

EXERCISE EVALUATION GUIDE (EEG)

<p>Exercise Name: The Rhode Island Long Term Care Mutual Aid Plan (LTC-MAP) Full-Scale Exercise</p> <p>Exercise Date: _____</p>	<p>Organizations: Rhode Island Long Term Care Mutual Aid Plan (LTC-MAP)</p>	<p>Location Evaluated: Disaster Struck Facility Command Center:</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Facility Name</p>
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Healthcare Preparedness and Response (HCPR) Capabilities & Public Health Preparedness (PHP) Capabilities

HCPR Capability 2, Objective 2, Activity 3: Utilize communication systems and platforms.
PHP Capability 6, Function 3: Exchange information to determine a common operating picture.
Critical Tasks:

- Ensure ongoing communication capability throughout the exercise by employing redundant systems (e.g. landline telephone, cellular telephone, text, e-mail, fax, other 2-way communications and the LTC-MAP website).
- Ensure that 100% of activated LTC-MAP members complete Emergency Reporting within the established timeframe (30 minutes and by the end of the exercise).
- Ensure that Connecticut LTC- MAP member provide ongoing information and situational reports via online emergency reporting system as their internal situations escalate.

HCPR Capability 2, Objective 3, Activity 1,2 & 3: Identify and Coordinate Resource Needs during an Emergency. Coordinate Incident Action Planning During an Emergency. Communicate with Health Care Providers, Non-Clinical Staff, Patients (Residents), and Visitors during an Emergency.
Critical Tasks:

- All DSFs document an Incident Action Plan (IAP) using the NHICS IAP Quick Guide in their Facility Command Center.
- Demonstrate the ability to fill resource gaps through members’ vendor support process and sharing of resources.
- DSFs to conduct a staff recall utilizing their internal communications plan (electronic notification system, phone tree, call down lists, etc.).

HCPR Capability 3, Objective 6, Activity 1: Develop and Implement Evacuation and Relocation Plans.
Critical Tasks:

- Demonstrate effective response and evacuation coordination by DSF personnel through the use of the Nursing Home Incident Command System (NHICS) and community partner involvement.
- DSF Clinicians determine the proper placement of mock residents based on mock RAFs bed availability and categories of care.

Healthcare Preparedness and Response (HCPR) Capabilities & Public Health Preparedness (PHP) Capabilities

HCPR Capability 3, Objective 6, Activity 2: Develop and Implement Evacuation Transportation Plans.

Critical Tasks:

- Determine the transportation needs of the full census of the Disaster Struck Facility (DSF) by completing a Transportation Evacuation Survey during the exercise and uploading the data to the LTC-MAP website in the Transportation tab for the DSF.

HCPR Capability 4, Objective 2, Activity 2: Implement Out-of-Hospital Medical Surge.

Critical Tasks:

- Evacuating DSFs arrange for the transfer of staff, supplies, and equipment, as needed, for the continuity of care of their residents at the receiving facilities.

Homeland Security Exercise and Evaluation Program (HSEEP)

Disaster Struck Facility Command Center EEG

Rhode Island Long Term Care Mutual Aid Plan
Full Scale Exercise

Capability Objective	Associated Critical Tasks	Observation Notes and Explanation of Rating	Target Rating
<p>HCPR Capability 2 Objective 2 Activity 3: Utilize communication systems and platforms PHP Capability 6, Function 3: Exchange information to determine a common operating picture.</p>	<ul style="list-style-type: none"> • Ensure ongoing communication capability throughout the exercise by employing redundant systems (e.g. landline telephone, cellular telephone, text, e-mail, fax, other 2-way communications and the LTC-MAP website). • Ensure that 100% of activated LTC-MAP members complete Emergency Reporting within the established timeframe (30 minutes and by the end of the exercise). • Ensure that Connecticut LTC-MAP member provide ongoing information and situational reports via online emergency reporting system as their internal situations escalate. 		
<p>HCPR Capability 2, Objective 3, Activity 1,2 & 3: Identify and Coordinate Resource Needs during an Emergency. Coordinate Incident Action Planning During an Emergency. Communicate with Health Care Providers, Non-Clinical Staff, Patients (Residents), and Visitors during an Emergency.</p>	<ul style="list-style-type: none"> • All DSFs document an Incident Action Plan (IAP) using the NHICS IAP Quick Guide in their Facility Command Center. • Demonstrate the ability to fill resource gaps through members' vendor support process and sharing of resources. • DSFs to conduct a staff recall utilizing their internal communications plan (electronic notification system, phone tree, call down lists, etc.). 		

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<p>HCPR Capability 3, Objective 6, Activity 1: Develop and Implement Evacuation and Relocation Plans.</p>	<ul style="list-style-type: none"> • Demonstrate effective response and evacuation coordination by DSF personnel through the use of the Nursing Home Incident Command System (NHICS) and community partner involvement. • DSF Clinicians determine the proper placement of mock residents based on mock RAFs bed availability and categories of care. 		
<p>HCPR Capability 3 Objective 6, Activity 2: Develop and Implement Evacuation Transportation Plans.</p>	<ul style="list-style-type: none"> • Determine the transportation needs of the full census of the Disaster Struck Facility (DSF) by completing a Transportation Evacuation Survey during the exercise and uploading the data to the LTC-MAP website in the Transportation tab for the DSF. 		
<p>HCPR Capability 4, Objective 2, Activity 2: Implement Out-of-Hospital Medical Surge.</p>	<ul style="list-style-type: none"> • Evacuating DSFs arrange for the transfer of staff, supplies, and equipment, as needed, for the continuity of care of their residents at the mock receiving facilities. 		
Final Core Capability Rating			

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Any suggestions for RI LTC-MAP plan improvements:

Any Exercise Suggestions:

Other Disaster Struck Facility Command Center Comments:

Evaluator Name _____

Evaluator E-mail _____

Phone _____

Ratings Key

- P – Performed without Challenges
- S – Performed with Some Challenges
- M – Performed with Major Challenges
- U – Unable to be Performed

PLEASE FAX COMPLETED EEG TO 860-793-4880 or e-mail to
kim.joyce@jensenhughes.com
By: September 30, 2022

Ratings Definitions

<p>Performed without Challenges (P)</p>	<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.</p>
<p>Performed with Some Challenges (S)</p>	<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. However, opportunities to enhance effectiveness and/or efficiency were identified.</p>
<p>Performed with Major Challenges (M)</p>	<p>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.</p>
<p>Unable to be Performed (U)</p>	<p>The targets and critical tasks associated with the core capability were not performed in a manner that achieved the objective(s).</p>