WORKSHEET – Finding the Focus

Determining Exercise Concepts and Objectives

Facility/Agency Name **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Contact Person **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Section 1: WHY**

**Potential resources for determining exercise concepts and objectives:**

* Hazards and Vulnerability Analysis(es) [facility, community and region]
* Regulatory requirements
* Real-world events
* Past After Action Reports (AARs)/ Improvement Plans (IPs)
* EOP revisions/staff training
* Federal Healthcare Preparedness Program (HPP) Capabilities [can be found on www.GHA911.org in the “Public Resources” folder at bottom of page]
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Section 2: WHAT**

**Chosen Scenario(s)/Regional Plans to Test: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**What are the top three concerns your respective facility/organization has for a coalition-based REGIONAL response as listed above? (Consider triggers for regional responses, roles/responsibilities, communications, resources/assets)**

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Section 3: HOW and WHEN**

**Possible Concepts and Objectives:**

Remember that the end goal is to conduct a REGIONAL full scale exercise. It is best to plan exercises using a building-block approach, since ALL possible exercise objectives *cannot* be tested at once. The following should be considered when *fully* preparing and planning for a **full scale exercise** using this approach:

* Procedural reviews/updates needed
* New equipment and system(s) installations
* Staff training that may need to occur prior to exercise
* Drills or other exercises that help prepare for a more complex exercise

***Instructions:*** *As part of your internal and local discussions, complete the table below. There will be several objectives identified, but only list your TOP three.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| DESIRED CONCEPT/OBJECTIVE TO TEST | DISCUSSION-BASED EXERCISE | OPERATIONS-BASED EXERCISE | TRAINING/ DRILL TYPE NEEDED BEFOREHAND? | PLANNING NOTES |
|  | YES NO  TYPE: \_\_\_\_\_\_\_\_\_\_\_\_\_ | YES NO  TYPE: \_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |
|  | YES NO  TYPE: \_\_\_\_\_\_\_\_\_\_\_\_\_ | YES NO  TYPE: \_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |
|  | YES NO  TYPE: \_\_\_\_\_\_\_\_\_\_\_\_\_ | YES NO  TYPE: \_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |

**Section 4: WHO**

Based upon the selected regional scenario, which partners should be **invited and** **encouraged to participate in your exercise**? (Check all that apply.)

**INTERNAL PARTNERS (for healthcare facilities)**

* Administration
* Admissions/Registration
* Alzheimer’s Unit
* Blood Bank
* Case Management/Social Services
* Dietary
* Director of Nursing
* Emergency Department
* Environmental Services
* Facilities Management
* Finance/Business Office
* Information Technology (IT)
* Intensive Care
* Labs
* Med/Surg
* Pediatrics
* Pharmacy
* Physicians/Medical Director
* Public Information Officer (PIO)
* Radiology
* Security
* Trauma Services
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EXTERNAL PARTNERS**

***LOCAL***

* Academic Officials (K-12 - college)
* ARES
* Behavioral Health
* Businesses
* Community Health Centers
* Coroner
* County EMA
* County Public Health Department
* Dialysis Clinics
* EMS
* Fire Department
* Government Officials
* Hospice and Home Care
* Hospitals
* Law Enforcement
* Local Emergency Planning Committee (LEPC)
* Long Term Acute Care Facilities
* Medical Reserve Corps (MRC)
* Nursing Homes
* Pharmacies and Local Drug Stores
* Volunteer Agencies
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***REGIONAL***

* American Red Cross
* EMS Program Director
* GEMA Field Coordinator
* Medical Reserve Corps (MRC)
* Nursing Home Council Coordinator
* Public Health District Representatives
* Regional Coordinating Hospital (RCH)
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***STATE***

* Georgia Department of Public Health (GDPH)
* Georgia Hospital Association (GHA)
* Georgia Health Care Association (GHCA) – nursing homes
* Georgia Hospice and Palliative Care Organization (GHPCO)
* Georgia Association for Primary Health Care (GAPHC) – community health centers
* Department of Transportation (DOT)
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***FEDERAL***

* Military
* NDMS
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Section 5: GETTING PARTNERS TO THE TABLE**

Hold local meeting(s) and discussions to strategize the best way to gain buy-in and participation from the internal and local partners you identified above. **Complete the table below before the Tabletop Exercise Initial Planning Meeting (IPM) and plan on sharing your strategy and progress.**

|  |  |  |  |
| --- | --- | --- | --- |
| LOCAL PARTNER ENGAGEMENT STRATEGY | | | |
| **Organization/Agency** | **Point of Contact** | **WHO SHOULD MAKE CONTACT and how?** | **DATE OF CONTACT AND RESULT** |
| *County EMA* |  |  |  |
| *County/District Public Health* |  |  |  |
| *Medical Transportation (EMS, etc.)* |  |  |  |
| *County/City Law Enforcement* |  |  |  |
| *County/City Fire Department* |  |  |  |
| *Local Volunteer Orgs.* |  |  |  |
| *Other (See Section 4)* |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
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|  |  |  |  |