

# Tiny Troopers: A Pediatric Surge Tabletop Exercise

After-Action Report/Improvement Plan

Exercise: March 27, 2024

Document Date: May 1, 2024

The After-Action Report/Improvement Plan (AAR/IP) aligns exercise objectives with preparedness doctrine 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.

Throughout this document, you will find red boxes that include instructions for completing this After-Action Report/Improvement Plan for your organization. Delete the red boxes when you complete the After-Action Report.

Throughout this document you will also find highlighted text. This highlighted text should be replaced with information specific to your facility.

## EXERCISE OVERVIEW

Exercise Name	Tiny Troopers: A Pediatric Surge Tabletop Exercise			
Exercise Dates & Time	March 27, 2024 / 9:00 AM – 12:30 PM ET			
Scope	This exercise was a discussion-based exercise, planned for up to 3.5 hours. Exercise play was limited to virtual participation at each facility or organization.			
Focus Area(s)	Response			
Core Capabilities	<ul> <li>FEMA Core Capabilities <ul> <li>Planning</li> <li>Operational Coordination</li> <li>Operational Communication</li> </ul> </li> <li>HPP Core Capabilities <ul> <li>Capability 2: Health Care and Medical Response Coordination</li> <li>Capability 4: Medical Surge</li> </ul> </li> <li>PHEP Core Capabilities <ul> <li>Capability 1: Community Preparedness</li> <li>Capability 3: Emergency Operations Coordination</li> <li>Capability 6: Information Sharing</li> <li>Capability 10: Medical Surge</li> </ul> </li> </ul>			
Objectives	<ul> <li>Objective 1: Discuss and evaluate the Pediatric Surge Annex for the Southwest Florida Healthcare Coalition.</li> <li>Objective 2: Assess the coordination and communication between regional partners during a healthcare emergency.</li> <li>Objective 3: Evaluate the availability and adequacy of resources dedicated to managing a pediatric surge.</li> <li>Objective 4: Identify and discuss the procedures related to patient reunification.</li> </ul>			
Threat or Hazard	Pediatric Surge			
Scenario	On a warm and sunny morning in DeSoto County, an SUV lost control on Highway 17, colliding with a school bus transporting 30 children to the local elementary school.			
Sponsor	Southwest Florida Healthcare Coalition			

Participating Jurisdictions/ Organizations	Multiple Healthcare organizations within the Southwest Florida Healthcare Coalition. For a full list of participating organizations, please reference Appendix B.
Point of Contact	Brian Massey Southwest Florida Healthcare Coalition Program Manager <u>Coalition@HPCSWF.com</u> 239-433-6700 ext. 302
Point of Contact	Elaina Huffman, MPS, CHEC All Clear Emergency Management Group Planning Specialist <u>ElainaH@AllClearEMG.com</u> 303-913-0614

### 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 exercise objectives, aligned capabilities, and performance ratings for each capability as observed during the exercise and determined by the evaluation team.

Exercise Objectives	HPP Core Capability	FEMA Core Capability	PHEP Core Capabilities
<b>Objective 1:</b> Test and evaluate the Southwest Florida Healthcare Coalition's Pediatric Surge Annex.	Capability 2: Health Care and Medical Response Coordination Capability 4: Medical Surge	Planning	Capability 1: Community Preparedness Capability 10: Medical Surge
<b>Objective 2</b> : Test and evaluate communication resources and procedures on the local and regional level for a pediatric surge event.	Capability 2: Health Care and Medical Response Coordination	Operational Communication Operational Coordination	Capability 3: Emergency Operations Coordination Capability 6: Information Sharing
<b>Objective 3:</b> Test and evaluate resource availability and coordination on the local and regional level for a pediatric surge event.	Capability 2: Health Care and Medical Response Coordination Capability 4: Medical Surge	Operational Communication Operational Coordination	Capability 3: Emergency Operations Coordination Capability 6: Information Sharing Capability 10: Medical Surge
<b>Objective 4</b> : Test and evaluate patient reunification procedures at the local and regional level for a pediatric surge event.	Capability 2: Health Care and Medical Response Coordination	Operational Communication Operational Coordination	Capability 2: Community Recovery Capability 6: Information Sharing

Table 1. Exercise Objectives and Associated Capabilities

### **DEFINITION OF RATINGS**

**Performed without Challenges (P):** The targets and critical discussions associated with the capability were completed in a manner that achieved the objective(s) and would not negatively impact the performance of other activities. Performance of this activity would not contribute to additional health and/or safety risks for the public or for emergency workers, and it was discussed as being conducted in accordance with applicable plans, policies, procedures, regulations, and laws.

**Performed with Some Challenges (S):** The targets and critical discussions associated with the capability were completed in a manner that achieved the objective(s) and would not negatively impact the performance of other activities. Performance of this activity would not contribute to additional health and/or safety risks for the public or for emergency workers, and it was discussed as being 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 discussions associated with the capability were completed in a manner that achieved the objective(s), but some or all of the following were observed: completion of discussed activities would have a negative impact on the performance of other activities; would contribute to additional health and/or safety risks for the public or for emergency workers; and/or was not identified as being conducted in accordance with applicable plans, policies, procedures, regulations, and laws.

**Unable to be Performed (U):** The targets and critical discussions 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.

### EXERCISE SUMMARY

The Tiny Troopers tabletop exercise, hosted by the Southwest Florida Healthcare Coalition, was specifically designed to evaluate the healthcare coalition's Pediatric Surge Annex. The scenario focused on a pediatric Mass Casualty Incident which required regional coordination and response. For this exercise, participants were placed into breakout groups to discuss their response to the presented scenarios with other similar organizations. Each participant was provided with a Situation Manual (SitMan) consisting of discussion questions that were covered throughout the exercise.

For this exercise, each agency was asked to reference their existing plans as well as the coalitions Pediatric Surge Annex to inform their discussion and responses as it related to the scenario. The purpose of this After-Action Report and Improvement Plan is to analyze exercise results, identify strengths and best practices to be maintained and built upon, identify potential areas for further improvement, and support the development of corrective actions. This report contains identified areas of improvement for all participants as well as agency-specific areas for improvement and corrective actions. The following strengths and areas for improvement were major highlights of the exercise.

#### **Highlighted Strengths:**

- The Southwest Florida Healthcare Coalition demonstrated a commitment to knowledge sharing, continuous practice, and improvement of its emergency response plans.
- Healthcare coalition members demonstrated an understanding of the origin of initial notifications, the existing mass notification systems and ReadyOp, which is utilized by the coalition. Regular testing and evaluation of these notification systems will enhance the coalition's readiness for future events.
- Participants recognized the significance of patient reunification and emphasized the involvement of school districts in reunification plans for pediatric patients. Continuous refinement of these plans is vital to facilitating a seamless reunification process for pediatric patients and their families.

#### Highlighted Areas for Improvement:

- Inclusion of Emergency Medical Servies (EMS) in Emergency Planning Efforts: During the exercise, there was limited participation from Emergency Medical Services stakeholders. Discussion surrounding pre-hospital activities highlighted the need for additional clarification regarding the roles and responsibilities of EMS.
- Alerting the Healthcare Coalition of an Incident: Participants highlighted that notifying the healthcare coalition of an incident was not integrated into formal notification plans.
- Update Child and Parent Reunification Procedures: Many of the hospitals within the coalition have reunification plans to address the needs of families seeking information about their loved ones. However, procedures varied between hospitals and left uncertainties regarding the process for identification of parents and the process for connecting a child and parent after an incident.

# OBJECTIVE 1: DISCUSS AND EVALUATE THE PEDIATRIC SURGE ANNEX FOR THE SOUTHWEST FLORIDA HEALTHCARE COALITION

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

If an objective is indicated as meeting the "full" capability level, there were no Areas for Improvement identified. If there were Areas for Improvement identified by the evaluators and participants, the capability level should be noted as being "partial."

#### STRENGTHS

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

**Strength 1.1:** The Southwest Florida Healthcare Coalition demonstrated a commitment to information sharing, continuous practice, and improvement of its emergency response plans. These actions help participating organizations to verify that the existing emergency response plans will remain effective. Continuous engagement in exercises, discussions and regular plan updates will ensure organizations will be best prepared for crisis response.

If you have additional strengths to note, please add lines and supporting information as needed.

#### AREAS FOR IMPROVEMENT

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

Area for Improvement 1.1: Inclusion of Emergency Medical Servies (EMS) in Emergency Planning Efforts

**Analysis:** During the exercise, there was limited participation from Emergency Medical Services stakeholders. Discussion surrounding pre-hospital activities highlighted the need for additional clarification regarding the roles and responsibilities of EMS. It is the recommendation that the healthcare coalition identify strategies to engage with EMS and ensure their inclusion in planning efforts.

If you have additional Areas for Improvement to note, please add lines and supporting information as needed. Additionally, ensure that "what was supposed to happen" and "what occurred" is accurately depicted for your organization in the following section.

### OBJECTIVE 2: ASSESS THE COORDINATION AND COMMUNICATION BETWEEN REGIONAL PARTNERS DURING A HEALTHCARE EMERGENCY.

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

If an objective is indicated as meeting the "full" capability level, there were no Areas for Improvement identified. If there were Areas for Improvement identified by the evaluators and participants, the capability level should be noted as being "partial."

#### STRENGTHS

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

**Strength 2.1**: Healthcare coalition members demonstrated an understanding of the origin of initial notifications, the RAVE mass notification system and ReadyOp, which is utilized by the coalition. Regular testing and evaluation of these notification systems will enhance the coalition's readiness for future events.

**Strength 2.2**: Throughout the exercise, Southwest Florida HCC demonstrated commendable coordination efforts, marked by robust relationships among hospitals, non-hospital entities, and key stakeholders. Sustaining these collaborative relationships will enhance the region's response in future events.

If you have additional strengths to note, please add lines and supporting information as needed.

#### AREAS FOR IMPROVEMENT

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

Area for Improvement 2.1: Medical Transport Coordination and Patient Tracking

**Analysis:** Participants expressed concerns regarding the coordination of medical transport resources for pediatric patients and the process of tracking patients during crisis situations. It is recommended that the coalition facilitate exercises and drills specifically focused on transportation scenarios to evaluate the mechanisms, communications, protocols, and patient tracking during an emergency. Having Emergency Medical Services present for these discussions is critical to the success of the exercise and the region's response.

Area for Improvement 2.2: Alerting the Healthcare Coalition of an Incident

**Analysis:** Participants highlighted that notifying the healthcare coalition of an incident was not integrated into formal notification plans. However, in scenarios such as a medical surge, the coalition could leverage its capacity to disseminate critical information among relevant stakeholders. It is the recommendation that the coalition remind stakeholders of their role during a response and encourage stakeholders to add contacting the coalition into their communications plan.

#### Area for Improvement 2.3: Parental Notification Procedures

Analysis: A prevalent observation during the exercise was the uncertainty among participating organizations regarding parental notification procedures in the event of a pediatric emergency. Many organizations lacked clarity on the established protocols and procedures for identifying and notifying parents or guardians during such incidents. This lack of formalized processes could contribute to confusion and delays in effectively communicating with parents or guardians during pediatric patients. It is the recommendation that coalition stakeholders review their policies and procedures to identify a protocol for parental notification.

#### Area for Improvement 2.4: Training on Crisis Communication

Analysis: Despite recognizing its significance, participants struggled with various aspects of crisis communications for different types of scenarios. The challenges of the coalition's stakeholders included maintaining timely and accurate information dissemination, coordinating messaging across multiple platforms, and addressing public concerns effectively. Enhancing crisis communication capabilities can be integrated into broader emergency response planning efforts via training coordinated through the coalition. It is also recommended that the coalition continue to integrate communications drills into regional exercises.

If you have additional Areas for Improvement to note, please add lines and supporting information as needed. Additionally, ensure that "what was supposed to happen" and "what occurred" is accurately depicted for your organization in the following section.

# OBJECTIVE **3:** EVALUATE THE AVAILABILITY AND ADEQUACY OF RESOURCES DEDICATED TO MANAGING A PEDIATRIC SURGE.

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

If an objective is indicated as meeting the "full" capability level, there were no Areas for Improvement identified. If there were Areas for Improvement identified by the evaluators and participants, the capability level should be noted as being "partial."

#### STRENGTHS

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

**Strength 3.1:** Based on discussion, EMS services have knowledge of their current resources and understand the process for requesting resources and supplies once they have been depleted. This ensures continuity of operations and effective emergency response in the field. Continuing to review and exercise the resource request procedures will ensure sustainment of this strength.

If you have additional strengths to note, please add lines and supporting information as needed.

#### AREAS FOR IMPROVEMENT

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

Area for Improvement 3.1: Limited Pediatric EMS Supplies

**Analysis:** While EMS may have some pediatric supplies on hand during the initial response, there is a need to identify insufficiencies in their caches. Noted insufficiencies included pediatric restraint devices for stretchers, pediatric immobilizers, and pediatric backboards. For counties lacking adequate pediatric resources, it is recommended that they update response plans to include potential limiting factors in the response.

#### Area for Improvement 3.2: Pediatric Mental Health Support

Analysis: Prioritizing mental health during emergency response is essential for the well-being, resilience, and recovery of patients and their families. Throughout the exercise, participants identified unanswered questions regarding mental health resources related to pediatric cases. It is imperative to involve mental health professionals in planning to address these questions and best support the community's mental health needs in the aftermath of an emergency. It is recommended that the coalition and participating agencies identify opportunities to collaborate with mental health professionals for preparedness and planning.

If you have additional Areas for Improvement to note, please add lines and supporting information as needed. Additionally, ensure that "what was supposed to happen" and "what occurred" is accurately depicted for your organization in the following section.

# OBJECTIVE 4: IDENTIFY AND DISCUSS THE PROCEDURES RELATED TO PATIENT REUNIFICATION.

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

If an objective is indicated as meeting the "full" capability level, there were no Areas for Improvement identified. If there were Areas for Improvement identified by the evaluators and participants, the capability level should be noted as being "partial."

#### STRENGTHS

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

**Strength 4.1:** Participants recognized the significance of patient reunification and emphasized the involvement of school districts in reunification plans for pediatric patients. Continuous refinement of these plans is vital to facilitating a seamless reunification process for pediatric patients and their families.

If you have additional strengths to note, please add lines and supporting information as needed.

#### AREAS FOR IMPROVEMENT

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

Area for Improvement 4.1: Update Child and Parent Reunification Procedures

**Analysis:** Many of the hospitals within the coalition have reunification plans to address the needs of families seeking information about their loved ones. However, procedures varied between hospitals and left uncertainties regarding the process for identification of parents and the process for connecting a child and parent after an incident. Improving patient reunification plans and clarifying these aspects would greatly benefit each organization's ability to manage reunification efforts effectively during emergencies.

If you have additional Areas for Improvement to note, please add lines and supporting information as needed. Additionally, ensure that "what was supposed to happen" and "what occurred" is accurately depicted for your organization in the following section.

## APPENDIX A: IMPROVEMENT PLAN

This Improvement Plan was developed based on the results of the Tiny Troopers tabletop exercise, held on March 27, 2024. The Improvement Plan is the section of the AAR/IP that outlines the steps your organization can take to improve on the overarching Areas for Improvement identified during the exercise.

This improvement plan was prepared based on the results of this exercise. We invite you to personalize it by adding your specific areas for improvement and corrective actions in the blank space provided. You are also free to edit the entire chart to align with your needs or recommendations. Remember to complete the highlighted sections of the improvement plan.

- Column 1: Exercise Objectives This is a list of all the objectives from the exercise.
- Column 2: Issue \ Area for Improvement These areas for improvement are populated based on the analysis and recommendations sections from above. The areas for improvement were identified based on the results of the exercise and additional areas for improvement can be added based on your own personal notes.
- **Column 3: Corrective Action(s)** For each area for improvement, the actions needed to address the area for improvement are listed. You can add your own corrective actions to this chart.
- **Column 4**: **Capability Element** For each corrective action, a capability element is identified (Planning, Organization, Equipment, Training, Exercises) to assign a target for your corrective actions.
- Column 5: Assigned To List here who is tasked with seeing the corrective actions through to completion.
- Column 6: Start Date List the date that work on each corrective action will begin.
- Column 7: Target Completion Date List the date on which you plan to have the corrective actions completed.

#### Tips and Tricks for Improvement Planning:

- This Improvement Plan was developed based on the cumulative results of the exercise. Not all areas for improvement may be applicable to your organization. Please feel free to delete or update the listed items as needed.
- It is a **GOOD THING** to have areas for improvement and action items in every exercise you conduct. Nothing will go perfectly this is your opportunity to dig in and look for ways to improve.

Exercise Objective	Issue/Area for Improvement	Corrective Actions	Capability Element	Assigned To	Start Date	Target Completion Date
Objective 1: Discuss and evaluate the Pediatric Surge Annex for the Southwest Florida Healthcare Coalition.	<b>Area for Improvement</b> <b>1.1:</b> Inclusion of Emergency Medical Servies (EMS) in Emergency Planning Efforts	It is the recommendation that the healthcare coalition identify strategies to engage with EMS and ensure their inclusion in planning efforts.	Organization	Southwest Florida Healthcare Coalition Program Manager	03/27/24	On going

Exercise Objective	Issue/Area for Improvement	Corrective Actions	Capability Element	Assigned To	Start Date	Target Completion Date
	Area for Improvement 2.1: Medical Transport Coordination and Patient Tracking	Continue to invite EMS to exercises and drills and identify strategies for engagement.	Organization	Southwest Florida Healthcare Coalition Program Manager	03/27/24	On going
<b>Objective 2:</b> Assess the coordination and communication between regional	<b>Area for Improvement</b> <b>2.2</b> : Alerting the Healthcare Coalition of an Incident	It is the recommendation that the coalition remind stakeholders of their role during a response and encourage stakeholders to add alerting cross county and regional partners and the Coalition into their communications plan when appropriate.	Planning	Southwest Florida Healthcare Coalition Program Manager	03/27/24	03/27/25
partners during a healthcare emergency.	Area for Improvement 2.3: Parental Notification Procedures	It is the recommendation that coalition stakeholders review their policies and procedures to identify a protocol for parental notification.	Planning	Southwest Florida Healthcare Coalition Program Manager	03/27/24	On going
	Area for Improvement 2.4: Training on Crisis Communication	It is also recommended that the coalition continue to integrate communications drills into regional exercises, and emphasize communication across county and regional lines	Exercise	Southwest Florida Healthcare Coalition Program Manager	03/27/24	On going

Exercise Objective	Issue/Area for Improvement	Corrective Actions	Capability Element	Assigned To	Start Date	Target Completion Date
<b>Objective 3:</b> Evaluate the availability and adequacy of resources	Area for Improvement 3.1: Limited Pediatric EMS Supplies	For counties lacking adequate pediatric resources, it is recommended that they update response plans to include potential limiting factors in the response.	Planning	Southwest Florida Healthcare Coalition Program Manager	03/27/24	On going
dedicated to managing a pediatric surge.	Area for Improvement 3.2: Pediatric Mental Health Support	It is recommended that the coalition and participating agencies identify opportunities to collaborate with mental health professionals for preparedness and planning.	Planning	Southwest Florida Healthcare Coalition Program Manager	03/27/24	On going

Exercise Objective	Issue/Area for Improvement	Corrective Actions	Capability Element	Assigned To	Start Date	Target Completion Date
<b>Objective 4:</b> Identify and discuss the procedures related to patient reunification.	<b>Area for Improvement</b> <b>4.1:</b> Update Child and Parent Reunification Procedures	Improving patient reunification plans and clarifying these aspects would greatly benefit each organization's ability to manage reunification efforts effectively during emergencies.	Planning	Southwest Florida Healthcare Coalition Program Manager	03/27/24	On going

## APPENDIX B: EXERCISE PARTICIPANTS

If your organization is not listed or is listed incorrectly, please make the necessary changes to your copy of this document. Please remember to delete this red box prior to finalization.

Participating Organizations for March 27, 2024				
Organization Name	Organization Type			
Avow	Hospice			
Charlotte County Emergency Management	Emergency Management			
City of Fort Myers	Emergency Management			
DeSoto County Emergency Management	Emergency Management			
DeSoto County Health Department	Public Health			
Family Initiative	Other			
Florida Department of Health Collier County	Public Health			
Florida Department of Health Highlands	Public Health			
Florida Department of Health in DeSoto County	Public Health			
Florida Department of Health Okeechobee County	Public Health			
Florida Department of Health, Region 6	Public Health			
Florida Surgical Suites	Ambulatory Surgical Center (ASC)			
Fort Myers Fire Department	Emergency Medical Services (EMS)			
Fort Myers Shores Fire Department	Emergency Medical Services (EMS)			
Golisano Childrens Hospital	Hospital			
HCA Florida Highlands Hospital	Hospital			
Health Planning Council of Southwest Florida, Inc.	Other			
Hendry County Emergency Management	Emergency Management			
Highlands County Emergency Management	Emergency Management			
Lakewood Ranch Medical Center	Hospital			
Lee County Emergency Management	Emergency Management			
Lee Health	Hospital			
Premier Mobile Health Services	Rural Health Clinic (RHC)			
Sarasota County Fire Department	Emergency Medical Services (EMS)			
Sarasota Memorial Health Care System	Hospital			
Sarasota Memorial Health Care System	Hospital			
Sarasota Memorial Healthcare System - Venice	Hospital			

Participating Organizations for March 27, 2024				
Sarasota Memorial Hospital	Hospital			
Sarasota Memorial Hospital	Hospital			
Sarasota Memorial Hospital - North Port	Freestanding Emergency Department			
Southwest Florida Healthcare Coalition	Healthcare Coalition			

# APPENDIX C: ACRONYMS

Acronym	Term
AAR/IP	After Action Report / Improvement Plan
ASCs	Ambulatory Surgical Centers
ASPR	Administration for Strategic Preparedness & Response
CMS	Centers for Medicare & Medicaid Services
COOP	Continuity of Operations
CORFs	Comprehensive Outpatient Rehabilitation Facilities
DHS	Department of Health and Human Services
EMS	Emergency Medical Services
EOP	Emergency Operations Plan
FEMA	Federal Emergency Management Agency
HHAs	Home Health Agencies
HICS	Hospital Incident Command System
HPP	Hospital Preparedness Program
HSEEP	Homeland Security Exercise and Evaluation Program
IAP	Incident Action Plan
ICFs/IIDs	Intermediate Care Facilities for Individuals with Intellectual Disabilities
ICS	Incident Command System
TIL	Just-In-Time Training
LTCs	Long Term Care
MOU	Memoranda of Understanding
NIMS	National Incident Management System
PACE	Program for the All-Inclusive Care for the Elderly
PRTFs	Psychiatric Residential Treatment Facilities
TRACIE	Technical Resources, Assistance Center, and Information Exchange
TTX	Tabletop Exercise