Operation Snowbird

After-Action Report/Improvement Plan

4/25/2016

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

EXERCISE OVERVIEW

Exercise Name	Operation Snowbird
Exercise Dates	April 19, 2016
Scope	This exercise was a discussion based exercise planned for 2.5 hours held at Rasmussen College room 212, 8661 Citizens Dr, New Port Richey, FL 34654. The exercise was designed to be the first test of the draft Florida Department of Health in Pasco County Alternate Care Site plan.
Mission Area(s)	Protection, Response, Recovery
Core Capabilities	Planning, Public Health and Medical Services, Operational Coordination
Objectives	<p>Evaluate the familiarity of the Florida Department of Health in Pasco County Alternate Care Site plan by agencies with responsibilities defined in the plan.</p> <p>Observe and evaluate Pasco County Emergency Operations processes necessary for a coordinated response requiring activation of the Alternate Care Site plan.</p> <p>Identify areas in the draft Alternate Care Site plan requiring updates or additional planning meetings with stakeholder agencies.</p> <p>Identify resource shortfalls based on the draft Alternate Care Site plan and determine strategies to obtain resources or identify mutual aid resources.</p>
Threat or Hazard	Medical surge from a major hurricane.
Scenario	Following landfall of a Category 4 hurricane impacting Pasco County and the Tampa Bay Region, hospitals and other medical facilities would not only have a large census, but would also be impacted by power outages and other infrastructure failures. Treatment of the minor injuries and illnesses that would most likely occur in a community during the first few days following a major hurricane would require the activation of an Alternate Care Site. Local resources would be required initially to treat a large number of citizens. Adequate State and Federal resources would take several days to mobilize, deploy, and be operational in the impacted area.
Sponsor	Florida Department of Health in Pasco County

**Participating
Organizations**

A full list of participating agencies is found in Appendix B.

Point of Contact

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ANALYSIS OF CORE CAPABILITIES

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

Objective	Core Capability	Performed without Challenges (P)	Performed with Some Challenges (S)	Performed with Major Challenges (M)	Unable to be Performed (U)
Evaluate the familiarity of the Florida Department of Health in Pasco County Alternate Care Site plan by agencies with responsibilities defined in the plan.	Planning, Public Health and Medical Services		S		
Observe and evaluate Pasco County Emergency Operations processes necessary for a coordinated response requiring activation of the Alternate Care Site plan.	Public Health and Medical Services, Operational Coordination		S		
Identify areas in the draft Alternate Care Site plan requiring updates or additional planning meetings with stakeholder agencies.	Planning, Operational Coordination		S		
Identify resource shortfalls based on the draft Alternate Care Site plan and determine strategies to obtain	Planning, Public Health and Medical Services, Operational Coordination	P			

Objective	Core Capability	Performed without Challenges (P)	Performed with Some Challenges (S)	Performed with Major Challenges (M)	Unable to be Performed (U)
resources or identify mutual aid resources.					
Ratings Definitions: <ul style="list-style-type: none"> • Performed without Challenges (P): The targets and critical tasks associated with the core capability were completed in a manner that achieved the objective(s) and did not negatively impact the performance of other activities. Performance of this activity did not contribute to additional health and/or safety risks for the public or for emergency workers, and it was conducted in accordance with applicable plans, policies, procedures, regulations, and laws. • Performed with Some Challenges (S): The targets and critical tasks associated with the core capability were completed in a manner that achieved the objective(s) and did not negatively impact the performance of other activities. Performance of this activity did not contribute to additional health and/or safety risks for the public or for emergency workers, and it was conducted in accordance with applicable plans, policies, procedures, regulations, and laws. However, opportunities to enhance effectiveness and/or efficiency were identified. • Performed with Major Challenges (M): The targets and critical tasks associated with the core capability were completed in a manner that achieved the objective(s), but some or all of the following were observed: demonstrated performance had a negative impact on the performance of other activities; contributed to additional health and/or safety risks for the public or for emergency workers; and/or was not conducted in accordance with applicable plans, policies, procedures, regulations, and laws. • Unable to be Performed (U): The targets and critical tasks associated with the core capability were not performed in a manner that achieved the objective(s). 					

Table 1. Summary of Core Capability Performance

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

Objective 1:

Evaluate the familiarity of the Florida Department of Health in Pasco County Alternate Care Site plan by agencies with responsibilities defined in the plan.

Planning, Public Health and Medical Services

Strengths

The partial capability level can be attributed to the following strengths:

Strength 1: The draft ACS plan was developed by DOH with input from community partners at a planning workshop.

Strength 2: Exercise participants included many community partners especially the healthcare community including hospitals and State & Federal health agencies.

Areas for Improvement

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

Area for Improvement 1: All agencies with roles & responsibilities outlined in the ACS plan have not been involved in the planning and exercise process.

Analysis: The ACS plan identifies 15 Emergency Support Functions (ESF), based on the Pasco County Comprehensive Emergency Management Plan, with roles & responsibilities. During the exercise the majority of those ESF lead agencies did not participate. Exercise participants were aware of the missing agencies “need more & diverse partners”, “would have liked to see more involvement from EM and other community partners”, “ensure more partners participate”.

Area for Improvement 2: The ACS plan identifies a Unified Command structure to facilitate ACS response actions and to implement objectives.

Analysis: During the exercise “ownership” of the ACS function was not clearly defined or accepted. Several variables in a medical surge/ACS activation can impact what agency is ultimately “in charge” including operations, medical direction, and responsible for finance/costs. The plan references size and severity of the event (infectious disease or mass casualty) as determining if DOH, PCFR or another agency/organization will provide medical direction. Medical Directors have not participated in the ACS plan development or exercise. They should be included, along with other Pasco County senior leadership, to make policy decisions in regards to medical direction and overall management & “ownership” of the ACS process.

Exercise participants noted “need to have more decision makers at the table”, “we need leadership to guide us in ESF-8”, “need to find a way to create a “governing” council or hierarchy for running of the ACS”, and “need to engage decision makers from the different agencies involved because without their buy in this will go nowhere”.

Objective 2:

Observe and evaluate Pasco County Emergency Operations processes necessary for a coordinated response requiring activation of the Alternate Care Site plan.

Public Health and Medical Services, Operational Coordination

Strengths

The partial capability level can be attributed to the following strengths:

Strength 1: The ACS plan clearly identifies emergency operations processes including plan activation, threat & risk assessment, unified command, and communications.

Areas for Improvement

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

Area for Improvement 1: The ACS plan identifies a Threat Advisory Committee (TAC). The TAC includes leadership of county and municipal agencies and government entities. It is convened when situational irregularities indicate the need for concerted action and collaboration. A roster of recommended TAC members is included in the plan.

Analysis: The TAC was a recommendation during the ACS planning workshop. This group has not been vetted with the recommended roster of members. While the TAC has senior

Department of Health and EMS officials as members none of the members represent the healthcare system. Hospitals, home health, nursing homes, and other community healthcare organizations should be represented on a committee designed especially for a medical surge plan. Suggest that the Pasco County ESF-8 Consortium be represented by a hospital representative.

Area for Improvement 2: Additional ACS exercises of adequate time and scope should be held following updates to the ACS plan.

Analysis: Exercise participants noted the need for additional exercises: “This should be exercised more frequently to continually improve our response plan”, “Need more of these tabletop exercises”, and “need more than a 2-hour exercise. Sometimes things felt rushed and didn’t allow participants to fully discuss all the way through”.

Objective 3:

Identify areas in the draft Alternate Care Site plan requiring updates or additional planning meetings with stakeholder agencies.

Planning, Operational Coordination

Strengths

The partial capability level can be attributed to the following strengths:

Strength 1: The current ACS plan uses common terminology and concepts accepted and used in Pasco County.

Strength 2: The hospital and Emergency Medical System (Pasco County Fire Rescue) has been a leader in the development of both the ACS plan and exercise. These organizations continue to participate in planning efforts for medical surge scenarios.

Strength 3: The Florida Department of Health has demonstrated a significant leadership role in the development of the ACS plan and the exercise contributing significant resources including staff time and funding.

Areas for Improvement

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

Area for Improvement 1: The current ACS plan was developed in December 2015. The plan is aligned with the Pasco County Comprehensive Emergency Management Plan (CEMP). The Pasco CEMP was last updated in 2014 and included a significant shift in Emergency Support Function (ESF) structure. At the time the CEMP adopted the Federal ESF structure which is different than the ESF model used in Florida.

Analysis: The Federal ESF structure contains fifteen ESF’s. The Florida structure has eighteen ESF’s. Some consistency exists between both (ESF-8 is Public Health & Medical) in both systems however several differences do occur. During the exercise planning process Pasco County EM discussed that they would be updating the Pasco CEMP. Planned changes include adopting a “full Incident Command System” structure in the EOC.

FEMA is currently seeking input for an updated draft National Incident Management System (NIMS) refresh. NIMS provides a consistent nationwide approach and vocabulary to enable the whole community to work together seamlessly and manage all threats and hazards. NIMS applies to all incidents, regardless of cause, size, location or complexity. The draft NIMS provides guidance on a common structure and activation levels for operations and coordination centers, including Emergency Operations Centers (EOC), through new Center Management System (CMS) guidance and explains the relationship among ICS, CMS, and Multiagency Coordination Groups (MAC Groups).

As these planning mechanisms move forward any mass change to the ACS plan should be slowly implemented to ensure coordination with local, State, and Federal planning requirements.

Objective 4:

Identify resource shortfalls based on the draft Alternate Care Site plan and determine strategies to obtain resources or identify mutual aid resources.

Planning, Public Health and Medical Services, Operational Coordination

Strengths

The full capability level can be attributed to the following strengths:

Strength 1: Exercise participants identified several shortfalls in the ACS plan: pre-planned ACS facilities, medical staff, and medical equipment/supplies.

Strength 2: Several local resources are available to help fill these shortfalls including the Pasco County Medical Reserve Corp.

Strength 3: Pasco County Emergency Management is currently identifying facilities for other planning efforts. Incorporating ACS site pre-planning into that project will not be a significant increase in work and will expedite the pre-planning of ACS facilities.

Areas for Improvement

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

Area for Improvement 1: Identify additional facilities/sites for potential ACS operations.

Analysis: Pre-identified ACS facilities were identified as a shortfall. During the exercise the Fasano Regional Hurricane Shelter was selected for an ACS site. During a hurricane scenario the facility is already in use as a special needs shelter. Co-locating an ACS and a special needs shelter could tax resources and make management of both facilities more difficult. Fasano is located in the extreme northwest corner of Pasco County. This location is over an hour's drive from eastern communities in the county. Identification of multiple sites across Pasco County is needed.

Area for Improvement 2: Identify additional potential ACS staff from within Pasco County.

Analysis: Medical staffing is identified as a shortfall. During ACS operations or community wide emergencies local resources must be used before requesting mutual aid. Healthcare facilities often have staff with medical licensure that in day to day operations do not provide

patient care. During emergencies these staff, typically in administration, should be utilized in patient care roles. Also, when elective procedures are postponed due to an emergency those medical staff should be available for ACS and other disaster roles.

Area for Improvement 3: Determine regional mutual aid capabilities for staff and equipment/supplies.

Analysis: Once local resources are overloaded then mutual aid resources can be requested through the various mutual aid agreements and mechanisms in the State of Florida. The Tampa Bay Health and Medical Preparedness Coalition is made up of nine counties in West Central Florida including Pasco County. The coalition assists emergency preparedness needs of more than 2,000 healthcare organizations and 75,000 healthcare workers. The coalition leadership should work to identify both medical staff and equipment/supplies in the region that would be available for mutual aid to assist impacted counties. These regional resources, if not in an impacted area, would be the most likely to arrive in an impacted area first due to distance. Coalition members are already planning, training, and exercising together. They have built relationships that will carry over to response.

Area for Improvement 4: Educate community partners and leaders on the role and capabilities of the West Central Florida Medical Reserve Corps.

Analysis: The Medical Reserve Corps (MRC) is coordinated by the Pasco County Health Department, where both medical and non-medical volunteers are pre-trained, prepared and ready to respond to community health emergencies in a structured way. These pre-identified, trained and credentialed volunteers augment local community health and medical services during disasters and other public health activities. Pasco County community and government leaders need to have an understanding of the MRC. This will allow agencies and community partners to support the program with resources including staff. Local agencies should be encouraged to partner with the MRC.

Exercise participants noted “need a better understanding of our MRC”, “need manpower”, “education of community partners on MRC capabilities. Could build C-MRT (county medical response team) type entity within MRC”.

APPENDIX A: IMPROVEMENT PLAN

This IP has been developed specifically for Pasco County as a result of Operations Snowbird conducted on 4/19/2016.

Core Capability	Issue/Area for Improvement	Corrective Action	Capability Element ¹	Primary Responsible Organization	Organization POC	Start Date	Target Completion Date
Planning Public Health and Medical Services Operational Coordination	"Ownership" of ACS process/operations needs to be fully vetted and documented in the ACS plan. Verify medical direction/oversight during ACS activation/operations.	Lessons learned from ACS exercise are incorporated into updated ACS plan. Sub-committees will be established for logistics (facilities & staffing), and equipment/supplies.	Planning	Pasco County ESF-8 Consortium	Glenn Baker, Chair & Denise Heady, Co-chair	5/1/2016	10/1/2016
		Pasco County senior leadership (DOH Director, EM Director, PCFR Chief) must decide which agency will provide oversight and take responsibility for ACS operations. Develop overview of ACS plan/process to present to the DOH & PCFR medical directors to determine proper	Organization	Pasco County ESF-8 Consortium	Glenn Baker, Chair & Denise Heady, Co-chair	5/1/2016	6/1/2016
			Planning	Pasco County ESF-8 Consortium	Glenn Baker, Chair & Denise Heady, Co-chair	5/1/2016	6/1/2016

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

		medical direction & protocols for use during ACS operations.					
Identify potential ACS sites other than the Fasano Regional Hurricane Shelter. Identify potential staffing outside of DOH and Hospital staff. Through coordination by the Tampa Bay Health and Medical Preparedness Coalition develop an inventory of mutual aid resources including staff and equipment/supplies.	Identify triggers for ACS plan activation.	Potential ACS sites should be identified, MOU's for use developed if necessary, and sites be added to the ACS Plan. Multiple sites in both eastern and western areas of the county should be located.	Planning	Pasco County ESF-8 Consortium	Hospital Sub-Committee	5/1/2016	6/1/2016
	Use of licensed administrative staff, home health, and other volunteer/non-profit agencies should be explored to determine potential staffing resources already in Pasco County.	Planning	Pasco County ESF-8 Consortium	Logistics sub-committee	5/1/2016	8/1/2016	
Request Tampa Bay Health And Medical Preparedness Coalition identify potential mutual aid staffing resources from all nine member healthcare	Request Tampa Bay Health And Medical Preparedness Coalition identify potential mutual aid staffing resources from all nine member healthcare	Request Tampa Bay Health And Medical Preparedness Coalition identify potential mutual aid staffing resources from all nine member healthcare	Planning	Pasco County ESF-8 Consortium, Tampa Bay Health and Medical Preparedness Coalition	Logistics sub-committee, Tampa Bay HMPC Chairman	5/1/2016	8/1/2016

Appendix A: Improvement Plan

A-2

Florida Department of Health in Pasco County

APPENDIX B: EXERCISE PARTICIPANTS

Participating Organizations
Federal Agencies
Veterans Administration – Home Based Primary Care
State Agencies
Florida Department of Health in Pasco County
Florida Department of Health in Hernando County
Region 4 State Medical Response Team
Pasco County Agencies
Pasco County Fire Rescue
Pasco County Sheriff’s Office
Medical Center Trinity
Bayfront Health – Dade City
Morton Plant Mease Hospital
North Bay Hospital
Rasmussen College
Florida Hospital Wesley Chapel

Ursula Evans

PARTICIPANT FEEDBACK FORM

Thank you for participating in this exercise. Your observations, comments, and input are greatly appreciated, and provide invaluable insight that will better prepare our nation against threats and hazards. Any comments provided will be treated in a sensitive manner and all personal information will remain confidential. Please keep comments concise, specific, and constructive.

Part I: General Information

Please enter your responses in the form field or check box after the appropriate selection.

Name:

Agency/Organization Affiliation:

Position Title:

Exercise Role: Player Facilitator/Controller Observer Evaluator

Part II: Exercise Design

Please rate, on a scale of 1 to 5, your overall assessment of the exercise relative to the statements provided, with 1 indicating strong disagreement and 5 indicating strong agreement.

Assessment Factor	Strongly Disagree				Strongly Agree
Pre-exercise briefings were informative and provided the necessary information for my role in the exercise.	1	2	3	4	5
The exercise scenario was plausible and realistic.	1	2	3	4	5
Exercise participants included the right people in terms of level and mix of disciplines.	1	2	3	4	5
Participants were actively involved in the exercise.	1	2	3	4	5
Exercise participation was appropriate for someone in my field with my level of experience/training.	1	2	3	4	5
The exercise increased my understanding about and familiarity with the capabilities and resources of other participating organizations.	1	2	3	4	5
The exercise provided the opportunity to address significant decisions in support of critical mission areas.	1	2	3	4	5
After this exercise, I am better prepared to deal with the capabilities and hazards addressed.	1	2	3	4	5

Part III: Participant Feedback

1. I observed the following strengths during this exercise:

Strengths
Well planned and executed exercise
Great mix of people

2. I observed the following areas for improvement during this exercise. Please provide recommendations on how to make improvements.

Areas for Improvement & Recommendations
* Needs more time than a 2-hour exercise - sometimes things felt rushed and didn't allow participants to fully discuss all the way through

Additional comments:

A large empty rectangular box with a thin black border, intended for entering additional comments.

PARTICIPANT FEEDBACK FORM

Thank you for participating in this exercise. Your observations, comments, and input are greatly appreciated, and provide invaluable insight that will better prepare our nation against threats and hazards. Any comments provided will be treated in a sensitive manner and all personal information will remain confidential. Please keep comments concise, specific, and constructive.

Part I: General Information

Please enter your responses in the form field or check box after the appropriate selection.

Name:

Agency/Organization Affiliation:

Position Title:

Exercise Role: Player Facilitator/Controller Observer Evaluator

Part II: Exercise Design

Please rate, on a scale of 1 to 5, your overall assessment of the exercise relative to the statements provided, with 1 indicating strong disagreement and 5 indicating strong agreement.

Assessment Factor	Strongly Disagree				Strongly Agree
Pre-exercise briefings were informative and provided the necessary information for my role in the exercise.	1	2	3	4	5
The exercise scenario was plausible and realistic.	1	2	3	4	5
Exercise participants included the right people in terms of level and mix of disciplines.	1	2	3	4	5
Participants were actively involved in the exercise.	1	2	3	4	5
Exercise participation was appropriate for someone in my field with my level of experience/training.	1	2	3	4	5
The exercise increased my understanding about and familiarity with the capabilities and resources of other participating organizations.	1	2	3	4	5
The exercise provided the opportunity to address significant decisions in support of critical mission areas.	1	2	3	4	5
After this exercise, I am better prepared to deal with the capabilities and hazards addressed.	1	2	3	4	5

Part III: Participant Feedback

1. I observed the following strengths during this exercise:

Strengths
Good Questions / Interactions

2. I observed the following areas for improvement during this exercise. Please provide recommendations on how to make improvements.

Areas for Improvement & Recommendations
Hospitals need clinical inputs
CEO buy in.

Additional comments:

Group was great!

Ken Smith

PARTICIPANT FEEDBACK FORM

Thank you for participating in this exercise. Your observations, comments, and input are greatly appreciated, and provide invaluable insight that will better prepare our nation against threats and hazards. Any comments provided will be treated in a sensitive manner and all personal information will remain confidential. Please keep comments concise, specific, and constructive.

Part I: General Information

Please enter your responses in the form field or check box after the appropriate selection.

Name:

Agency/Organization Affiliation:

Position Title:

Exercise Role: Player Facilitator/Controller Observer Evaluator

Part II: Exercise Design

Please rate, on a scale of 1 to 5, your overall assessment of the exercise relative to the statements provided, with 1 indicating strong disagreement and 5 indicating strong agreement.

Assessment Factor	Strongly Disagree				Strongly Agree
Pre-exercise briefings were informative and provided the necessary information for my role in the exercise.	1	2	3	4	5
The exercise scenario was plausible and realistic.	1	2	3	4	5
Exercise participants included the right people in terms of level and mix of disciplines.	1	2	3	4	5
Participants were actively involved in the exercise.	1	2	3	4	5
Exercise participation was appropriate for someone in my field with my level of experience/training.	1	2	3	4	5
The exercise increased my understanding about and familiarity with the capabilities and resources of other participating organizations.	1	2	3	4	5
The exercise provided the opportunity to address significant decisions in support of critical mission areas.	1	2	3	4	5
After this exercise, I am better prepared to deal with the capabilities and hazards addressed.	1	2	3	4	5

Part III: Participant Feedback

1. I observed the following strengths during this exercise:

Strengths
Good communication within group
Strong understanding of concept.

2. I observed the following areas for improvement during this exercise. Please provide recommendations on how to make improvements.

Areas for Improvement & Recommendations
UNK. of who is ACTUALLY responsible for ACTIVATION & OPERATION of PLAN.

Additional comments:

WELL PUT TOGETHER.

PARTICIPANT FEEDBACK FORM

Thank you for participating in this exercise. Your observations, comments, and input are greatly appreciated, and provide invaluable insight that will better prepare our nation against threats and hazards. Any comments provided will be treated in a sensitive manner and all personal information will remain confidential. Please keep comments concise, specific, and constructive.

Part I: General Information

Please enter your responses in the form field or check box after the appropriate selection.

Name: MARY KONER

Agency/Organization Affiliation: Rasmussen College

Position Title: DEAN OF NURSING

Exercise Role: Player Facilitator/Controller Observer Evaluator

Part II: Exercise Design

Please rate, on a scale of 1 to 5, your overall assessment of the exercise relative to the statements provided, with 1 indicating strong disagreement and 5 indicating strong agreement.

Assessment Factor	Strongly Disagree				Strongly Agree
Pre-exercise briefings were informative and provided the necessary information for my role in the exercise.	(1)	2	3	4	5
The exercise scenario was plausible and realistic.	1	2	3	(4)	5
Exercise participants included the right people in terms of level and mix of disciplines.	1	(2)	3	4	5
Participants were actively involved in the exercise.	1	2	3	4	(5)
Exercise participation was appropriate for someone in my field with my level of experience/training.	1	2	3	4	(5)
The exercise increased my understanding about and familiarity with the capabilities and resources of other participating organizations.	1	2	3	(4)	5
The exercise provided the opportunity to address significant decisions in support of critical mission areas.	1	2	3	4	(5)
After this exercise, I am better prepared to deal with the capabilities and hazards addressed.	1	2	3	(4)	5

Part III: Participant Feedback

1. I observed the following strengths during this exercise:

Strengths
Good Stakeholder involvement

2. I observed the following areas for improvement during this exercise. Please provide recommendations on how to make improvements.

Areas for Improvement & Recommendations
Need to have more decision makers at the table.

Additional comments:

PARTICIPANT FEEDBACK FORM

Thank you for participating in this exercise. Your observations, comments, and input are greatly appreciated, and provide invaluable insight that will better prepare our nation against threats and hazards. Any comments provided will be treated in a sensitive manner and all personal information will remain confidential. Please keep comments concise, specific, and constructive.

Part I: General Information

Please enter your responses in the form field or check box after the appropriate selection.

Name: *Randy Austin*

Agency/Organization Affiliation: *Bayfront Health Dade City*

Position Title: *Biomed, EOC Chairperson*

Exercise Role: Player Facilitator/Controller Observer Evaluator

Part II: Exercise Design

Please rate, on a scale of 1 to 5, your overall assessment of the exercise relative to the statements provided, with 1 indicating strong disagreement and 5 indicating strong agreement.

Assessment Factor	Strongly Disagree			Strongly Agree	
Pre-exercise briefings were informative and provided the necessary information for my role in the exercise.	1	2	3	(4)	5
The exercise scenario was plausible and realistic.	1	2	3	(4)	5
Exercise participants included the right people in terms of level and mix of disciplines.	1	2	(3)	4	5
Participants were actively involved in the exercise.	1	2	3	4	(5)
Exercise participation was appropriate for someone in my field with my level of experience/training.	1	2	3	(4)	5
The exercise increased my understanding about and familiarity with the capabilities and resources of other participating organizations.	1	2	3	(4)	5
The exercise provided the opportunity to address significant decisions in support of critical mission areas.	1	2	3	(4)	5
After this exercise, I am better prepared to deal with the capabilities and hazards addressed.	1	(2)	3	4	5

Part III: Participant Feedback

1. I observed the following strengths during this exercise:

Strengths
Everyone very engaged

2. I observed the following areas for improvement during this exercise. Please provide recommendations on how to make improvements.

Areas for Improvement & Recommendations
Need to engage decision makers from the different agencies involved because without their buy in this will go nowhere

Additional comments:

PARTICIPANT FEEDBACK FORM

Thank you for participating in this exercise. Your observations, comments, and input are greatly appreciated, and provide invaluable insight that will better prepare our nation against threats and hazards. Any comments provided will be treated in a sensitive manner and all personal information will remain confidential. Please keep comments concise, specific, and constructive.

Part I: General Information

Please enter your responses in the form field or check box after the appropriate selection.

Name: TRAEI ARMAS

Agency/Organization Affiliation: WPNBRC - BAYCAPE

Position Title: SAFETY / SECURITY MHT III

Exercise Role: Player Facilitator/Controller Observer Evaluator

Part II: Exercise Design

Please rate, on a scale of 1 to 5, your overall assessment of the exercise relative to the statements provided, with 1 indicating strong disagreement and 5 indicating strong agreement.

Assessment Factor	Strongly Disagree				Strongly Agree
	1	2	3	4	5
Pre-exercise briefings were informative and provided the necessary information for my role in the exercise.	1	2	3	4	5
The exercise scenario was plausible and realistic.	1	2	3	4	5
Exercise participants included the right people in terms of level and mix of disciplines.	1	2	3	4	5
Participants were actively involved in the exercise.	1	2	3	4	5
Exercise participation was appropriate for someone in my field with my level of experience/training.	1	2	3	4	5
The exercise increased my understanding about and familiarity with the capabilities and resources of other participating organizations.	1	2	3	4	5
The exercise provided the opportunity to address significant decisions in support of critical mission areas.	1	2	3	4	5
After this exercise, I am better prepared to deal with the capabilities and hazards addressed.	1	2	3	4	5

Part III: Participant Feedback

1. I observed the following strengths during this exercise:

Strengths
MULTI - AGENCY AND SHOWING COOPERATION, PARTICIPATION AND SUPPORT OF EACH OTHER
GAPS WERE IDENTIFIED
ENHANCED KNOWLEDGE

2. I observed the following areas for improvement during this exercise. Please provide recommendations on how to make improvements.

Areas for Improvement & Recommendations
ACS ROLES DEFINED OR DESIGNATE "LEAD - BOARD"

Additional comments:

THIS SHOULD BE EXERCISED
MORE FREQUENTLY TO CONTINUALLY
IMPROVE OUR RESPONSE PLAN,

PARTICIPANT FEEDBACK FORM

Thank you for participating in this exercise. Your observations, comments, and input are greatly appreciated, and provide invaluable insight that will better prepare our nation against threats and hazards. Any comments provided will be treated in a sensitive manner and all personal information will remain confidential. Please keep comments concise, specific, and constructive.

Part I: General Information

Please enter your responses in the form field or check box after the appropriate selection.

Name: Luis Hernandez

Agency/Organization Affiliation: Florida Hospital Wesley Chapel

Position Title: Security Manager

Exercise Role: Player Facilitator/Controller Observer Evaluator

Part II: Exercise Design

Please rate, on a scale of 1 to 5, your overall assessment of the exercise relative to the statements provided, with 1 indicating strong disagreement and 5 indicating strong agreement.

Assessment Factor	Strongly Disagree				Strongly Agree
Pre-exercise briefings were informative and provided the necessary information for my role in the exercise.	1	2	3	4	5
The exercise scenario was plausible and realistic.	1	2	3	4	5
Exercise participants included the right people in terms of level and mix of disciplines.	1	2	3	4	5
Participants were actively involved in the exercise.	1	2	3	4	5
Exercise participation was appropriate for someone in my field with my level of experience/training.	1	2	3	4	5
The exercise increased my understanding about and familiarity with the capabilities and resources of other participating organizations.	1	2	3	4	5
The exercise provided the opportunity to address significant decisions in support of critical mission areas.	1	2	3	4	5
After this exercise, I am better prepared to deal with the capabilities and hazards addressed.	1	2	3	4	5

↑

Part III: Participant Feedback**1. I observed the following strengths during this exercise:**

Strengths
The various groups provided various points of view and information
The various groups found that they all face obstacles, but they can be overcome as a group.
Various ideas were exercise wide, not just one group.

2. I observed the following areas for improvement during this exercise. Please provide recommendations on how to make improvements.

Areas for Improvement & Recommendations
Need to find a way to create a "governing" Council or hierarchy for the running of the AES.
This should be accomplished w/ members from <u>all</u> agencies involved.

Additional comments:

PARTICIPANT FEEDBACK FORM

Thank you for participating in this exercise. Your observations, comments, and input are greatly appreciated, and provide invaluable insight that will better prepare our nation against threats and hazards. Any comments provided will be treated in a sensitive manner and all personal information will remain confidential. Please keep comments concise, specific, and constructive.

Part I: General Information

Please enter your responses in the form field or check box after the appropriate selection.

Name: Devin Sommise

Agency/Organization Affiliation: Medical Center of Trinity

Position Title: Director of Engineering & Facilities

Exercise Role: Player Facilitator/Controller Observer Evaluator

Part II: Exercise Design

Please rate, on a scale of 1 to 5, your overall assessment of the exercise relative to the statements provided, with 1 indicating strong disagreement and 5 indicating strong agreement.

Assessment Factor	Strongly Disagree			Strongly Agree	
	1	2	3	4	5
Pre-exercise briefings were informative and provided the necessary information for my role in the exercise.	1	2	3	4	5
The exercise scenario was plausible and realistic.	1	2	3	4	5
Exercise participants included the right people in terms of level and mix of disciplines.	1	2	3	4	5
Participants were actively involved in the exercise.	1	2	3	4	5
Exercise participation was appropriate for someone in my field with my level of experience/training.	1	2	3	4	5
The exercise increased my understanding about and familiarity with the capabilities and resources of other participating organizations.	1	2	3	4	5
The exercise provided the opportunity to address significant decisions in support of critical mission areas.	1	2	3	4	5
After this exercise, I am better prepared to deal with the capabilities and hazards addressed.	1	2	3	4	5

Part III: Participant Feedback

1. I observed the following strengths during this exercise:

Strengths
Many good people involved.

2. I observed the following areas for improvement during this exercise. Please provide recommendations on how to make improvements.

Areas for Improvement & Recommendations
We need leadership to guide us in ESF 8

Additional comments:

PARTICIPANT FEEDBACK FORM

Thank you for participating in this exercise. Your observations, comments, and input are greatly appreciated, and provide invaluable insight that will better prepare our nation against threats and hazards. Any comments provided will be treated in a sensitive manner and all personal information will remain confidential. Please keep comments concise, specific, and constructive.

Part I: General Information

Please enter your responses in the form field or check box after the appropriate selection.

Name: *Dick Palmer*

Agency/Organization Affiliation: *MORROW PLANT MAINE HEALTHCARE*

Position Title: *Emergency Preparedness Coordinator*

Exercise Role: Player Facilitator/Controller Observer Evaluator

Part II: Exercise Design

Please rate, on a scale of 1 to 5, your overall assessment of the exercise relative to the statements provided, with 1 indicating strong disagreement and 5 indicating strong agreement.

Assessment Factor	Strongly Disagree				Strongly Agree
Pre-exercise briefings were informative and provided the necessary information for my role in the exercise.	1	2	3	4	5 <input checked="" type="radio"/>
The exercise scenario was plausible and realistic.	1	2	3	4	5 <input checked="" type="radio"/>
Exercise participants included the right people in terms of level and mix of disciplines.	1	2	3	4	5 <input checked="" type="radio"/>
Participants were actively involved in the exercise.	1	2	3	4	5 <input checked="" type="radio"/>
Exercise participation was appropriate for someone in my field with my level of experience/training.	1	2	3	4	5 <input checked="" type="radio"/>
The exercise increased my understanding about and familiarity with the capabilities and resources of other participating organizations.	1	2	3 <input checked="" type="radio"/>	4	5
The exercise provided the opportunity to address significant decisions in support of critical mission areas.	1	2	3	4	5 <input checked="" type="radio"/>
After this exercise, I am better prepared to deal with the capabilities and hazards addressed.	1	2	3	4 <input checked="" type="radio"/>	5

Part III: Participant Feedback

1. I observed the following strengths during this exercise:

Strengths
Active Discussion AND Leadership
More Recognized GAPS AND THE DESIRE TO ADDRESS

2. I observed the following areas for improvement during this exercise. Please provide recommendations on how to make improvements.

Areas for Improvement & Recommendations
WHILE DOH WROTE THE PLAN / IDENTIFIED THEIR LEADERSHIP THEY DIDN'T WANT TO ACCEPT OWNERSHIP OF OPERATIONS

Additional comments:

A large empty rectangular box with a thin black border, intended for entering additional comments.

PARTICIPANT FEEDBACK FORM

Thank you for participating in this exercise. Your observations, comments, and input are greatly appreciated, and provide invaluable insight that will better prepare our nation against threats and hazards. Any comments provided will be treated in a sensitive manner and all personal information will remain confidential. Please keep comments concise, specific, and constructive.

Part I: General Information

Please enter your responses in the form field or check box after the appropriate selection.

Name: **TIM REARDON**

Agency/Organization Affiliation: **PCFR**

Position Title: **RESCUE CHIEF**

Exercise Role: Player Facilitator/Controller Observer Evaluator

Part II: Exercise Design

Please rate, on a scale of 1 to 5, your overall assessment of the exercise relative to the statements provided, with 1 indicating strong disagreement and 5 indicating strong agreement.

Assessment Factor	Strongly Disagree				Strongly Agree
Pre-exercise briefings were informative and provided the necessary information for my role in the exercise.	1	2	3	4	5
The exercise scenario was plausible and realistic.	1	2	3	4	5
Exercise participants included the right people in terms of level and mix of disciplines.	1	2	3	4	5
Participants were actively involved in the exercise.	1	2	3	4	5
Exercise participation was appropriate for someone in my field with my level of experience/training.	1	2	3	4	5
The exercise increased my understanding about and familiarity with the capabilities and resources of other participating organizations.	1	2	3	4	5
The exercise provided the opportunity to address significant decisions in support of critical mission areas.	1	2	3	4	5
After this exercise, I am better prepared to deal with the capabilities and hazards addressed.	1	2	3	4	5

Part III: Participant Feedback

1. I observed the following strengths during this exercise:

Strengths
Group communication
Solutions Problems presented with solutions

2. I observed the following areas for improvement during this exercise. Please provide recommendations on how to make improvements.

Areas for Improvement & Recommendations
Community leadership for ACS needed Define a leader
plan has gaps. Further development of plan.

Additional comments:

A large empty rectangular box with a thin black border, intended for entering additional comments.

PARTICIPANT FEEDBACK FORM

Thank you for participating in this exercise. Your observations, comments, and input are greatly appreciated, and provide invaluable insight that will better prepare our nation against threats and hazards. Any comments provided will be treated in a sensitive manner and all personal information will remain confidential. Please keep comments concise, specific, and constructive.

Part I: General Information

Please enter your responses in the form field or check box after the appropriate selection.

Name: *Cpl. Rodriguez David*

Agency/Organization Affiliation: *Pasco Sheriff's Office*

Position Title: *Corporal*

Exercise Role: Player Facilitator/Controller Observer Evaluator

Part II: Exercise Design

Please rate, on a scale of 1 to 5, your overall assessment of the exercise relative to the statements provided, with 1 indicating strong disagreement and 5 indicating strong agreement.

Assessment Factor	Strongly Disagree			Strongly Agree	
Pre-exercise briefings were informative and provided the necessary information for my role in the exercise.	1	2	3	(4)	5
The exercise scenario was plausible and realistic.	1	2	3	4	(5)
Exercise participants included the right people in terms of level and mix of disciplines.	1	2	3	4	(5)
Participants were actively involved in the exercise.	1	2	3	4	(5)
Exercise participation was appropriate for someone in my field with my level of experience/training.	1	2	3	4	(5)
The exercise increased my understanding about and familiarity with the capabilities and resources of other participating organizations.	1	2	3	4	(5)
The exercise provided the opportunity to address significant decisions in support of critical mission areas.	1	2	3	4	(5)
After this exercise, I am better prepared to deal with the capabilities and hazards addressed.	1	2	(3)	4	5

Part III: Participant Feedback

1. I observed the following strengths during this exercise:

Strengths
Good team work between all the Emergency Services.

2. I observed the following areas for improvement during this exercise. Please provide recommendations on how to make improvements.

Areas for Improvement & Recommendations
N/A.

Additional comments: *NONE*

PARTICIPANT FEEDBACK FORM

Thank you for participating in this exercise. Your observations, comments, and input are greatly appreciated, and provide invaluable insight that will better prepare our nation against threats and hazards. Any comments provided will be treated in a sensitive manner and all personal information will remain confidential. Please keep comments concise, specific, and constructive.

Part I: General Information

Please enter your responses in the form field or check box after the appropriate selection.

Name: *Cristine McGuire-Wolfe*

Agency/Organization Affiliation: *PCFR*

Position Title: *Special Projects*

Exercise Role: Player Facilitator/Controller Observer Evaluator

Part II: Exercise Design

Please rate, on a scale of 1 to 5, your overall assessment of the exercise relative to the statements provided, with 1 indicating strong disagreement and 5 indicating strong agreement.

Assessment Factor	Strongly Disagree			Strongly Agree	
Pre-exercise briefings were informative and provided the necessary information for my role in the exercise.	1	2	3	4	5
The exercise scenario was plausible and realistic.	1	2	3	4	5
Exercise participants included the right people in terms of level and mix of disciplines.	1	2	3	4	5
Participants were actively involved in the exercise.	1	2	3	4	5
Exercise participation was appropriate for someone in my field with my level of experience/training.	1	2	3	4	5
The exercise increased my understanding about and familiarity with the capabilities and resources of other participating organizations.	1	2	3	4	5
The exercise provided the opportunity to address significant decisions in support of critical mission areas.	1	2	3	4	5
After this exercise, I am better prepared to deal with the capabilities and hazards addressed.	1	2	3	4	5

Part III: Participant Feedback

1. I observed the following strengths during this exercise:

Strengths
Engaged discussions regarding issues
Practical based approach

2. I observed the following areas for improvement during this exercise. Please provide recommendations on how to make improvements.

Areas for Improvement & Recommendations
Would have liked a concrete Action Plan for unresolved issues. Items identified but feel like there is a vagueness as to resolution.

Additional comments:

Overall, very productive exercise.

PARTICIPANT FEEDBACK FORM

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Part I: General Information

Please enter your responses in the form field or check box after the appropriate selection.

Name: DAN JOHNSON

Agency/Organization Affiliation: SMRT

Position Title: COMMANDER

Exercise Role: Player Facilitator/Controller Observer Evaluator

Part II: Exercise Design

Please rate, on a scale of 1 to 5, your overall assessment of the exercise relative to the statements provided, with 1 indicating strong disagreement and 5 indicating strong agreement.

Assessment Factor	Strongly Disagree			Strongly Agree	
Pre-exercise briefings were informative and provided the necessary information for my role in the exercise.	1	2	3	4	5
The exercise scenario was plausible and realistic.	1	2	3	4	5
Exercise participants included the right people in terms of level and mix of disciplines.	1	2	3	4	5
Participants were actively involved in the exercise.	1	2	3	4	5
Exercise participation was appropriate for someone in my field with my level of experience/training.	1	2	3	4	5
The exercise increased my understanding about and familiarity with the capabilities and resources of other participating organizations.	1	2	3	4	5
The exercise provided the opportunity to address significant decisions in support of critical mission areas.	1	2	3	4	5
After this exercise, I am better prepared to deal with the capabilities and hazards addressed.	1	2	3	4	5

Part III: Participant Feedback

1. I observed the following strengths during this exercise:

Strengths
<i>synergistic decisions / excellent brainstorming</i>
<i>It's a good start...</i>

2. I observed the following areas for improvement during this exercise. Please provide recommendations on how to make improvements.

Areas for Improvement & Recommendations
<i>Need more in depth gap analysis.</i>

Additional comments:

Great template and draft.

PARTICIPANT FEEDBACK FORM

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Part I: General Information

Please enter your responses in the form field or check box after the appropriate selection.

Name: *Brenda De Sousa*

Agency/Organization Affiliation: *VA- HBPC*

Position Title: *Kinesiotherapist*

Exercise Role: Player Facilitator/Controller Observer Evaluator

Part II: Exercise Design

Please rate, on a scale of 1 to 5, your overall assessment of the exercise relative to the statements provided, with 1 indicating strong disagreement and 5 indicating strong agreement.

Assessment Factor	Strongly Disagree			Strongly Agree	
	1	2	3	4	5
Pre-exercise briefings were informative and provided the necessary information for my role in the exercise.	1	2	3	4	5
The exercise scenario was plausible and realistic.	1	(2)	3	4	5
Exercise participants included the right people in terms of level and mix of disciplines.	1	(2)	3	4	5
Participants were actively involved in the exercise.	(1)	2	3	4	5
Exercise participation was appropriate for someone in my field with my level of experience/training.	1	(2)	(3)	4	5
The exercise increased my understanding about and familiarity with the capabilities and resources of other participating organizations.	1	(2)	3	4	5
The exercise provided the opportunity to address significant decisions in support of critical mission areas.	1	(2)	3	4	5
After this exercise, I am better prepared to deal with the capabilities and hazards addressed.	1	2	(3)	4	5

- not present for this

Part III: Participant Feedback

1. I observed the following strengths during this exercise:

Strengths
Knowledge of Fire & Rescue Somewhat diversified group F&R, LE, SMRT, BSFS
Group participation - productive

2. I observed the following areas for improvement during this exercise. Please provide recommendations on how to make improvements.

Areas for Improvement & Recommendations
Determination of: ACS location options Staffing / Credentialing Leadership - ACS Expand community participants in ACS Exercise
Pre-scripted P.I. announcement
Entering the VA to participate in these exercises

Additional comments:

Need more of these Tabletop Exercises -

PARTICIPANT FEEDBACK FORM

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Part I: General Information

Please enter your responses in the form field or check box after the appropriate selection.

Name: Ron Beach

Agency/Organization Affiliation: FDOH-PASCO

Position Title: MRC Coordinator - FDOH-PASCO

Exercise Role: Player Facilitator/Controller Observer Evaluator

Part II: Exercise Design

Please rate, on a scale of 1 to 5, your overall assessment of the exercise relative to the statements provided, with 1 indicating strong disagreement and 5 indicating strong agreement.

Assessment Factor	Strongly Disagree				Strongly Agree
Pre-exercise briefings were informative and provided the necessary information for my role in the exercise.	1	2	3	4	5
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Exercise participation was appropriate for someone in my field with my level of experience/training.	1	2	3	4	5
The exercise increased my understanding about and familiarity with the capabilities and resources of other participating organizations.	1	2	3	4	5
The exercise provided the opportunity to address significant decisions in support of critical mission areas.	1	2	3	4	5
After this exercise, I am better prepared to deal with the capabilities and hazards addressed.	1	2	3	4	5

Part III: Participant Feedback

1. I observed the following strengths during this exercise:

Strengths
Active participation + information sharing for the common good of the group
Good mix of players
Great exchange of information + recommendations

2. I observed the following areas for improvement during this exercise. Please provide recommendations on how to make improvements.

Areas for Improvement & Recommendations
NEED for additional players to group for participation
Greater sense of urgency re: Plan development

Additional comments:

Great
Table
Top
Exercise -

PARTICIPANT FEEDBACK FORM

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Part I: General Information

Please enter your responses in the form field or check box after the appropriate selection.

Name:

Agency/Organization Affiliation:

Position Title:

Exercise Role: Player Facilitator/Controller Observer Evaluator

Part II: Exercise Design

Please rate, on a scale of 1 to 5, your overall assessment of the exercise relative to the statements provided, with 1 indicating strong disagreement and 5 indicating strong agreement.

Assessment Factor	Strongly Disagree					Strongly Agree				
Pre-exercise briefings were informative and provided the necessary information for my role in the exercise.	1	2	3	4	5	1	2	3	4	5
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Exercise participants included the right people in terms of level and mix of disciplines.	1	2	3	4	5	1	2	3	4	5
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The exercise provided the opportunity to address significant decisions in support of critical mission areas.	1	2	3	4	5	1	2	3	4	5
After this exercise, I am better prepared to deal with the capabilities and hazards addressed.	1	2	3	4	5	1	2	3	4	5

Part III: Participant Feedback

1. I observed the following strengths during this exercise:

Strengths
Engagement
Fundamental Knowledge

2. I observed the following areas for improvement during this exercise. Please provide recommendations on how to make improvements.

Areas for Improvement & Recommendations
Ensure more partners participate

Additional comments:

- Nice job, Moved quickly
- Scores me to see how much we don't know.
-

PARTICIPANT FEEDBACK FORM

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Part I: General Information

Please enter your responses in the form field or check box after the appropriate selection.

Name: Hunter Zager

Agency/Organization Affiliation: FDOH

Position Title: Regional Emergency Response Advisor

Exercise Role: Player Facilitator/Controller Observer Evaluator

Part II: Exercise Design

Please rate, on a scale of 1 to 5, your overall assessment of the exercise relative to the statements provided, with 1 indicating strong disagreement and 5 indicating strong agreement.

Assessment Factor	Strongly Disagree			Strongly Agree	
	1	2	3	4	5
Pre-exercise briefings were informative and provided the necessary information for my role in the exercise.	1	2	3	4	5
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The exercise provided the opportunity to address significant decisions in support of critical mission areas.	1	2	3	4	5
After this exercise, I am better prepared to deal with the capabilities and hazards addressed.	1	2	3	4	5

Part III: Participant Feedback

1. I observed the following strengths during this exercise:

Strengths
It was a good opportunity to identify expectations of DOH when it comes to ACS. And they are significant.
Participants were willing to admit when didn't know something.

2. I observed the following areas for improvement during this exercise. Please provide recommendations on how to make improvements.

Areas for Improvement & Recommendations
Would've liked to see more involvement from EM + other community partners.

Additional comments:

Education of community partners on MRC + capabilities.
(could build C-MRT (county Med resp team) type entity
within MRC.)

PARTICIPANT FEEDBACK FORM

Thank you for participating in this exercise. Your observations, comments, and input are greatly appreciated, and provide invaluable insight that will better prepare our nation against threats and hazards. Any comments provided will be treated in a sensitive manner and all personal information will remain confidential. Please keep comments concise, specific, and constructive.

Part I: General Information

Please enter your responses in the form field or check box after the appropriate selection.

Name: *Christine Abarca*

Agency/Organization Affiliation: *Dell-Pasco*

Position Title: *Asst. Director*

Exercise Role: Player Facilitator/Controller Observer Evaluator

Part II: Exercise Design

Please rate, on a scale of 1 to 5, your overall assessment of the exercise relative to the statements provided, with 1 indicating strong disagreement and 5 indicating strong agreement.

Assessment Factor	Strongly Disagree			Strongly Agree	
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The exercise increased my understanding about and familiarity with the capabilities and resources of other participating organizations.	1	2	3	(4)	5
The exercise provided the opportunity to address significant decisions in support of critical mission areas.	1	2	(3)	4	5
After this exercise, I am better prepared to deal with the capabilities and hazards addressed.	1	2	(3)	4	5

Part III: Participant Feedback

1. I observed the following strengths during this exercise:

Strengths
Engaged participants
Organized process for moving thru the exercise
Having a draft plan to use as a reference

2. I observed the following areas for improvement during this exercise. Please provide recommendations on how to make improvements.

Areas for Improvement & Recommendations
More diverse partners

Additional comments:

Appreciate the assistance and guidance from
the table and general facilitators

PARTICIPANT FEEDBACK FORM

Thank you for participating in this exercise. Your observations, comments, and input are greatly appreciated, and provide invaluable insight that will better prepare our nation against threats and hazards. Any comments provided will be treated in a sensitive manner and all personal information will remain confidential. Please keep comments concise, specific, and constructive.

Part I: General Information

Please enter your responses in the form field or check box after the appropriate selection.

Name: Kathleen Yeater

Agency/Organization Affiliation: DOH - Pasco Co.

Position Title: Executive Director of Nursing

Exercise Role: Player Facilitator/Controller Observer Evaluator

Part II: Exercise Design

Please rate, on a scale of 1 to 5, your overall assessment of the exercise relative to the statements provided, with 1 indicating strong disagreement and 5 indicating strong agreement.

Assessment Factor	Strongly Disagree			Strongly Agree	
Pre-exercise briefings were informative and provided the necessary information for my role in the exercise.	1	2	3	4	5
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The exercise increased my understanding about and familiarity with the capabilities and resources of other participating organizations.	1	2	3	4	5
The exercise provided the opportunity to address significant decisions in support of critical mission areas.	1	2	3	4	5
After this exercise, I am better prepared to deal with the capabilities and hazards addressed.	1	2	3	4	5

Part III: Participant Feedback

1. I observed the following strengths during this exercise:

Strengths
<ul style="list-style-type: none"> - Interest in Topic / Engaged Partners - Collaboration among partners - Identified Gaps
<ul style="list-style-type: none"> - Honest feedback - UNDERSTAND what is in "Draft" ACS Plan better
<ul style="list-style-type: none"> - Identified Need Health Care Coalition members to help us - MOU's NEED signed,

2. I observed the following areas for improvement during this exercise. Please provide recommendations on how to make improvements.

Areas for Improvement & Recommendations
<ul style="list-style-type: none"> - Education of partners and community leaders on realistic roles + responsibilities of various agencies
<ul style="list-style-type: none"> - Mutual Aid agreements needed - Better understanding of our MRC
<ul style="list-style-type: none"> - Engage ESF 8 Coalition in Plan - Need MANPOWER - NEED Hospital CEOs involved + other Key Health Players,

Additional comments:

THANK YOU
Great Exercise



Florida Department of Health in Pasco County

Alternate Care Site Tabletop Exercise

April 19, 2016



Opening Remarks

Exercise Schedule

1400 - 1410	Welcome and Opening Remarks
1410 - 1500	Module 1: Briefing, Caucus Discussion, and Brief-Back
1500 - 1600	Module 2: Briefing, Caucus Discussion, and Brief-Back
1600 - 1630	Hot Wash
1630	Closing Comments

Exercise Objectives

- Evaluate the familiarity of the Florida Department of Health in Pasco County Alternate Care Site plan by agencies with responsibilities defined in the plan.
- Observe and evaluate Pasco County Emergency Operations processes necessary for a coordinated response requiring activation of the Alternate Care Site plan.
- Identify areas in the draft Alternate Care Site plan requiring updates or additional planning meetings with stakeholder agencies.
- Identify resource shortfalls based on the draft Alternate Care Site plan and determine strategies to obtain resources or identify mutual aid resources.

Exercise Guidelines

- **Issue identification is not as valuable as suggestions and recommended actions that could improve prevention/response/recovery efforts.**
- **Problem-solving efforts should be the focus.**
- **Issues requiring additional planning or extended discussion will be placed in a “parking lot” for identification and future planning.**



Module 1: ACS Plan Activation

August 13, 2016 9am

Category 4 Hurricane Marilyn made landfall at the Pinellas/Pasco County line near Tarpon Springs about 48 hours ago. Initial assessments are still being compiled however reports indicate significant damage throughout West Central Florida.

Shelters are still operational, initial debris “pushes” have begun, and search and rescue operations are mostly complete. Several fatalities occurred due to flooding and injuries have been reporting as people begin to clean up.

Power companies estimate many repairs will take at least 7 to 10 days with isolated areas requiring up to 3 weeks before 100% restoration is complete.



Module 1: ACS Plan Activation

The Pasco County EOC was activated to Level 1 in the days before landfall. Impact assessments are still being finalized.

At the direction of the Pasco County Policy Group planning has begun for operations over the next week.

The State EOC has stated that State and Federal resources are being assigned to priority missions based on life-safety and restoring critical life-sustaining systems in the hardest hit areas.

Elected officials are being contacted by citizens about the long waits at medical facilities for treatment of minor injuries and illnesses. Hospitals are doing everything they can but high census counts from the flu and normal patient levels were near capacity before the hurricane.

Module 1: Key Issues

- **The Pasco County EOC is activated at Level 1. A local State of Emergency has been declared by the Pasco County BOCC. Governor Scott has issued an Executive Order covering all of West Central Florida and has requested a Presidential Disaster Declaration from FEMA.**
- **Field units are reporting a large number of citizens with minor injuries and illness seeking treatment at local hospitals and medical clinics. The facilities are overwhelmed with a large number of patients and wait times are at least 10-12 hours for non-critical patients.**

Module 1: Key Issues

- **Hospitals are reporting staffing shortages. Pasco County Fire Rescue has requested additional EMS mutual aid due to the very large increase in call volume.**
- **Local medical clinics are limited in capabilities or non-operational because they do not have generators and most of their staff has not reported to work.**
- **Electrical restoration estimates throughout Pasco County are 7 to 10 days with some outages up to 3 weeks in isolated areas.**

Module 1: Activation Process

1. The draft ACS plan activation process includes the “Executive Policy Group” and the “Threat Advisory Committee” with defined members of senior county officials. Are these groups properly defined in the plan? If not what changes need to be made to the plan?
2. What information will need to be provided to decision makers during the ACS plan activation process?
3. Does a local state of emergency declaration need to include specific ACS language?

Module 1: Roles & Responsibilities

- 1. According to the ACS plan medical direction/protocols can be assigned to DOH-Pasco or the Pasco County Fire Rescue. Who will be responsible for oversight and support of patient care and site protocols in this scenario?**
- 2. Many Emergency Support Functions (ESF's) are delegated responsibilities in the ACS plan. (ACS Plan pages 11-14). Are these correct?**



Module 1: Conclusion



Module 2: ACS Operations

August 13, 2016 11am

- A policy group decision called for the activation of one ACS.
- State and Federal resources will take several days to be mobilized and be operational in the county requiring initial ACS operations to be supported only by local resources.
- Based on current impact assessment the ACS is anticipated to be operational for up to 7 days.
- Hospital staff are already on recall status and are not available for assisting with the ACS.

Module 2: ACS Operations

General Questions

1. How much time is required to mobilize and make an ACS operational?
2. What gaps or shortfalls exist?
3. Who facilitates the overall ACS mobilization and operations process?
4. What information from ACS operations is required by the EOC for Incident Action Plans, Situation Reports, or other reporting and documentation processes?
5. Is there a pre-scripted plan for ACS public information including level of care, services available, operational hours, and other necessary information? How is this information distributed to hospitals and medical facilities?

Module 2: ACS Operations

Facilities

- 1. What facilities are pre-identified in the ACS plan? Are adequate written agreements/MOU's in place for their use?**
- 2. What factors will play a key role in the determination of which facility to choose for an ACS?**
- 3. Does Pasco County have adequate resources to open and operate multiple ACS sites?**
- 4. Who pays for the use of sites including utilities, damage, and repairs?**

Module 2: ACS Operations

Staffing

- 1. With medical facilities already reporting staff shortages what are some options for staff to work at an Alternate Care Site?**
- 2. Who is responsible for payment, liability, and workers comp of these staff?**
- 3. What role does the West Central Florida Medical Reserve Corps (WCFMRC) have in the Alternate Care Site plan?**
- 4. If volunteers are utilized who is responsible for verification of credentials and certifications for volunteers? How long does that process take before a volunteer is cleared to work?**
- 5. Has just-in-time ACS training for staff and volunteers been developed? How will this training be delivered during an ACS operation?**

Module 2: ACS Operations

Equipment & Supplies

- 1. What pre-existing equipment and supplies are available for use at an ACS? How will these resources be mobilized, deployed, tracked, and replaced?**
- 2. How long would existing equipment and supplies last before additional resources are needed? Who is responsible to monitor burn rates of supplies?**
- 3. Who is responsible for contracting and procuring additional equipment or supplies? Who pays for them?**
- 4. What other local resources are available outside of “normal” agencies?**
- 5. Is there a demobilization plan?**



Module 2: Conclusion

Hot Wash

- **What went well?**
- **What needs to be improved?**
- **Suggestions to make those improvements?**

Please complete Participant Feedback Form before you leave today!

Issue identification is not as valuable as suggestions and recommended actions that could improve prevention/response/recovery efforts.



After Action Meeting

- **April 25th 9am**
- **Pasco County DOH**
- **10841 Little Rd, New Port Richey, FL 34654**



Closing Comments