

# TWISTING TURMOIL

A MEDICAL RESPONSE  
& SURGE EXERCISE

Exercise Date: April 22, 2024



**After-Action  
Report/Improvement Plan**  
June 5, 2024



SOUTHWEST FLORIDA  
**HEALTHCARE  
COALITION**  
HEALTH PLANNING COUNCIL  
OF SOUTHWEST FL

## EXERCISE OVERVIEW

Exercise Name	“Twisting Turmoil”: a Medical Response and Surge Exercise
Exercise Dates	April 23, 2024, 10:00 AM- 1:00 PM
Scope	This exercise was a virtual, operations-based exercise planned for up to four hours, to include an After-Action Review. Exercise play was limited to the Southwest Florida Healthcare Coalition members and partners. The exercise was designed to provide Southwest Florida Healthcare Coalition with an opportunity to test their medical surge response and preparedness capabilities.
Focus Area(s)	Response
Hospital Preparedness Program Capabilities	<ul style="list-style-type: none"> <li>• <b>Capability 1:</b> Foundation for Health Care and Medical Readiness</li> <li>• <b>Capability 2:</b> Health Care and Medical Response Coordination</li> <li>• <b>Capability 4:</b> Medical Surge</li> </ul>
Public Health Emergency Preparedness Capabilities	<ul style="list-style-type: none"> <li>• <b>Capability 3:</b> Emergency Operations Coordination</li> <li>• <b>Capability 10:</b> Medical Surge</li> </ul>
Federal Emergency Management Agency Core Capabilities	<ul style="list-style-type: none"> <li>• Public Health, Healthcare and Emergency Medical Services</li> <li>• Operational Coordination</li> </ul>
ASPR Required Objectives	<p><b>Objective 1:</b> Evaluate the ability of Southwest Florida Healthcare Coalition to engage coalition members and their executives to participate in the exercise and the After-Action Review.</p> <p><b>Objective 2:</b> Evaluate the ability of Southwest Florida Healthcare Coalition to effectively notify Coalition members of an incident and facilitate ongoing information sharing during a community-wide emergency or disaster.</p> <p><b>Objective 3:</b> Participants will demonstrate their ability to assess and meet the critical personnel and resource needs (supplies, equipment, etc.) to manage patient surge during a community-wide emergency or disaster by the end of the medical response and surge exercise.</p> <p><b>Objective 4:</b> Participants will demonstrate their ability to assess and meet the critical Emergency Medical Services personnel and resource needs to manage patient surge during a community-wide emergency or disaster by the end of the MRSE.</p> <p><b>Objective 5:</b> Participants will demonstrate their ability to reduce patient morbidity and mortality through appropriate patient placement during a large patient surge by assisting with the identification and coordination of available patient care resources by the end of the MRSE.</p>

	<b>Objective 6:</b> Participants will demonstrate their ability to successfully coordinate and execute the Southwest Florida Healthcare Coalition Operations Plan, and jurisdictional surge plans during a community-wide emergency or disaster.
<b>Threat or Hazard</b>	Severe Weather
<b>Scenario</b>	<b>Date:</b> April 23, 2024 <b>Location:</b> Highlands County, Southwest Florida <b>Incident:</b> Two tornadoes touched down in Highlands County, causing extensive damage to the community. The tornadoes strike suddenly, resulting in injuries and structural damage, necessitating the immediate evacuation of the affected facilities.
<b>Sponsor</b>	Southwest Florida Healthcare Coalition
<b>Participating Organization Types</b>	Hospitals, Emergency Medical Services, Emergency Management, Public Health
<b>Points of Contact</b>	<b>Mary Beth Skarote, MEP</b> All Clear Emergency Management Group HCC Division Manager <a href="mailto:MaryBethS@AllClearEMG.com">MaryBethS@AllClearEMG.com</a>  <b>Brian Massey</b> Program Manager Southwest Florida Healthcare Coalition <a href="mailto:brianmassey@hpcswf.com">brianmassey@hpcswf.com</a>

## ANALYSIS OF CAPABILITIES

Aligning exercise objectives and capabilities provides a consistent taxonomy for evaluation that transcends individual exercises to support preparedness reporting and trend analysis. Table 1 includes the regional exercise objectives, aligned capabilities, and performance ratings for each capability as observed during the exercise and determined by the evaluation team.

Objective	Hospital Preparedness Capability	Performed without Challenges (P)	Performed with Some Challenges (S)	Performed with Major Challenges (M)	Unable to be Performed (U)
<b>Objective 1:</b> Evaluate the ability of Southwest Florida Healthcare Coalition to engage coalition members and their executives to participate in the exercise and the After-Action Review.	<b>Capability 1:</b> Foundation for health care and medical readiness.		<b>S</b>		
<b>Objective 2:</b> Evaluate the ability of Southwest Florida Healthcare Coalition to effectively notify Coalition members of an incident and facilitate ongoing information sharing during a community-wide emergency or disaster.	<b>Capability 2:</b> Health Care and Medical Response Coordination		<b>S</b>		
<b>Objective 3:</b> Participants will demonstrate their ability to assess and meet the critical personnel and resource needs (supplies, equipment, etc.) to manage patient surge during a community-wide emergency or disaster by the end of the MRSE.	<b>Capability 2:</b> Health Care and Medical Response Coordination		<b>S</b>		

Objective	Hospital Preparedness Capability	Performed without Challenges (P)	Performed with Some Challenges (S)	Performed with Major Challenges (M)	Unable to be Performed (U)
<p><b>Objective 4:</b> Participants will demonstrate their ability to assess and meet the critical Emergency Medical Services personnel and resource needs to manage patient surge during a community-wide emergency or disaster by the end of the MRSE.</p>	<p><b>Capability 2:</b> Health Care and Medical Response Coordination</p>			<p><b>M</b></p>	
<p><b>Objective 5:</b> Participants will demonstrate their ability to reduce patient morbidity and mortality through appropriate patient placement during a large patient surge by assisting with the identification and coordination of available patient care resources by the end of the MRSE.</p>	<p><b>Capability 4:</b> Medical Surge</p>		<p><b>S</b></p>		
<p><b>Objective 6:</b> Participants will demonstrate their ability to successfully coordinate and execute the Southwest Florida Healthcare Coalition Operations Plan, and jurisdictional surge plans during a community-wide emergency or disaster.</p>	<p><b>Capability 1:</b> Foundation for Health Care and Medical Readiness. <b>Capability 2:</b> Health Care and Medical Response Coordination <b>Capability 4:</b> Medical Surge</p>		<p><b>S</b></p>		

Table 1: Summary of HPP Capability Performance

**Ratings Definitions:**

**Performed without Challenges (P):** The targets and critical tasks associated with the 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 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 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 capability were not performed in a manner that achieved the objective(s).

The following sections provide an overview of the performance related to each exercise objective and associated capability, highlighting strengths and areas for improvement.

**Objective 1: Evaluate the ability of Southwest Florida Healthcare Coalition to engage coalition members and tier executives to participate in the exercise After-Action Review.**

### Strengths

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

**Strength 1.1:** The participation of hospital executives in the exercise demonstrated a commitment to healthcare preparedness and response. Throughout the exercise and the subsequent after-action review, executives consistently engaged in open dialogue, pooled their expertise, and worked together to address challenges.

### Areas for Improvement

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

#### Area for Improvement 1.1 Limited Emergency Medical Services Participation

**Analysis:** There was limited participation from Emergency Medical Services and their executive leadership in the medical response and surge exercise. The absence of Emergency Medical Services' representation created challenges related to the ability to assess and provide critical resources as well as the collection of data for performance measures. At this time, it is not fully understood why Emergency Medical Services participation for this exercise was limited.

**Recommendation:** The Southwest Florida Healthcare Coalition should perform a root cause analysis related to the limited participation of Emergency Medical Services agencies and make exercise design or marketing changes for future coalition sponsored exercises.

**Reference:** 2017-2022 Health Care Preparedness and Response Capabilities (Capability 1, Objective 4, Activity 3 – Plan and Conduct Exercises with Healthcare Coalition Members and Other Response Organizations)

### Strengths

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

**Strength 2.1:** During the exercise, the coalition demonstrated their capability to share information with coalition stakeholders using the ReadyOp system. The coalition's proficiency with ReadyOp allowed for real-time updates, ensuring that all members were consistently informed of developments as they occurred. ReadyOp, a versatile communication and coordination platform, has played and will continue to play a pivotal role in facilitating seamless information exchange among all coalition stakeholders.

### Areas for Improvement

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

#### Area for Improvement 2.1: Identification and Implementation of ReadyOp Tags for Coalition Stakeholder Groups to Improve Communication Pathways

**Analysis:** Despite the overall success with ReadyOp, an area identified for improvement is the need to refine and utilize the system's tagging capabilities more effectively. A robust tagging system within ReadyOp would allow the coalition to efficiently reach out to specific disciplines, such as Hospitals, Public Health, or Emergency Medical Services, enhancing targeted communication and response.



**Recommendation:** It is the recommendation that the Healthcare Coalition establish a clear and consistent tagging protocol that outlines specific tags for various disciplines, urgency levels, and types of information. Additionally, it is recommended that the coalition implement a feedback mechanism to continuously review the effectiveness of the tagging system. Regularly gather input from exercises and drills to identify any issues or areas for improvement and make necessary adjustments to the system tags.

**Reference:** 2017-2022 Health Care Preparedness and Response Capabilities (Capability 2, Objective 2, Activity 3 –Utilize Communications Systems and Platforms)

**Area for Improvement 2.2.:** Identification of Essential Elements of Information for the Healthcare Coalition

**Analysis:** Another area for improvement is the identification and prioritization of essential elements of information for information gathering and sharing purposes within the Healthcare Coalition. The coalition needs to determine what information is realistically feasible to gather and share, ensuring it aligns with the coalition's capabilities and the needs of its members. This involves balancing the HCC's role in information sharing with the reality that it is often a lower priority in incident notifications, not being a primary part of response plans for local or state agencies.

**Recommendation:** Collaboratively identify and define the essential elements of information that are crucial for the coalition's operations and realistic information that can be gathered. This should include input from all relevant stakeholders to ensure comprehensiveness and relevance. Once those essential elements of information have been determined, the healthcare coalition can develop guidelines for information collection which would be included in the coalition's response plan.

**Reference:** 2017-2022 Health Care Preparedness and Response Capabilities (Capability 2, Objective 2, Activity 1 –Develop Information Sharing Procedures)

**Objective 3:** Participants will demonstrate their ability to assess and meet the critical personnel and resource needs (supplies, equipment, etc.) to manage patient surge during a community-wide emergency or disaster by the end of the MRSE.

### Strengths

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

**Strength 3.1:** Hospitals in the coalition demonstrated strong Incident Command System and incident management capabilities. They effectively utilized Incident Command System protocols, which allowed for seamless coordination and communication among departments and external partners. Command centers operated efficiently, with clearly assigned roles and responsibilities, facilitating quick decision-making and resource allocation.

**Strength 3.2:** Coalition stakeholders exhibited a commendable willingness to share resources, including bed availability, across the region to support a surge of patients. This collaborative approach ensured that the healthcare system could efficiently manage increased patient loads during the simulated emergency.

### Areas for Improvement

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

**Area for Improvement 3.1:** Better understanding of what supplies were available in the region.



**Analysis:** Coalition stakeholders could benefit from a better understanding of the resources available across the region. During the exercise, gaps in knowledge about existing inventories and resource locations became apparent, which could hinder efficient resource allocation and response efforts.

**Recommendation:** It is recommended that the coalition provide training sessions on the resource request process as well as develop a database of available resources that can be requested.

**Reference:** 2017-2022 Health Care Preparedness and Response Capabilities (Capability 2, Objective 3, Activity 1 – Identify and Coordinate Resource Needs During an Emergency)

**Objective 4:** Participants will demonstrate their ability to assess and meet the critical Emergency Medical Services personnel and resource needs to manage patient surge during a community-wide emergency or disaster by the end of the MRSE.

During the exercise, little to no participation from Emergency Medical Services was observed and therefore the ability to assess this objective was impeded.

### Areas for Improvement

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

**Area for Improvement 4.1:** Availability of Emergency Medical Services Resources, Personnel, and Critical Resources

**Analysis:** Emergency Medical Services plays a critical role in emergency response, providing essential pre-hospital care and transportation for patients. Their participation is vital for a comprehensive assessment of the coalition's preparedness and response capabilities. The absence of Emergency Medical Services during the exercise created a significant gap in the evaluation process, preventing a thorough understanding of their strengths, challenges, and coordination with other response entities. The limited Emergency Medical Services participation highlights the need for greater engagement and collaboration with Emergency Medical Services agencies in future exercises. Ensuring their involvement is crucial for a holistic evaluation of emergency response capabilities.

**Recommendation:** It is the recommendation that the coalition work with Emergency Medical Services leadership to explore potential incentives for Emergency Medical Services participation.

**Reference:** 2017-2022 Health Care Preparedness and Response Capabilities (Capability 2, Objective 3, Activity 1 – Identify and Coordinate Resource Needs During an Emergency)

**Objective 5:** Participants will demonstrate their ability to reduce patient morbidity and mortality through appropriate patient placement during a large patient surge by assisting with the identification and coordination of available patient care resources by the end of the MRSE.

### Strengths

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

**Strength 5.1:** Healthcare facilities demonstrated remarkable capability in creating bed availability and managing patient surges through their own internal responses. Healthcare facilities efficiently activated their internal surge plans, which included strategies such as discharging non-critical patients, repurposing existing spaces for patient care, and rapidly setting up additional treatment

areas. These measures ensured that they could accommodate a sudden influx of patients without compromising the quality of care.

### Areas for Improvement

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

**Area for Improvement 5.1:** Additional Understanding or Coalition Stakeholders on the Coalition's Role During a Response

**Analysis:** An area for improvement observed is the need for regional partners to develop a deeper understanding of the role and significance of the Southwest Florida Healthcare Coalition within the emergency response framework. While awareness of the HCC's existence may exist among partners, there appears to be a lack of comprehensive understanding regarding its functions and how it interfaces with other stakeholders during emergencies.

**Recommendation:** The healthcare coalition is working to develop an "Activation 101" course for stakeholders which would clearly define the roles of the healthcare coalition as well as Emergency Management and other regional partners. It is the recommendation that the coalition continue to offer similar educational opportunities to coalition stakeholders.

**Reference:** 2017-2022 Health Care Preparedness and Response Capabilities (Capability 1, Objective 4, Activity 2 – Educate and Train on Identified Preparedness and Response Gaps)

**Objective 6:** Participants will demonstrate their ability to successfully coordinate and execute the Southwest Florida Healthcare Coalition Operations Plan, and jurisdictional surge plans during a community-wide emergency or disaster.

### Strengths

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

**Strength 6.1:** Hospitals within the coalition demonstrated a notable strength in having well-established internal medical surge plans, which they have successfully activated in past experiences.

### Areas for Improvement

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

**Area for Improvement 6.1:** Family Assistance Center Planning at the Local Level

**Analysis:** Family Assistance Center planning at the local level requires improvement to better address the needs of families and individuals affected by emergencies or disasters. During the exercise, deficiencies were observed in the preparedness and coordination of Family Assistance Centers, highlighting the importance of enhancing planning efforts in this area.

**Recommendation:** It is the recommendation that the healthcare coalition facilitate discussions related to Family Assistance Center Planning.

**Reference:** 2017-2022 Health Care Preparedness and Response Capabilities (Capability 4, Objective 1, Activity 3 – Incorporate Medical Surge Planning into a Health Care Organization Emergency Operations Plan)

**Area for Improvement 6.2:** Coalition Stakeholders' Knowledge of Emergency Management's Roles and Responsibilities

**Analysis:** The coalition identified a need for improvement in stakeholders' understanding of emergency management roles and responsibilities. During the exercise, deficiencies in knowledge about respective roles and responsibilities were observed, highlighting the importance of enhancing awareness and clarity in this area. Some participants noted that there was a lack of awareness of the chain of command and decision-making processes during emergencies and that there was a limited understanding of the resources and capabilities available through Emergency Management and how they could be leveraged.

**Recommendation:** As noted previously, the healthcare coalition is working to develop an "Activation 101" course for stakeholders which would clearly define the roles of the healthcare coalition as well as Emergency Management and other regional partners. It is the recommendation that the coalition continue to offer similar educational opportunities to coalition stakeholders.

Reference: 2017-2022 Health Care Preparedness and Response Capabilities (Capability 4, Objective 1, Activity 3 – Incorporate Medical Surge Planning into a Health Care Organization Emergency Operations Plan)

**Area for Improvement 6.3:** Lack of Trigger Points or Activation Criteria in Healthcare Coalition Response Plans

Analysis: Activation and trigger points are fundamental components of emergency response plans, providing guidance on when and how to initiate response activities based on predetermined criteria. However, during the exercise, it became apparent that coalition's response plans lacked specificity regarding activation thresholds and trigger points for key response capabilities. These deficiencies can lead to delays in response, ineffective resource allocation, and confusion among stakeholders, ultimately compromising the coalition's ability to assist in a coordinated and timely response to emergencies.

**Recommendation:** It is recommended that the healthcare coalition work to collaboratively develop clear and objective criteria for activating the Healthcare Coalition and its associated response functions. These criteria should be based on the nature and magnitude of the incident, as well as established best practices and guidelines.

Reference: 2017-2022 Health Care Preparedness and Response Capabilities (Capability 4, Objective 1, Activity 3 – Incorporate Medical Surge Planning into a Health Care Organization Emergency Operations Plan)

## APPENDIX A: IMPROVEMENT PLAN

Capability	Issue/Area for Improvement	Corrective Action	Capability Element <sup>1</sup>	Primary Responsible Organization	Start Date	Completion Date
<b>Capability 1:</b> Foundation for health care and medical readiness.	1.1 Limited Emergency Medical Services Participation	The Southwest Florida Healthcare Coalition should perform a root cause analysis related to the limited participation of Emergency Medical Services agencies and make exercise design or marketing changes for future coalition sponsored exercises.	Exercise	SWFL HCC	06/2024	On going
	5.1 Additional Understanding or Coalition Stakeholders on the Coalition’s Role During a Response	The healthcare coalition is working to develop an “Activation 101” course for stakeholders which would clearly define the roles of the healthcare coalition as well as Emergency Management and other regional partners. It is the recommendation that the coalition continue to offer similar educational opportunities to coalition stakeholders.	Planning	SWFL HCC	06/2024	08/24
<b>Capability 2:</b> Health Care and Medical Response Coordination	2.1 ReadyOp Tags for Coalition Stakeholder Groups	It is the recommendation that the Healthcare Coalition establish a clear and consistent tagging protocol that outlines specific tags for various disciplines, urgency levels, and types of information.	Planning	SWFL HCC	06/2024	On going
	2.2 Identification of Essential Elements of Information for the Healthcare Coalition	Collaboratively identify and define the essential elements of information that are crucial for the coalition’s operations and realistic information that can be gathered.	Planning	SWFL HCC	06/2024	On going

<sup>1</sup> Planning, Organization, Equipment, Training, or Exercise

Capability	Issue/Area for Improvement	Corrective Action	Capability Element <sup>1</sup>	Primary Responsible Organization	Start Date	Completion Date
	3.1 Better understanding of what supplies were available in the region.	Provide training sessions on the resource request process as well as develop a database of available resources that can be requested.	Planning	SWFL HCC	06/2024	08/24
	4.1 Availability of Emergency Medical Services Resources, Personnel, and Critical Resources	Work with Emergency Medical Services leadership to explore potential incentives for Emergency Medical Services participation.	Organization Exercise	SWFL HCC	04/2024	On going
<b>Capability 4 : Medical Surge</b>	6.1 Family Assistance Center Planning at the Local Level	It is the recommendation that the healthcare coalition facilitate discussions related to Family Assistance Center Planning.	Planning	SWFL HCC	06/2024	On going
	6.2 Coalition Stakeholders' Knowledge of Emergency Management's Roles and Responsibilities	The healthcare coalition is working to develop an "Activation 101" course for stakeholders which would clearly define the roles of the healthcare coalition as well as Emergency Management and other regional partners. It is the recommendation that the coalition continue to offer similar educational opportunities to coalition stakeholders.	Training	SWFL HCC	06/2024	On going
	6.3 Lack of Trigger Points or Activation Criteria in Healthcare Coalition Response Plans	It is recommended that the healthcare coalition work to collaboratively develop clear and objective criteria for activating the Healthcare Coalition and its associated response functions.	Planning	SWFL HCC	06/2024	6/2025

## APPENDIX B: EXERCISE PARTICIPANTS

Participating Organization
Advent Health Lake Placid
Advent Health Sebring
Avow
Cape Coral Hospital
City of Fort Myers
DeSoto Memorial Hospital
Empath Health
Eye Surgery & Laser Center
Family Health Centers of Southwest Florida, Inc.
FDOH Hendry
Florida Department of Health Highlands
Golisano Children's Hospital
Good Shepherd
Gulf Coast Medical Center Lee Memorial Health System
HCA Florida Englewood Hospital
HCA Florida Fawcett Hospital
HCA Florida Highlands Hospital
HCA Florida Raulerson Hospital
HCA Florida Sarasota Doctors Hospital
HealthPark MEDICAL CENTER
Hendry County EMS
Hendry Regional Medical Center
HIGHLANDS COUNTY EMA
LANDMARK HOSPITAL OF SOUTHWEST FLORIDA
Lee County Port Authority
Lee County VA
Lee Health
LEE MEMORIAL HOSPITAL
LEHIGH REGIONAL MEDICAL CENTER
Millennium Homecare
NAPLES COMMUNITY HOSPITAL
NCH Bonita ASC
NCH Healthcare System North Naples Hospital Campus
Okeechobee EM
PAM Rehabilitation Hospital of Venice
Park Center for Procedures
Physicians Regional Medical Center - Collier
Physicians Regional Medical Center - North
Physicians Regional Medical Center - Pine Ridge
Plymouth Harbor
Premier Mobile Health
Premier Surgery Center
Premier Surgery Center of Sarasota

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<b>Participating Organization</b>
Salus Care, Inc.
Sarasota Memorial Hospital
Sarasota Memorial Hospital - Venice
ShorePoint Health Port Charlotte
ShorePoint Health Punta Gorda
ShorePoint Health Cape Coral
Solaris Senior Living North Naples
Suncoast Endoscopy of Sarasota
Tampa Bay Health & Medical Preparedness Coalition
The Glenridge on Palmer Ranch
The Preserve
United Digestive
Vitas HealthCare
Willough At Naples



## APPENDIX C: MEDICAL RESPONSE SURGE EXERCISE PERFORMANCE MEASURES

<b>MRSE Performance Measures</b>		
PM 14: Percent of contacted HCC members acknowledging initial emergency notification.	<b>Performance Measure 14</b>	17%%
PM 15: Percent of contacted HCC members who responded to the initial information request.	<b>Performance Measure 15</b>	52%
PM 16: Percent of all pre-identified, critical required personnel types that were met by participating HCC members to manage patient surge.	<b>Performance Measure 16</b>	13%
PM 17: Percent of all pre-identified, critical resources that were met to manage patient surge.	<b>Performance Measure 17</b>	89%
PM 18: Percent of all pre-identified, critical Emergency Medical Services resources that were met to safely respond to triage and transportation needs.	<b>Performance Measure 18</b>	20%
PM 19 (previously PM 18): Percent of patients requiring inpatient care who were placed at a receiving facility with an appropriate staffed bed by the end of the exercise.	<b>Performance Measure 19</b>	100%
PM 20: Percent of HCC core members with at least one executive participating in the exercise After-Action Review (AAR).	<b>Performance Measure 20</b>	34%
PM 21 (previously PM 23): Percent of all pre-identified, critical HCC members that participated in the exercise.	<b>Performance Measure 21</b>	79%