2017 STATEWIDE MEDICAL AND HEALTH EXERCISE
AFTER ACTION REPORT

FUNCTIONAL EXERCISE
PREFACE

The 2017 California Statewide Medical and Health Exercise (SWMHE) is sponsored by the California Department of Public Health (CDPH) and the Emergency Medical Services Authority (EMSA). This After Action Report (AAR) was produced with input, advice, and assistance from the SWMHE Planning Workgroup, comprised of representatives from:

- California Association of Health Facilities (CAHF)
- California Department of Public Health (CDPH)
- California Emergency Medical Services Authority (EMSA)
- California Governor’s Office of Emergency Services (Cal OES)
- California Hospital Association (CHA)
- California Primary Care Association (CPCA)
- El Dorado County Health & Human Services Agency
- Kaiser Permanente
- Los Angeles County Department of Public Health
- Nevada County Public Health Department
- Orange County Health Care Agency
- Providence Health & Services
- Regional Disaster Medical Health Coordinator/Specialist Program
- Riverside County Emergency Management Department
- San Joaquin County Emergency Medical Services (EMS) Agency
- San Mateo County EMS Agency
- Sharp HealthCare
- Sutter Medical Center Sacramento

This AAR follows guidelines set forth by the U.S. Federal Emergency Management Agency (FEMA) Homeland Security Exercise and Evaluation Program (HSEEP). The AAR is a tool for use in evaluating the exercise and developing improvement plans. See Appendix D for a listing of agency/event acronyms. All exercise participants should use appropriate guidelines to ensure proper control of information within their areas of expertise and protect this material in accordance with current jurisdictional directives.
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EXERCISE OVERVIEW

Exercise Name: 2017 California Statewide Medical and Health Exercise (SWMHE) – Functional Exercise (FE)

Exercise Date: November 16th, 2017

Scope:
This is a functional exercise planned for the County of San Luis Obispo to take place at 0800 on November 16th, 2017 at the Public Health Department. The 2017 SWMHE Program is a progressive exercise program comprised of a series of training exercises tied to a set of common program priorities. This year’s exercise is a multiphase program culminating in the Functional Exercise (FE) on November 16th, 2017.

Mission Area(s): Response

Capabilities:
- Emergency Operations Coordination
- Medical Surge
- Provide and receive situational awareness with inter- and intra-jurisdictional stakeholders per local policies and procedures through the Medical and Health Operational Area Coordinator (MHOAC) program [PH]
- Ensure the PIO and/or JIC are considering media for reaching vulnerable populations and those with other access and functional needs (AFN). Use appropriately translated materials when possible. Utilize nonprofit partners and community/faith-based organizations (CBOs/FBOs) with any internal and/or external messaging with these vulnerable populations. [PH]

Objectives:
- Plan for the activation of mental and behavioral health services for all staff members as part of incident response and recovery planning [PH]
- Activate the Incident Command System (ICS) per scenario or hazard-specific plan and/or local policies and procedures within 30 minutes of notification of incident information that may affect normal operations. [EMS]
- Initiate coordination with the Medical and Health Operational Area Coordinator (MHOAC) Program for medical and health resource ordering within 30 minutes of identification of need. [EMS]

Threat or Hazard: Multi Casualty Incident

Scenario: Terrorist Incident/ Active Shooter

Sponsor: The 2017 SWMHE Exercise is sponsored by the California Department of Public Health and the California Emergency Medical Services Authority in collaboration with response partners representing local health departments, public safety and healthcare facilities across California.
Participating Organizations

- County of San Luis Obispo Health Agency Department
- Twin Cities Community Hospital
- Sierra Vista Regional Medical Center
- Arroyo Grande Community Hospital
- French Hospital Medical Center
- San Luis Ambulance
- United Blood Services
- Central Coast Home Health
- FBI
ADMINISTRATIVE HANDLING INSTRUCTIONS

1. The title of this document is the *California Statewide Medical and Health Exercise (SWMHE) Program After Action Report (AAR).*

2. The information gathered in this AAR is designated as For Official Use Only (FOUO) and should be handled as sensitive information that is not to be disclosed. This document should be safeguarded, handled, transmitted, and stored in accordance with appropriate security directives. Reproduction of this document, in whole or in part, without prior approval from the County of San Luis Obispo is prohibited. All exercise participants may view the AAR.

3. For more information about the exercise, please consult the following points of contact (POCs):

Denise Yi  
Public Health Emergency Preparedness Specialist  
County of San Luis Obispo  
2180 Johnson Ave  
San Luis Obispo, CA 93401  
dyi@co.slo.ca.us  
(805) 788-2067
EXERCISE BACKGROUND

The California Department of Public Health (CDPH) and the Emergency Medical Services Authority (EMSA) lead California in the annual SWMHE. CDPH recognizes that being prepared for a threat to community health is of national concern in an era of possible bioterrorism, pandemic influenza, and emerging public health threats. As an integral part of local public health response, the County of San Luis Obispo led a multi-organization exercise as part of the larger SWMHE on November 17, 2017. To ensure an effective exercise, subject matter experts (SMEs) and local representatives from various agencies have taken part in the planning process. Members of the exercise planning team included:

- Reanna Clayton, French Hospital Medical Center
- Eric Ruelas, French Hospital Medical Center
- Teri Reeder, Arroyo Grande Community Hospital
- Jennifer Sandoval, Arroyo Grande Community Hospital
- Beth Haberkern, Arroyo Grande Community Hospital
- Emma Lauriston, Sierra Vista Regional Medical Center
- Bridgette Bateman, Sierra Vista Regional Medical Center
- Carrie Vucasovich, Twin Cities Community Hospital
- Jody Ghione, Twin Cities Community Hospital
- Denise Yi, County of San Luis Obispo Public Health
- Elizabeth Merson, County of San Luis Obispo Public Health
- George Brown, County of San Luis Obispo Public Health
- Andy Scott, County of San Luis Obispo Public Health
- Fred Motlo, San Luis Ambulance
- Jason Crabtree, United Blood Services
- Dave Blanchard, FBI
ANALYSIS OF CAPABILITIES

Aligning exercise objectives and capabilities provides consistency for evaluation that transcends individual exercises to support preparedness reporting and trend analysis.

Objective 1
Provide and receive situational awareness with inter- and intra-jurisdictional stakeholders per local policies and procedures through the Medical and Health Operational Area Coordinator (MHOAC) program [PH]

A. Capability
Information Sharing

Expected Actions:
- Develop or assist in the development of the Situation Report for the Region and State within two hours of activation per the State Public Health and Medical Emergency Operations Manual (EOM)
- Distribute an intra-departmental situation report within 30 minutes of the start of an incident
- Request a Situation Report from Healthcare Coalition members and/or intra-jurisdictional stakeholders within 30 minutes per local policies and procedures
- Complete a preliminary assessment of the incident, and document medical resource needs and availability (e.g., personnel, facilities, logistics, and other healthcare resources) within 30 minutes.
- The MHOAC, in coordination with the EMS Section Chief, shall evaluate the current medical-health resources of the OA and ensure the integrity of the countywide medical health response system
- Continually re-assess on-scene medical resource needs every 30 minutes

Strengths
- The planning section developed the situation report and sent it out in a timely manner.
- Intra departmental situation reports were distributed within 30 minutes of the start of the incident.
- A preliminary assessment of each incident and documentation of medical resource needs and availability were prepared within 30 minutes.

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

None
ANALYSIS OF CAPABILITIES

Objective 2
Ensure the PIO and/or JIC are considering media for reaching vulnerable populations and those with other access and functional needs (AFN). Use appropriately translated materials when possible. Utilize nonprofit partners and community/faith-based organizations (CBOs/FBOs) with any internal and/or external messaging with these vulnerable populations. [PH]

B. Capability
Information Sharing

Expected Actions:
- Identify vulnerable/special populations that may need customized messaging throughout incident response and recovery and the appropriate methods/media for reaching said populations
- Activate a document and/or resource-sharing repository (e.g., Homeland Security Information Network) in which to share translated materials to maximize response efficiency
- Include at least one objective each operational period related to serving AFN populations

Strengths
- Messages in Spanish were requested and provided in a timely manner
- Social Media and WebEOC were utilized for resource sharing and releasing translated materials

Areas for Improvement
The following areas require improvement to achieve the full capability level:
- Train Public Health PIO staff on their role relative to PIOs in other organizations (Law Enforcement, Office of Emergency Services (OES) and hospitals)
- Crisis Emergency Response Communication (CERC) Plan CD (in binder located in CHADOC) is not accessible to newer laptops without CD drives. Need to convert to USB or provide external CD drives.
- Update CERC plan templates to new County letterhead and update provider notice and media release layouts to new layouts during the CERC plan revision
- Purchase additional laptop computers, printers, fax machines and install one additional monitor for news monitoring.
ANALYSIS OF CAPABILITIES

Objective 3
Plan for the activation of mental and behavioral health services for all staff members as part of incident response and recovery planning. Health Care Preparedness and Response Capability 1: Foundation for Health Care and Medical Readiness

C. Capability
Foundation for Health Care and Medical Readiness

Expected Actions:
- Coordinate with the MHOAC and local responding agencies to determine the need for additional behavioral and mental health services, partners, and volunteers to provide an appropriate level of care to staff, victims, and family members.
- Incorporate mental and behavioral health services and agencies in all situational awareness and/or information distributed to other agencies as part of incident response

Strengths
- There was excellent coordination of behavioral health resources.
- Behavioral health staff was present in CHADOC for all of the briefings.

Areas for Improvement
The following areas require improvement to achieve the full capability level:
- Train Behavioral Health staff on disaster response and critical stress
ANALYSIS OF CAPABILITIES

Objective 4
Activate the Incident Command System (ICS) per scenario or hazard-specific plan and/or local policies and procedures within 30 minutes of notification of incident information that may affect normal operations. [EMS]

D. Capability
Foundation for Health Care and Medical Readiness
Health Care and Medical Response and Recovery Coordination

Expected Actions:
- Work with jurisdictional officials to analyze data, assess emergency conditions, and determine Department Operations Center (DOC) activation levels based on the complexity of the event or incident within 30 minutes.
- Complete a preliminary assessment of the incident, and document medical resource needs and availability (e.g., personnel, facilities, logistics, and other healthcare resources) within 30 minutes.
- Conduct an initial incident briefing for all on-duty and recalled staff members, including communications and reporting procedures, within 30 minutes of incident notification.
- Establish check-in procedure(s) for responding units and personnel.

Strengths
- ReddiNet and WebEOC were utilized as well as frequent communications with the Sheriff’s Watch Commander.
- A preliminary assessment of the incident was completed, and documentation of medical resource needs and availability was conducted within 30 minutes.
- An initial briefing was conducted within 30 minutes.
- All CHAODC staff checked in, donned position vests and obtained copies of their SOPs.

Areas for Improvement
The following areas require improvement to achieve the full capability level:
- Update the layout for CHADOC to make it more optimal for interoperability.
ANALYSIS OF CAPABILITIES

Objective 5
Initiate coordination with the Medical and Health Operational Area Coordinator (MHOAC) Program for medical and health resource ordering within 30 minutes of identification of need. [EMS]

E. Capability
Health Care Preparedness and Response Capability
Health Care and Medical Response and Recovery Coordination

Expected Actions:
- Receive and fill a resource request that addresses the need, amount, supply, source, delivery location, and staging location of the resource
- Include required logistical support ("wrap around services") such as food, lodging, and fuel as part of any resource requests sent
- Forward resource requests that are not able to be filled within Operational Area to RDMHS

Strengths
- Resource requests were filled for additional Behavioral Health staff
- Additional County vehicles for Behavioral Health staff were obtained
- A resource request for a strike team of ambulances from outside the Operation Area was forwarded

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

None
## APPENDIX A: IMPROVEMENT PLAN

<table>
<thead>
<tr>
<th>Capability</th>
<th>Observation</th>
<th>Corrective Action</th>
<th>Capability Element</th>
<th>Primary Responsible Organization</th>
<th>Organization POC</th>
<th>Start Date</th>
<th>Completion Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. i. Information Sharing</td>
<td>Area for Improvement</td>
<td>Work with PH Public Information Officer to update Crisis Emergency Response Communication Plan</td>
<td>Planning</td>
<td>Public Health Emergency Preparedness PHEP</td>
<td>Denise Yi</td>
<td>January 1st, 2018</td>
<td>June 30th, 2018</td>
</tr>
<tr>
<td>ii. Information Sharing</td>
<td>Area for Improvement</td>
<td>Convert CERC Plan CD to USB for PIO use in CHADOC</td>
<td>Planning</td>
<td>Public Health Emergency Preparedness</td>
<td>Robin Hendry</td>
<td>January 1st, 2018</td>
<td>June 30th, 2018</td>
</tr>
<tr>
<td>iii. Information Sharing</td>
<td>Area for Improvement</td>
<td></td>
<td>Planning</td>
<td>Public Health Emergency Preparedness</td>
<td>Elizabeth Merson/ Robin Hendry</td>
<td>January 1st, 2018</td>
<td>June 30th, 2018</td>
</tr>
<tr>
<td>B. Foundation for Health Care and Medical Readiness</td>
<td>Area for Improvement</td>
<td>Invite BH staff to critical stress and disaster response training</td>
<td>Training</td>
<td>Public Health Emergency Preparedness</td>
<td>Elizabeth Merson</td>
<td>January 1st, 2018</td>
<td>June 30th, 2018</td>
</tr>
</tbody>
</table>
| C. Foundation for Health Care and Medical Readiness
  Health Care and Medical Response and Recovery Coordination | Area for Improvement                 | Update the layout of County Health Agency Department Operations Center for optimal interoperability | Planning          | Public Health Emergency Preparedness                                 | Denise Yi/ Elizabeth Merson | January 1st, 2018 | June 30th, 2018 |
<p>| | | | | | | |</p>
<table>
<thead>
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</thead>
</table>
D. |   |   |   |   |   |   |
## APPENDIX B: EXERCISE PARTICIPANTS

<table>
<thead>
<tr>
<th>Name</th>
<th>Phone Number</th>
<th>Role</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>County of San Luis Obispo</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Denise Yi</td>
<td>805-266-0987</td>
<td>Exercise Director</td>
</tr>
<tr>
<td><strong>FBI</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dave Blanchard</td>
<td>805-857-6372</td>
<td>Phone Participant</td>
</tr>
<tr>
<td><strong>Central Coast Home Health</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brandi Colombo</td>
<td>805-540-6020</td>
<td>Phone Participant</td>
</tr>
<tr>
<td><strong>United Blood Services</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Jason Crabtree</td>
<td>805-549-0303</td>
<td>Phone Participant</td>
</tr>
<tr>
<td><strong>County Health Agency Department Operations Center (CHADOC)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>RJ Hansen</td>
<td>805-619-7324</td>
<td>Evaluator</td>
</tr>
<tr>
<td>Scott Milner</td>
<td>805-260-0491</td>
<td>Evaluator</td>
</tr>
<tr>
<td>Claire Grantham</td>
<td>805-215-2812</td>
<td>Controller</td>
</tr>
<tr>
<td><strong>Arroyo Grande Community Hospital</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teri Reeder</td>
<td>805-901-3763</td>
<td>Facility POC</td>
</tr>
<tr>
<td>Colleen Avery</td>
<td>805-610-6320</td>
<td>Controller</td>
</tr>
<tr>
<td>Beth Haberkern</td>
<td>805-550-1110</td>
<td>Controller</td>
</tr>
<tr>
<td>Steve Reeder</td>
<td>805-903-3684</td>
<td>Evaluator</td>
</tr>
<tr>
<td>Fred Haberkern</td>
<td>805-440-3808</td>
<td>Evaluator</td>
</tr>
<tr>
<td><strong>French Hospital Medical Center</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reanna Clayton</td>
<td>805-748-8445</td>
<td>Facility POC</td>
</tr>
<tr>
<td>Dave Majors</td>
<td>805-503-0872</td>
<td>Controller</td>
</tr>
<tr>
<td>Cherie McKinley</td>
<td>805-542-6267</td>
<td>Evaluator</td>
</tr>
<tr>
<td><strong>Sierra Vista Regional Medical Center</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emma Lauriston</td>
<td>805-801-7421</td>
<td>Facility POC</td>
</tr>
<tr>
<td>Diane Stalker-Hood</td>
<td>805-546-5110</td>
<td>Controller</td>
</tr>
<tr>
<td>Jorge Rodriguez</td>
<td>805-704-0405</td>
<td>Evaluator</td>
</tr>
<tr>
<td><strong>Twin Cities Community Hospital</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Carrie Vucasovich</td>
<td>805-434-4522</td>
<td>Facility POC</td>
</tr>
<tr>
<td>Eleze Armstrong</td>
<td>805-835-1053</td>
<td>Controller</td>
</tr>
<tr>
<td>Cindy Kellerman</td>
<td>805-434-4369</td>
<td>Evaluator</td>
</tr>
<tr>
<td>Marlene Aten</td>
<td>805-434-4363</td>
<td>Evaluator</td>
</tr>
<tr>
<td>Jan Tiffin</td>
<td>805-434-4303</td>
<td>Evaluator</td>
</tr>
</tbody>
</table>
## APPENDIX C: SCHEDULE

<table>
<thead>
<tr>
<th>TIME</th>
<th>PERSONNEL</th>
<th>ACTIVITY</th>
<th>LOCATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>745</td>
<td>Assigned Personnel</td>
<td>• Report to assigned site for exercise set up</td>
<td>Assigned Site</td>
</tr>
<tr>
<td>800</td>
<td>All Players</td>
<td>• Player, Controller, Evaluator Check In</td>
<td>Assigned Site</td>
</tr>
<tr>
<td>815</td>
<td>All Controllers/Evaluators</td>
<td>• C/E Briefing and Communications Check</td>
<td>Assigned Site</td>
</tr>
<tr>
<td>820</td>
<td>All Players</td>
<td>• Initial Conditions Briefing</td>
<td>Assigned Site</td>
</tr>
<tr>
<td>825</td>
<td>All Players</td>
<td>• C/Es and Players in position and ready to play</td>
<td>Assigned location</td>
</tr>
<tr>
<td>830</td>
<td>All</td>
<td>• Start EX</td>
<td>Assigned Location</td>
</tr>
<tr>
<td>1230</td>
<td>All</td>
<td>• End EX</td>
<td>Assigned Location</td>
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<tr>
<td></td>
<td>Immediately Following Exercise</td>
<td>• Facility Hot Washes</td>
<td>Assigned Location</td>
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<tr>
<td></td>
<td>All</td>
<td>• Participant Feedback Forms</td>
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</table>
APPENDIX D: ACRONYMS

AAM  After Action Meeting
AAR  After Action Report
AAR/IP After Action Report / Improvement Plan
AFN  Access and Functional Needs
C/E  Controller/Evaluator
CAHAN California Health Alert Network
CAHF California Association of Health Facilities
Cal OES California Governor's Office of Emergency Services
Cal OSHA California Division of Occupational Safety and Health
CBO  Community Based Organizations
CCLHO California Conference of Local Health Officers
CDPH California Department of Public Health
CERT Community Emergency Response Team
CHA  California Hospital Association
C/ME Coroner/Medical Examiner
CPCA California Primary Care Association
CHHS California Health and Human Services Agency
DHS  Department of Homeland Security
DOC  Department Operations Center
ED  Emergency Department
EEG  Exercise Evaluation Guide
EHD  Environmental Health Department
EMS  Emergency Medical Services
EMSA  Emergency Medical Services Authority
EMSAAC Emergency Medical Services Administrators Association of California
EOC  Emergency Operation Center
EOM  California Public Health and Medical Emergency Operations Manual
EOP  Emergency Operations Plan
EPO  California Department of Public Health Emergency Preparedness Office
ETA Estimated Time of Arrival
ExPlan Exercise Plan
FAC/FIC Family Assistance Center / Family Information Center
FBI  Federal Bureau of Investigation
FE  Functional Exercise
FEMA Federal Emergency Management Agency
FOUO For Official Use Only
FSE  Full Scale Exercise
HAZMAT Hazardous Materials
HCC  Hospital Command Center
HICS Hospital Incident Command System
HIPAA Health Insurance Portability and Accountability Act
HPP Hospital Preparedness Program
HSEEP Homeland Security Exercise and Evaluation Program
IAP  Incident Action Plan
ICS  Incident Command System
IP   Improvement Plan
JIC  Joint Information Center
JIS  Joint Information System
JRIC Joint Regional Intelligence Center
JTTF Joint Terrorism Task Force
LEMSA Local Emergency Medical Services Authority
LHD Local Health Department
MCI  Mass Casualty Incident
MHCC Medical and Health Coordination Center
MHOAC Medical/Health Operational Area Coordinator Program
MOU Memorandum of Understanding
MRC Medical Reserve Corps
MSEL Master Scenario Events List
NGO Non-governmental organization
NHICS Nursing Home Incident Command System
NIMS National Incident Management System
OA  Operational Area
OEM Office of Emergency Management
OES California Governor’s Office of Emergency Services
PHEP Public Health Emergency Preparedness
POC Point of Contact
PPE Personal Protective Equipment
RDMHC Regional Disaster Medical Health Coordinator
RDMHS Regional Disaster Medical Health Specialist
REOC Regional Emergency Operation Center
SEMS Standardized Emergency Management System
SimCell Simulation Cell
SitMan Situation Manual
SME Subject Matter Expert
SOC State Operations Center
SWAT Special Weapons and Tactics Team
SWMHE Statewide Medical and Health Exercise
TLO  Terrorism Liaison Officer
TTX Tabletop Exercise
UC  Unified Command
VIP Very Important Person