Tuolumne County Health Care & Safety Coalition Information Sharing Exercise

After-Action Report/Improvement Plan

Exercise Date: December 17, 2019

AAR/IP Date: December 27, 2019

# Exercise Overview

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| **Exercise Name** | Tuolumne County Health Care & Safety Coalition Information Sharing Exercise |
| **Exercise Dates** | December 17, 2019 |
| **Scope** | This was a functional exercise which occurred at individual participant locations. Exercise play was limited to the objectives listed in the Exercise Plan. |
| **Mission Area(s)** | Response |
| **Core Capabilities** | Information Sharing |
| **Objectives** | 1. Public Health will utilize the California Health Alert Network (CAHAN) system to alert HCSC partners of a potential Public Safety Power Shutoff (PSPS) and to remind them to charge their radios and begin outreach to clients with Access and Functional Needs (AFN).
2. Coalition partners will successfully communicate with Tuolumne County Public Health and the Medical Health Operational Area Coordinator (MHOAC) via EMResource, fax, phone, and radio.
3. The MHOAC will submit an update regarding the status of the local healthcare system to Tuolumne County Office of Emergency Services (OES).
4. The MHOAC will submit a Situation Report to the Regional Disaster Medical Health Specialist.
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| **Threat or Hazard** | Public Safety Power Shutoff |
| **Scenario** | On December 16, 2019, PG&E informed Tuolumne County OES of a potential PSPS beginning December 17, 2019 in the afternoon or evening. Tuolumne County Public Health issued a CAHAN alert notifying HCSC partners of the potential PSPS and reminding them to charge their radios and begin outreach to clients with AFN. On December 17th, the Tuolumne County MHOAC Program asks all partner agencies to submit a Situation Report with updates regarding their preparedness efforts and current operating status. |
| **Sponsor** | Tuolumne County Public Health Department |
| **Participating Organizations** | All members of the Tuolumne County Health Care & Safety Coalition are invited to participate. |
| **Point of Contact** | Rebecca Morgenstern, HPP Coordinator, Tuolumne County Public Health RMorgenstern@co.tuolumne.ca.us, 209-533-7416 |

# 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) |
| --- | --- | --- | --- | --- | --- |
| Public Health will utilize the California Health Alert Network (CAHAN) system to alert HCSC partners of a potential Public Safety Power Shutoff (PSPS) and to remind them to charge their radios and begin outreach to clients with Access and Functional Needs (AFN). | Information Sharing |  | S |  |  |
| Coalition partners will successfully communicate with Tuolumne County Public Health and the Medical Health Operational Area Coordinator (MHOAC) via EMResource, fax, phone, and radio.  | Information Sharing |  | S |  |  |
| The MHOAC will submit an update regarding the status of the local healthcare system to Tuolumne County Office of Emergency Services (OES).  | Information Sharing | P |  |  |  |
| The MHOAC will submit a Situation Report to the Regional Disaster Medical Health Specialist. | Information Sharing | P |  |  |  |
| **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).
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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 improvements.

## Objective 1: Public Health will utilize the California Health Alert Network (CAHAN) system to alert HCSC partners of a potential Public Safety Power Shutoff (PSPS) and to remind them to charge their radios and begin outreach to clients with Access and Functional Needs (AFN).

### Strengths

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

Strength 1: The CAHAN system was easy to use and was an efficient method for quickly disseminating a message to the HCSC.

### Areas for Improvement

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

Area for Improvement 1: Only 38 HCSC partners were enrolled in CAHAN, so many key partners did not receive the message.

Area for Improvement 2: The CAHAN response rate was 73.6%, which was partially due to some partners only having one or two communication methods available.





## Objective 2: Coalition partners will successfully communicate with Tuolumne County Public Health and the Medical Health Operational Area Coordinator (MHOAC) via EMResource, fax, phone, and radio.

### Strengths

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

Strength 1: Those who participated reported that they were easily able to follow procedure and contact the MHOAC and/or Public Health via EMResource, fax, phone, and radio.

Strength 2: The Public Health receptionists correctly transferred all calls for the MHOAC to Clarence Teem or Dr. Bernstein (note: Dr. Freeman was also present).

### Areas for Improvement

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

Area for Improvement 1: HCSC partner participation in the exercise was low.

Area for Improvement 2: Tuolumne County Behavioral Health reported that their radio transmission was unclear and that some of their radios were malfunctioning.

## Objective 3: The MHOAC will submit an update regarding the status of the local healthcare system to Tuolumne County Office of Emergency Services.

### Strengths

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

Strength 1: The OES Coordinator was included in the Situation Report submission to the Region IV RDMHS and the MHOACs plan to continue this practice to ensure the OES Coordinator is aware of the status of the local healthcare system.

### Areas for Improvement

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

Area for Improvement 1: none

## Objective 4: The MHOAC will submit a Situation Report to the Regional Disaster Medical Health Specialist.

### Strengths

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

Strength 1: The three MHOACs worked together to complete the Situation Report form and submit it to the Region IV RDMHS.

Strength 2: The new Region IV RDMHS was able to practice receiving a Sit Rep.

### Areas for Improvement

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

Area for Improvement 1: none

# Appendix A: Improvement Plan

This IP has been developed specifically for the Tuolumne County Health Care & Safety Coalition as a result of the Tuolumne County HCSC Information Sharing Exercise conducted on December 17, 2019

| **Core Capability** | **Issue/Area for Improvement** | **Corrective Action** | **Capability Element[[1]](#footnote-1)** | **Primary Responsible Organization** | **Organization POC** | **Start Date** | **Completion Date** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Core Capability: Information Sharing | 1. Only 38 HCSC partners were enrolled in CAHAN, so many key partners did not receive the message. | Conduct outreach to HCSC to increase enrollment in CAHAN (via email, at HCSC meetings, etc.)  | Planning | Tuolumne County Public Health | PHEP Coordinator & HPP Coordinator | January 9, 2020 | ongoing |
| 2. The CAHAN response rate was 73.6%, which was partially due to some partners only having one or two communication methods available. | Contact the HCSC members already enrolled in CAHAN who did not respond to the exercise message and ask them to resubmit the CAHAN enrollment form.  | Planning | Tuolumne County Public Health | PHEP Coordinator & HPP Coordinator | January 9, 2020 | February 28, 2020 |
| 3. HCSC partner participation in the exercise was low. | During After Action Meeting (part of HCSC meeting), ask partners for feedback regarding participation, specifically what would help facilitate increased participation. | Exercise | Tuolumne County Public Health & all HCSC members | HPP Coordinator | January 9, 2020 | January 9, 2020 |
|  | 4. Tuolumne County Behavioral Health reported that their radio transmission was unclear and that some of their radios were malfunctioning. | Contact County Radio Communications Analyst regarding malfunctioning radios. | Planning | Tuolumne County Behavioral Health | Administrative Assistant/ EP Coordinator  | January 9, 2020 | March 31, 2020 |

# Appendix B: Exercise Participants

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| Participating Organizations |
| Adventist Health Rapid Care |
| American Red Cross |
| Calaveras County Public Health |
| Tuolumne County Behavioral Health |
| Tuolumne County EMS Agency |
| Tuolumne County Public Health |
| Tuolumne Me Wuk Indian Health Center |
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1. Capability Elements are: Planning, Organization, Equipment, Training, or Exercise. [↑](#footnote-ref-1)