

## FACILITY AFTER ACTION REPORT / IMPROVEMENT PLAN

<b>Facility Name</b>	
<b>Exercise Name</b>	<b>2024 Ruptured Sprinkler Pipe / Internal Flood Tabletop Exercise.</b>
<b>Exercise Date</b>	<input type="checkbox"/> <b>Tuesday, June 4, 2024 (CT LTC-MAP)</b> <input type="checkbox"/> <b>Wednesday, June 5, 2024 (CT LTC-MAP)</b> <input type="checkbox"/> <b>Thursday, June 6, 2024 (CT LTC-MAP)</b>
<b>Scope</b>	<p>This Tabletop exercise was part of the 2024 Connecticut Long Term Care Mutual Aid Plan (LTC-MAP) Annual Education Conference. This exercise reinforces discussions and presentations on the CMS Emergency Preparedness Program requirements, including:</p> <ul style="list-style-type: none"> <li>• <b>Hazard Vulnerability Assessments (HVA) &amp; Mitigation Plans</b></li> <li>• <b>Plan Design and Implementation:</b> <ul style="list-style-type: none"> <li>○ Emergency Preparedness Plan (EPP)</li> <li>○ Incident Command System (ICS)</li> <li>○ Communications Plan</li> <li>○ Full Building Evacuation Plan</li> <li>○ Individual Disaster Response Procedures</li> <li>○ Recovery Plan &amp; Continuity of Operations (COOP)</li> </ul> </li> <li>• <b>Training and Testing:</b> Provide guidance on minimum requirements and practical Training and Testing Programs.</li> </ul> <p>This Tabletop exercise included a group discussion led by a facilitator using a narrated, clinically relevant emergency escalating scenario. For each operational period, a scenario was presented, and the participants were tasked with applying their emergency procedures by answering prepared questions designed to challenge their emergency response plans.</p>
<b>Mission Area(s)</b>	<b>Response</b>



Healthcare  
Preparedness  
and Response  
Capabilities

The capabilities listed below, as identified in the 2017 – 2022 Health Care Preparedness and Response Capabilities, published in November 2016, provide the foundation for developing the exercise objectives and scenario. The purpose of this exercise is to measure and validate the performance of the following capabilities and their associated critical tasks:

**Capability 1: Foundation for Healthcare and Medical Readiness**

**Objective 4:** Train and Prepare the Health Care and Medical Workforce

Activity 3: Plan and Conduct Coordinated Exercises with Health Care Coalitions Members and Other Response Organizations.

**Capability 2: Healthcare and Medical Response Coordination**

**Objective 3:** Coordinate Response Strategy, Resources, and Communications.

Activity 1: Identify and Coordinate Resource Needs during an Emergency

**Capability 3: Continuity of Healthcare Service Delivery**

**Objective 6:** Plan for and Coordinate Health Care Evacuation and Relocation

Activity 1: Develop and Implement Evacuation and Relocation Plans

Threat or  
Hazard

A sprinkler pipe ruptured causing extended internal flooding in and around the electrical room and residents' rooms/apartments. This was followed by the loss of phones and internet. This forced residents to relocate to another area of the facility and eventually to their stop-over point location.



Scenarios

**Module 1 / Operational Period 1: Burst Sprinkler Pipe**

**Scenario:** Your current census is 80% of your licensed beds. At approximately 9:15 am, the fire alarm is activated. The receptionist reports to the fire alarm panel, and it states, “Water Flow.” She is unsure what that means, but the phone lines are dead as she attempts to overhead page the alarm. Staff informs her that a sprinkler pipe burst near the mechanical/electrical room, and water is everywhere. Upon fire department arrival, they are directed to the mechanical/electrical room.

**Module 2 / Operational Period 2: Assessments and Notifications**

**Scenario:** The fire department was able to stop the flow of water. The mechanical/electrical room and nearby residents' rooms/apartments suffered extensive damage. The internet switch and router are not operating. There are no phones or internet in the building. The fire department has called the electrical inspector because water is in the main electrical panels and the generator transfer switch. Per the electrical inspector, the electrical system is stable in one part of the building. The electrical service was shut down on the other side of the building due to water damage in those panels.

**Module 3 / Operational Period 3: Relocation of Residents to Other Areas of Your Facility And Your Stop-Over Location**

**Scenario:** 10:30 am. The necessary repairs should take 24 – 30 hours. The facility leadership team and municipal partners have decided to relocate residents to other building areas and our stop-over location or evacuation out of the building to other facilities. The facility's command center is initiating its surge plan and evacuation plan. The fire department is asking what resources are needed. The local media are outside the facility filming the situation. There are multiple social media posts of “something going on.” These posts are starting to trend, and there are many community comments.

**Module 4 / Operational Period 4: Recovery**

**Scenario:** It is now 2:30 pm. All preparatory actions for the internal relocation of residents and evacuation to stop-over locations have been accomplished, and the evacuation/movement of residents is well underway.



**Sponsor**

**Connecticut Long Term Care Mutual Aid Plan (LTC-MAP), funded through the Connecticut Department of Public Health (CT DPH) and CT LTC-MAP Members Annual Dues.**

**Participating Organizations**

Participating Organizations	
	Connecticut Department of Public Health (DPH), Facility Licensing & Investigations Section (FLIS)
	Connecticut Department of Public Health (DPH), Office of Public Health Preparedness & Response (OPHPR)
	Connecticut Department of Emergency Services & Public Protection (DESPP), Division of Emergency Management & Homeland Security (DEMHS)
	Connecticut Long Term Care Mutual Aid Plan (LTC-MAP) Members
	Jensen Hughes, Inc.

**Points of Contact**

**Connecticut Association of Health Care Facilities (CAHCF) POC:**  
 Matthew V. Barrett, JD, MPA  
 President / Chief Executive Officer  
 213 Court Street  
 Middletown, CT 06457  
 (860) 290-9424  
[mbarrett@cahcf.com](mailto:mbarrett@cahcf.com)

**Jensen Hughes POC:**  
 Andy McGuire, CEM, EMT-P  
 Senior Fire & Emergency Management Consultant  
 Jensen Hughes  
 31 Cooke Street  
 Plainville, CT 06062  
 (860) 390-1949  
[andrew.mcguire@jensenhughes.com](mailto:andrew.mcguire@jensenhughes.com)

## ANALYSIS OF CORE CAPABILITIES

The following section provides an overview of the performance related to each exercise operational period and offers an opportunity to highlight strengths and areas for improvement.

<b>Module 1 / Operational Period 1: Burst Sprinkler Pipe</b>	
What immediate Life Safety actions should be taken?	
What immediate Clinical Actions should be taken?	
Strengths:	Areas of Improvement:
<b>Module 2 / Operational Period 2: Assessment and Notifications</b>	
List the existing internal plans and procedures that should be activated.	
What regulatory requirements/notifications should you be making?	
What are the steps to activate the Long Term Care Mutual Aid Plan (LTC-MAP)?	
You have received a notification from the Long Term Care Mutual Aid Plan (LTC-MAP) to conduct emergency reporting. Log into <a href="http://www.protectadvisr.com">www.protectadvisr.com</a> and complete your Emergency Reporting. (see Emergency Reporting quick guide for assistance)	

Strengths:	Areas of Improvement:
<p><b><u>Module 3 / Operational Period 3: Relocation of Residents to Other Areas of Your Facility and Your Stop Over Point Location</u></b></p>	
<p>Where would you establish your internal surge area(s)? What staff and supplies do you need for your surge area(s)?</p>	
<p>Where is your Stop Over Point Location? What staff and supplies do you need for your Stop Over Point Location?</p>	
<p>How would you determine which residents to relocate to your internal surge location and your Stop Over Point?</p> <p>How would you prepare the residents to relocate to your Stop Over Point?</p> <p>What personal belongings needs to go with them?</p>	
<p>Where do you get the information to give to the Fire Department / EMS and/or LTC Coordinating Center regarding what transportation vehicles are needed to transport your residents to your Stop Over Point?</p> <p>Where would vehicle staging be located?</p> <p>Who would manage the vehicle staging area?</p>	

<p>Ongoing Communications: What actions would the facility Incident Commander and/or PIO take to address the media inquiries?</p> <p>How and who would notify residents' families?</p> <p>How would you address the transfer of the resident's medications to your Stop Over Point location?</p> <p>How would you share medical records and resident information with residents accepting facilities?</p>	
<p>Strengths:</p>	<p>Areas of Improvement:</p>
<p><b><u>Module 4 / Operational Period 4: Recovery</u></b></p>	
<p>Do you have a Business Agreement with a Restoration Contractor?</p> <p>If so, are they listed as a vendor in your EOP? List their contact information.</p>	
<p>Who is responsible for contacting your insurance company to file a claim?</p> <p>Who is responsible for tracking all the expenses that occurred during this event?</p>	

How will you communicate with residents, and their families, who were evacuated to your Stop Over Point or a receiving facility?	
Strengths:	Areas of Improvement:



## EXECUTIVE SUMMARY / IMPROVEMENT PLAN

### Major Strengths

**Instructions to participant:** At the end of the exercise, summarize at least 3-5 items identified as major strengths in your planning, procedures, and response.

The major strengths identified during this exercise are as follows:

**Primary Areas for Improvement**

**Instructions to participant:** At the end of the exercise, prioritize the top 3-5 issues identified as primary areas for improvement in your planning, procedures, and response, and develop an action plan for improvement:

The Primary Areas for Improvement identified during this exercise are as follows:	Action Plan for Improvement:	Responsible	Projected Completion Date
<i>EXAMPLE: We determined that staff did not have knowledge of the "location of our stop-over point location.</i>	<ol style="list-style-type: none"> <li>1. <i>Develop a plan to train all staff on our Full Building Evacuation Plan</i></li> <li>2. <i>Add this component to onboarding and annual training.</i></li> </ol>	<i>Director of Maintenance</i>	<i>9/1/2024</i>

Use this area as a continuation for any comments within the document: