|  |
| --- |
| ***Exercise Name:*** Response Team, Assemble! ***Organization Name:***      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ***Exercise Date:*** September 17, 2024 ***Venue:***      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| ***Exercise Objectives:***  1. Evaluate the planning and response actions of healthcare organizations during a simulated significant winter weather event.  2. Evaluate ability to conduct planning and response by implementing an Incident Management Team (IMT) or command center operation proactively, in advance of an incident happening.  3. Demonstrate incident planning and implementation of Healthcare Incident Command System (HICS) principles by following planning processes associated with filling out the Incident Action Plan QuickStart Form. |
| ***Exercise Scope:*** This exercise is a community-based Functional Exercise, planned for three hours at players’ organizations and through a virtual platform. Exercise play is limited to the Metro Health & Medical Preparedness Coalition, nursing homes, assisted living facilities, group homes/ICF, home care, hospice, and clinics from across Minnesota. |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Module 1** | | | | |
| **Objectives** | **Expected Actions** | **Observation Notes and Explanation of Rating** | **Rating** |
| ***All Participants*** | | | |
| Evaluate the planning and response actions of healthcare organizations during a simulated significant winter weather event. | Participants discuss whether to activate emergency plans or not. |  | Meets  Partially meets  Does not meet  NA |
| Participants discuss internal and external communication needs. |  | Meets  Partially meets  Does not meet  NA |
| Participants conduct supply and system assessments. |  | Meets  Partially meets  Does not meet  NA |
| Participants are able to receive MNTrac alert. |  | Meets  Partially meets  Does not meet  NA |
| Participants are able to join MNTrac Coordination Room. |  | Meets  Partially meets  Does not meet  NA |
| Evaluate ability to conduct planning and response by implementing an Incident Management Team (IMT) or command center operation proactively, in advance of an incident happening. | Participants decide whether to activate response team or not. |  | Meets  Partially meets  Does not meet  NA |
| Demonstrate incident planning and implementation of Healthcare Incident Command System (HICS) principles by following planning processes associated with filling out the Incident Action Plan Quickstart Form. | Participants begin filling out the Incident Action Plan-QuickStart Form. |  | Meets  Partially meets  Does not meet  NA |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Module 2** | | | | |
| **Objectives** | **Expected Actions** | **Observation Notes and Explanation of Rating** | **Rating** |
| ***Nursing Homes, Assisted Living Facilities, Group Homes/ICF, Inpatient Hospice*** | | | |
| Evaluate the planning and response actions of healthcare organizations during a simulated significant winter weather event. | Participants re-assess supply needs. |  | Meets  Partially meets  Does not meet  NA |
| Participants assess staffing levels and plans. |  | Meets  Partially meets  Does not meet  NA |
| Participants identify back-up power plans. |  | Meets  Partially meets  Does not meet  NA |
| Demonstrate incident planning implementation of Healthcare Incident Command System (HICS) principles by following planning processes associated with by filling out the Incident Action Plan QuickStart Form. | Complete IAP QuickStart Form. |  | Meets  Partially meets  Does not meet  NA |
| ***Home Health/Outpatient Hospice*** | | | |
| Evaluate the planning and response actions of healthcare organizations during a simulated significant winter weather event. | Participants describe plans for tracking staff in the field. |  | Meets  Partially meets  Does not meet  NA |
| Participants identify who the decision-makers are when deciding to pause services due to weather. |  | Meets  Partially meets  Does not meet  NA |
| Participants identify messaging to staff, visitors, families, and residents regarding storm. |  | Meets  Partially meets  Does not meet  NA |
| Participants review power outage back-up plans |  | Meets  Partially meets  Does not meet  NA |
| Demonstrate incident planning implementation of Healthcare Incident Command System (HICS) principles by following planning processes associated with by filling out the Incident Action Plan QuickStart Form. | Complete IAP QuickStart Form |  | Meets  Partially meets  Does not meet  NA |
| ***Clinics*** | | | |
| Evaluate the planning and response actions of healthcare organizations during a simulated significant winter weather event. | Review patient communication plans |  | Meets  Partially meets  Does not meet  NA |
| Identify process for deciding facility closure |  | Meets  Partially meets  Does not meet  NA |
| Demonstrate incident planning implementation of Healthcare Incident Command System (HICS) principles by following planning processes associated with by filling out the Incident Action Plan QuickStart Form. | Complete IAP QuickStart Form |  | Meets  Partially meets  Does not meet  NA |

|  |  |  |  |
| --- | --- | --- | --- |
| **Module 3** | | | |
| ***Nursing Homes, Assisted Living Facilities, Group Homes/ICF, Inpatient Hospice*** | | | |
| **Objectives** | **Expected Actions** | **Observation Notes and Explanation of Rating** | **Rating** |
| Evaluate ability to conduct planning and response by implementing an Incident Management Team (IMT) or command center operation proactively, in advance of an incident happening. | Participants discuss rotating response team roles |  | Meets  Partially meets  Does not meet NA |
| Evaluate the planning and response actions of healthcare organizations during a simulated significant winter weather event. | Participants re-assess food/water/supply capacity for anticipated duration of event |  | Meets  Partially meets  Does not meet NA |
| Demonstrate incident planning implementation of Healthcare Incident Command System (HICS) principles by following planning processes associated with by filling out the Incident Action Plan QuickStart Form. | Begin/Complete second IAP Quick Start Form |  | Meets  Partially meets  Does not meet NA |
| ***Home Health/Outpatient Hospice*** | | | |
| Evaluate the planning and response actions of healthcare organizations during a simulated significant winter weather event. | Participants discuss plans/processes to assist clients with access and functional needs |  | Meets  Partially meets  Does not meet NA |
| Participants review communication plans and messaging |  | Meets  Partially meets  Does not meet NA |
| Participants discuss safety assessment for staff travel. |  | Meets  Partially meets  Does not meet NA |
| Demonstrate incident planning implementation of Healthcare Incident Command System (HICS) principles by following planning processes associated with by filling out the Incident Action Plan QuickStart Form. | Begin/Complete second IAP Quick Start Form |  | Meets  Partially meets  Does not meet NA |
| ***Clinics*** | | | |
| Evaluate the planning and response actions of healthcare organizations during a simulated significant winter weather event. | Participants review communication plans and messaging |  | Meets  Partially meets  Does not meet NA |
| Participants discuss safety assessment for reopening. |  | Meets  Partially meets  Does not meet NA |
| Demonstrate incident planning implementation of Healthcare Incident Command System (HICS) principles by following planning processes associated with by filling out the Incident Action Plan QuickStart Form. | Begin/Complete second IAP Quick Start Form |  | Meets  Partially meets  Does not meet NA |
| **End Exercise** | | | |

|  |
| --- |
| **Ratings Key** |
| **Meets –** Team performed expected action  **Partially Meets –** Team partially performed, or performed parts of expected action  **Does Not Meet –** Team did not perform expected action  **NA-**Not applicable |

Evaluator Name: \_     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Evaluator E-mail:      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**RATINGS DEFINITIONS**

|  |  |
| --- | --- |
| **Meets Expected Action** | The expected actions associated with the objectives were completed in accordance with applicable plans, policies, procedures, and regulations and did not negatively impact the performance of other activities. |
| **Partially Meets Expected Action** | The expected actions associated with the objectives were completed in a manner that partially achieved the objectives, however opportunities to enhance effectiveness, efficiency, and completion of the objectives were identified during the exercise. |
| **Does Not Meet Expected Action** | The expected actions associated with the objectives were not performed in a manner which achieved the objectives. |
| **Not Applicable (NA)** | This Expected Action does not apply. |