

Georgia Mountains Healthcare Coalition

Regional Active Shooter Tabletop Exercise

March 14, 2019

AFTER ACTION REPORT IMPROVEMENT PLAN

PUBLISHED: APRIL 2, 2019



Note: This After Action Report (with included Improvement Plan Appendix) aligns selected exercise objectives with preparedness doctrine to include the National Preparedness Goal and related frameworks and guidance.

Findings in this report are based upon observations of exercise facilitators and evaluators in addition to feedback provided by exercise participants.

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Handling Instructions

The title of this document is Georgia Mountains Healthcare Coalition Pandemic Flu Tabletop Exercise (TTX) After Action Report (AAR).

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Exercise Overview

Exercise Name	Georgia Mountains Healthcare Coalition –Regional Active Shooter Tabletop Exercise
Exercise Date	March 14, 2018
Scope	This discussion-based exercise focuses on Georgia Mountains Healthcare Coalition healthcare facilities' and community partners' ability to respond to a regional pandemic event. This will include reviewing local and regional response plans, as well as engaging in discussion to address potential gaps that may exist.
Mission Areas	Prevention, Protection, Mitigation, and Response
Core Capabilities	Cap 1: Foundation for Health Care and Medical Readiness Cap 2: Health Care and Medical Response Coordination Cap 3: Continuity of Health Care Service Delivery Cap 4: Medical Surge
Objectives	 The Georgia Mountains Healthcare Coalition will coordinate requests and maintain a common operating picture throughout an active shooter event in accordance with the Georgia Mountains Healthcare Coalition Coordination Plan. The Georgia Mountains Healthcare Coalition will utilize available, interoperable communications systems and platforms to maintain situational awareness throughout a regional active shooter event in accordance with the Georgia Mountains Healthcare Coalition Coordination Plan. The Georgia Mountains Healthcare Coalition members will request, mobilize, and demobilize regional and/or state assets during a medical surge/ active shooter response in accordance with regional plans and protocols. The Georgia Mountains Healthcare Coalition healthcare facilities and response partners will coordinate the placement of and clinical care for a surge of patient/residents throughout the region during an active shooter event in accordance with applicable surge plans.
Threat or Hazard	Active Shooter in Medical Facility
Scenario	A landscaping crew notices a red Ford Mustang approach the medical office building at an accelerated speed and park illegally in front of the building. A white male exits the vehicle dressed in blue jeans and a red flannel shirt. Upon exiting the car, he reaches into the backseat and pulls out a black backpack and is soon observed entering the medical office building through the front door. A front seat passenger appears to move over to the driver's seat after the backpack is retrieved. Shortly after the male enters the building, the landscaping crew hears loud screams and "popping noises" similar to gun shots coming from inside the medical office building. Several visitors and patients are then seen fleeing the building. After several minutes, the gunman exits the building and gets back in the red Pontiac Sunfire, which leaves the scene at a high rate of speed.
Sponsors	Georgia Mountains Healthcare Coalition, Northeast Georgia Health System Regional Coordinating Hospital; Georgia Department of Public Health
Participating Organizations	73 Participating Healthcare Organizations and Community Partners (see page 6 for complete listing)

Exercise Planning and Participation

Exercise Planning Team (EPT)

Representatives of the following organizations participated in the Georgia Mountains Healthcare Coalition Tabletop Exercise planning process by attending scheduled regional exercise planning meetings:

District 2 Public Health

Northeast Georgia Health System

Participating Organizations

The following organizations were represented at the Georgia Mountains Healthcare Coalition Tabletop Exercise:

- Ability Pediatric Therapy, LLC
- Acts Retirement Life Communities Lanier Village Estates
- Air Life Georgia
- American Red Cross
- Banks County Coroner
- Barrow County Emergency Services
- Barrow County EMA
- Bell Minor Home
- Braselton Endoscopy Center
- Brown Health and Rehabilitation
- Center for Spine and Pain Medicine
- Chatuge Regional Hospital
- Chatuge Regional Nursing Home
- Chelsey Park Health and Rehabilitation
- Clearview Behavioral Health
- Davita Braselton
- Davita Gainesville
- Davita Jesse Jewel Dialysis
- Dawson County Fire
- Ethica Health
- Fresenius Kidney Care
- Fresenius Kidney Care Braselton
- Fresenius Kidney Care Lake Lanier
- Gainesville Endoscopy Center
- Gainesville Fire Department
- Gateway Health and Rehab
- Georgia ARES
- Georgia Department of Public Health
- Georgia Department Public Health District 2
- Georgia Department of Public Health District 3-2
- Georgia Department of Public Health District 5-1
- Georgia Department of Public Health District 10
- Georgia Emergency Management Agency /Homeland Security
- Georgia Health Care Association
- Georgia Mountains Healthcare Coalition
- Georgia Mountains Health Services, Inc
- Gold City Health and Rehab
- Habersham Medical Center

- Hall County 911/EOC
- Hall County ARES
- Hall County EMA
- Hall County Fire Services
- Hall County Sheriff's Department
- Hospice of NGMC
- Jackson ARES
- Kindred Hospice, Gainesville
- Lumpkin County EMA
- Medlink Georgia Inc.
- Mountain View Health and Rehab
- New Horizons Lanier Park
- New Horizons Limestone
- Northeast Georgia Medical Center Barrow
- Northeast Georgia Medical Center Braselton
- Northeast Georgia Medical Center Gainesville
- Northeast Georgia Medical Center Laurelwood
- Pruitt Health The Oaks Limestone
- PruittHealth Home Health Gainesville
- PruittHealth-Toccoa
- Regency Southern Care Hospice
- St. Mary's Health Care System
- Specialty Orthopaedics Surgery Center
- Specialty Spine and Pain
- Stephens County Hospital
- SunCrest Home Health
- The Gables at Cobb Village Assisted Living
- The Oaks Scenic View
- Towns County ARES
- Towns County EMA
- Tugaloo Home Health
- Union County Emergency Management Agency
- Union County Nursing Home
- Union General Hospital
- University of North Georgia
- UNG, Police Department
- US Renal Care
- White County Emergency Management
- WillowBrooke Court at Lanier Village Estates

Number of Attendees

Number of Attendees

Facilitators	10
Logistics/Support	3
Participants	104

TOTAL: 117 attendees

Tabletop Exercise Planning and Preparation

In preparation for the exercise, the following meetings were held:

February 13, 2019 Tabletop Exercise Concepts & Objectives (TTX C&O) & Tabletop Exercise Initial

Planning Meeting (TTX IPM)

February 20, 2019 Tabletop Exercise Midterm Planning Meeting (TTX MPM)

March 12, 2019 Tabletop Exercise Final Planning Meeting (TTX FPM)



Executive Summary

The Georgia Mountains Healthcare Coalition Active Shooter Tabletop Exercise was held on March 14, 2019 at the Lanier Technical College Ramsey Conference Center in Gainesville, Georgia. The 117 participants included representatives from many coalition healthcare facilities, local community response partners, and state and regional support agencies. The Georgia Mountains Healthcare Coalition tabletop exercise focused on the coalition's ability to respond to an active shooter at a medical facility and subsequent surge scenario affecting healthcare facilities and their partners across the region. Tabletop participants were seated with county partners in order to facilitate discussion of both local and regional plans. The exercise sought to identify gaps in capabilities that currently exist in both local response plans and the Georgia Mountains Healthcare Coalition's Communication Coordination Plan.

The following areas were recognized as major strengths of the Georgia Mountains Healthcare Coalition healthcare coalition during the exercise:

- Most represented facilities and agencies noted having Emergency Operations Plans (EOPs) available and were familiar with the triggers for plan activation and implementation.
- Most represented facilities have existing Memoranda of Understanding (MOUs) with other agencies, including private corporations, to help procure additional supplies during an event.
- All participating groups were very cognizant of their specific vulnerabilities at each respective agency.
- Most facilities have many forms of redundant communications available for emergencies.
- Most participating facilities monitor data from multiple information sources.

The primary identified regional opportunities for improvement were as follows:

- Though a regional communications coordination plan has now been drafted, some coalition members remain unclear on their specific roles within the plan and how regional coordination would be achieved during a widespread event.
- **Everbridge and GHA911 WebEOC were not widely used** across the region and many partners are unfamiliar with the platforms.
- Many facilities are not aware of the resources available to the Georgia Mountains Healthcare Coalition Unified Coalition during a disaster/emergency.

Regional 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.

Summary of Core Capability Performance

	Objective	Core Capability	Discussed with No Gaps Identified (N)	Discussed with Some Gaps Identified (S)	Discussed with Major Gaps Identified (M)	Unable to be Discussed (U)
1.	The Georgia Mountains Healthcare Coalition will coordinate requests and maintain a common operating picture throughout an active shooter event in accordance with the Georgia Mountains Healthcare Coalition Communications Coordination Plan.	Health Care and Medical Readiness		S		
2.	The Georgia Mountains Healthcare Coalition will utilize available, interoperable communications systems and platforms to maintain situational awareness throughout a regional active shooter event in accordance with the Georgia Mountains Healthcare Coalition Communications Coordination Plan.	Health Care and Medical Response Coordination		S		
3.	The Georgia Mountains Healthcare Coalition members will request, mobilize, and demobilize regional and/or state assets during a medical surge/ active shooter response in accordance with regional plans and protocols.	Continuity of Health Care Service Delivery		S		
4.	Georgia Mountains Healthcare Coalition healthcare facilities and response partners will coordinate the placement of and clinical care for a surge of patient/residents throughout the region during an active shooter event in accordance with applicable surge plans.	Medical Surge		S		

Ratings Definitions:

- Discussed with No Gaps Identified (N): The targets and critical tasks associated with the capability were discussed in a manner
 that fully addressed the objective(s) without identifying any operational gaps in current policies, plans, and protocols. Existing
 policies, plans, and protocols are effective and are not perceived to need additional updates at this time. Staff members are
 fully trained and understand the existing protocols.
- **Discussed with Some Gaps Identified (S):** The targets and critical tasks associated with the capability were discussed in a manner that addressed the objective(s). While plans are currently in place, some operational gaps were identified. <u>Plans need to be expanded and/or altered to better address identified gaps.</u> Additional training and education on existing plans may also be required.
- Discussed with Major Gaps Identified (M): The targets and critical tasks associated with the capability were discussed in a manner that addressed the objective(s). It was recognized that major operational gaps are present. Needed plans, policies, and protocols may not exist. Current plans are not coordinated with coalition partners and will be difficult to effectively operationalize during a regional response. Training and education on any new plans or protocols will be required.
- Unable to Discuss (U): The targets and critical tasks associated with the capability were not discussed in a way which allows for evaluation of the identified objective(s).

Analysis of Exercise Objectives

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: The Georgia Mountains Healthcare Coalition will **coordinate requests and maintain a common operating picture** throughout an active shooter event in accordance with the Georgia Mountains Healthcare Coalition Communications Coordination Plan.

CORE CAPABILITY: FOUNDATION FOR HEALTH CARE AND MEDICAL READINESS

Strengths

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

- ✓ All Georgia Mountains Healthcare Coalition (Region B) members noted that they have extremely strong relationships with other emergency preparedness and response partners within their respective communities and throughout the region. Members of the coalition know one another by name and are comfortable interacting with each other during both planning and real-world events. The commitment of coalition members to emergency preparedness is one of the region's greatest assets.
- ✓ Most coalition members agreed that law enforcement would likely take the lead role in the coordination of public messaging during a an active shooter response.
- ✓ Most local communities and healthcare facilities have active shooter response plans. While triggers for such plans vary based upon the specific locations, most agree that these triggers are known to healthcare staff and response partners.
- ✓ Most Georgia Mountains Healthcare Coalition (Region B) members have access to and know how to use the GHA911 WebEOC event logs.
- ✓ Some healthcare facilities and local communities have resources caches that would be available for use during an emergency. It is, however, recognized that most of these caches would only be able to support the initial response and that additional support from neighboring counties, the region, or the state may be required.

Areas for Improvement

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

- <u>Education on Regional Communications Coordination Plan:</u> Though a regional communications
 coordination plan has now been disseminated, some coalition members remain unclear on their specific
 roles within the plan and how region-wide coordination would be achieved during a widespread, extended
 event.
 - ➤ It is recommended that education and training be conducted regarding the regional communications coordination plan. It is critical that each member of the coalition have input into the regional plan and that each organization have a working knowledge of the regional plan.
 - ➤ It is further recommended that discussion and operations-based exercises be conducted following the determination of plan triggers to address operational gaps that may manifest.

- Additionally, members of the coalition stated that they are still unclear on what events should trigger the creation of a GHA911 WebEOC event log. This should be addressed in future coalition meetings, discussions and triggers for this may require expansion.
- <u>Understanding the Role of the Healthcare Coalition</u>: Some coalition partners expressed a lack of understanding when considering the role of the healthcare coalition in an active shooter response.
 - ➤ It is recommended that the coalition executive team utilize upcoming planning meetings and regional events to educate all members on the roles the coalition may play during an regional response.
- <u>Coordination of Healthcare Emergencies with Local EMAs:</u> While relationships seemed strong at the local level, there may be a lack of comprehensive understanding of what should and should not be coordinated through local EMA in terms of a healthcare disaster of this nature. This would be true especially when comparing one healthcare discipline vs. another since they are at varying levels of emergency preparedness understanding or activity.
 - ➤ It is recommended that all healthcare facilities contact the local EMA to discuss specific roles and responsibilities during a community emergency. This should cover what resources the EMA could be able to assist in procuring and how situational awareness will be maintained between agencies. It should be noted that specific EMA roles and involvement may vary based upon the specific event and support provided through existing healthcare networks.

OBJECTIVE 2: The Georgia Mountains Healthcare Coalition will utilize available, interoperable communications systems and platforms to maintain situational awareness throughout a regional active shooter event in accordance with the Georgia Mountains Healthcare Coalition Communications Coordination Plan.

CORE CAPABILITY: HEALTH CARE AND MEDICAL RESPONSE COORDINATION

Strengths

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

- ✓ All Georgia Mountains Healthcare Coalition (Region B) members noted that there are multiple, redundant communications platforms through which notifications are received.
- ✓ Most Georgia Mountains Healthcare Coalition (Region B) healthcare facilities and community partners have access to a great number of redundant communications systems. These include: landline telephones, cell phones, email, UHF/VFH radios, 800MHz radios, two-way radios, (EVERBRIDGE) mass notifications, GHA911 WebEOC event logs, overhead paging systems, runners, amateur radios, etc.
- ✓ Some Georgia Mountains Healthcare Coalition (Region B) members have amateur radio capabilities at their respective facility(s). There is a strong network of amateur radio operators within the region and it was noted that ARES volunteers are willing to assist during real-world events and planned exercises.

Areas for Improvement

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

- <u>Use of GHA911 WebEOC and EVERBRIDGE:</u> Some coalition members within the coalition were unfamiliar with the GHA911 WebEOC and EVERBRIDGE systems. The GHA911 WebEOC event logs can be accessed via the secure portion of the www.gha911.org website and may be used to monitor ongoing events and maintain situational awareness during exercises and real world emergencies. EVERBRIDGE is a mass notifications platform that can be used daily and during emergencies. Messages can be distributed via phone, email, text, etc. with the option of prepopulating contact lists for rapid dissemination of information to healthcare staff, as needed.
 - ➤ It is recommended that healthcare facilities and community partners who are unfamiliar with these systems reach out to the Georgia Mountains Healthcare Coalition (Region B) RCH, their respective Healthcare Facilitator, or Georgia Hospital Association representatives for additional information.
 - ➤ New users can request an electronic account via the GHA911 homepage (www.gha911.org). The Georgia Hospital Association also offers free webinars and in-person training courses for each system. A quick start guide for the GHA911 event logs can also be found in the appendices of this document.
- <u>Reliance upon Emails for Coalition Notifications:</u> It was noted by many coalition members that there is a
 heavy reliance upon email messaging as the primary means for coalition notification. While email
 messaging is important, sending important notifications via multiple modalities will promote
 redundancy and ensure messages are received by coalition members.
 - ➤ It is recommended that coalition messaging be conducted through multiple modalities to ensure that email messages are not being missed and that other communications platforms are available, should the internet be unavailable.
 - ➤ It is further recommended that the coalition executive team maintain a comprehensive coalition contact list within the EVERBRIDGE mass messaging system. This will allow for messages to easily be distributed via email, text message, and voice message during a disaster.
- <u>WebEOC Posting Protocols:</u> It is important that coalition members refer to the Coordination/Communications Plan that identifies the naming matrixes for Regional Event Logs as well as the Essential Elements of Information that needs to be shared.
 - ➤ It is recommended that the Georgia Mountains Healthcare Coalition (Region B) discuss and draft a protocol for use when replying to other members' postings during an event. This could include noting the time stamp of the original posting and/or posters' name(s) or copying the entire thread into the message body so that both the original comment and reply appear together.
- Public Messaging Coordination: Most coalition members agree that coordinating messages during an event is critical and that establishing a Joint Information Center could be of use in most communities. While there is general informal agreement on information flow among coalition members, few counties have established formal plans to create a JIC or, if included in plans, have truly operationalized this function during a drill or real world event. Additionally, some healthcare facilities do not have their own in-house PIO available, so coordination is required to ensure that their respective clients/patient/residents receive needed information.
 - ➤ It is further recommended that the Georgia Mountains Healthcare Coalition (Region B) look into providing additional public information training within the region and share training available opportunities with coalition partners throughout the year.

OBJECTIVE 3: The Georgia Mountains Healthcare Coalition members will **request, mobilize,** and demobilize regional and/or state assets during a medical surge/ active shooter response in accordance with regional plans and protocols.

CORE CAPABILITY: CONTINUITY OF HEALTH CARE SERVICE DELIVERY

Strengths

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

- ✓ Most Georgia Mountains Healthcare Coalition (Region B) members expressed that mental health responders would be critical when addressing an active shooter.
- ✓ Some healthcare organizations noted that they have a seat at their respective county EOC and are included in county emergency management planning.
- ✓ Most healthcare organizations have independent surge plans and are knowledgeable of the steps needed to make room for a large influx of patients. While some smaller facilities do not have surgespecific plans, these organizations noted that there are ways they can support larger facilities through increased staff support or decompression of current census.
- ✓ Some coalition members noted that there are extremely strong relationships between local healthcare facilities and EMS providers. These groups understand each other's capabilities are prepared to support one another during a surge event.
- ✓ There is strong public safety/ first responder involvement in the Georgia Mountains Healthcare Coalition (Region B) exercise program. Having these healthcare support partners involved is important as they will play a critical role during a disaster.

Areas for Improvement

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

- <u>Procuring Additional Active Shooter Training:</u> While all healthcare organizations noted that they have conducted some level of Active Shooter Training, most recognized that the due to staff turnover they need to reeducate. Most of these partners also expressed concern that courses are not readily available and that the coalition should focus on funding upcoming trainings.
 - ➤ It is recommended that coalition members work together to procure training and classes for a variety of responders to determine what regional gaps are greatest. Course needs and priorities should be communicated up to members of the coalition executive team so that the group can maintain situational awareness and have an understanding of overall regional preparedness.
- <u>Coordination of PPE with Local Fire/Law Enforcement Personnel</u>: Most members of the Georgia Mountains Healthcare Coalition (Region B) Coalition noted that local fire departments and law enforcement agencies maintain only minimal PPE for staff and that some of these agencies have not been included when considering additional PPE needs and responder concerns.
 - ➤ Healthcare facilities and EMS services are encouraged to reach out to leaders within these local agencies to assist with answering questions concerning. It may be beneficial to procure some additional PPE kits which could be made available to local fire departments/law enforcement agencies during an active shooter trainings.

- ➤ The Georgia Mountains Healthcare Coalition (Region B) should ensure that local fire departments and law enforcement agencies receive needed information and updates concerning active shooter training and tactics. Including these partners in coalition contact/distribution lists will ensure that all response partners are knowledgeable of current threats and needed PPE.
- <u>Need for Local Alternate Care Site Plans:</u> Some coalition members indicated that current plans for alternate care site/ triage locations are informal and/or insufficient to handle relocate services should disruption of normal business due to an active shooting in a medical facilty.
 - ➤ It is recommended that staff members at each healthcare facility evaluate their respective plans to ensure that alternate care sites are included. Partnering with local clinics and/or pharmacies could be critical. Plans for alternate care sites should include provisions for possible resource and/or staffing needs.
- <u>Augmenting Healthcare Staffing Levels:</u> Many coalition members noted that staffing would be a primary
 concern during post an active shooter event. Many healthcare workers are employed by multiple
 healthcare facilities, EMS services, etc. throughout the region. This can create complications during a
 disaster when all organizations are seeking to augment staff and calling in all personnel.
 - It is recommended that organizations utilize existing relationships with volunteer and student organizations to recruit possible disaster volunteers. While it is unlikely such volunteers would assist in a clinical capacity, these individuals could reduce the staff workload in other areas to free up additional staff members.
 - ➤ It is further recommended that healthcare agencies consider utilizing volunteers in the SERV-GA system. Upon arrival at the requesting facility, volunteers could be assigned various roles based on identified skill sets and verification of licensure via the State Emergency Registry of Volunteers of Georgia (SERVGA). SERVGA is a component of the national Emergency System for Advance Registration of Volunteer Health Professionals (ESAR-VP) system.

OBJECTIVE 4: Georgia Mountains Healthcare Coalition healthcare facilities and response partners will coordinate the placement of and clinical care for a surge of patient/residents throughout the region during an active shooter event in accordance with applicable surge plans.

CORE CAPABILITY: MEDICAL SURGE

Strengths

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

- ✓ Most healthcare facilities have provided additional and/or refresher training to staff members that may have the need for critical incident stress debriefing. Many coalition individuals participated in grant funded CISM classes for Region B over the last year.
- ✓ Some facilities have small supply caches or stockpiles for use during an active shooter event. Staff members expressed general confidence that these stockpiles would be enough to support facilities through the first wave of a patients who survived the active shooting but would be problematic for the volumes of patients that would present for treatment.

Areas for Improvement

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

- <u>Updating Regional Surge Plan:</u> The Region has a Surge plan, but it requires updating to act as a regional response plan. In order to validate stated procedures, a number of actions would be required. Also, some smaller healthcare facilities do not have independent plans and were unsure as to what extent they were included in existing regional plans.
 - ➤ It is recommended that the Georgia Mountains Healthcare Coalition (Region B) review the plan to determine how to best revise it to reflect a coalition response.
 - ➤ In order to update the plan, the coalition must ensure all parts of plans are still viable, systems referenced are still in use, and that the facilities covered within the plan are comprehensive and reflect the current healthcare community.
 - > Training on an updated regional plan would be needed to ensure that coalition members are knowledgeable of their respective roles and responsibilities during an active shooter response.



Appendix A: Improvement Plan Worksheet

Core Capability	Issue/Area for Improvement	Corrective Action	Capability Element	Primary Responsible Organization	Start Date	Completion Date
	Train and Prepare	a. Conduct education and training on Regional Communications Coordination Plan.	Training	Coalition Executive Team	May 22, 2019	
	the Healthcare and Medical Workforce	b. Conduct operations-based exercises following the determination of plan triggers to address operational gaps that may manifest	Exercise	Coalition Executive Team	May 22, 2019	
Foundations		c. Provide education on what triggers the creation of a GHA911 WebEOC event log.	Training	Coalition Executive Team	May 22, 2019	
for Healthcare and Medical Readiness	Ensure Preparedness is Sustainable	a. Ensure its members understand the Role of the Healthcare Coalition b. Utilize upcoming planning meetings and regional events to educate all members on the roles the coalition may play during an extended regional response.	Training	Coalition Executive Team	May 22, 2019	
	Develop a Health Care Coalition Preparedness Plan	a. Healthcare facilities should contact the local EMA to discuss specific roles and responsibilities during a community healthcare emergency. - This should cover what resources the EMA could be able to assist in procuring and how situational awareness will be maintained between agencies.	Planning	Coalition Executive Team	May 22, 2019	
Health Care and Medical	Utilize All Available Communications Systems and Platforms	a. Assist Healthcare facilities and community partners who are unfamiliar with GHA911 WebEOC and Everbridge with additional information and training -New users can request an electronic account via (www.gha911.org)The Georgia Hospital Association also offers free webinars and in-person training courses for each system A quick start guide for the GHA911 event logs can also be found in the appendices of this document.	Training	Coalition Executive Team	May 22, 2019	
Response Coordination		b. Coalition messaging should be conducted through multiple modalities to ensure that email messages are not being missed and that other communications platforms are available, should the internet be unavailable.	Planning	Coalition Executive Team	May 22, 2019	
	Develop and Coordinate Healthcare Organization and Healthcare Coalition Response Plans	a. Work with regional healthcare facilities/ community partners to obtain accurate emergency contact information for each, especially public safety and county EM. b. Add Coalition contact information to Everbridge and test regularly	Planning	Coalition Executive Team	May 22, 2019	

Core Capability	Issue/Area for Improvement	Corrective Action	Capability Element	Primary Responsible Organization	Start Date	Completion Date
		a. Complete a resource coordination plan that includes information on request and distribution of resources. This plan should be transparent in its identification of how resource needs will be assessed and what, if any, priority will be given.	Planning	Coalition Executive Team	May 22, 2019	
		b. Formalize mobilization and demobilization plans and resource request protocols for use by coalition members - Education on plan and protocol to coalition members	Planning	Coalition Executive Team	May 22, 2019	
	Coordinate Response Strategy, Resources,	c. Establish a JIC and exercise it; Provide PIO Training to representatives across the region.	Training	Coalition Executive Team	May 22, 2019	
	and Communications	d. Ensure that local fire and law enforcement agencies receive needed information and updates concerning active shooter response	Planning	Coalition Executive Team	May 22, 2019	
		e. Educate on what elements are most appropriate for inclusion in a regional event log. Integrate GHA911 WebEOC training into upcoming coalition meetings - specifically EEI list and updated posting protocols -Discuss and draft a protocol for use when replying to other members' postings during a WebEOC Event	Training	Coalition Executive Team	May 22, 2019	
	Maintain access to non-personnel resources during an emergency	a. Conduct an extensive inventory of regional assets and assemble a database that allows users to know who controls which regional assets, whether they are currently available, and who to contact to request use of a resource.	Planning	Coalition Executive Team	May 22, 2019	
Continuity of Health Care	Plan for and Coordinate Health Care Evacuation and Relocation	a. Members at each healthcare facility should evaluate their respective plans to ensure that alternate care sites are included. Plans for alternate care sites should include provisions for possible resource and/or staffing needs.	Planning	Coalition Executive Team	May 22, 2019	
Service Delivery	Protect Responders'	a. Coalition members should work together to loosely inventory PPE supply levels to determine what regional gaps are greatest. Additional resources may be made available through realignment.	Equipment	Coalition Executive Team	May 22, 2019	
	Safety and Health	b. Coordinate PPE with Local Fire/Law Enforcement Personnel by reaching out to leaders within Local Fire/Law Enforcement and answering questions concerning PPE	Equipment	Coalition Executive Team	May 22, 2019	
	Plan for Continuity of Operations	a. Utilize existing relationships with volunteer and student organizations to recruit possible disaster volunteers. b. Healthcare agencies should consider utilizing volunteers	Planning	Coalition Executive Team	May 22, 2019	

Core Capability	Issue/Area for Corrective Action		Capability Element	Primary Responsible Organization	Start Date	Completion Date
		in the SERV-GA system				
	Plan for a Medical Surge Medical	a. Update Regional Surge Plan to act as a regional response plan and determine how to best revise it to reflect a coalition response -In order to update the plan, the coalition must ensure all parts of plans are still viable, systems referenced are still in use, and that the facilities covered within the plan are comprehensive and reflect the current healthcare community.	Planning	Coalition Executive Team	May 22, 2019	
Medical Surge		b. Train on an updated regional plan to ensure that coalition members are knowledgeable of their respective roles and responsibilities during an active shooter response	Training	Coalition Executive Team	May 22, 2019	
Juige		c. Incorporate Medical Surge into the Health Care Coalition Response Plan; to include EMS organizations, the HCC, and its members	Planning	Coalition Executive Team	May 22, 2019	
	Provide Pediatric Care Coordination	a. Distribute appropriate CHOA contact information and flyer.	Planning	Coalition Executive Team	May 22, 2019	
	during a Medical Surge Response	b. Work with CHOA to make a checklist of needed information for pediatric transfer call (based on transfer center questions).	Planning	Coalition Executive Team	May 22, 2019	

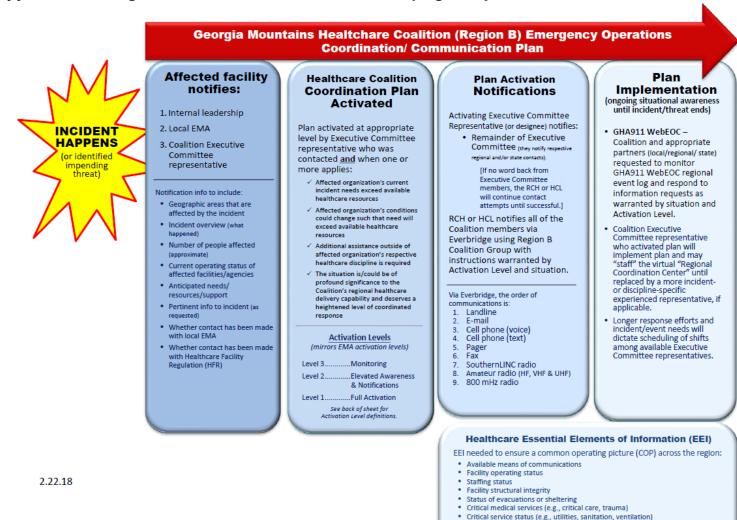
Critical healthcare delivery status (e.g., bed status, laboratory and radiology)

· Critical/Acute Resource Needs (material, medications, utility back-up supplies, etc.)

· Patient/resident transport

· Patient/resident tracking

Appendix B: Georgia Mountains Healthcare Coalition (Region B) Communications Coordination Plan



(OVER)

Georgia Mountains Healthcare Coalition Emergency Operations Coordination Plan

GEORGIA MOUNTAINS HEALTHCARE COALITION EMERGENCY OPERATIONS COORDINATION PLAN

Activation Levels

Level 3 Activation - Monitoring

Considered business as usual/normal duty activity where no incidents or threats are affecting facilities in the Region. Coalition members are practicing basic situational awareness, and any notifications or actions that need to be made will be communicated by the RCH to state-level agencies and Coalition partners as part of their everyday responsibilities.

Level 2 Activation - Elevated Awareness & Notifications

Considered a phase of heightened awareness due to a perceived or pending threat to the Region. The level of communication among Coalition members will increase in order to maintain a higher level of situational awareness. Coalition members should review plans and check resources/supplies as a response to this level of activation.

Level 2 Activation will consist of the following sequence of notifications:

- The facility/organization who learns of pending threat will alert their organization leadership and staff, in accordance with their internal protocols.
- 2. Facility will notify county EMA Director of incident/threat.
- 3. Facility will notify designated Coalition Executive Committee representative
 - Notified Coalition Executive Committee representative (or designee) will notify:
 - Other Coalition Executive Committee representatives who will notify:
 - appropriate regional-/state-level partners
 - All Coalition members, as appropriate, who will notify:
 - Internal leadership and community partners, as appropriate
- Executive Committee representative who activated Coordination Plan (or designee) may activate Regional Command Center and start a GHA911/WebEOC event log for the Region (named: Georgia Mountains Region [incident] [start date of incident; xx-xx-xx]).

Level 1 - Full Activation of Coalition

Activation will occur when a facility or multiple facilities in Region have been or will be affected by an incident/threat, and may need assistance and/or resources.

Level 1 Activation will consist of the following sequence of events:

- Facility will follow their emergency operations plan, and alert their organization leadership and staff of incident/threat.
- 2. Facility will notify their county EMA Director of incident/threat.
- 3. Facility will notify designated Coalition Executive Committee representative.
 - Notified Coalition Executive Committee representative will contact other Coalition Executive Committee representatives
 - Coalition Executive Committee representatives will notify appropriate regional/ /state-level partners
 - Notified Coalition Executive Committee representative (or designee) will notify all Coalition members
 - Coalition partners will notify their internal leadership and community partners as appropriate
- 4. Involved facility(ies) will follow their internal protocols and plans to manage the event.
- 5. Involved facilities will start a GHA911/WebEOC Event log for the event for their facility.
- Executive Committee representative who activated Coordination Plan (or designee) will activate Regional Command Center and start a GHA911/WebEOC event log for the Region (named: Georgia Mountains Region [incident] [start date of incident; xx-xx-xx]).
- Depending on the scope and severity of the event, the RCH may consider the handoff of RCH duties to another region.

Coalition Members'
Executive Committee Representative

HEALTHCARE DISCIPLINES	CONTAC T	HEALTHCARE COALITION EXECUTIVE COMMITTEE REPRESENTATIVE
Hospitals Other healthcare disciplines (not represented below)	\bigcirc	Northeast Georgia Health System Matthew Crumpton 770-219-1823 (office) 678-630-5955 (cell)
Public Health	-	DPH District Emergency Coordinator Mark Palen, District 2 Public Health 770-531-4505 (office) 678-928-1337 (cell)
Public Health	-	DPH Healthcare Liaison Donna Sue Campbell, District 2 Public Heath 770-535-6989 (office) 770-851-3089 (cell)
Local Emergency Management Agencies	-	Emergency Management Agency (EMA)
Nursing Homes	-	Nursing Home (NH) Kerry Smith, NGHS Lanier Park 770-219-8315 (office)
Emergency Medical Services	-	Emergency Medical Services (EMS) Scott Masters, NGHS EMS 770-550-6365 (office)

Communications with Regional/State Partners

COALITION EXECUTIVE LEADERSHIP REPRESENTATIVE	NOTIFIES THE FOLLOWING
Regional Coordinating Hospital (RCH)	GHA Emergency Preparedness Director (notifies other RCHs) GDPH Healthcare Preparedness Program Director
DPH District Emergency Coordinator (or designee)	District Health Director State on-call duty officer (855-377-4374)
DPH Healthcare Liaison	Others as warranted
Emergency Management Agency (EMA)	GEMA On-Call Field Coordinator GEMA
Nursing Home (NH) Council Coordinator	Georgia Mountains Region Nursing Home Administrators Georgia Health Care Association (GHCA) Neighboring Nursing Home Council Coordinator
Federally Qualified Community Health Center (Other Healthcare Provider Representative)	Others as warranted
Emergency Medical Services (EMS)	Regional EMS Program Director, State Deputy Director of EMS, Director of EMS, EMS Directors in Georgia Mountains Region, EMS agencies in affected region and/or neighboring regions

NOTE: Media will only be notified by Incident Commander of affected facility/scene.

Georgia Mountains Healthcare Coalition Emergency Operations Coordination Plan

Appendix C: Georgia Mountains Healthcare Coalition (Region B) Executive Committee Contacts

RCH - Matthew Crumpton Emergency Preparedness Manager Coalition Coordinator Northeast Georgia Health System

(o): 770/219-1823 (c): 678/630-5955

matthew.crumpton@nghs.com

EMA - Casey Ramsey
Hall County EMA
Captain of Special Operations
Department Safety Officer
Hall County Fire Services
(o) 770-503-3215
(c) 770-519-2418
cramsey@hallcounty.org

LTC - Kerry Smith
Executive Director of Long Term Care
New Horizons Lanier Park
(o) 770-219-8315
(c) 678-773-5229
kerry.smith@nghs.com

DPH HCL - Donna Sue Campbell
Emergency Preparedness Healthcare Liaison
Coalition Facilitator
District 2 Public Health
(o) 770-535-6989
(c) 770-851-3089
DonnaSue.Campbell@dph.ga.gov

DPH EC – Mark Palen District 2 Public Health (o) 770-531-4505 (c) 678-928-1337 Mark.Palen@dph.ga.gov

EMA – Diedra Moore Banks County EMA / E-911 (o) 706-677-3163 (c) 706-658-5120 dmoore@co.banks.ga.us

LTC-Pamela Desrochers
Manager of Long Term Care
New Horizons Limestone
(o) 770-219-8683
(c) 706-769-0670
Pamela.Desrochers@nghs.com

Hospital - Cecil Solaguren Environment of Care Director Union General Hospital (706) 994-3619 cecilsolaguren@uniongeneral.org

Appendix D: Georgia Mountains Healthcare Coalition (Region B) Facility Bed Counts

REGION B	FACILITY TYPE	# LICENSED BEDS	CURRENT CENSUS
BANKS	·		
	TOTAL		
BARROW (Region E)		F	
Barrow Regional Medical Center	Hospital	56	
Winder Health Care & Rehab Center	Nursing Home	163	
	TOTAL		
DAWSON		F	
	TOTAL		
HABERSHAM		-	
Habersham County Medical Center	Hospital	53	
Habersham Home	Nursing Home	84	
The Oaks Scenic View Skilled Nursing	Nursing Home	148	
	TOTAL		
HALL			
Willowbrooke Court At Lanier Village Estates	Nursing Home	64	
New Horizons Limestone	Nursing Home	134	
The Oaks- Limestone	Nursing Home	104	
Willowwood Nursing Center	Nursing Home	100	
The Bell Minor Home	Nursing Home	104	
Northeast Georgia Medical Center	Hospital	557	
NGHS Braselton	Hospital	100	
New Horizons Lanier Park	Nursing Home	118	
	TOTAL	-	
LUMPKIN		· ·	
Chestatee Regional Hospital	Hospital	4 9	
Chelsey Park Health and Rehabilitation	Nursing Home	60	
Gold City Health and Rehab	Nursing Home	102	
	TOTAL	-	
RABUN			
Mountain Lakes Medical Center	Hospital	25	
Mountain View Health Care	Nursing Home	113	
The transfer of the transfer o	TOTAL		
STEPHENS			
Stephens County Hospital	Hospital	96	
Pruitt Health - Toccoa	Nursing Home	181	
Traite Treater Toccou	TOTAL	101	
TOWNS			
Chatuge Regional Hospital	Hospital	24	
Chatuge Regional Nursing Home	Nursing Home	112	
chatage hegional reasons frome	TOTAL	112	
UNION	IVIAL		
Union General Hospital	Hospital	45	
Union County Nursing Home	Nursing Home	150	
Official Country Mursing Hoffic	TOTAL	130	
NA/LIITE	IUIAL		
WHITE	Ni. metr. = 11 =	00	
Friendship Health and Rehab	Nursing Home	89	
Gateway Health and Rehab	Nursing Home	60	
	TOTAL		

Appendix E: GHA911 WebEOC Event Log – TTX [Special Event] - 2019 Georgia Mountains Healthcare Coalition Tabletop - March 14

[Special Event] - 2019 Georgia Mountains Healtho	Entered By	Organization	Entry Date
Comment	Littered by	Organization	Littly Date
This is only an exercise - Coalition Coordinator is monitor the situation of possible active shooter at a medical facility.	Matthew Crumpton	Northeast Georgia Medical Center-RCH	Mar 14, 2019 at 9:36 AM
Matthew Crumpton			
678-630-5955			
This is only an exercise.			
This is only an exercise.	Matthew	Northeast Georgia	Mar 14, 2019
Scenario Update: March 14, 2019; 0900 Hours It is a pleasant spring day just before lunchtime with temperatures approaching 76F. A landscaping crew notices a red Ford Mustang approach the medical office building at an accelerated speed and park illegally in front of the building. A white male exits the vehicle dressed in blue jeans and a red flannel shirt. Upon exiting the car, he reaches into the backseat and pulls out a black backpack and is soon observed entering the medical office building through the front door. A front seat passenger appears to move over to the driver's seat after the backpack is retrieved.	Crumpton	Medical Center-RCH	at 9:39 AM
Shortly after the male enters the building, the landscaping crew hears loud screams and "popping noises" similar to gun shots coming from inside the medical office building. Several visitors and patients are then seen fleeing the building. After several minutes, the gunman exits the building and gets back in the red Ford Mustang, which leaves the scene at a high rate of speed.			
Matthew Crumpton			
678-630-5955			
This is only an exercise.			
This is only an exercise.	Matthew	Northeast Georgia	Mar 14, 2019
Healthcare Essential Elements of Information (EEI)	Crumpton	Medical Center-RCH	at 9:50 AM
EEI needed to ensure a common operating picture (COP) across the region:			
? Available means of communications			
? Facility operating status			
? Staffing status			
? Facility structural integrity			

Comment	Entered By	Organization	Entry Date
? Status of evacuations or sheltering			
? Critical medical services (e.g., critical care, trauma)			
? Critical service status (e.g., utilities, sanitation, ventilation)			
? Critical healthcare delivery status (e.g., bed status, laboratory and radiology)			
? Patient/resident transport			
? Patient/resident tracking			
? Critical/Acute Resource Needs (material, medications, utility back- up supplies, etc.)			
Matthew Crumpton			
678-630-5955			
This is only an exercise.			
Exercise Exercise	Donna Sue	Public Health District	Mar 14, 2019
	Campbell	2 (Gainesville)	at 9:52 AM
District 2 PH and GA Mtns Healthcare Coalition are participating in Active Shooter TTX.			
Monitoring WebEOC boards, communications			
Donna Sue Campbell, HCF			
cell 770-535-6989			
Exercise	Kevin Chamlee	Ethica Health and Retirement Communities	Mar 14, 2019 at 9:57 AM
Ethica Health is monitoring situations for all affected Ethica managed Nursing Facilities near the incident location.			
Exercise: The Gables is monitoring the active shooter situation.	Joyce Bryant	The Gables at Cobb	Mar 14, 2019
Facility is currently on lockdown and sheltering in place. All residents, staff and visitors are accounted for.		Village	at 10:00 AM
Bed Count UCNH 125	Cecil Solaguren	Union General	Mar 14, 2019
CRNH 105 UGH 34			at 10:03 AM
Chatuge 10			
The Gables bed count has been updated.	Joyce Bryant	The Gables at Cobb Village	Mar 14, 2019 at 10:05 AM
The Gables has 45 occupied beds and 3 available beds, male or	Joyce Bryant	The Gables at Cobb	Mar 14, 2019
female.		Village	at 10:06 AM

	E 1 10	0 : "	F 1
Comment	Entered By	Organization	Entry Date
Exercise Exercise	Billie	Brown Health and Rehabilitation	Mar 14, 2019
Brown Health and Rehabilitation is locked down and sheltering in	Hollingsworth	Renabilitation	at 10:06 AM
place. Local law enforcement has been notified, EMA notified and			
Healthcare Coalition Coordinator have been contacted. All non			
wounded associates, patients and visitors have been moved to a			
secure area at this time.			
Actiive shooter live event at UGH Security and Community Partners	Cecil Solaguren	Union General	Mar 14, 2019
Responding. Coalition has been notified.			at 10:07 AM
Stephens County is monitoring situation. SCH has updated bed count	Faye Taylor	Stephens County	Mar 14, 2019
in GHA911. Pruitt health is also standing by.		Hospital	at 10:09 AM
WillowBrooke Court continues in lockdown. Updated bed Count in	Tamey Stith	Willowbrooke Court	Mar 14, 2019
GHA911. Tamey Stith 404-275-0072		at Lanier Village	at 10:10 AM
		Estates	
Exercise Exercise	Kevin Chamlee	Ethica Health and	Mar 14, 2019
		Retirement	at 10:12 AM
		Communities	
Posting for Terry Head, Maintenance Director at Chelsey Park Health			
and Rehabilitation, Dahlonega, GA			
Chelsey Park Health and Rehabilitation is locked down and sheltering			
in place. Local law enforcement has been notified, EMA notified and			
Healthcare Coalition Coordinator have been contacted. All non			
wounded associates, patients and visitors have been moved to a			
secure area at this time.			
Exercise Exercise	Billie	Brown Health and	Mar 14, 2019
	Hollingsworth	Rehabilitation	at 10:12 AM
Brown Health and Rehabilitation has updated bed availability.			
97 current patients in house			
1 Female bed available			
1 Female bed available			
1 Male bed available			
1 Ividic bed available			
and 1 Non Gender Private Room available			
This is only an Exercise.	Matthew	Northeast Georgia	Mar 14, 2019
	Crumpton	Medical Center-RCH	at 10:14 AM
Scenario Update: March 14, 2019; 0908 Hours Local law			
enforcement officials arrive on scene within five minutes of the first			
911 call from an employee cell phone inside the building. Police			
quickly enter the medical office building in and confirm that the			
popping noises were indeed gun shots as they have encountered			
several wounded or dead patients and staff members on the floor.			
They begin a systematic search of the building for the intruder and			
call for the county bomb squad to respond on location as they have			
found a black backpack near the elevator on the 3rd floor that appears suspicious and could contain an improvised explosive device.			
The landscaping crew remains outside at the Incident Command Post			
to give the police officers more information about the intruder.			
as and and points of the interest morning about the intrader.			
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Comment	Entered By	Organization	Entry Date
This is only an Exercise.			
Matthew Crumpton			
678-630-5955			
GHCA is aware of the event and monitoring (exercise)	Kevin Johnson	Georgia Health Care	Mar 14, 2019
		Association	at 10:18 AM
Hall County ARES is monitoring the situation.	Ron Harris	Amateur Radio	Mar 14, 2019
		Emergency Service (ARES)	at 10:20 AM
Exercise	Terry Head	Chelsey Park Health	Mar 14, 2019
		and Rehab	at 10:22 AM
Chelsey Park has updated bed availability. 55 staff onsite, no injuries,			
etc. at this time.			
All means of communication available			
Sheltering in place			
Exercise Exercise	Billie	Brown Health and	Mar 14, 2019
Brown Health and Rehabilitation currently has 53 associates in the	Hollingsworth	Rehabilitation	at 10:22 AM
facility.			
Update on numbers of staff UGH 80	Cecil Solaguren	Union General	Mar 14, 2019
			at 10:22 AM
UGNH 40, Chatuge Hospital 35, CRNH 45			
This is an exercise. All staff members accounted for and safe. No	Rita	PruittHealth Home	Mar 14, 2019
injuries. Rita Southworth 678-646-9149 Stephens County hospital reports modes of communication as	Southworth Faye Taylor	Health - Gainesville Stephens County	at 10:24 AM Mar 14, 2019
landlines, cells, WebEOC,, plain language overhead page, mobile	raye rayioi	Hospital	at 10:25 AM
radios.			0.0 10.120 7
Currently on lockdown status.			
Chaffing a hard a warter lavelle			
Staffing at adequate levels.			
Structural integrity intact.			
of access in the second of the			
No evacuations.			
All critical services in operation.			
Security in place monitoring all patients/visitors requesting entry			
into building.			
<u> </u>			
WillowBrooke Court updated bed status:	Tamey Stith	Willowbrooke Court	Mar 14, 2019
The state of the s	ramey stitti	at Lanier Village	at 10:26 AM
64 beds		Estates	
For Official Use Only			Dago I 26

Comment	Entered By	Organization	Entry Date
Current Census: 59			
2 male beds open			
3 non-specific beds open			
Security and local LE have responded to location and are in process	Cecil Solaguren	Union General	Mar 14, 2019
of establishing joint incident command. This is only an Exercise.	Matthew	Northeast Georgia	at 10:33 AM Mar 14, 2019
This is only all Exercise.	Crumpton	Medical Center-RCH	at 10:33 AM
Scenario Update: March 14, 2019; 920 Hours			
Local news agencies pick up the chatter from law enforcement			
agencies on police scanners and begin to broadcast news of the			
incident "LIVE". Initial reports indicate that an NGPG Administrator			
and a physician have been shot and killed. Emergency Medical Service ambulances have been dispatched and begin to arrive on			
location at the incident staging area. Several staff members run from			
the rear of the medical office building shouting that the man is no			
longer in the building and has shot and killed several staff members. The staff members along with the landscaping crew are providing			
information about the shooter to law enforcement personnel. Staff			
members state the shooter was the husband of a patient that			
recently died due to complications of colon cancer.			
Meanwhile, first responder teams enter the medical office building,			
and begin evacuation of the building and triaging victims. Law			
enforcement begins a multi county manhunt for the red Ford			
Mustang.			
Matthew Crumpton			
679 620 5055			
678-630-5955			
This is only an exercise.			
The Gables is fully staffed with 15 staff members onsite at this time	Joyce Bryant	The Gables at Cobb	Mar 14, 2019
and through Everbridge notification support staff is on standby if needed.		Village	at 10:35 AM
The Gables has no critical resource at this time but will continue to	Joyce Bryant	The Gables at Cobb	Mar 14, 2019
monitor and update as needed.		Village	at 10:37 AM
No critical resource needs at this time.	Joyce Bryant	The Gables at Cobb	Mar 14, 2019
Exercise Exercise	Billie	Village Brown Health and	at 10:38 AM Mar 14, 2019
	Hollingsworth	Rehabilitation	at 10:39 AM
Brown Health and Rehabilitation currently has the following			
communication devicesLandline, cell phone, Everbridge, internal radios, and Southern Linc Radio.			
Exercise Exercise	Terry Head	Chelsey Park Health	Mar 14, 2019
		and Rehab	at 10:44 AM
		<u> </u>	

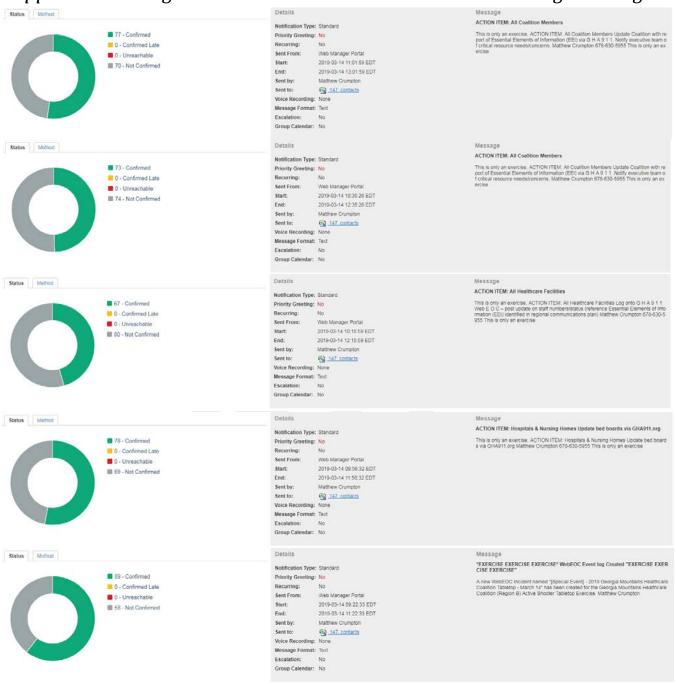
Comment	Entered By	Organization	Entry Date
Chelsey Park Health and Rehabilitation currently has the following			
communication devicesLandline, cell phone, Everbridge, internal			
radios, and Southern Linc Radio.			
WillowBrooke Court has several staff experiencing anxiety, shock	Tamey Stith	Willowbrooke Court	Mar 14, 2019
over active shooter event. Need mental health resources to meet		at Lanier Village	at 10:45 AM
with staff, residents and visitors		Estates	
UGH Requires 5 RNs	Cecil Solaguren	Union General	Mar 14, 2019
CDANLE : ODAL A CNA O ENACH :			at 10:45 AM
CRNH Requires 3RNs , 4 CNAs ,2 EMS Units			
Chatuge Hospital 5 RNs 1 MD			
Chatage Hospital 5 MAS I Mid			
Exercise	Kevin Chamlee	Ethica Health and	Mar 14, 2019
Exercise	Neviii Gilannee	Retirement	at 10:47 AM
		Communities	
Ethica Health has been in communication with affected Ethica			
managed facilities. No injuries at this time. Facilities have requested			
mental health resources due to initial shock of the active shooter			
event.			
This is only an exercise.	Matthew	Northeast Georgia	Mar 14, 2019
	Crumpton	Medical Center-RCH	at 11:00 AM
Scenario Update: March 14, 2019; 1132 Hours			
Lefferson Delice Department legate the red Ford Mustang on New			
Jefferson Police Department locate the red Ford Mustang on New Salem Church Rd and attempt to pull the suspect over. The suspect			
pulls over in the parking lot of the New Salem Baptist Church. As law			
enforcement attempts to apprehend the suspect, the individual			
shoots the passenger in the head and turns the gun on himself			
committing suicide.			
Matthew Crumpton			
678-630-5955			
This is only an Eventine			
This is only an Exercise. Exercise	Kevin Chamlee	Ethica Health and	Mar 14 2010
Exercise	Kevin Chamiee	Retirement	Mar 14, 2019 at 11:06 AM
		Communities	at 11.00 Aivi
		Communicies	
Ethica Health corporate team members are en-route to affected			
managed nursing centers to further evaluate situations, concerns			
and to determine if any external resources are needed. All media			
contact is directed to corporate Public Information Officer.			
Mental Health Resources arrived at WBC along with facility Chaplins	Tamey Stith	Willowbrooke Court	Mar 14, 2019
who are currently ministering to staff, residents and visitors.		at Lanier Village	at 11:07 AM
		Estates	
The Gables is working with corporate office to communicate with	Joyce Bryant	The Gables at Cobb	Mar 14, 2019
media about the status of the event and resident conditions.		Village	at 11:09 AM
Support staff has been called in to help with residents and relieve			
staff that has been a part of the event.			

Comment	Entered By	Organization	Entry Date
Local chaptering have been called in the halfs with residents and			
Local chaplains have been called in to help with residents and employees. EAP has also been contacted for assistance.			
Exercise Exercise Exercise	Billie	Brown Health and	Mar 14, 2019
LARICISE LARICISE	Hollingsworth	Rehabilitation	at 11:10 AM
Brown Health and Rehabilitation.has 23 Casualties and 10 Fatalities.	Tromingsworth	nendomation	ut 11.10 / ((v)
Currently in need of first aid supplies for treatment, Mental Health			
and Emotional support.			
Exercise Exercise	Terry Head	Chelsey Park Health	Mar 14, 2019
		and Rehab	at 11:11 AM
Chelsey Park Health and Rehabilitation.has 23 Casualties and 10			
Fatalities.			
Currently in need of first aid supplies for treatment, Mental Health			
and Emotional support.			
Exercise Exercise	Billie	Brown Health and	Mar 14, 2019
	Hollingsworth	Rehabilitation	at 11:14 AM
Broad email has been sent out to all Region E Nursing Homes to give			
status at Brown Health and Rehabilitation and Chelsey Park Health			
and Rehabilitation and their needs.			
Needed resources for both Brown Health and Rehabilitation and	Kevin Chamlee	Ethica Health and	Mar 14, 2019
Chelsey Park Heal H and Rehabilitation are en-route. External help		Retirement	at 11:15 AM
for nursing treatments, medical supplies and mental health resources		Communities	
from other Ethica managed facilities will be onsite soon.			
Several Patients and Staff members have been killed	Cecil Solaguren	Union General	Mar 14, 2019
Resources on scene at multiple facilities Buildings have been			at 11:26 AM
cleared of any active shooter presence. Media and visitor control is in			
place. PIO will make any communications that have been authorized			
by incident command. Adequate LE and medical resources are in			
place			
Exercise, Exercise	Faye Taylor	Stephens County	Mar 14, 2019
		Hospital	at 11:32 AM
23 casualties, 10 fatalities			
Additional staff called in, additional physicians called in, 3 helicopter			
services in route. hospital chaplains notified and in route to assist			
social services with managing families. Off campus family site setup			
at local church, statement to be released to media at 1pm at local library. Mutual aid in place with EMS. No supplies needed at this			
time.			
Exercise Exercise	Billie	Brown Health and	Mar 14, 2019
LACIOSC LACIOSC	Hollingsworth	Rehabilitation	at 11:33 AM
Ethica Health Field consultants, Mental Health and Chaplains have			21 22:33 / 1111
arrived for support. Region E Healthcare Coalition has dispatched			
medical supplies to the facility.			
Physician office has been secured by local law enforcement. Toccoa	Faye Taylor	Stephens County	Mar 14, 2019
Falls College notified and sending counselors to work with staff		Hospital	at 11:34 AM
involved.			
Exercise Exercise	Terry Head	Chelsey Park Health	Mar 14, 2019
For Official Use Only		and Rehab	at 11:36 AM

Comment	Entered By	Organization	Entry Date
Ethica Health Field consultants, Mental Health resources and			
Chaplains have arrived for support. Also, local sister Facilities staff			
members are onsite to help with identified needed areas.			



Appendix F: Georgia Mountain Healthcare Coalition EverBridge Messages



Appendix G: Acronyms

Acronym	Meaning
AAR	After Action Report
ARES	Amateur Radio Emergency Service
СНОА	Children's Healthcare of Atlanta
EEI	Essential Elements of Information
EMA	Emergency Management Agency
EMS	Emergency Medical Services
EOC	Emergency Operations Center
EOP	Emergency Operations Plan
EPD	Environmental Protection Division
EPT	Exercise Planning Team
ESAR-VHP	Emergency System for Advance Registration of Volunteer Health Professionals
ESF	Emergency Support Function
FSE	Full Scale Exercise
GAPHC	Georgia Association for Primary Health Care
GDBHDD	Georgia Department of Behavioral Health and Developmental Disabilities
GDPH	Georgia Department of Public Health
GEMA	Georgia Emergency Management Agency
GHA	Georgia Hospital Association
GHCA	Georgia Health Care Association
НСС	Healthcare Coalition Coordinator
HCF	Healthcare Coalition Facilitator
HICS	Hospital Incident Command System
HSEEP	Homeland Security Exercise Evaluation Program
HVA	Hazard Vulnerability Assessment
HVAC	Heating, Ventilation, and Air Conditioning
ICS	Incident Command System
ISC	Internal Surge Capacity
IT	Information Technology
JIC	Joint Information Center
LE	Law Enforcement
LEPC	Local Emergency Planning Committee

MOU	Memorandum of Understanding
MSEL	Master Scenario Event List
NIMS	National Incident Management System
PAPR	Powered Air Purifying Respirator
PIO	Public Information Officer
PPE	Personal Protective Equipment
RCH	Regional Coordinating Hospital
SERVGA	State Emergency Registry of Volunteers of Georgia
SitMan	Situation Manual
SME	Subject Matter Expert
TTX	Tabletop Exercise
UGA IDM	University of Georgia Institute for Disaster Management



Appendix H: GHA911WebEOC Quick Guide

Accessing WebEOC and Posting to Event Logs

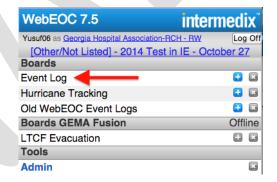
You will need a GHA911 account to access WebEOC. If you do not have an account, please go to the GHA911 homepage and click the "Register Now" button on the right-hand side of the screen.

- Use your username and password to log into GHA911.
- Locate box labeled "Login to WebEOC Incident Discussion" (directly below the "Organizational Information" and "Bed Count Status" buttons.)
- Use the drop-down menu to select the incident you'd like to log into.
- Click the green "WebEOC Login" button. (Note: It is important to make sure you log into the correct incident.)

After clicking the WebEOC login button, the control panel will appear in a new popup window.

• Click "Event Log" to enter the incident discussion.

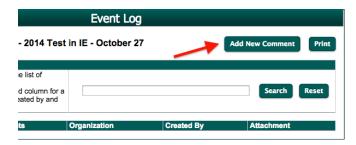




After clicking the Event Log link in the previous step, the event log will open in another popup window.

To Post a New Comment:

- Click the "Add New Comment" button and the new comment data entry form will appear.
- Enter your comments and attach any files you'd like to attach.
- Click the "Save Comment" button.





Your comment will then appear in the event log. Comments from other users will show up in real time as they are posted. **To**

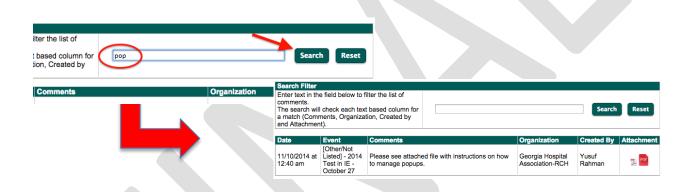
download an attached file. Just click on the file icon in the attachment column.

To Find a Comment:

As the incident goes on, the event log will get longer. If you need to find information regarding a specific topic, you can enter part of the comment, facility name, or the user in the search field, then click the "Search" button. This will filter the comments down to only

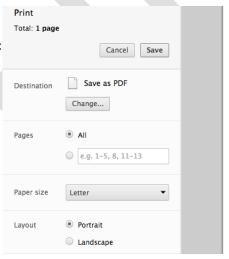
Date	Event	Comments	Organization	Created By	Attachmen
11/10/2014 at 12:42 am	[Other/Not Listed] - 2014 Test in IE - October 27	Thanks!	Eastern Test Hospital (TEST)	Yusuf Demo	
11/10/2014 at 12:42 am	[Other/Not Listed] - 2014 Test in IE - October 27	Got it. Thanks!	Eastern Test Hospital (TEST)	Yusuf Demo	
11/10/2014 at 12:40 am	[Other/Not Listed] - 2014 Test in IE - October 27	Please see attached file with instructions on how to manage popups.	Georgia Hospital Association-RCH	Yusuf Rahm	□ PDF
11/10/2014 at 12:38 am	[Other/Not Listed] - 2014 Test in IE - October 27	Thanks for posting an update Eastern Test Hospital.	Georgia Hospital Association-RCH	Yusuf Rahman	
11/10/2014 at 12:32 am	[Other/Not Listed] - 2014 Test in IE -	Eastern Test Hospital has adequate staffing and supplies at this time. Bed counts updated on status boards.	Eastern Test Hospital (TEST)	Yusuf Demo	

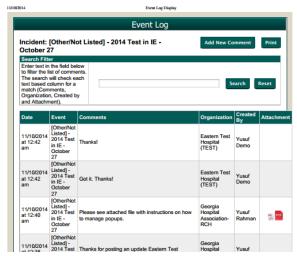
those that meet the search criteria.



To Print an Event Log:

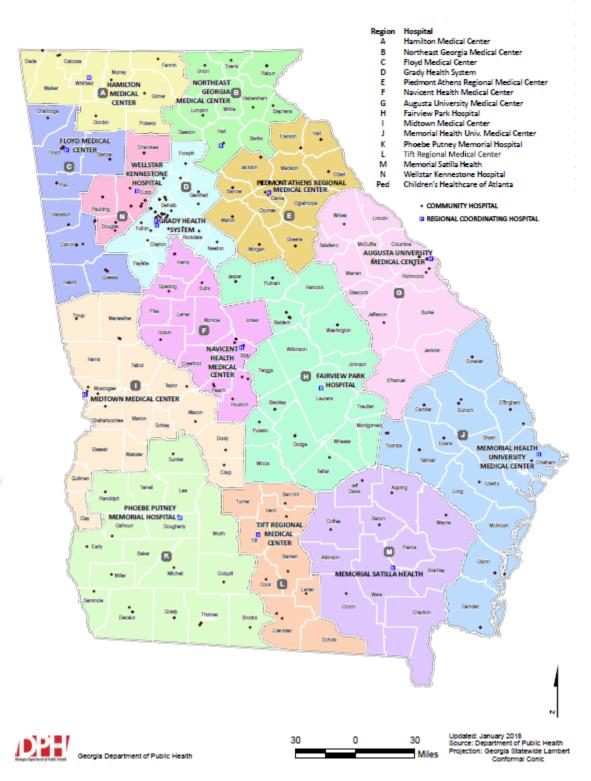
You may also print an event log so that you can have a hard copy to take with you. Just clcik the print button to get a standard print dialog box.



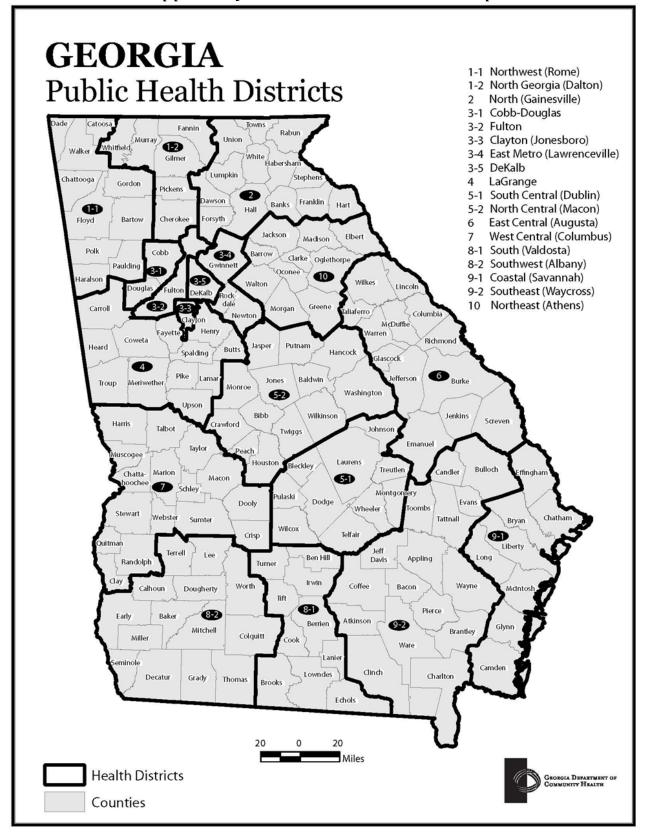


Appendix I: Regional Coordinating Hospital Area Map

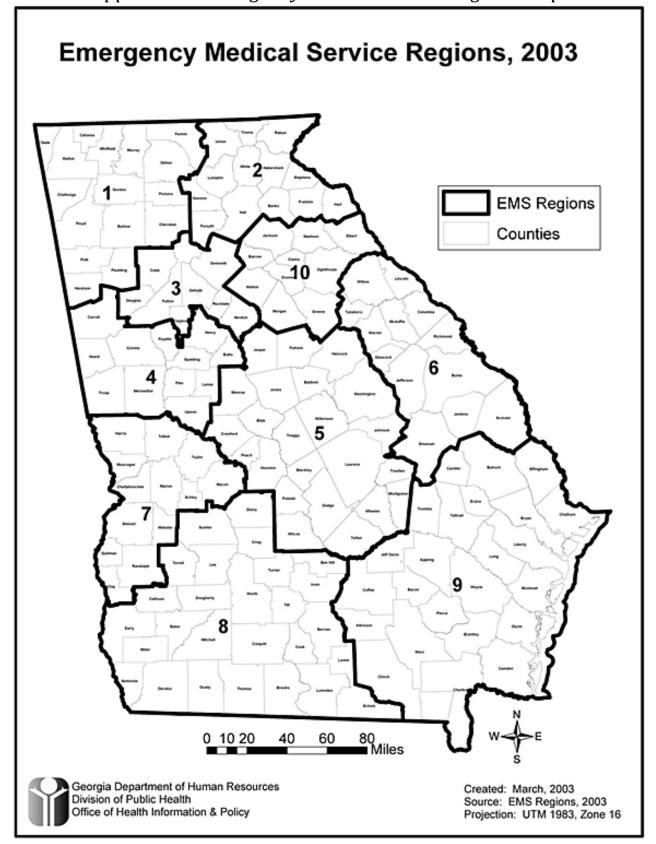
Healthcare Coalitions



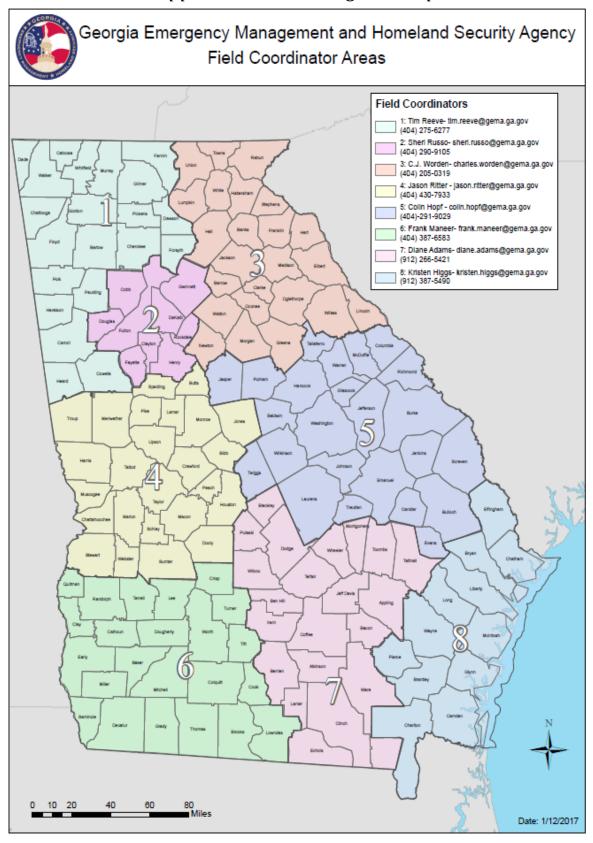
Appendix J: Public Health Districts Map



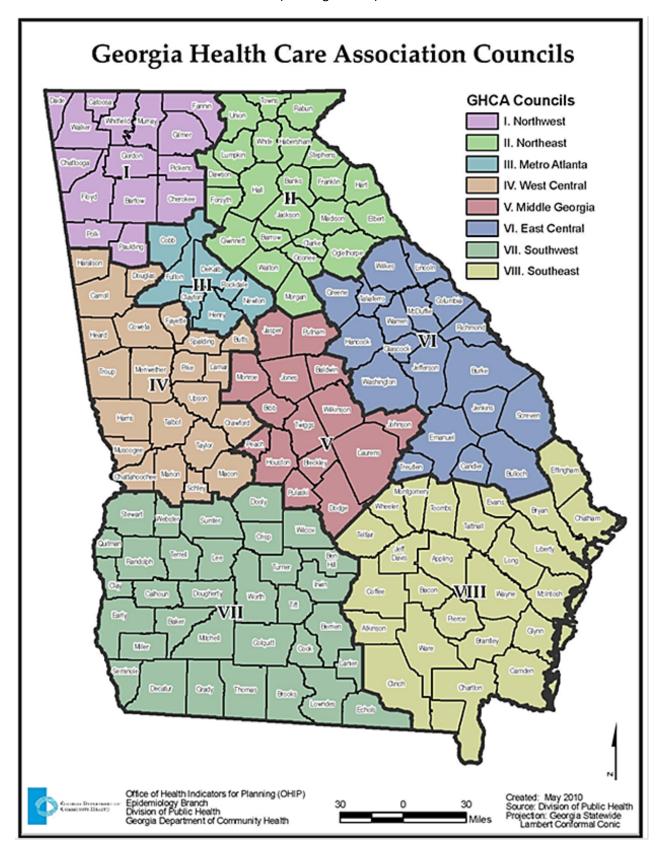
Appendix K: Emergency Medical Service Regions Map



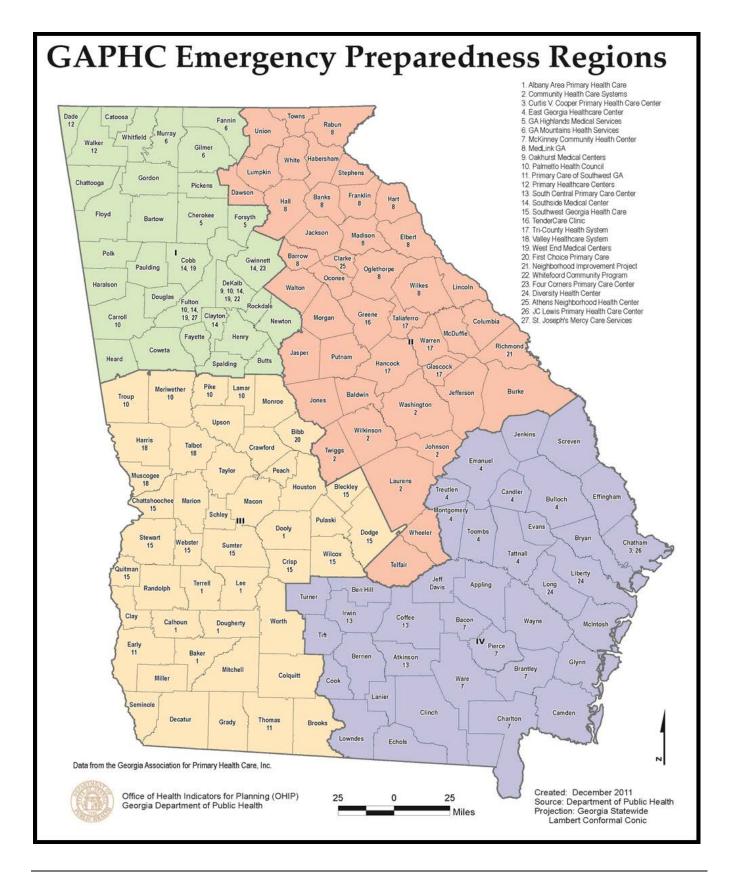
Appendix L: GEMA Regions Map



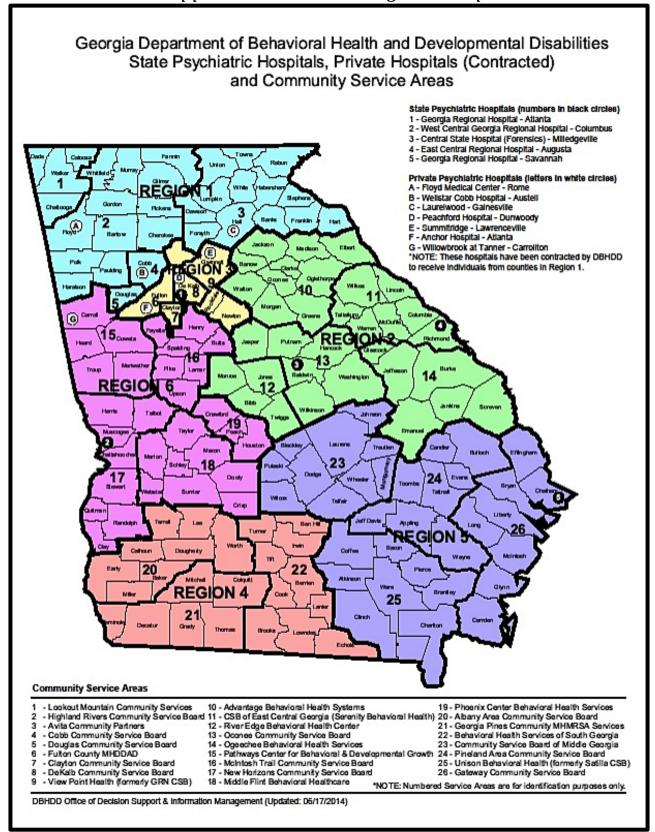
Appendix M: Georgia Health Care Association Council Map (Nursing Homes)



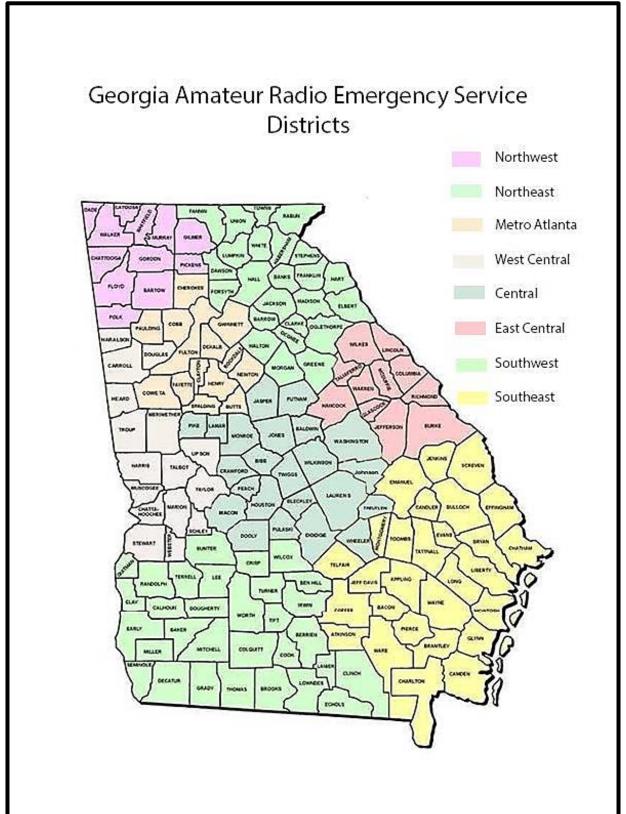
Appendix N: GAPHC Community Health Centers Map



Appendix O: GDBHDD Regional Map



Appendix P: Georgia ARES Districts



Appendix Q: Government Emergency Telecommunications Service (GETS) Fact Sheet



Office of Emergency Communications

May 2013

Government Emergency Telecommunications Service

The Government Emergency Telecommunications Service (GETS) is a capability offered by the Department of Homeland Security's Office of Emergency Communications (OEC). Developed in response to a growing need for priority communications for select users, GETS enhances call completion for select wireline (landline) users when abnormal call volumes exist. Assigned on a case-by-case basis, GETS access is extended to only those Federal, State, local, tribal and select private sector users who support national security and emergency preparedness (NS/EP) activities. During times of network congestion, GETS users are granted priority communications by dialing the universal access number (710-627-GETS) using common telephone equipment and entering a personal identification number. Once authenticated, GETS calls will receive priority over regular calls; however, GETS calls do not preempt calls in progress or deny the general public's use of the telephone network. GETS is in a constant state of readiness.

WHO USES GETS?

Access to the GETS program is restricted to those users with NS/EP roles, traditionally those with command and control functions critical to management of, and response to, national security and emergency situations, particularly during the first 24 to 72 hours following an event. GETS supports critical Continuity of Government and Continuity of Operations efforts; Federal, State, local, territorial, and tribal emergency preparedness and response communications; non-military executive branch communications systems; critical infrastructure protection networks; and non-military communications networks.

During Hurricanes Irene, Isaac, and Sandy, over 99 percent of calls made via GETS were successfully completed.

WHY SHOULD YOU ENROLL?

GETS users rely on landline communications services to perform critical functions, including those areas related to leadership, safety, maintenance of law and order, finance, and public health. Acts of terrorism, including cyber attacks, natural disasters, power outages, cable cuts, and software problems can cripple the telephone services of an entire region. Congestion alone can prevent access to circuits. The NS/EP community needs the ability to increase the likeliness their calls will go through in times of crisis. GETS users have historically experienced call completion rates at or above 90 percent during actual emergencies.

WHAT ELSE SHOULD YOU KNOW?

- · GETS is available nationwide and can also be accessed from international locations.
- GETS can be accessed through the Defense Switched Network, FTS2001/Networx, the Diplomatic Telecommunications Service, and the Federal Emergency Management Agency Switched Network.
- GETS calls may be placed from cellular and satellite phones.
- GETS calls over cellular networks are most effective when used in conjunction with the Wireless Priority Service, a similar service managed by OEC that offers authorized users priority treatment on the wireless networks.
- GETS access is restricted to individuals with NS/EP responsibilities. Traditionally, users must meet those
 responsibilities outlined in Executive Order 13618, Assignment of National Security and Emergency
 Preparedness Communications Functions.
- · There is no charge to enroll in GETS or to make calls to the familiarization line.

FOR ADDITIONAL INFORMATION

Please contact the DHS Priority Telecommunications Service Center at 866-627-2255 or 703-676- 2255, via email at GETS@HQ.DHS.GOV, or visit www.dhs.gov/gets

Version 5/13

Appendix R: Wireless Priority Service (WPS) Fact Sheet



Office of Emergency Communications

May 2015

WIRELESS PRIORITY SERVICE

Congestion on wireless (cellular) networks caused by natural and/or man-made disasters can affect emergency response capabilities by limiting call completion for public safety and national security and emergency preparedness (NS/EP) personnel. The Wireless Priority Service (WPS), offered by the Department of Homeland Security Office of Emergency Communications (OEC), was developed to address the growing need for priority communications for select cellular users. WPS enhances call completion for select users when excessive call volumes exist. OEC offers WPS access to eligible federal, state, local, tribal, and select private sector users supporting NS/EP activities. During times of network congestion, WPS users receive priority calling to the desired destination number from an authorized user's cell phone.

WHO IS ELIGIBLE FOR WPS?

Enrollment in the WPS program is reserved for select users who support public safety and NS/EP activities, traditionally those with command and control functions that are critical to management of, and response to, national security and emergency situations, particularly during the first 24 to 72 hours following an incident. WPS supports critical Continuity of Government and Continuity of Operations; federal, state, local,

In the wake of the April 2013 Boston Marathon, response and recovery calls made through WPS received a 93 percent call completion rate.

territorial, and tribal (FSLTT) emergency preparedness and response communications; non-military executive branch communications networks and systems; and critical infrastructure protection networks.

WHY SHOULD YOU ENROLL?

WPS users rely on cellular communications to perform critical functions, including those areas related to leadership, safety, maintenance of law and order, finance, and public health. Acts of terrorism, such as cyberattacks, natural disasters, power outages, and software problems, can cripple the telephone services of an entire region.

Congestion alone can prevent access to circuits. WPS can be extremely beneficial during an emergency in which the public telecommunications networks are degraded by congestion or damage to the infrastructure. NS/EP personnel enrolled in WPS have a greater chance of call completion on an operational cellular network than those without the service.

WHAT ELSE SHOULD YOU KNOW?

- WPS is complementary to, and can be most effective, when used in conjunction with the Government Emergency Telecommunications Service (GFTS). GETS is the landline priority service offered and managed by OEC and has the same eligibility requirements as WPS.
- WPS is available in all nationwide networks and some regional networks including: AT&T, C Spire, Cellcom, GCI, SouthernLINC, Sprint, T-Mobile, U.S. Cellular and Verizon Wireless.
- WPS is an add-on feature to existing commercial wireless services; no special phones are required.

- · Users can apply for WPS through OEC.
- WPS users are responsible for any service provider charges for activation, service, and per-minute usage associated with WPS. Wireless carriers can charge a one-time activation fee of up to \$10.00, a monthly access charge of no more than \$4.50, and a maximum of \$0.75 per minute for WPS calls.
- · OEC is responsible for WPS infrastructure enhancements and the day-to-day management of WPS.
- · WPS operates in a constant state of readiness.
- To invoke WPS, enter * 272 and destination number on a WPS-enabled phone.
- · OEC recommends including WPS in operational plans and communications exercising.

FOR ADDITIONAL INFORMATION

Please contact the DHS Priority Telecommunications Service Center at 866-627-2255 or 703-676-2255, via email at

WPS@DHS.GOV, or visit WWW.DHS.GOV/WPS.

Version 5/15

Appendix S: Role of Specialty Coordinating Hospital

Children's Healthcare of Atlanta (CHOA) has contracted with the Georgia Hospital Association (GHA) to act as the Specialty Coordinating Hospital (SCH) for pediatrics with the state of Georgia. In the event of a disaster, CHOA will assist facilities and regions with pediatric patient needs. **CHOA Transfer Center can facilitate the acceptance of pediatric patients.**

If the scope of the event exceeds the resources of CHOA, we will work with those facilities within Georgia that have pediatric inpatient capabilities for patient placement. CHOA's is also a signatory to the Southeastern Regional Pediatric Disaster Network and is in contact with numerous pediatric hospitals across the Southeast (Tennessee, North Carolina, South Carolina, Florida, Kentucky, Alabama, and Mississippi). This organization has a memorandum of understanding to support each other in the event of a disaster involving pediatrics.



For assistance with pediatric patient placement, please call the Children's Healthcare of Atlanta Transfer Center

404-785-7778 or 1-888-785-7778

Additional responsibilities of the Specialty Coordinating Hospital (SCH)

Children's Healthcare of Atlanta will:

- Provide technical assistance for hospitals in the development of plans and exercises as well as during real world emergencies upon request.
- Assistance may include providing additional staffing, sharing expertise and distribution of specialty care supplies and equipment through mutual aid during a disaster or evacuation.
- Participate in regional drills to offer pediatric expertise and to encourage pediatric patients to be included in drill
 casualties to better prepare for world events

If you need more information on Children's role as the SCH for pediatrics, please contact Karen Hill at 404-785-6503.

Children's Healthcare of Atlanta Overview

- CHOA is comprised of three (3) separate hospitals: Egleston, Scottish Rite and Hughes Spalding.
 - o **Egleston** is the only designated Level 1 Pediatric Trauma Center in the state.
 - o **Scottish Rite** is the only designated Level 2 Pediatric Trauma Center in the state.
 - Hughes Spaulding has Pediatric Emergency Department and pediatric general care capabilities.
- Between the 3 campuses, CHOA has over 500 licensed pediatric beds!
- Currently this includes 58 pediatric intensive care beds combined in 2 PICU's, Neonatal Intensive Care Units (NICU) a Cardiac Intensive Care Unit (CICU) and Technology Dependent Unit (TDICU). Egleston has ECMO capabilities as well.
- CHOA has all pediatric sub-specialties and will accept pediatric patients in transfer when beds are available.

CHOA can assist with the transport of patients. CHOA can provide ground transportation with up to 7 ambulances and 1 helicopter. CHOA can also assist with fixed wing transport.

Additional CHOA Contacts

Trauma intake line for EMS:

404-785-5082 or State HEAR or MED Channel 2 or 3

Children's Transport

404-785-6540 or 1-800-325-6540