

Georgia Mountains Healthcare Coalition Active Shooter Full Scale Exercise



CONTROLLER / EVALUATOR HANDBOOK

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DRAFT

Handling Instructions

The title of this document is Georgia Mountains Healthcare Coalition Active Shooter FSE Controller and Evaluator (C/E) Handbook.

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Exercise Schedule

Friday, May 3rd, 2019

Time	PERSONNEL	ACTIVITY
All personnel should report to their assigned areas 30 minutes prior to exercise start time.	Assigned Internal Evaluators and Exercise Staff	Setup of exercise site
	Controllers and Evaluators	Check-In and Briefing
	Controllers and Evaluators	Communications Check
	Participants/Players	Positioned in your assigned area for Exercise play
9:00 am (or as designated)	All	Exercise Play Start (StartEx) for Region NOTE: Due to scenario development, some specific organizations may specify later start times.
12:00 pm (or sooner)	All	Exercise Play End – (EndEx) FSE Active Shooter NOTE: Due to the different extent of play at each healthcare facility, the Lead Controller will decide when to terminate the exercise.
(To begin immediately following end of exercise play at respective facility)	All	Internal Hotwash*
3:00 pm	Lead Controllers and Emergency Coordinators (Anyone can call in and listen; only Lead Controllers will speak.)	Regional Hotwash Conference Call Briefing Conference Call Number: (800)617-4268 (toll free) Participant Pin Code: 44983442#

*A “hotwash” is a quick debriefing where exercise leaders and participants meet together to discuss things they thought went well and items that could be improved upon following the exercise. The hotwash is led by the Lead Controller at each facility.

Chapter 1: General Information

Introduction

The Georgia Mountains Healthcare Coalition Active Shooter Incident Full Scale Exercise (FSE) is designed to provide a learning environment for players to exercise emergency response plans, policies, and procedures as they pertain to a severe weather system precipitating a mass casualty incident that will require a regionally-coordinated response.

This C/E Handbook was produced with the assistance of The Georgia Mountains Healthcare Coalition Active Shooter FSE Exercise Planning Team (EPT). The C/E Handbook is a supplement to The Georgia Mountains Healthcare Coalition Active Shooter FSE Exercise Plan (ExPlan).

Confidentiality

The Georgia Mountains Healthcare Coalition Active Shooter FSE is an *unclassified exercise*. The control of information is based more on public sensitivity regarding the nature of the exercise than on the actual exercise content. Some exercise material is intended for the exclusive use of exercise planners, controllers, and evaluators, but players may view other materials deemed necessary to their performance. The Exercise Plan (ExPlan) may be viewed by all exercise participants, *but this C/E Handbook is a restricted document intended for controllers and evaluators only.*

Public release of exercise materials to third parties is at the discretion of the Northeast Georgia Health System and/or The Georgia Mountains Healthcare Coalition.

Chapter 2: Exercise Scenario and Safety Information

Exercise Scenario

It is a pleasant spring day just before lunchtime with temperatures approaching 76F. A landscaping crew notices a red Ford Mustang approach a crowded strip mall/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 shopping center through the front door of one of the stores. 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 building. Several visitors and workers are then seen fleeing the building. 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 shopping center/office building and confirm that the popping noises were indeed gun shots as they have encountered several wounded or dead patrons and staff members on the floor. They begin a systematic search of the building for the intruder and clear the scene for safety. The landscaping crew remains outside at the Incident Command Post to give the police officers more information about the intruder.

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 dozens of citizens, many of them children, 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 building, shouting that the man is no longer in the building and has shot and killed several people. The staff members along with the landscaping crew are providing information about the shooter to law enforcement personnel.

Meanwhile, first responder teams enter the building, and begin evacuation and triaging victims. Law enforcement remains on scene, securing the perimeter.

This incident has the potential to cause a regional mass casualty event which will require extensive communication and resource coordination in order to provide an effective regional response.

Accident Reporting

All injuries, incidents, and accidents, regardless of severity, will be reported immediately to the nearest controller. Anyone observing a participant who is seriously ill or injured will first advise the nearest controller and then render first aid, if possible, provided the aid given does not exceed his or her training. For an emergency that requires assistance, the phrase will be “**Real-World Emergency**.” If the nature of the emergency requires a suspension of the exercise at the venue/function, all exercise activities at that facility will immediately cease. Exercise play may resume at that venue/function once the “**Real-World Emergency**” situation has been addressed. If a real emergency occurs that affects the entire exercise, the exercise may be suspended or terminated at the discretion of the Exercise Director and Lead Controller.

Activity-Specific Safety Requirements

The appropriate law enforcement and security personnel will provide access control to exercise areas to ensure that unauthorized non-participants are denied access and that authorized non-participants transiting the exercise area to reach other work areas do so without deviating from established routes or reasonable travel times. Those personnel performing exercise site security are not direct participants in the exercise and will not be exposed (as part of the exercise) to any scenario-related play.

Chapter 3: Controller Information and Guidance

Exercise Controller Organization

Controllers, evaluators, and personnel essential to the exercise are collectively referred to as the Exercise Staff.

Exercise Control

Exercise Start, Suspension, and Termination Instructions

The Georgia Mountains Healthcare Coalition Active Shooter Incident Full Scale Exercise will be a one-day event taking place on Friday May 3rd, 2019; from 8:00am until 12:00pm, or until the Lead Controller/Evaluator determines that the exercise objectives have been met. The Lead Controller will

announce the start of exercise. The Lead Controller will announce any exercise suspension or termination and will instruct participants to stop safely.

If an actual emergency occurs, the exercise may be suspended or terminated at the discretion of the Lead Controller depending on the nature of the incident. The designated emergency phrase in case of a medical emergency is “**Real-World Emergency**.” The Lead Controller will announce restart of the exercise.

Controller Responsibilities

The table below details specific controller responsibilities.

Lead Controller
<ul style="list-style-type: none"> • Reports to the Exercise Director who oversees the entire exercise. • Oversees all exercise functions at a specific location. • Oversees and remains in contact with on-site evaluators. • Debriefs evaluators following the exercise. • Issues exercise materials to players as required. • Monitors exercise timeline. • Provides input to players (i.e., injects) as described in the MSEL.
Venue/Facility Security (Venue Supervisor)
<ul style="list-style-type: none"> • Establishes and maintains security at the exercise venue. • Oversees the site security detail. • Enforces site access procedures. • Acts as the safety officer for his/her site.
Public Information Officer
<ul style="list-style-type: none"> • Provides escort for observers. • Provides narration/explanation during exercise events as needed. • Performs pre-exercise and post-exercise public affairs duties. • May act as media briefer and escort at the exercise site.
Simulation Cell (SIMCELL) Controller
<ul style="list-style-type: none"> • Issues exercise materials to players as required. • Monitors exercise timeline. • Provides input to players (i.e., injects) as described in the MSEL.

Controller Package

Controllers and evaluators will be issued their exercise materials prior to the exercise. The controller package will consist of the ExPlan, C/E Handbook, and other exercise tools (e.g., MSEL, EEGs, etc.) as determined are necessary. Controllers may reorganize the material so the information critical to their specific assignment is readily accessible.

Incident Simulation

Because the exercise is of limited duration and scope, the physical description of what would fully occur at the incident site and surrounding areas will be relayed to the players by controllers. Controllers will “paint the picture” for players—verbally or with limited written materials—of what is happening in and around the incident scene.

Scenario Tools

The Master Scenario Events List (MSEL) outlines benchmarks (injects that drive exercise play) and provides realistic input to exercise players. It provides information expected to originate from simulated organizations (e.g., those non-participating organizations, agencies, and individuals who would usually respond to a situation.)

Exercise Communications

**All spoken and written communication
will start and end with the statement,
“THIS IS AN EXERCISE!”**

Controller Communications

The principal method of communications for controllers during the exercise will be cell phones. A list of key telephone and fax numbers, and radio call signs (if applicable) will be available to each LCE before the start of the exercise. Controller communications will link control personnel at all play areas and will remain separate from the player communications. In no case will controller communications interfere with or override player communications.

Player Communications

Players will use routine, in-place agency communication systems. Additional communication assets may be made available as the exercise progresses. The need to maintain capability for a real-world response may preclude the use of certain communication channels or systems that would usually be available for an actual emergency incident. *In no instance should exercise communication interfere with real-world emergency communications.* Each venue will coordinate its own internal communication networks and channels.

Assessment, Review, and Analysis of Exercise Evaluations

All evaluations are preliminary and may be revised based on information from other evaluators, controllers, or players. If an evaluator or controller did not observe specific aspects of an organization’s performance, exercise players may be asked to comment. These aspects should be indicated in the evaluation as being provided by players.

Exercise Report

A regional exercise After Action Report (AAR) will be prepared to document evaluation of overall exercise performance. This AAR will cover the schedule, scenario, players' activities, evaluations, issues, opportunities, and best practices. The AAR will contain the following:

- A brief summary with introductory and general statements noting exercise scope, purpose, objectives, players, and an overall performance assessment;
- Assessments for each capability observed; and,
- Issues and recommendations as suggested by controller, evaluator, and/or player comments.

A draft of the Georgia Mountains Healthcare Coalition Active Shooter Incident Full Scale Exercise AAR will be provided to participating organizations for comment prior to the Full Scale Exercise After Action Meeting.

After Action Meeting

The After Action Meeting is a forum for jurisdiction officials to hear the results of the evaluation analysis and validate the findings and recommendations in the draft AAR. This will also facilitate the start of the regional improvement planning process. The AAM will be held on Wednesday, May 22 at 10:00am at Lanier Technical College, Ramsey Conference Center (2535 Lanier Tech Drive, Gainesville Georgia).

Chapter 4: Evaluator Information and Guidance

General Information

The goal of exercise/event evaluation is to validate strengths and identify improvement opportunities for the participating organization(s). For the Region B Active Shooter FSE, evaluation will attempt to validate plans, procedures, and protocols of Region B participating agencies, and determine their level of proficiency of the exercised capabilities. Validation attempts to answer the questions:

- Were established plans, procedures, and protocols followed during the exercise?
- Did the agencies do what they said they were going to do?
- Were the plans, procedures, and protocols effective?
- What level of capability do the plans, policies, and procedures establish?

This is accomplished by:

- Observing the event and collecting supporting data;
- Analyzing the data to compare performance against expected outcomes; and,
- Determining what changes need to be made to the procedures, plans, staffing, equipment, communications, organizations, and interagency coordination to ensure expected outcomes.

The evaluation results will serve as an opportunity to identify ways to build upon strengths and improve capabilities. Since jurisdictions are testing new and emerging plans, skills, resources, and relationships in response to a changed homeland security environment, every exercise or event can be expected to result in multiple findings and recommendations for improvement.

Evaluator Instructions and Guidelines

Evaluation Basics

Remember, experience and expertise are your most important tools. Experienced evaluators use the following techniques for effective evaluation:

- Use the EEGs to confirm that evaluation objectives are met.
- Take detailed notes concerning significant activities observed, including the time they were initiated and/or completed (e.g., 8:14am – Command staff logged into GHA911 WebEOC).
- When more than one evaluator is assigned to an area, divide responsibilities to ensure detailed evaluation of player activities.
- Stay in proximity to player decision-makers.
- Focus on Critical Tasks, as specified in the EEG.

Recording Important Events

Although numerous events may occur simultaneously, evaluators do not need to record all the action. Knowing which events are important eliminates superfluous information and provides the kind of data most useful for evaluation. Important events evaluators should record include the following:

- Initiating scenario events
- Actions of players in relation to the event
- Key decisions made by managers and the times these decisions are made
- Deviations from plans and implementation procedures
- Times when significant actions are completed
- Equipment used

What to Look For

Individuals preparing the evaluation report will analyze the results provided by all evaluators to achieve an integrated evaluation of the exercised plans and capabilities. Their analysis will focus on the timing of key events, decisions made, and actions taken. Potential areas you should focus on to assist in that analysis include the following:

- Timeliness in actions
- Communication among players and organizations
- Direction and coordination of field activities
- Monitoring and assessing events
- Command and control
- Creative player problem solving, potentially beyond current plans and implementation procedures
- Plans or procedures that affect player efforts
- Equipment issues in relation to player efforts

Placement and Monitoring

Evaluators should be located so they can observe player actions and hear conversations without interfering with those activities. Certain conditions may warrant more than one evaluator being located in a single setting or area.

Post-Exercise Activities

The Lead Evaluator will notify you when the evaluation of the event has been suspended or terminated. The evaluation will be terminated when the Lead Controller determines that all objectives have been met or enough time has elapsed for objectives to have been demonstrated.

All evaluators are expected to participate in an Internal Hotwash and take notes on findings identified by players. Before the Hotwash, if evaluators are asked for their impressions of how things went, specific issues or problems should not be discussed. At event termination, be sure you have thoroughly completed all Exercise Evaluation Guides and submit the required paperwork to the designated Lead Evaluator before leaving the Hotwash.

Exercise Evaluation

Evaluator Training Briefing

This briefing will assist in preparing evaluators for performance of their functions. It will include a detailed review of event activities. This briefing is the time for evaluators to ask questions and ensure they completely understand their roles and responsibilities. Evaluator questions should be addressed and information clarified so controllers and evaluators feel confident they can effectively perform their assignments. The Evaluator Training Briefing will occur two days before the FSE via a conference call.

Exercise Evaluation Guides (EEGs)

The content for the AAR will be drawn from the EEGs. Each evaluator will be provided with EEGs that will provide specific guidance on what data to collect during the exercise, how to record it, and how to analyze it prior to submission to the Lead Evaluator. The Lead Controller/Evaluator will compile all evaluator submissions into the first working draft of the AAR.

Each EEG corresponds to a given capability and provides a list of subordinate activities and tasks that players may perform during the exercise in order to demonstrate that respective capability. Critical tasks may be labeled as strengths and/or opportunities for improvement (or Not Applicable). Included after each task is room for evaluators to detail any supporting observations. The observations of the evaluators regarding the performance of these tasks will inform the overall completion ratings assigned by the Lead Evaluator in the AAR.

Evaluator Responsibilities

Player performance must be observed and analyzed against plans, policies, procedures, and practices using criteria established before the event. Evaluators document the player performance using EEGs, as well as information obtained during the Internal Hotwash. The evaluations, documentation, Hotwash, and debriefing discussion(s) provide important information that substantiates exercise/event conduct and performance. A regional AAR will be written that summarizes the overall results of the exercise and provides a comprehensive assessment of the capabilities and plans that were demonstrated.

Chapter 5: Controller/Evaluator Exercise Instructions

Before the Exercise

- ❖ Review the appropriate emergency plans, procedures, and protocols.
- ❖ Attend required Evaluator Training and other briefings.
- ❖ **Review appropriate exercise package materials** including the exercise objectives, scenario, injects or implementers, security and safety plans, and evaluator instructions.
- ❖ Review the EEGs and other supporting material for your area of responsibility.
- ❖ **Report to the event location at the time designated** in the Schedule of Events. Report arrival to check-in and meet with event staff.
- ❖ Be at the appropriate location at least 15 minutes before the start of the event. If you are not assigned to a specific site, be in place to deploy as necessary at least 15 minutes before the start of the event.
- ❖ Obtain or locate necessary communications equipment and test it to ensure satisfactory communication between controllers and the Lead Controller.
- ❖ **Wear evaluator identification** (distinctive badge). Badges will be issued at the during the morning briefing.

During the Exercise

- ❖ The evaluators' **primary duty is documenting the actions of players based** on information provided in the MSEL. It is essential that evaluators keep accurate records and notes because these will form the basis for evaluation of performance. The value of evaluation is its ability to provide constructive feedback (positive and negative) to improve the effectiveness of an organization's response to emergencies. Accurate and detailed documentation (time action was taken and description of action) is critical to facilitate a full record of all the events in an exercise/event and to understand player actions.
- ❖ Evaluators should have limited interaction with players during the exercise. However, evaluators should use their discretion to ensure the exercise does not come to a standstill or veer off in a direction that was not intended.
- ❖ During exercise play, avoid personal conversations with any exercise players.
- ❖ **If you have been given injects, deliver them to appropriate players at the time** indicated in the MSEL (or as directed by the Lead Controller). *Caution: If the information depends on some action to be taken by the player, do not deliver the inject until the player has earned the information by successfully accomplishing the required action.*
- ❖ Controllers, when delivering an inject, note the time delivered and player actions.
- ❖ Receive and record exercise information from players that would be directed to non-participating organizations.
- ❖ **Record all significant events observed and the time they occurred.**
- ❖ Observe and record exercise artificialities that interfere with exercise realism. Controllers, begin and end all exercise communications with the phrase, ***"This is an exercise."***
- ❖ During the exercise, do not prompt a player regarding what a specific response should be unless an inject directs you to do so. Clarify information as long as it does not provide coaching.

- ❖ Ensure all observers and media personnel stay out of the exercise activity area during the exercise. If you need assistance, notify the Exercise Director.
- ❖ Do not give information to the players regarding scenario event progress or resolution of problems encountered by others. Players are expected to obtain information through their own resources.
- ❖ The Lead Controller will notify the Exercise Director if the exercise has been suspended or terminated. The exercise will be terminated when the Lead Controller or the Exercise Director determines that all exercise objectives have been met or enough time has elapsed for objectives to be demonstrated.

Following the Exercise

- ❖ Immediately following the completion of exercise play, controllers and evaluators will **attend and facilitate the facility hotwash**, led by the controller. The hotwash is an opportunity for exercise participants to voice their opinions on the exercise while the events are still fresh in their minds. At this time, controllers can also seek clarification on certain actions and what prompted players to take them.
- ❖ Controllers and evaluators should **take comprehensive notes** during the hotwash and include these observations in their report.

Participant Feedback Forms will be used for documenting participant information about the exercise. The Lead Controller will distribute these forms during the hotwash. They will be collected afterward, along with completed player sign-in sheet. Controllers should emphasize to the players that the forms provide the opportunity to comment candidly on emergency response activities and effectiveness of the exercise.

Appendix A: Acronyms

Acronym	Meaning
AAR	After Action Report
AARC	After Action Review Conference
AAM	After Action Meeting
C/E	Controller/Evaluator
C/E Handbook	Controller and Evaluator Handbook
CC	Command Center
CHOA	Children's Healthcare of Atlanta
ED	Emergency Department
EEG	Exercise Evaluation Guide
EMA	Emergency Management Agency
EMS	Emergency Medical Services
EndEx	End Exercise
EOC	Emergency Operations Center
EOP	Emergency Operations Plan
EPT	Exercise Planning Team
ExPlan	Exercise Plan
FSE	Full Scale Exercise
GDPH	Georgia Department of Public Health
GEMA	Georgia Emergency Management Agency
GHA	Georgia Hospital Association
GHCA	Georgia Health Care Association
HICS	Hospital Incident Command System
HSEEP	Homeland Security Exercise Evaluation Program
IC	Incident Commander
ICC	Incident Command Center
ICS	Incident Command System
IP	Improvement Plan
JIC	Joint Information Center
LCE	Lead Controller/Evaluator
MSEL	Master Scenario Event List
NWS	National Weather Service
PIO	Public Information Officer
RCH	Regional Coordinating Hospital
SERVGA	State Emergency Registry of Volunteers of Georgia
SimCell	Simulation Cell
SME	Subject Matter Expert
StartEx	Start Exercise

**For an expanded acronym list, please visit the Public Resources folder on GHA911.org.



Appendix B: Role of Children's Healthcare of Atlanta (CHOA)

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.
 - **Egleston** is the only designated Level 1 Pediatric Trauma Center in the state.
 - **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.

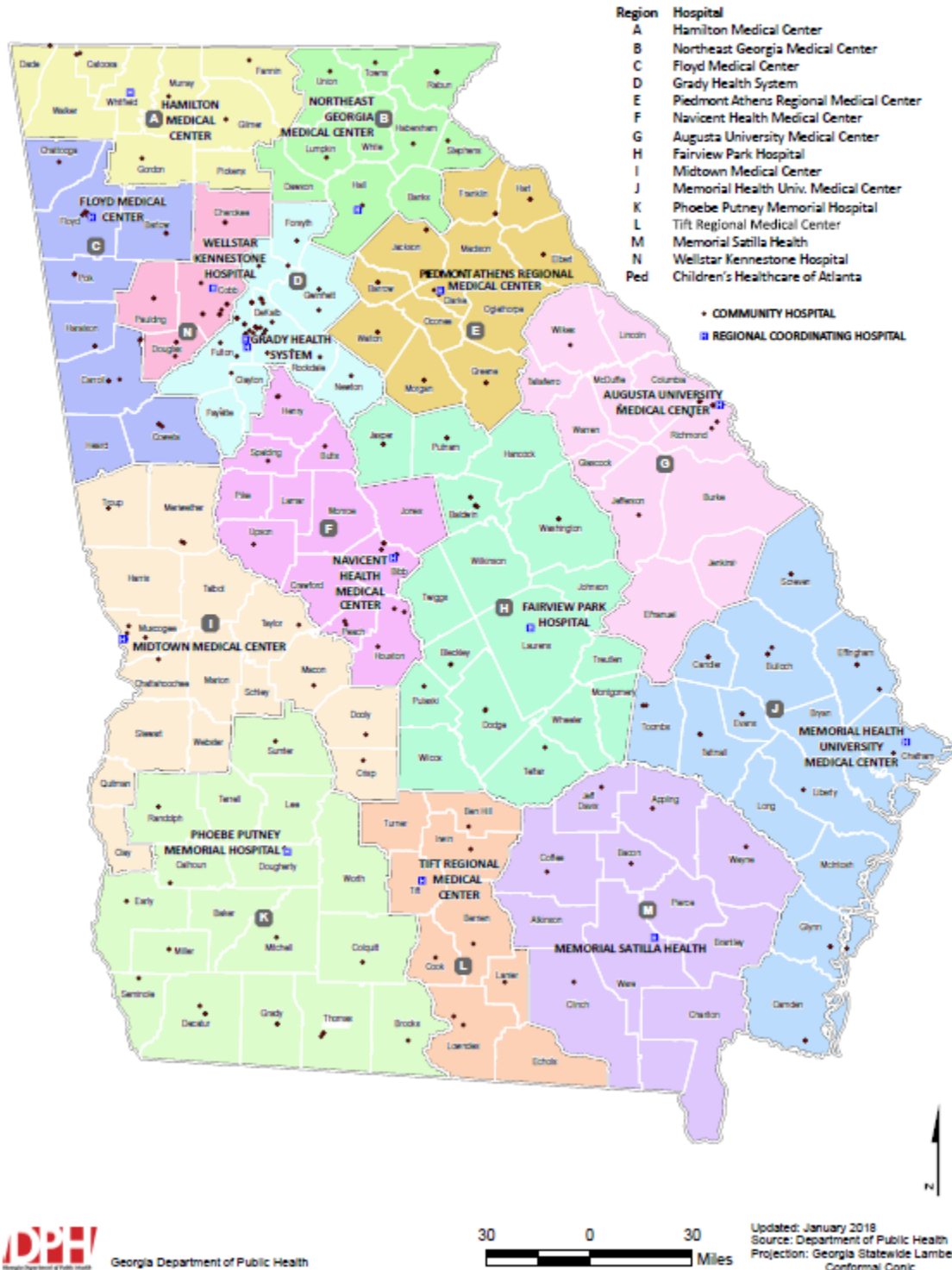
CHOA can assist with the transport of patients. CHOA can provide ground transportation with up to 7 ambulances and 1 helicopter. CHOA can also assist with fixed wing transport.

Additional CHOA Contacts

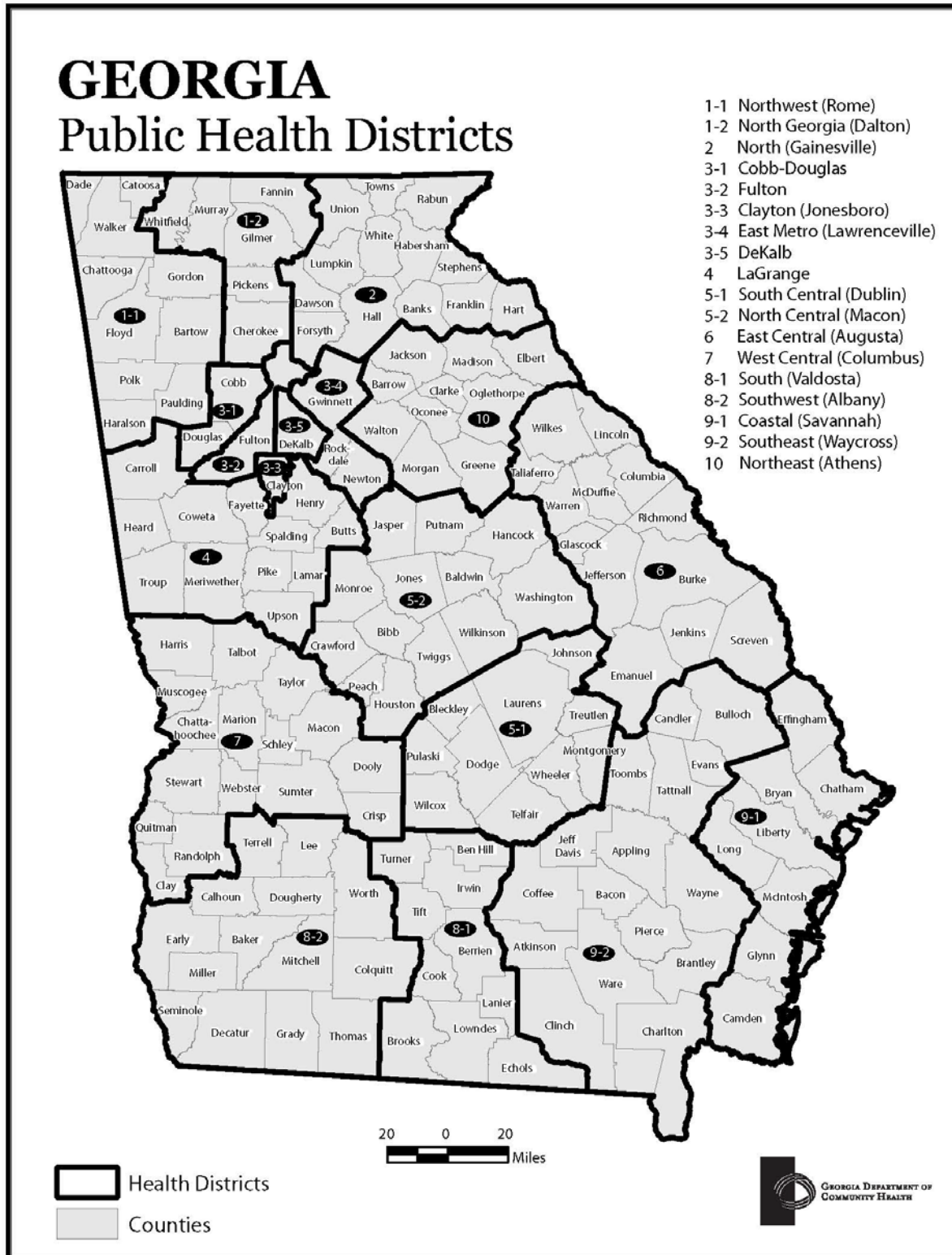
- **Trauma intake line for EMS:**
 - 404-785-5082 or
 - State HEAR or
 - MED Channel 2 or 3
- **Children's Transport**
 - 404-785-6540 or
 - 1-800-325-6540

Appendix C: Regional Coordinating Hospital Area Map

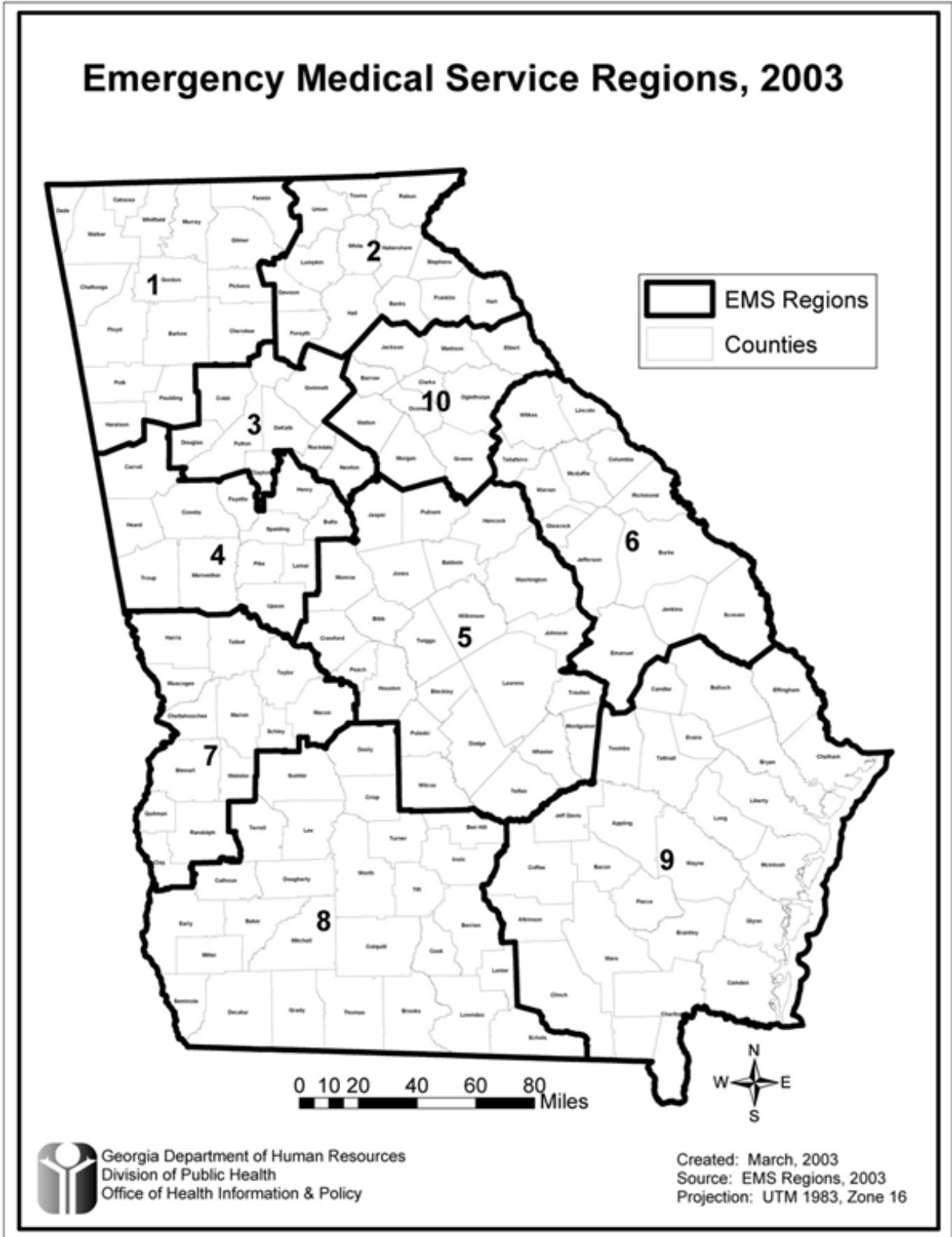
Healthcare Coalitions



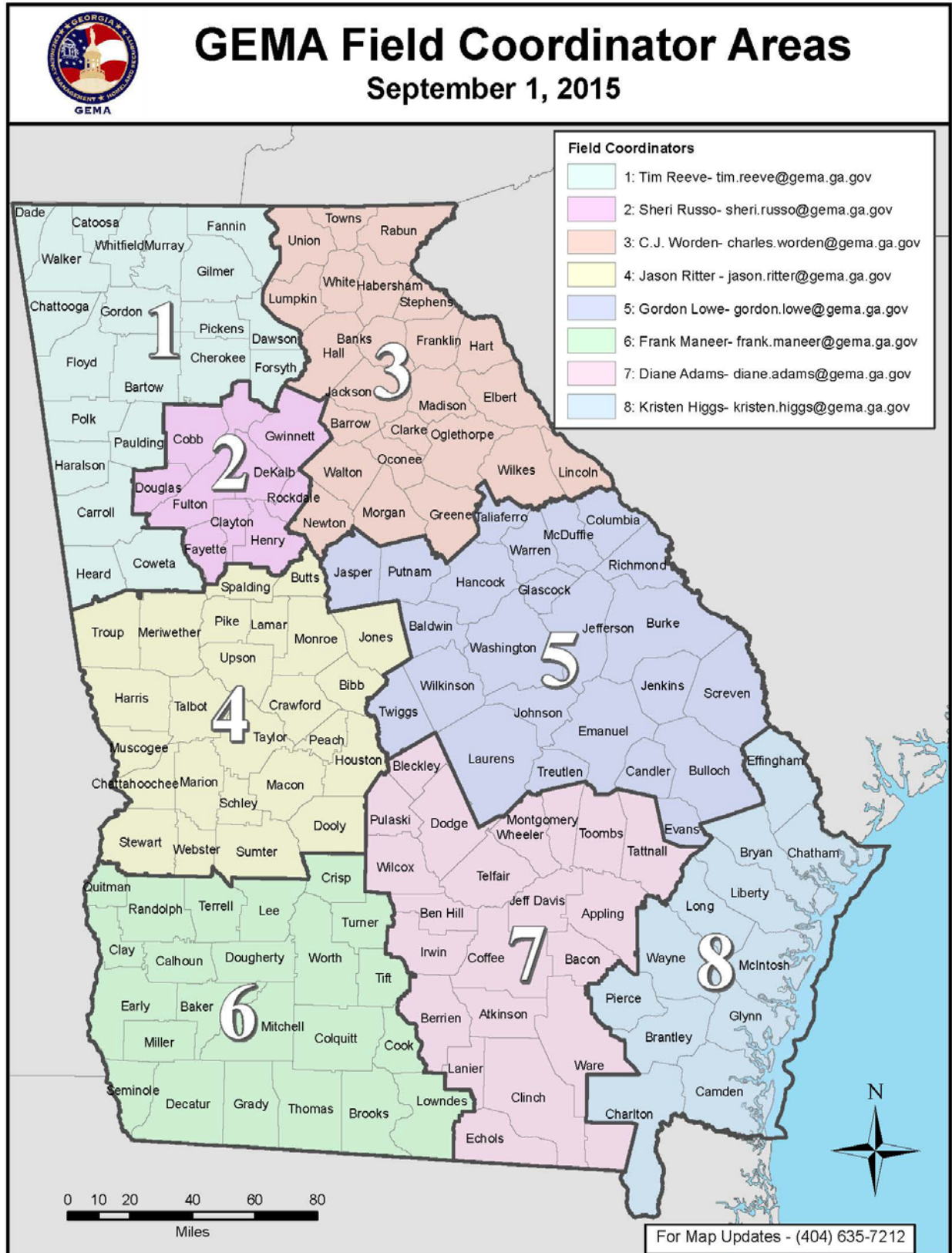
Appendix D: Public Health Districts Map



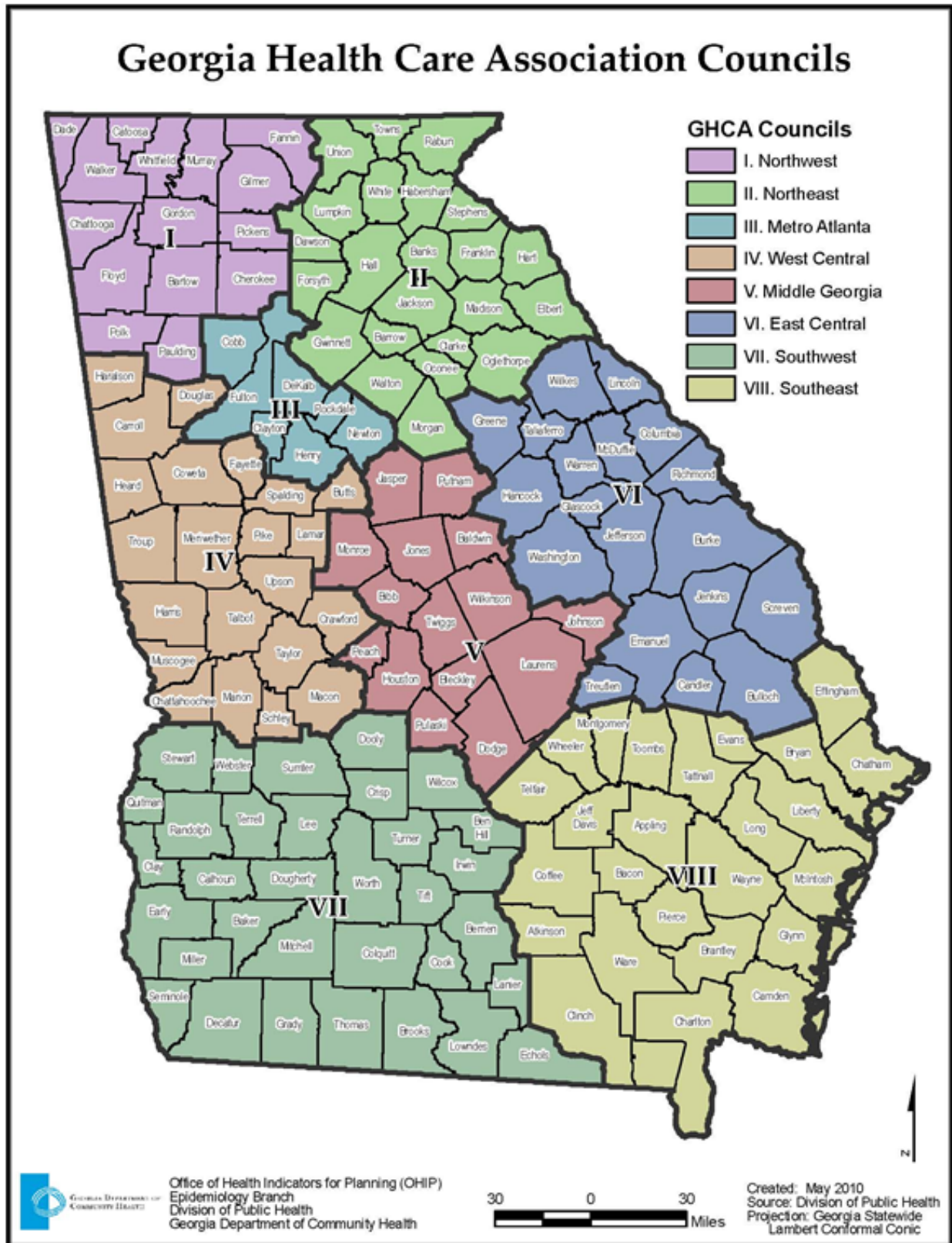
Appendix E: EMS Regions Map



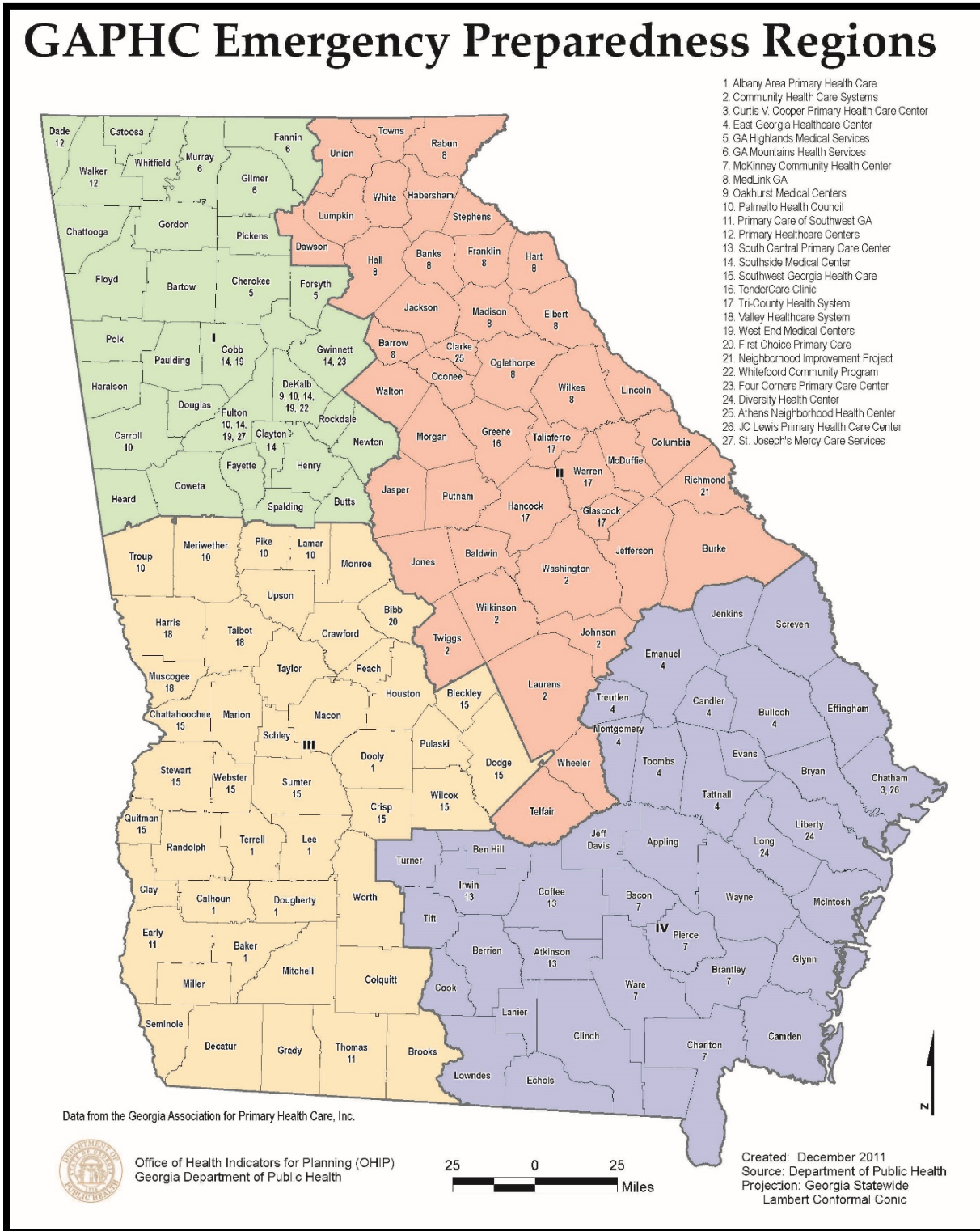
Appendix F: GEMA Regions Map



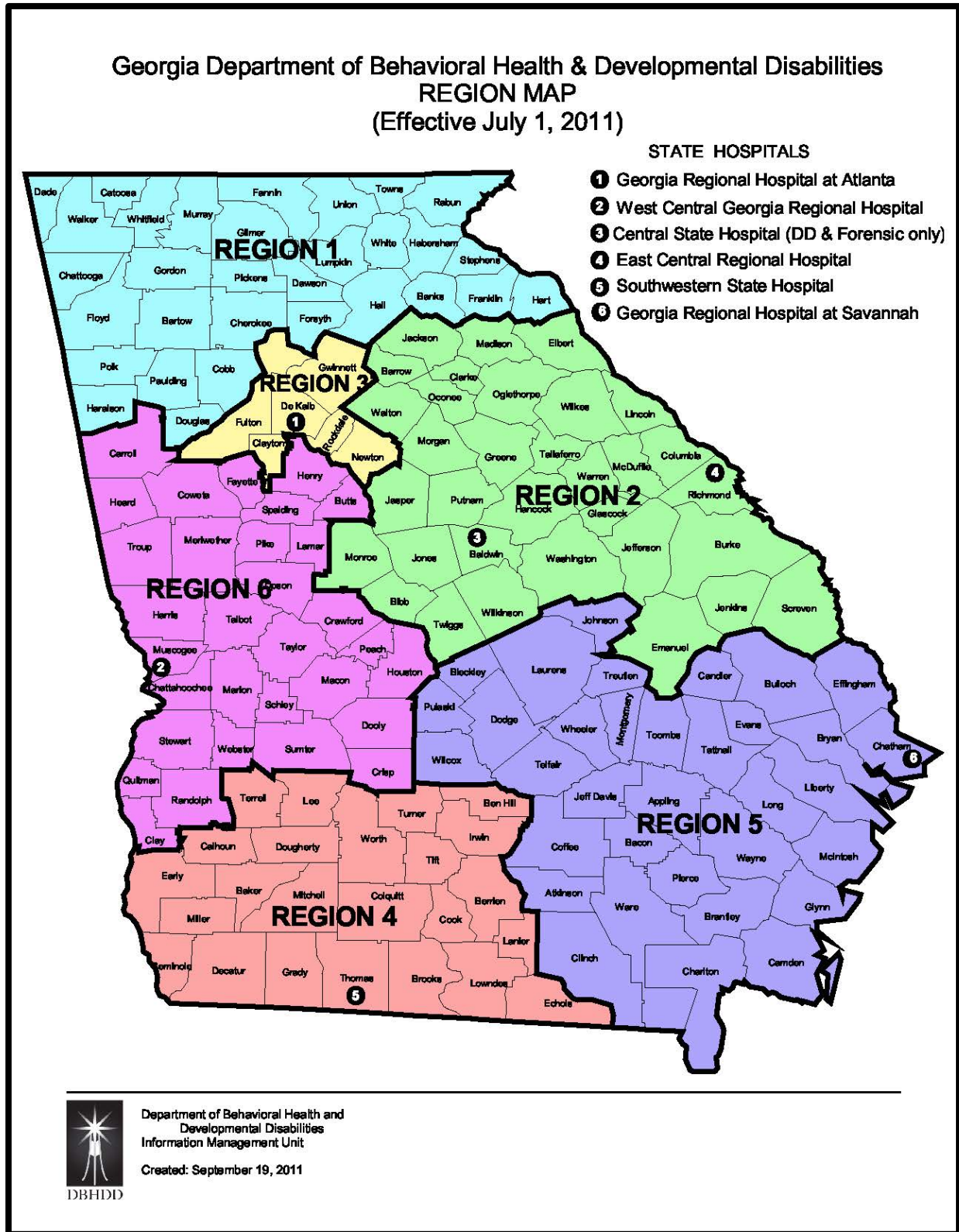
*Appendix G: Georgia Health Care Association Council Map
(Nursing Homes)*



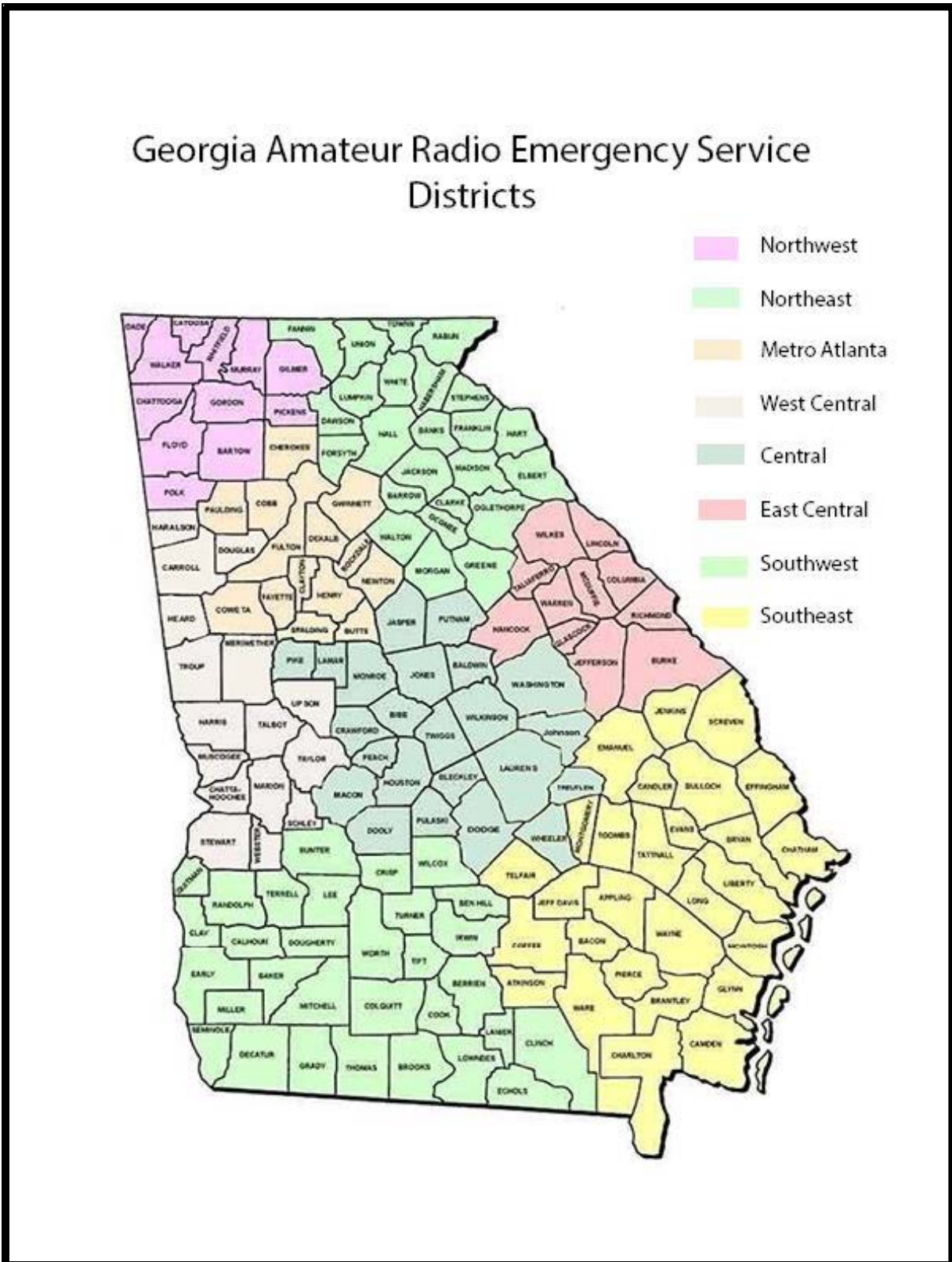
Appendix H: Community Health Center Regions Map



Appendix I: Georgia DBHDD Regional Map



Appendix J: Georgia ARES Districts



Appendix K: GHA911WebEOC Quick Guide

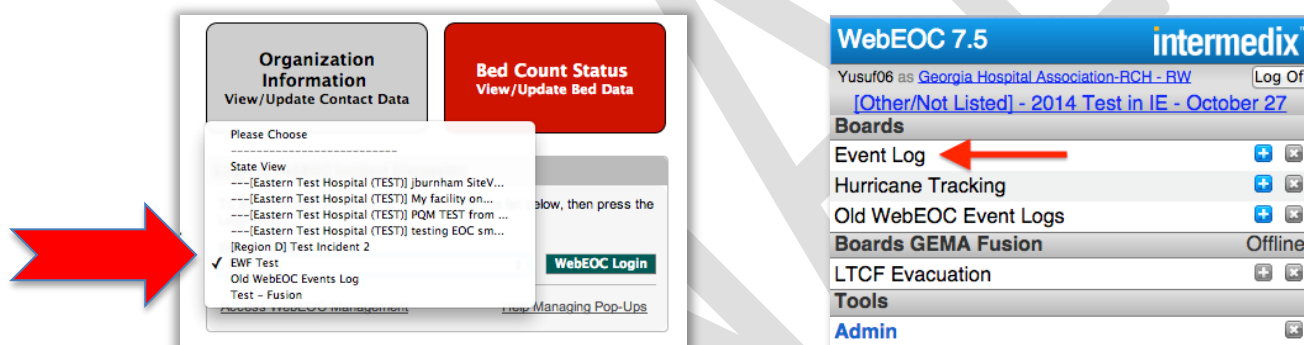
Accessing WebEOC and Posting to Event Logs

****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.

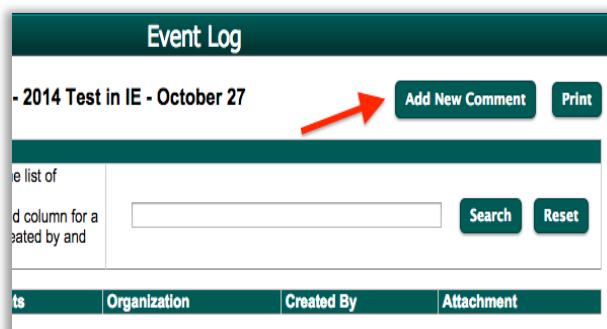
- Click “Event Log” to enter the incident discussion.



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.

New Comment

Add New Comment

Created By: Yusuf Demo

Date / Time: 11/10/2014 00:30:11


Comments: Eastern Test Hospital has adequate staffing and supplies at this time. Bed counts updated on status boards.

Attachment: No file chosen

Publish to: ☐ GEMA Statewide Significant Events
☐ Public Health Statewide Significant Events

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.**

Date	Event	Comments	Organization	Created By	Attachment
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 Rahman	
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	

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intermedix

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 those that meet the search criteria.

Filter the list of


based column for
ion, Created by

Comments	Organization	Created By	Attachment
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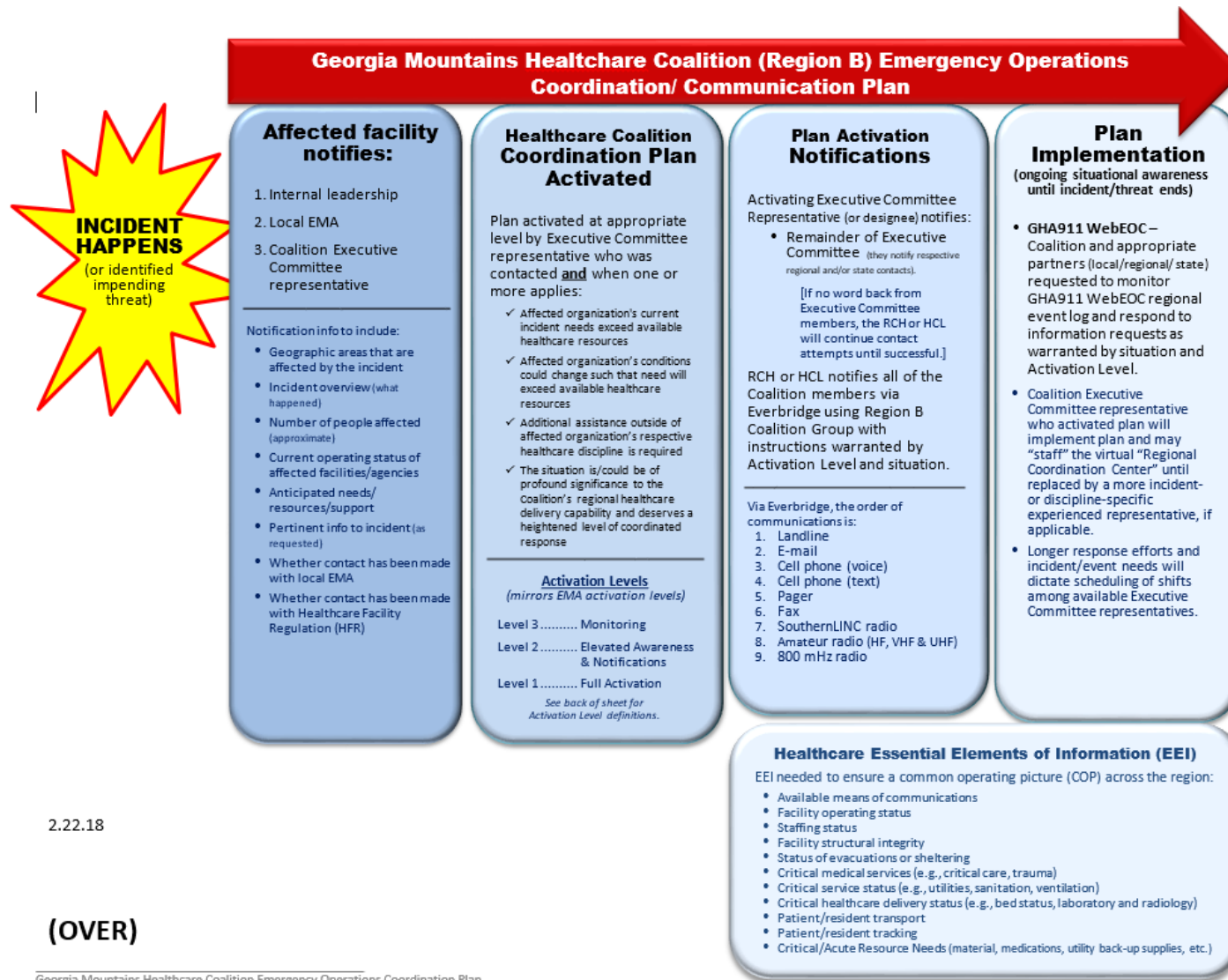


Search Filter

Enter text in the field below to filter the list of comments.
The search will check each text based column for a match (Comments, Organization, Created by and Attachment).

Date	Event	Comments	Organization	Created By	Attachment
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 Rahman	

Appendix L: Georgia Mountains Healthcare Coalition Communications Coordination Plan



2.22.18

(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:

1. 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
4. 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:

1. 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*.
6. 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]).
7. Depending on the scope and severity of the event, the RCH may consider the handoff of RCH duties to another region.

Georgia Mountains Healthcare Coalition Emergency Operations Coordination Plan

**Coalition Members'
Executive Committee Representative**

HEALTHCARE DISCIPLINES	CONTACT	HEALTHCARE COALITION EXECUTIVE COMMITTEE REPRESENTATIVE
<ul style="list-style-type: none"> • Hospitals • Other healthcare disciplines (not represented below) 	➡	Northeast Georgia Health System Matthew Crumpton 770-219-1823 (office) 678-630-5955 (cell)
<ul style="list-style-type: none"> • Public Health 	➡	DPH District Emergency Coordinator Mark Palen, District 2 Public Health 770-531-4505 (office) 678-928-1337 (cell)
<ul style="list-style-type: none"> • Public Health 	➡	DPH Healthcare Liaison Donna Sue Campbell, District 2 Public Health 770-535-6989 (office) 770-851-3089 (cell)
<ul style="list-style-type: none"> • Local Emergency Management Agencies 	➡	Emergency Management Agency (EMA)
<ul style="list-style-type: none"> • Nursing Homes 	➡	Nursing Home (NH) Kerry Smith, NGHS Lanier Park 770-219-8315 (office)
<ul style="list-style-type: none"> • Emergency Medical Services 	➡	Emergency Medical Services (EMS) Scott Masters, NGHS EMS 770-550-6365 (office)
<u>My Organization's Healthcare Coalition Contact:</u>		

Communications with Regional/State Partners

COALITION EXECUTIVE LEADERSHIP REPRESENTATIVE	NOTIFIES THE FOLLOWING
Regional Coordinating Hospital (RCH)	<ul style="list-style-type: none"> • GHA Emergency Preparedness Director (notifies other RCHs) • GPH Healthcare Preparedness Program Director
DPH District Emergency Coordinator (or designee)	<ul style="list-style-type: none"> • District Health Director • State on-call duty officer (855-377-4374)
DPH Healthcare Liaison	<ul style="list-style-type: none"> • Others as warranted
Emergency Management Agency (EMA)	<ul style="list-style-type: none"> • GEMA On-Call Field Coordinator • GEMA
Nursing Home (NH) Council Coordinator	<ul style="list-style-type: none"> • 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)	<ul style="list-style-type: none"> • Others as warranted
Emergency Medical Services (EMS)	<ul style="list-style-type: none"> • 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.