[INSERT LOGO]

Special Pathogen Call Down Drill

After-Action Report/Improvement Plan

[Date]

The After-Action Report/Improvement Plan (AAR/IP) aligns exercise objectives with preparedness doctrine to include the National Preparedness Goal and related frameworks and guidance. Exercise information required for preparedness reporting and trend analysis is included; users are encouraged to add additional sections as needed to support their own organizational needs.

# Exercise Overview

|  |  |
| --- | --- |
| **Event Name** | Special Pathogen Call Down Drill |
| **Exercise Dates** | [Date] |
| **Scope** | This exercise is a no-notice drill, planned for [duration] in the Incident Command Center and [Isolation Room/Biocontainment]. Exercise play is limited to activation and response only. |
| **Mission Area(s)** | Response |
| **Core Capabilities** | Operational Communications - Ensure the capacity for timely communications in support of security, situational awareness, and operations by any and all means available, among and between affected communities in the impact area and all response forces.Health Care and Medical Response Coordination - Health care organizations, the HCC, their jurisdiction(s), and the state’s/jurisdiction’s Emergency Support Function-8 (ESF-8) lead agency plan and collaborate to share and analyze information, manage and share resources, and coordinate strategies to deliver medical care to all populations during emergencies and planned events. |
| **Objectives** | * + - 1. Notify leadership to a Special Pathogen PUI via [method]
			2. Activate Staff Notification process and call-down
			3. Identify correct staff (Tier 1 and Tier 2) to respond to Biocontainment/ICC
			4. Staff Respond to Biocontainment within [expected timeframe] and the ICC within [expected timeframe].
 |
| **Threat or Hazard** | Emerging Infectious Diseases – Special Pathogen |
| **Incident Summary** | [FACILITY NAME] is notified of an incoming Person Under Investigation (PUI) with a suspected Special Pathogen. [Facility] will need to notify and activate its staffing, with Tier 1 and Tier 2 staff responding in an appropriate time frame. |
| **Sponsor** | [Insert Sponsors] |
| **Participating Organizations** | [Insert Participating Organizations] |
| **Point of Contact** | [Insert Point(s) of Contact] |

**Executive Summary**

[Insert Exercise Summary]

[Facility] response to this incident utilized the following core capabilities:

FEMA:

* Operational Communications

ASPR:

* Health Care and Medical Response Coordination

The following Objectives were developed for Incident Response:

* + - 1. Notify leadership to a Special Pathogen PUI via [method]
			2. Activate Staff Notification process and call-down
			3. Identify correct staff (Tier 1 and Tier 2) to respond to Biocontainment/ICC
			4. Staff Respond to Biocontainment within [expected timeframe] and the ICC within [expected timeframe].

**Major Strengths**

* [Identify several strengths observed]

**Primary Areas for Improvement**

* [Identify Several Areas for Improvement Observed]

# 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.

| Objective | Core Capability | Performed without Challenges (P) | Performed with Some Challenges (S) | Performed with Major Challenges (M) | Unable to be Performed (U) |
| --- | --- | --- | --- | --- | --- |
| Notify leadership of response via \_\_\_\_\_\_\_ system | Operational Communications |  |  |  |  |
| Activate Staff Notification process and call-down | Operational Communications |  |  |  |  |
| Identify correct staff to respond to Biocontainment/ICC | Health Care and Medical Response Coordination |  |  |  |  |
| Staff Respond to Biocontainment within [\_\_] minutes/ICC within [\_\_] minutes | Health Care and Medical Response Coordination |  |  |  |  |
| **Ratings Definitions:*** Performed without Challenges (P): The targets and critical tasks associated with the core capability were completed in a manner that achieved the objective(s) and did not negatively impact the performance of other activities. Performance of this activity did not contribute to additional health and/or safety risks for the public or for emergency workers, and it was conducted in accordance with applicable plans, policies, procedures, regulations, and laws.
* Performed with Some Challenges (S): The targets and critical tasks associated with the core capability were completed in a manner that achieved the objective(s) and did not negatively impact the performance of other activities. Performance of this activity did not contribute to additional health and/or safety risks for the public or for emergency workers, and it was conducted in accordance with applicable plans, policies, procedures, regulations, and laws. However, opportunities to enhance effectiveness and/or efficiency were identified.
* Performed with Major Challenges (M): The targets and critical tasks associated with the core capability were completed in a manner that achieved the objective(s), but some or all of the following were observed: demonstrated performance had a negative impact on the performance of other activities; contributed to additional health and/or safety risks for the public or for emergency workers; and/or was not conducted in accordance with applicable plans, policies, procedures, regulations, and laws.
* Unable to be Performed (U): The targets and critical tasks associated with the core capability were not performed in a manner that achieved the objective(s).
 |

Table 1. Summary of Core Capability Performance

The following sections provide an overview of the performance related to each exercise objective and associated core capability, highlighting strengths and areas for improvement.

## Notify leadership of response via [Method]

The strengths and areas for improvement for each core capability aligned to this objective are described in this section.

## Operational Communications

### Strengths

The [full or partial] capability level can be attributed to the following strengths:

Strength 1: [Observation statement]

Strength 2: [Observation statement]

Strength 3: [Observation statement]

### Areas for Improvement

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

Area for Improvement 1: [Observation statement. This should clearly state the problem or gap; it should not include a recommendation or corrective action, as those will be documented in the Improvement Plan.]

Reference: [List any relevant plans, policies, procedures, regulations, or laws.]

Analysis: [Provide a root cause analysis or summary of why the full capability level was not achieved.]

Area for Improvement 2: [Observation statement]

Reference: [List any relevant plans, policies, procedures, regulations, or laws.]

Analysis: [Provide a root cause analysis or summary of why the full capability level was not achieved.]

## Activate staff notification process and call-down

The strengths and areas for improvement for each core capability aligned to this objective are described in this section.

## Operational Communications

### Strengths

The [full or partial] capability level can be attributed to the following strengths:

Strength 1: [Observation statement]

Strength 2: [Observation statement]

Strength 3: [Observation statement]

### Areas for Improvement

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

Area for Improvement 1: [Observation statement. This should clearly state the problem or gap; it should not include a recommendation or corrective action, as those will be documented in the Improvement Plan.]

Reference: [List any relevant plans, policies, procedures, regulations, or laws.]

Analysis: [Provide a root cause analysis or summary of why the full capability level was not achieved.]

Area for Improvement 2: [Observation statement]

Reference: [List any relevant plans, policies, procedures, regulations, or laws.]

Analysis: [Provide a root cause analysis or summary of why the full capability level was not achieved.]

## Identify correct staff to respond to Biocontainment/ICC

The strengths and areas for improvement for each core capability aligned to this objective are described in this section.

## Health Care and Medical Response Coordination

### Strengths

The [full or partial] capability level can be attributed to the following strengths:

Strength 1: [Observation statement]

Strength 2: [Observation statement]

Strength 3: [Observation statement]

### Areas for Improvement

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

Area for Improvement 1: [Observation statement. This should clearly state the problem or gap; it should not include a recommendation or corrective action, as those will be documented in the Improvement Plan.]

Reference: [List any relevant plans, policies, procedures, regulations, or laws.]

Analysis: [Provide a root cause analysis or summary of why the full capability level was not achieved.]

Area for Improvement 2: [Observation statement]

Reference: [List any relevant plans, policies, procedures, regulations, or laws.]

Analysis: [Provide a root cause analysis or summary of why the full capability level was not achieved.]

## Staff Respond to Biocontainment within [\_\_\_] minutes/ICC within [\_\_\_] minutes

The strengths and areas for improvement for each core capability aligned to this objective are described in this section.

## Health Care and Medical Response Coordination

### Strengths

The [full or partial] capability level can be attributed to the following strengths:

Strength 1: [Observation statement]

Strength 2: [Observation statement]

Strength 3: [Observation statement]

### Areas for Improvement

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

Area for Improvement 1: [Observation statement. This should clearly state the problem or gap; it should not include a recommendation or corrective action, as those will be documented in the Improvement Plan.]

Reference: [List any relevant plans, policies, procedures, regulations, or laws.]

Analysis: [Provide a root cause analysis or summary of why the full capability level was not achieved.]

Area for Improvement 2: [Observation statement]

Reference: [List any relevant plans, policies, procedures, regulations, or laws.]

Analysis: [Provide a root cause analysis or summary of why the full capability level was not achieved.]

# Appendix A: Improvement Plan

This IP has been developed specifically for [Organization Name] as a result of Special Pathogen Call Down Drill conducted on [Exercise Date].

| **Core Capability** | **Issue/Area for Improvement** | **Corrective Action** | **Capability Element[[1]](#footnote-1)** | **Primary Responsible Organization** | **Organization POC** | **Start Date** | **Completion Date** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Operational Coordination |  |  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |
| Health Care and Medical Response Coordination  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |

# Appendix B: Exercise Participants

[INSERT LIST OF EXERCISE PARTICIPANTS]

# Appendix C: Time Evaluation

[INSERT COPIES OF THE TIME EVALUATION SHEETS]

# Appendix D: Acronyms

| Acronym | Meaning |
| --- | --- |
| AAR/IP | After Action Report/Improvement Plan  |
| ADN | Assistant Director of Nursing |
| AOD | Administrator On Duty |
| ASPR | Administration for Stragetic Preparedness and Response (HHS) |
| BCU | Biocontainment Unit |
| CEO | Chief Executive Officer |
| COO | Chief Operating Officer |
| ED | Emergency Department |
| EMS | Emergency Medical Services |
| EOC | Emergency Operations Center |
| EOP | Emergency Operations Plan |
| EVD | Ebola Virus Disease |
| EVS | Environmental Services |
| ICC | Incident Command Center |
| ICU | Intensive Care Unit |
| IRG | Incident Response Guide |
| HCID | High Consequence Infectious Disease |
| HHS | Health & Human Services (Federal Department) |
| HICS | Hospital Incident Command System.  |
| HIMT | Hospital Incident Management Team |
| MCI | Mass Casualty Incident |
| MD | Medical Doctor |
| PICU | Pediatric Intensive Care Unit |
| PUI | Person Under Investigation |
| RESPTC | Regional Emerging Special Pathogen Treatment Center |
| RN | Registered Nurse |
| SPP | Special Pathogen Program |
| SPU | Special Pathogen Unit |
| VHF | Viral Hemorrhagic Fever |

1. Capability Elements are: Planning, Organization, Equipment, Training, or Exercise. [↑](#footnote-ref-1)