

Naugatuck Valley Health District Shelton POD Functional Exercise

After-Action Report/Improvement Plan May 3, 2016

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

Exercise Name	Naugatuck Valley Health District				
Exercise Dates	April 11-14, 2016				
	This is a functional exercise planned for the four-day period of April 11-14, 2016. Exercise play will be very limited during Days 1-3, with the bulk of the exercise play on Day 4.				
	Exercise play is limited to the following locations:				
	• April 11-13, 2016:				
	Exercise play is conducted at NVHD, 98 Bank Street, Seymour, CT 06483.				
Scope	• April 14, 2016:				
	POD set-up at Shelton High School, 120 Meadow Street, Shelton, CT 06484				
	MCM delivery at LDS, Seymour Police Department Sally Port, 11 Franklin Street, Seymour, CT 06483				
	Hotwash immediately following exercise at NVHD, 98 Bank Street, Seymour, CT 06483				
Mission Area(s)	Response				
Core Capabilities	Public Health and Medical Services				
	Capability #6 Information Sharing				
	1. Demonstrate the ability of the POD site to generate and submit orders for MCM assets using IMATS				
	Capability #8 Medical Countermeasure Dispensing				
Objectives	2. Demonstrate the ability to staff and set up the POD site				
	Capability #9 Medical Material Management and Distribution				
	3. Demonstrate the ability to receive, secure, and manage MCM inventory				
	 Demonstrate the ability to distribute MCM assets from the LDS to 1 Open POD site 				

	Capability #15 Volunteer Management					
	5. Demonstrate the ability to credential and deliver just-in-time training (JITT) to POD site staff					
Threat or						
Hazard	Biological – Emerging Infectious Disease					
	Several individuals in Connecticut have begun presenting to hospital emergency rooms and physician offices complaining of fever, headache, body aches, cough, and diarrhea. Influenza is eliminated as a possible cause in every case.					
Scenario	Laboratory testing is inconclusive; hospitals notify DPH epidemiologists and samples are sent to the CDC.					
	While identification is still underway, it has been determined that the infection is caused by a bacterium that is susceptible to doxycycline, ciprofloxacin, or amoxicillin.					
	This exercise is sponsored by:					
a	Naugatuck Valley Health District					
Sponsor	This exercise is part of a statewide MCM exercise being conducted concurrently and sponsored by the CT Department of Public Health.					
	Naugatuck Valley Health District					
	City of Shelton Emergency Management Department					
Participating	City of Shelton Parks & Recreation Department					
Organizations	Shelton Fire Department					
	Seymour Police Department Connecticut Department of Public Health					
	Connecticut Department of Lubite ricatur					

Points of Contact	Naugatuck Valley Health District 203-881-3255 jstelmaszek@nvhd.org
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ANALYSIS OF 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	Capability	Performed without Challenges (P)	Performed with Some Challenges (S)	Performed with Major Challenges (M)	Unable to be Performed (U)
Demonstrate the ability to generate and submit orders for MCM assets using IMATS	(6) Information Sharing	Х			
Demonstrate the ability to staff and set up 1 Open POD site	(8) Medical Countermeasure Dispensing		Х		
Demonstrate the ability to receive, secure, and manage MCM inventory	(9) Medical Material Management and Distribution	Х			
Demonstrate the ability to distribute MCM assets from the LDS to 1 Open POD site	(9) Medical Material Management Distribution				N/A
Demonstrate the ability to credential and deliver just-in- time training (JITT) to POD site staff	(15) Volunteer Management	X			

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 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.

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

Capability 6: Information Sharing

1. Demonstrate the ability of the POD site to generate and submit orders for MCM assets using IMATS.

Strengths

The full capability level can be attributed to the following strengths:

Strength 1: CT DPH provided adequate training on IMATS prior to the exercise.

Strength 2: Ordering MCM assets on IMATS was simple, easy and was done quickly on Day 3.

Strength 3: Once the MCM asset order was received by NVHD from the LDS (Seymour Police Department), the inventory was received in IMATS system.

Areas for Improvement

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

Area for Improvement 1: NVHD Assistant Director Community Health is backup IMATS user for NVHD. She could not log in to her IMATS account the day of the exercise.

Reference: None

Analysis: CT DPH and CDC were aware of this issue prior to the exercise and had not resolved it in time.

Area for Improvement 2: The backup inventory ordering system (paper system) was not tested (in addition to the new IMATS system).

Reference: CT DPH RSS WAREHOUSE REQUEST/DELIVERY FORM (RSS-RDF), RSS Warehouse FOG, Appendix 1

Analysis: Testing the paper submission (backup method) was not tested as part of this drill for local health departments. CT DPH requested all local health orders be submitted online through the primary ordering method, IMATS.

Capability 8: Medical Countermeasure Dispensing

1. Demonstrate the ability to staff and set up the POD site.

Strengths

The partial capability level can be attributed to the following strengths:

Strength 1: Staff was enthusiastic about the exercise and contributed a lot of great analysis and recommendations throughout the exercise.

Strength 2: The Emergency Management Directors for the Town of Seymour and the City of Shelton offered recommendations during exercise play and during the hot wash. They made staff aware of additional resources that are housed within the jurisdiction (i.e. through Seymour) that can be made available to the District during a public health emergency.

Strength 3: Custodial staff at Shelton High School provided facility set-up support, were briefed on the intention of the exercise and agreed to provide the same help during a real public health emergency.

Areas for Improvement

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

Area for Improvement 1: Internal communication during the exercise play.

Reference: None

Analysis: Aging hand-held radios would not hold a battery charge and there were no backup radios available.

Replace hand-held radios because the batteries of our current radios are not holding a charge for an extended period. New batteries are not available because the radios are obsolete. In the past, radios were compatible with those of other regional partners so that radio capability can be expanded as needed for an event. Compatibility should continue.

Area for Improvement 2: ICS and Use of Medical Reserve Corps and volunteers

Reference: NVHD ICS- Shelton POD Functional Exercise April 14, 2016

Analysis: The current NVHD staffing level is 17 members so only the primary roles were filled with employees, this is a change. Supporting roles and other gaps were identified. This exercise was not inclusive of Medical Reserve Corps or Community Emergency Response Team volunteers nor was municipal staff invited to participate at this particular exercise. Pre-identified volunteers will be included moving forward. Also, NVHD has experienced considerable turnover of staff. It would benefit the new staff to have ICS training with a trainer for team-building purposes.

Area for Improvement 3: Cash on hand to cover simple drill expenses readily available leading up to and during the exercise.

Reference: None

Analysis of Capabilities

Analysis: The Finance Unit Leader should assure adequate petty cash on hand is available to cover anticipated costs of the drill and event.

Capability 9: Medical Material Management Distribution

- 1. Demonstrate the ability to receive, secure, and manage MCM inventory.
- 2. Demonstrate the ability to distribute MCM assets from the LDS to one Open POD site.

Strengths

The full capability level can be attributed to the following strengths:

Strength 1: The requested medical countermeasures were delivered to the correct location where the shipment was received and securely stored by Seymour Police Department until picked up by NVHD staff. All paperwork and change of custody forms were completed correctly.

Strength 2: NVHD Director of Health was notified by CT DPH via telephone call prior to when the shipment was expected to arrive in Seymour.

Strength 3: The Dispatcher for Seymour Police Department was notified prior to the drill during the planning stage.

Areas for Improvement

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

Area for Improvement 1: Staging the medical countermeasures.

Reference: None

Analysis: Since this was a small order for one open POD, staging was not practiced during this exercise.

Area for Improvement 2: Transportation of the MCM assets to the POD site(s) from the LDS.

Reference: None

Analysis: The MCM shipment was received after the NVHD POD exercise completed so there was no opportunity for the City of Shelton Emergency Management Director to practice the coordination of pick-up and delivery from Seymour to Shelton. The procedure and responsibilities for this process are included in the Shelton POD Security Plan, which is maintained by the Shelton Police Department.

Capability 15: Volunteer Management

Strengths

The partial capability level can be attributed to the following strengths:

Strength 1: All staff wore their NVHD identification badges and staff shirts.

Strength 2: All staff showed up on time to the exercise.

Strength 3: In addition to two classroom training sessions and two separate briefing meetings, just-in-time training (JITT) was provided to the POD staff.

Areas for Improvement

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

Area for Improvement 1: POD Facility Set-Up Team established.

Reference: None

Analysis: A specific "POD Facility Set-Up Team" should be established with three-deep leadership to ensure a smooth process.

Area for Improvement 2: Expectations for roles and responsibilities and the use of Job Action Sheets.

Reference: None

Analysis: Job Action Sheets (JAS) were provided to Incident Command Staff. Additional NIMS and ICS training is recommended for all NVHD staff to strengthen the team particularly due to recent turnover.

APPENDIX A: IMPROVEMENT PLAN

This IP has been developed specifically for Naugatuck Valley Health District as a result of the Shelton POD Functional Exercise conducted on Thursday April 14, 2016.

Capability	Issue/Area for Improvement	Corrective Action	Capability Element ¹	Primary Responsible Organization	Organization POC	Start Date	Completion Date
Capability #6 Information Sharing	1. IMATS accessibility by multiple NVHD staff.	NVHD, CT DPH and CDC has resolved the administrative issue preventing a secondary log-in.	Equipment	CT DPH CDC NVHD			
	2. The backup inventory ordering system (paper system) was not tested (in addition to the new IMATS system).	Work with DPH to test the backup method. Review CT DPH back up asset request forms.	Planning	CT DPH NVHD			
Capability #8 Medical Countermeasure Dispensing	1. Internal communication during the exercise play.	Purchase a new set of 12 handheld radios with push-to- talk earpieces.	Equipment				
		Battery powered alarm clock to keep time during POD operations.	Equipment	NVHD			

¹ Capability Elements are: Planning, Organization, Equipment, Training, or Exercise.

	2. Current NVHD staff alone is not enough to fill every role for the MDA.	Include pre- identified volunteers from the Naugatuck Valley Medical Reserve Corps and Community Emergency Response Teams in the NVHD jurisdiction. Municipal volunteers should also be considered and trained. Mutual aid from other LHDs.	Planning/ Training	NVHD		
	3. Assure cash on-hand to cover simple expenses was not readily available leading up to and during the exercise.	Review and modify current NVHD policy for petty cash.	Planning	NVHD		
Capability #9 Medical Material Management Distribution	1. Staging the medical countermeasures.	Review process with Emergency Management Director(s) of town(s) with identified POD site(s) as a refresher.	Planning	NVHD City of Shelton		

Capability #15 Volunteer Management	1. Expectations for roles and responsibilities and the use of Job Action Sheets.	Establish a "POD Facility Set-Up Team" Refresher NIMS and ICS training specific to the staff provided by a trainer	Organization/ Planning/Training Training	NVHD		

APPENDIX A: SIGN IN SHEETS

APPENDIX B: PICTURES

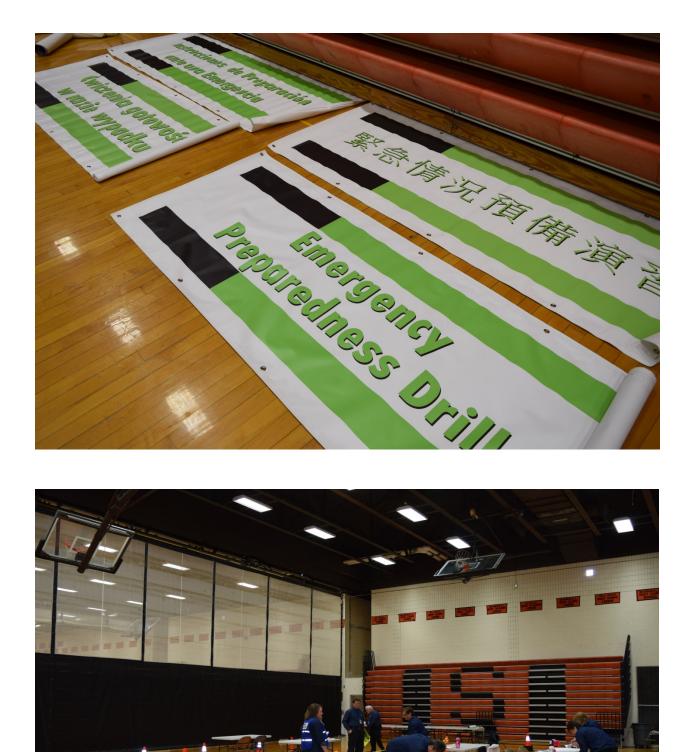








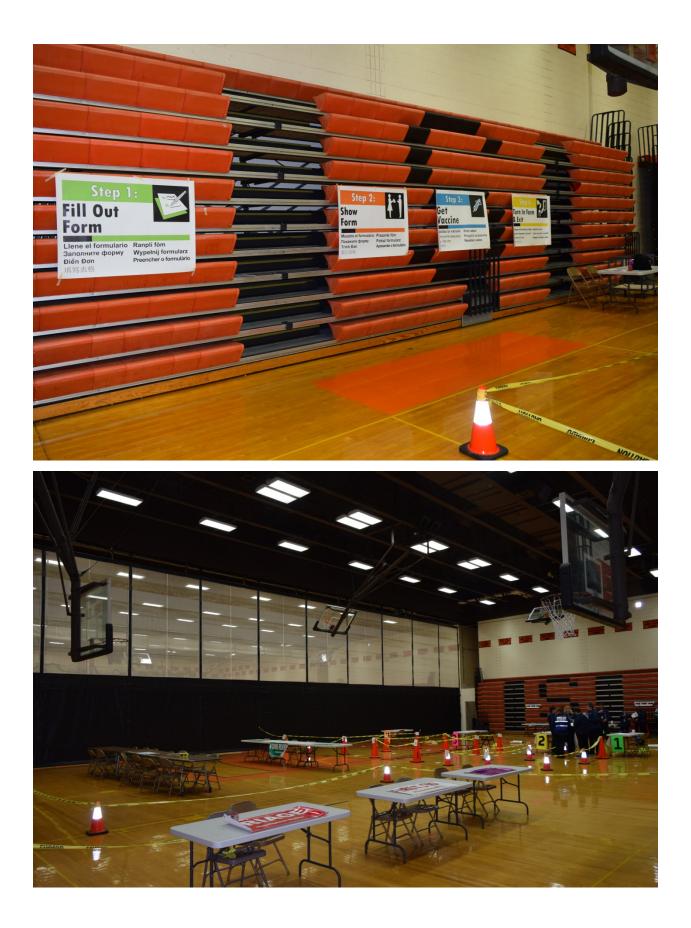


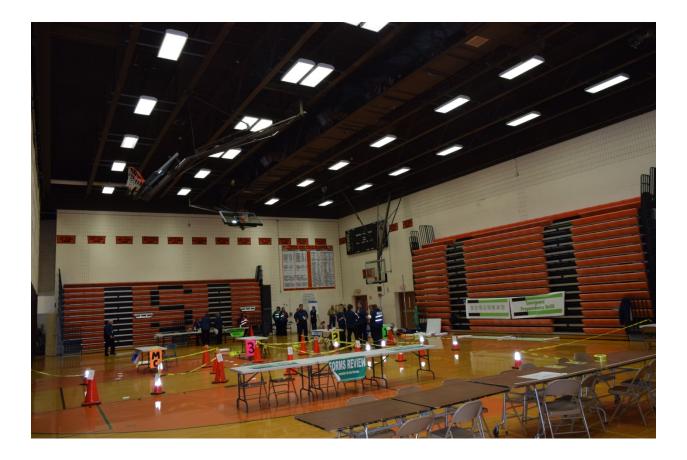






















APPENDIX D: PRESS



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JUNE ISSUE HIGHLIGHTS

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SHELTON COMMUNITY & BUSINESS NEWS

COMMUNITY NEWS

Naugatuck Valley Health District Hosts Mass Dispensing Exercise

The Naugatuck Valley Health District (NVHD) participated in an Emergency Preparedness Medical Countermeasures exercise the week of April 11-15, 2016. Staff were provided two classroom training sessions and participated in planning and briefing meetings leading up to the functional exercise on Thursday April 14, 2016. The purpose of the exercise was to test the District's ability to order, receive, and distribute medications from the Center for Disease Control and Prevention (CDC) Strategic National Stockpile (SNS) in the event of a public health emergency.

The exercise was part of a statewide medical countermeasure exercise that was conducted concurrently and sponsored by the Connecticut Department of Public Health's Office of Public Health Preparedness and Response. An infectious disease outbreak that required mass dispensing of certain medications was simulated. The exercise tested the effectiveness of the state and local emergency response system, including communications, resource allocation, and overall response coordination, in the event of an infectious disease outbreak such as pandemic influenza. NVHD response plans are compliant with the National Management Systems (NIMS), follow an Incident Command System (ICS) structure and are updated annually to ensure accurate and updated information.

NVHD staff practiced logistic operations through setting up one point of dispensing (POD) clinic site.



Jessica Stelmaszek provides NVHD staff with Just-in-Time training prior to the start of the exercise.



(left to right) Karen Spargo, NVHD Director of Health, Michael Maglione, Shelton Director of Public Safety & Emergency Management Services, Tom Eighmie, Seymour Emergency Management Director, and Jessica Stelmaszek, NVHD Public Health Emergency Preparedness Coordinator and Naugatuck Valley Medical Reserve Corps Unit Leader.

Medical countermeasures were delivered to an offsite location by the CT Department of Public Health where receiving, storing, and staging was tested. Actual throughput of the medical countermeasures was not tested by NVHD. The exercise was observed and evaluated by the Emergency Management Directors of Shelton and Seymour. Following the exercise, NVHD hosted a hot wash, an immediate after-action meeting where the participants shared their perspectives on key strengths and areas for improvement.

NVHD will be conducting two more functional or full-scale exercises throughout its jurisdiction (Ansonia, Beacon Falls, Derby, Naugatuck, Seymour & Shelton) by the year 2020.

If you are interested in volunteering at future NVHD emergency preparedness activities, please visit the Naugatuck Valley Medical Reserve Corps website <u>www.nvmrc.com</u> for more information. No medical background is required.

For questions regarding Public Health Emergency Preparedness, please contact NVHD Public Health and Emergency Preparedness and Medical Reserve Corps Coordinator, Jessica Stelmaszek at 203-881-3255 or jstelmaszek@nvhd.org.