

Exercise Program
For the
Wichita Metropolitan Statistical Area (MSA)



CITIES READINESS INITIATIVE
Butler ★ Harvey ★ Sedgwick ★ Sumner

“Pills to People in 48 Hours”

Exercise Program Guidance

Introduction

The Cities Readiness Initiative (CRI) is a federally funded effort to prepare major US cities and metropolitan areas to effectively respond to a large scale bioterrorist event by dispensing antibiotics to their entire identified population within 48 hours of the decision to do so.

In order to accomplish the above, each county must have a well written **Mass Dispensing Plan**. On an ongoing basis, the **Plan**, also known as the **SNS Plan**, must be evaluated, exercised, and improved. To this end, a CRI Critical Capacities List can be found at the end of this program guidance, followed by a multiyear training and exercise schedule (Year One through Year Three).

This document has been designed to provide information pertaining to the requirements and documentation of Public Health Emergency Management exercises consistent with the principles outlined in the Homeland Security Exercise and Evaluation Program (HSEEP).

Homeland Security Exercise and Evaluation Program (HSEEP)

The Homeland Security Exercise and Evaluation Program (HSEEP) is a capabilities and performance-based exercise program which provides a standardized policy, methodology, and terminology for exercise design, development, conduct, evaluation, and improvement planning. Adherence to the HSEEP policy and guidance ensures that exercise programs conform to established best practices, and helps provide unity and consistency of effort for exercises at all levels of government.

Exercise Types

There are seven types of exercises defined within HSEEP, each of which is either discussions-based or operations-based.

Discussions-based Exercises familiarize participants with current plans, policies, agreements and procedures, or may be used to develop new plans, policies, agreements, and procedures. Types of Discussion-based Exercises include:

- *Seminar.* A seminar is an informal discussion, designed to orient participants to new or updated plans, policies, or procedures (e.g., a seminar to review a new Evacuation Standard Operating Procedure).

- *Workshop*. A workshop resembles a seminar, but is employed to build specific products, such as a draft plan or policy (e.g., a Training and Exercise Plan Workshop is used to develop a Multi-year Training and Exercise Plan).
- *Tabletop Exercise (TTX)*. A tabletop exercise involves key personnel discussing simulated scenarios in an informal setting. TTXs can be used to assess plans, policies, and procedures.
- *Game*. A game is a simulation of operations that often involves two or more teams, usually in a competitive environment, using rules, data, and procedure designed to depict an actual or assumed real-life situation.

Operations-based Exercises validate plans, policies, agreements and procedures, clarify roles and responsibilities, and identify gaps in an operational environment. Types of Operations-based Exercises include:

- *Drill*. A drill is a coordinated, supervised activity usually employed to test a single, specific operation or function within a single entity (e.g., a fire department conducts a decontamination drill).
- *Functional Exercise (FE)*. A functional exercise examines and/or validates the coordination, command, and control between various multi-agency coordination centers (e.g., emergency operation center, joint field office, etc). A functional exercise does not involve any “boots on the ground” (i.e., first responders or emergency officials responding to an incident in real time).
- *Full-Scale Exercise (FSE)*. A full-scale exercise is a multi-agency, multi-jurisdictional, multi-discipline exercise involving functional (e.g., joint field office, emergency operation centers, etc.) and “boots on the ground” response (e.g., firefighters decontaminating mock victims).

Exercise Documentation

The list below briefly describes the important document types associated with most exercises.

- *A Situation Manual (SitMan)* is a participant handbook for discussion-based exercises, particularly TTXs. It provides background information on exercise scope, schedule, and objectives. It also presents the scenario narrative that will drive participant discussions during the exercise.
- *The Exercise Plan (ExPlan)*, typically used for operations-based exercises, provides a synopsis of the exercise and is published and distributed to players and observers prior to the start of the exercise. The ExPlan includes the exercise objectives and scope, safety procedures, and logistical considerations such as an exercise schedule. The ExPlan does not contain detailed scenario information.
- *The Controller and Evaluator (C/E) Handbook* supplements the ExPlan for operations-based exercises, containing more detailed information about the exercise scenario and describing exercise controllers' and evaluators' roles and responsibilities. Because the C/E Handbook contains information on the scenario and exercise administration, it is distributed only to those individuals specifically designated as controllers or evaluators.
- *The Master Scenario Events List (MSEL)* is a chronological timeline of expected actions and scripted events (i.e., injects) to be inserted into operations-based exercise play by controllers in order to generate or prompt player activity. It ensures necessary events happen so that all exercise objectives are met.
- *A Player Handout* is a 1-2 page document, usually handed out the morning of an exercise, which provide a quick reference for exercise players on safety procedures, logistical considerations, exercise schedule, and other key factors and information.
- *Exercise Evaluation Guides (EEGs)* help evaluators collect and interpret relevant exercise observations. EEGs provide evaluators with information on what tasks they should expect to see accomplished during an exercise, space to record observations, and questions to address after the exercise as a first step in the analysis process. In order to assist entities in exercise evaluation, standardized EEGs have been created that reflect capabilities-based planning tools, such as the Target Capabilities List (TCL) and the Universal Task List (UTL). The EEGs are not meant as report cards. Rather, they are intended to guide an evaluator's observations so that the evaluator focuses on capabilities and tasks relevant to exercise objectives to support development of the After Action Report/Improvement Plan (AAR/IP).

- An *After Action Report/Improvement Plan (AAR/IP)* is the final product of an exercise. The AAR/IP has two components: an AAR, which captures observations and recommendations based on the exercise objectives as associated with the capabilities and tasks; and an IP, which identifies specific corrective actions, assigns them to responsible parties, and establishes targets for their completion. The lead evaluator and the exercise planning team draft the AAR and submit it to exercise participants, for review, no more than 30 days after exercise conduct. The final AAR/IP should be disseminated to participants no more than 60 days after exercise conduct.

HSEEP Compliance

HSEEP Compliance is defined as adherence to specific HSEEP-mandated practices for exercise program management, design, development, conduct, evaluation, and improvement planning. In order for an entity to be considered HSEEP compliant it must satisfy four distinct performance requirements:

1. Conducting an annual Training and Exercise Plan Workshop and developing and maintaining a Multi-year Training and Exercise Plan.
2. Planning and conducting exercises in accordance with the guidelines set forth in HSEEP Volumes I-III.
3. Developing and submitting a properly formatted After-Action Report/Improvement Plan (AAR/IP). The format for the AAR/IP is found in HSEEP Volume III.
4. Tracking and implementing corrective actions identified in the AAR/IP.

Additional Resources and Information

The HSEEP website, <http://hseep.dhs.gov>, provides additional information regarding HSEEP Policy and Guidance. Available on the website are the revised versions of HSEEP Volumes I-III, which provide detail and context regarding many of the terms, processes, and requirements described above. Volume IV is a searchable library that provides many sample materials. The HSEEP Toolkit, which includes the National Exercise Schedule (NEXS) System, Design and Development System (DDS), and Corrective Action Program (CAP) System, allows users to schedule, plan, evaluate and track corrective actions from exercises. In addition, there are several exercise training courses, including independent study (IS-120a, IS-130, etc.), mobile (HSEEP Mobile Course), and residence courses (Master Exercise Practitioner Program) that teach students the principles of exercise planning, conduct, evaluation and improvement planning.

CRI Critical Capacities

1. *Command and Control* – Includes using an Incident Command System structure coordinated with essential state and local agencies and departments and with the federal government when necessary. An Incident Commander and back-up are identified, procedures for apportionment of SNS materiel have been developed, and agreements are in place between appropriate agencies and organizations.

2. *Requesting Strategic National Stockpile (SNS) assets* – Includes state and local procedures for the county to request SNS materiel, request justification guidelines, and a signed MOU between the Local Health Department and county hospital(s).

3. *Management of SNS Operations* – Includes identification of critical position leads with back-up and contact information. A current call-down roster is maintained.

4. *Tactical Communications* – Includes development of a job action sheet and training for the Communications Lead, having networks and a back-up system between command and control locations, a plan for rapid communications network repair, and maintenance of call-down lists.

5. *Public Information* – Includes development of a job action sheet and training for the Public Information Lead. Clinical and drug information has been compiled and public information campaigns have been developed. There are plans for coordinating local media efforts and disseminating information to the public and health care professionals.

6. *Security* – Includes development of a job action sheet and training for the Security Lead and a plan for securing SNS assets in the local distribution site (including coordination between the County Sheriff and the Highway Patrol). Security plans for the local distribution site, dispensing sites and treatment centers must include protection of staff and volunteers, crowd control, and credentialing staff. Security arrangements are consistent with security arrangements associated with any federal government assets that may be needed to augment local capabilities.

7. *Receiving SNS materiel* – Includes development of job action sheets and training of local distribution site leads and back-ups, identification and training of volunteers, and maintenance of call-down rosters. Appropriate office and material handling equipment is available.

8. *Controlling SNS Inventory* – Includes development of a job action sheet and training for an Inventory Lead, an inventory management system is in place with back-up, staff are identified and trained, and a call-down roster is maintained.

9. *Distribution* – Includes development of a job action sheet and training for a Distribution Lead, a plan is in place for coordinating delivery of SNS materiel to treatment facilities and dispensing sites. Agreements are in place with organizations that will perform this function, there is a plan for recovery and repair of vehicles, and the appropriate material handling equipment is available.

10. *Dispensing Oral Meds* – Includes development of a job action sheet and training for Dispensing Site Managers and back-up for each dispensing site. Leads and back-ups are identified for safety, security, communications, and logistics. There is a plan to dispense medications to the public, including standard operating procedures and protocols, requesting and receiving SNS materiel, and providing interpretation/translation services. Call-down rosters are maintained and core personnel have been identified and trained for each site.

11. *Treatment Center Coordination* – Includes development of a job action sheet and training for a Treatment Center Lead and contact persons have been identified and are documented in the SNS Plan.

Training, Exercise and Evaluation

The following personnel have been assigned to lead, plan and oversee public health emergency preparedness related training, exercise and evaluation (to include SNS-specific topics):

Ylonda Dennis (Butler County)

Wendy Bishop (Harvey County)

Daniel Deane (Sedgwick County)

Michael Green (Sumner County)

Travis Everett (CRI Planner)