



HOMELAND SECURITY EXERCISE AND EVALUATION PROGRAM

Volume II: Exercise Evaluation and Improvement

U.S. Department of Homeland Security

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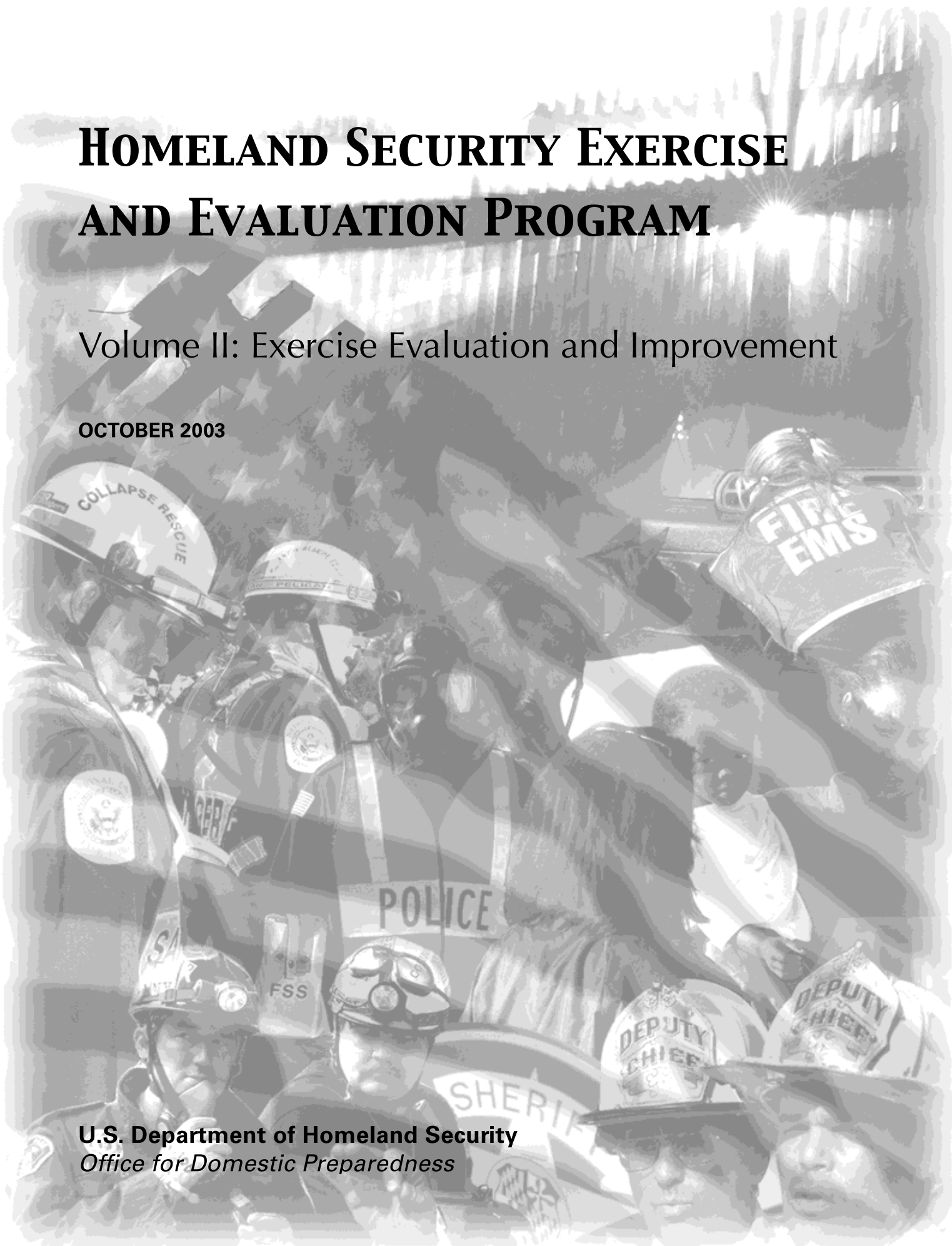
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Volume II: Exercise Evaluation and Improvement

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P R E F A C E

In the two years since the September 11, 2001, terrorist attacks on America, Federal, State, and local homeland security agencies have made major investments of time and resources to enhance their preparedness to prevent, respond to, and recover from acts of terrorism. It is important to evaluate how well these investments achieve enhanced preparedness.

The most effective way to evaluate preparedness prior to an actual incident is by conducting and evaluating threat- and performance-based exercises. Exercises provide a risk-free environment for jurisdictions to assess if they have the plans, policies, procedures, resources, and agreements in place to enable homeland security personnel to perform critical tasks required to prevent, respond to, or recover from a terrorist attack.

The Office for Domestic Preparedness (ODP), U.S. Department of Homeland Security, has defined a methodology and developed guidance for the evaluation of performance-based exercises, which are described in *Homeland Security Exercise and Evaluation Program, Volume II: Exercise Evaluation and Improvement*. The first document in this series on the Homeland Security Exercise and Evaluation Program, *Volume I: Overview and Doctrine*, was published in March 2003. *Volume III: Exercise Development Manual* and *Volume IV: Sample Exercise Documents and Formats* are under development.

The exercise evaluation methodology outlined in Volume II is designed to enhance the quality and usefulness of homeland security exercises by evaluating performance against standardized criteria, enhancing data analysis, and focusing greater attention on implementation of improvements. It is a methodology that recognizes that homeland security is a new activity for most Federal, State, and local agencies and that capabilities will need to be built and enhanced over time. The evaluation process recognizes those critical tasks that the exercise participants perform well and makes recommendations for improvements that need to be made. The goal is to improve the overall preparedness of the Nation so that all jurisdictions can perform required tasks at least at the 90 percent level.

The evaluation guides included in Volume II are an initial effort to define expected levels of performance. They build on past experience and will continue to be refined. The guides are incomplete at this time because they focus on response, with emphasis on a chemical attack. Additional evaluation guides are being developed to address prevention and deterrence, recovery, and other types of weapons of mass destruction. ODP plans to issue subsequent editions of Volume II as additional guides are developed and as the evaluation methodology is refined.

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INTRODUCTION

The Office for Domestic Preparedness (ODP), U.S. Department of Homeland Security (DHS), is implementing the Homeland Security Exercise and Evaluation Program (HSEEP) to enhance and assess terrorism prevention, response, and recovery capabilities at the Federal, State, and local levels. The HSEEP is a threat- and performance-based exercise program. It employs a cycle, mix, and range of exercise activities of varying degrees of complexity and interaction. It is designed to test the performance of critical homeland security tasks against objectively verifiable performance standards, with analytical review and strategic and operational application of the results.

Homeland Security Exercise and Evaluation Program, Volume II: Exercise Evaluation and Improvement is the second in a series of HSEEP manuals and provides guidance to State and local jurisdictions on evaluating terrorism exercises. It should be used in conjunction with the other documents in the series:

- ◆ *Volume I: Overview and Doctrine*
- ◆ *Volume III: Exercise Development Manual*
- ◆ *Volume IV: Sample Exercise Documents and Formats*

The following DHS/ODP definition of homeland security preparedness acknowledges the nature and unique characteristics of the terrorism threat and equates preparedness with performance.

Homeland security preparedness is a comprehensive national program encompassing all homeland security systems involved in the planning of organizational, operational, and technical measures designed to achieve full and sustainable performance to prevent, disrupt, or deter threats or acts of terrorism; reduce vulnerabilities; mitigate the effects of acts of terrorism; respond to threats and acts of terrorism; and perform effective

remediation and recovery efforts from terrorist attacks throughout the entire threat spectrum, including terrorist use of chemical, biological, radiological, nuclear, and explosive weapons of mass destruction (CBRNE WMD).

As public officials know, success in a real emergency is measured by performance. The public expects Government, law enforcement, and response agencies to prevent terrorist attacks if possible and, if attacked, to respond to and recover from these attacks quickly and effectively, mitigate the associated hazards, care for the victims, and protect the public.

Exercises provide a means to train and practice prevention, response, and recovery capabilities in a risk-free environment and to assess and improve performance. They allow individual responders and teams of responders to demonstrate and apply knowledge, skills, and abilities as well as provide a forum for the community to test plans, policies, procedures, and interagency/interjurisdictional interactions and agreements. Terrorism exercises are an advanced form of training through which the homeland security community demonstrates performance of tasks essential to an effective response and identifies and implements improvements.

This DHS/ODP methodology requires evaluation of organizational, operational, and technical capabilities at the task, agency/discipline/function, and mission levels. As part of its training strategy, DHS/ODP developed Emergency Responder Guidelines¹ that identify the essential tasks that response agencies must perform to effectively prevent, respond to, and recover from a threat or act of terrorism, including those involving the use of CBRNE weapons. Performance measures for the essential tasks associated with the response to threats or acts of terrorism are being developed for use in evaluating performance through exercises. The essential tasks and the performance measures will continue to be reviewed and refined as threats and response requirements change.

The methodology described in this document is an initial step in helping communities assess their level of preparedness, thereby contributing to the measurement of national readiness. DHS/ODP will continue to refine the approach by developing a suite of terrorism exercise scenarios designed to help jurisdictions test and evaluate their performance of essential tasks and overall response capabilities. Jurisdictions will be encouraged to establish a cycle of exercise activity that uses this common suite of scenarios to fully train to and test the continuum of tasks, conditions, and standards needed to prevent or respond to the range of probable terrorist threats as defined by National Intelligence Estimates. As these scenarios are developed, the evaluation methodology will be enhanced and discussed in subsequent editions of this document.

Background and Context

In 1998, ODP was established within the Department of Justice to help State and local governments improve their response to terrorism incidents. The Homeland Security Act of 2002 transferred ODP to the Department of Homeland Security and expanded its mission. DHS/ODP is assigned “the primary responsibility within the executive branch of government to build and sustain the preparedness of the United States to reduce vulnerabilities, prevent, respond to and recover from acts of terrorism.” Although ODP has been at the forefront of homeland security preparedness since 1998, the expanded responsibilities broaden its constituency from a State and local focus to include Federal agencies, tribal governments, the private sector, and international entities.

Although DHS/ODP’s mission has broadened, enhancing terrorism prevention, response, and recovery capabilities at the State and local levels remains its most important priority. DHS/ODP provides formula grant funds under the State Homeland Security Grant Program to the 50 States, the District of Columbia, and the U.S. Territories (hereafter collectively referenced as the States). The funds are awarded to a State or Territory Administrative Agency (SAA/TAA), designated by the Governor, and the SAA/TAA

makes subawards to State agencies and local governments for implementation of the DHS/ODP grant program. The funds may be used for planning, to purchase equipment, for training, and to support exercises. States conduct vulnerability, risk, and needs assessments, and develop and implement a Statewide Homeland Security Strategy. The strategy defines the State’s domestic preparedness goals; equipment, training, exercise, and technical assistance needs; and implementation strategy. Following the review of the strategies, DHS/ODP develops a State Assistance Plan (SAP) tailored to each State to help implement the strategy. The SAP defines the resources available to the State, including formula grant funds, training slots or course offerings available from DHS/ODP’s training program, direct exercise support and technical assistance. High threat urban areas follow a similar process in developing a strategy under the Urban Area Security Initiative. Additional information on these and other DHS/ODP programs can be found in *Homeland Security Exercise and Evaluation Program, Volume I: Overview and Doctrine*.

Purpose and Scope of This Manual

This volume of the HSEEP provides a how-to guide for conducting performance-based evaluations of terrorism threat-based exercises and developing Improvement Plans (IPs) to enhance prevention, response, and recovery capabilities. All jurisdictions that implement an exercise with grant funds or direct support available from DHS/ODP are encouraged to use the evaluation methodology outlined in this manual or to enhance their existing methodology based on this guidance. The document also sets out expectations for DHS/ODP contractors providing direct support to State and local jurisdictions under the HSEEP and provides requirements for exercise support contractors funded with DHS/ODP grant funds.

Because the users of this document may possess a wide range of experience with exercise evaluation, this document was designed to provide a

sound and straightforward process that can be easily followed and adapted to a wide range of exercise types, scenarios, and resource constraints. DHS/ODP's goal is to help jurisdictions objectively assess their capacity to prevent, respond to, and recover from a terrorist attack

so that modifications or improvements can be made before having to react to a real incident. By focusing on performance and the root causes for variances from expected outcomes,² public officials will be able to target their limited resources on improvements that will have the greatest effect on terrorism preparedness.

CHAPTER 1

Overview of the Evaluation Methodology

The goal of exercise evaluation is to validate strengths and identify improvement opportunities for the participating organization(s). This is accomplished by observing the exercise and collecting supporting data; analyzing the data to compare performance against expected outcomes; and determining what changes need to be made to the procedures, plans, staffing, equipment, communications, organizations, and interagency coordination to ensure expected outcomes. The focus of the evaluation for discussion-based exercises (e.g., workshops and tabletop exercises)³ is on plans, policies, and interagency/interjurisdictional relationships, whereas the focus for operations-based exercises (e.g., drills and full-scale exercises) is on assessing performance in preventing or responding to a simulated terrorist attack.

The participating agencies and jurisdictions should view the evaluation results not as a “report card” that grades weakness but rather as an opportunity to identify ways to build on strengths and improve capacity. Because jurisdictions are testing new and emerging plans, skills, resources, and relationships in response to a changed homeland security environment, every exercise can be expected to result in multiple findings and recommendations for improvement. It may take several years or more and multiple exercises before the enhanced capabilities in most jurisdictions are fully developed and practiced. Through the process outlined in this manual, exercise evaluators are encouraged to identify and analyze the cause for all variances from expected performance. Some of those variances will be positive changes that should be adopted widely as standard procedure. Others will require improvements on the part of the participating agencies or jurisdictions. Officials from participating agencies and jurisdictions should expect and demand an evaluation that is comprehensive, objective, and straightforward. Because

planning and conducting an exercise require a significant commitment of resources, it is important to maximize the benefits gained from the exercise through implementation of this U.S. Department of Homeland Security (DHS), Office for Domestic Preparedness (ODP), evaluation and improvement process.

Concerns are often expressed about the potential that a comprehensive and well-documented evaluation to identify vulnerabilities could be used by the media to criticize the participating government agencies or, worse, help potential terrorists plan an attack. Agencies need the ability to discuss areas for improvement and actions that they plan to take without concern that the information carries political or operational risks. Thus, all DHS/ODP-funded After Action Reports (AARs) and Improvement Plans (IPs),⁴ discussed in more detail later, are designated as “For Official Use Only.” Some jurisdictions may wish to share portions of their AAR and IP with the public. The decision to share the information will be made collaboratively at the State and local level by State and local officials.

Evaluation Methodology

This DHS/ODP evaluation methodology is designed to analyze performance at three levels, depending on the complexity of the exercise. For tabletop and other discussion-based exercises, the evaluation focuses on the adequacy of and familiarity with the jurisdiction’s plans, policies, procedures, resources, and interagency/interjurisdictional relationships that support the performance of critical tasks required to prevent or respond to a terrorist incident. For operations-based exercises, actual performance in preventing or responding to a simulated terrorist attack is expertly observed and assessed. The three levels of performance analysis are as follows:

- ◆ **Task-level performance**—the ability of individual players or teams to perform a required task during an exercise
- ◆ **Agency/discipline/function-level performance**—the performance of **agencies** (e.g., the police or fire department), **disciplines** (e.g., local, State, and Federal law enforcement agencies), and **functions**, often as defined by the Incident and Unified Command Systems (e.g., HazMat team, Emergency Operations Center (EOC), or fire services)
- ◆ **Mission-level performance**—the ability of the intergovernmental community as a whole (i.e., across disciplines and across jurisdictions) to achieve the expected outcomes in responding to an event

The results from these different levels of evaluation are needed to provide a comprehensive assessment of jurisdictional preparedness, which contributes to the national measurement of homeland security readiness.

Task-Level Performance

At the fundamental level, an exercise evaluation can be used to look at the ability to perform individual prevention and response tasks. A drill may focus on the performance of one or several tasks, whereas a full-scale exercise will require the effective performance of many tasks that contribute to effective prevention or response. Analysis at this level will answer the question, *Did the individuals or team carry out the task in the way that you expected and in a way that achieved the goal of the function?* In other words, did the person or small team do the right thing the right way at the right time?

The evaluation of the performance of individual tasks can help determine whether personnel, training, and equipment are sufficient for the individuals/teams to do their job. For example, the evaluation may show whether first responders followed prescribed procedures when responding to a terrorism incident and whether equipment has been properly maintained and operated correctly. Such information is useful

for team leaders and first-line supervisors when determining training needs, scheduling maintenance, and making routine purchases. For a drill, the analysis will generally stop with the identification of training and equipment needs. For a functional or full-scale exercise, the analysis will also explore the effect that not completing a task or not completing it in a timely manner has on other actions and the integrated overall response. Performance at the task level is linked and contributes to performance at the agency/discipline/function level and to mission accomplishment.

Agency/Discipline/Function-Level Performance

The exercise evaluation also assesses performance of specific agencies, disciplines, and functions. The purpose of evaluation at this level is to answer the question, *Did the larger team—the incident command team—perform the duties correctly in accordance with approved plans, policies, procedures, and agreements?*

The analysis at this level is useful for assessing such issues as advanced planning and preparation; how the members work together at the discipline, department, or organizational level; and how well team members communicate across organizational and jurisdictional boundaries. This information is used by department managers and agency executives at the State and local level in developing annual operating plans and budgets, communicating with political officials, setting long-range training and planning goals, and developing interagency and interjurisdictional agreements.

The evaluation team should conduct the evaluation and analysis in a way that synchronizes them with the organizational structures in use by the community. For many jurisdictions, the breakout of functional activities is defined by the Incident Command System (ICS)/National Incident Management System (NIMS).⁵ These functional groups, and the activities they carry out, are categorized as follows:

- ◆ **Fire services:** Initial response, fire suppression, explosive ordnance disposal, standby unit, decontamination, rescue, technical rescue, and recovery
- ◆ **Emergency medical service/emergency medicine:** Triage, treatment, transportation, medical communications, air operations, sustainment, and protocols
- ◆ **Health and hospitals:** Treatment, hospitals, decontamination, surge capacity, and hospital security
- ◆ **HazMat:** Entry, site access control, safe refuge area, decontamination, technical specialists, coordination, personal protection equipment selection, and reconnaissance
- ◆ **Law enforcement:** Initial response, scene security, force protection, investigation, law enforcement task force, explosive ordnance disposal, traffic control, and evacuation
- ◆ **Public safety communications:** Incident identification and linking responders and emergency management
- ◆ **Emergency management:**
 - Command and operations: Organization of initial response, reinforced response organization, multidivision/group organization, information, liaison, damage assessment, economic impact, operational planning, intergovernmental communications, and assessment
 - Planning: Situation, resources, documentation, and demobilization
 - Logistics: Communications, medical, supply, food, facilities, and transportation
 - Finance/administration: Time, procurement, compensation/claims, and cost
- ◆ **Public works:** Heavy equipment, public utilities, debris removal, construction, contract management, drainage, and water/runoff treatment
- ◆ **Public health:** Quarantine, medical advice, epidemiology, public outreach and education, and enforcement
- ◆ **Government administrators:** Public information, evacuation, requests for resources, and coordination
- ◆ **Environmental:** Environmental health, assessment (air, water, soil, flora, fauna), analysis, contamination, cleanup, and enforcement
- ◆ **Others**
 - Urban search and rescue
 - Victim support (e.g., social services, Red Cross, volunteer organizations, and religious organizations)
 - Mental health
 - Coroner/medical examiner

Mission-Level Performance

At the highest level, the evaluation can be used to assess whether the intergovernmental community as a whole (i.e., across disciplines and across jurisdictions) achieved the expected mission outcomes in responding to a simulated event. The focus is principally on outcome rather than on the individual processes. For example, the evaluation would assess whether casualties were minimized or prevented, not whether each individual followed a specific procedure. The purpose of evaluation at this level is to answer the question, *How prepared is the community to prevent or respond to and recover from a terrorist attack?*

Mission-level outcomes are those things that citizens expect from their elected officials and public agencies in addressing a terrorist threat or attack. Although the specifics may vary from community to community, the following is a list of mission outcomes that generally address public expectations:

- ◆ **Prevention/deterrence:** The ability to prevent or deter terrorist actions

- ◆ **Emergency assessment:** The ability to detect an event, determine its impact, classify the event, conduct environmental monitoring, and make government-to-government notifications
- ◆ **Emergency management:** The ability to direct, control, and coordinate a response, provide emergency public information to the population at risk and the population at large, and manage resources; this outcome also includes direction and control through the ICS and Unified Command System, EOC, and Joint Information Center (JIC)
- ◆ **Incident/hazard mitigation:** The ability to control, collect, and contain an incident at its source and to mitigate the magnitude of its impact; this outcome also includes all response tasks conducted at the incident scene except those specifically associated with victim care
- ◆ **Public protection:** The ability to provide initial warnings to the population at large and the population at risk, notify people to shelter in place or evacuate the population at risk, provide evacuee support (e.g., transportation for evacuees, reception centers, and shelters), protect schools and special populations, and manage traffic flow and access to the affected area
- ◆ **Victim care:** The ability to treat victims at the scene, transport patients, treat patients at a medical treatment facility, track patients, and handle and track human remains
- ◆ **Investigation/apprehension:** The ability to investigate the cause and source of the attack, prevent secondary attacks, and identify and apprehend those responsible
- ◆ **Recovery/remediation:** The ability to restore essential services, restore businesses and commerce, clean up the environment and render the affected area safe, compensate victims, provide long-term mental health and other services to victims and the public, and restore a sense of well-being to the community

Overview of the Evaluation and Improvement Process

The following overview describes the steps in the DHS/ODP evaluation and improvement process for operations-based and tabletop exercises. These steps do not apply to seminars and workshops.

Step 1: Plan and organize the evaluation.

As part of the exercise design and objectives development process, the exercise planning team will determine what information should be collected, who will collect it, and how it will be collected.

Step 2: Observe the exercise and collect data.

Expert (peer) evaluators collect data by recording their observations during exercise play and collecting additional data from records, logs, and so forth. Evaluators of tabletop exercises record the discussion and review documents such as plans, procedures, and interagency agreements.

Step 3: Analyze data. The analysis phase should answer the following questions about the exercise play:

- ◆ What happened?
- ◆ What was supposed to happen?
- ◆ If there is a difference, why?
- ◆ What is the effect of that difference?
- ◆ What should be learned from this?
- ◆ What improvement should be made or exemplary practices adopted?

The first step in the analysis process is a player hot wash, i.e., a short discussion session immediately following the exercise to get player feedback.

The evaluation of tabletop exercises focuses on assessing the adequacy of and familiarity with existing plans, policies, procedures, agreements and relationships, and resources that are needed for an effective response. The analysis phase of a tabletop exercise should address the following questions:

- ◆ How would response personnel perform the critical tasks?

- ◆ What decisions would need to be made and who would make them?
- ◆ Are personnel trained to perform the critical tasks?
- ◆ Are other resources needed? If so, how will they be obtained?
- ◆ Do plans, policies, and procedures support the performance of the critical tasks? Are response personnel familiar with these documents?
- ◆ Do response personnel from multiple agencies or jurisdictions need to work together to perform the tasks? If yes, are the agreements or relationships in place to support the performance of the tasks?
- ◆ What should be learned from this?
- ◆ What improvement actions are recommended?

Analysis of operations-based exercises is conducted using data collected to reconstruct the timeline of events as they occurred, an approach similar to the reconstruction of events that most agencies do following an accident or other type of incident. This information is then used to identify and explore the differences between what happened and what was supposed to happen to ascertain the root causes for the differences.

Step 4: Develop the draft After Action Report.

As part of the analysis phase, the evaluation team drafts the AAR, which provides a description of what happened, exemplary practices, issues that need to be addressed, and recommendations for improvements.

Exhibit 1 summarizes the steps in this process and the documents that are developed in each step of the exercise evaluation process.

The primary reason for conducting exercises is to assess and enhance the jurisdiction’s capacity to prevent, respond to, and recover from a terrorist attack. Steps 1–4 in the Exercise Evaluation and Improvement Process are focused on collection and assessment. Steps 5–8, described below, are focused on enhancing capacity to prevent, respond to, or recover from a terrorism attack.

The evaluators share the assessment information with jurisdiction officials and, if appropriate, facilitate the identification of improvements that can be made. This phase of the Exercise Evaluation and Improvement Process generally consists of the following steps, which are depicted in exhibit 2.

Step 5: Conduct Exercise Debrief meeting.

The exercise planners and/or evaluation team will present their analysis findings and recommendations in an Exercise Debrief meeting with

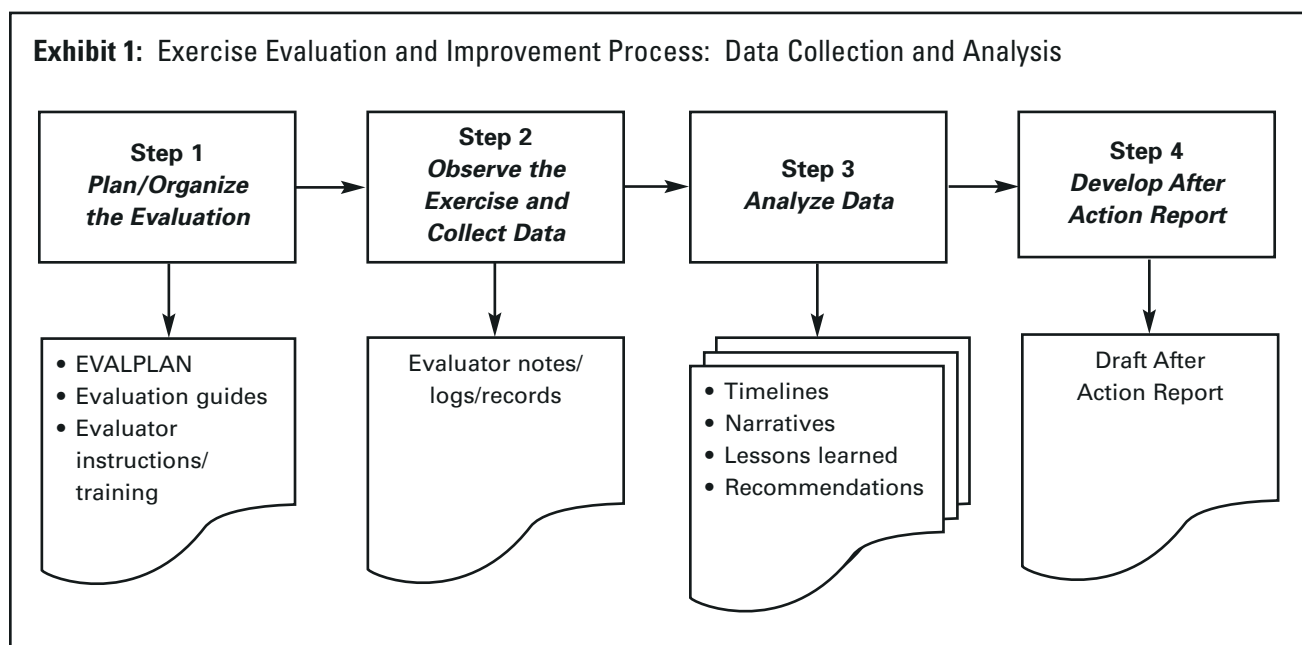
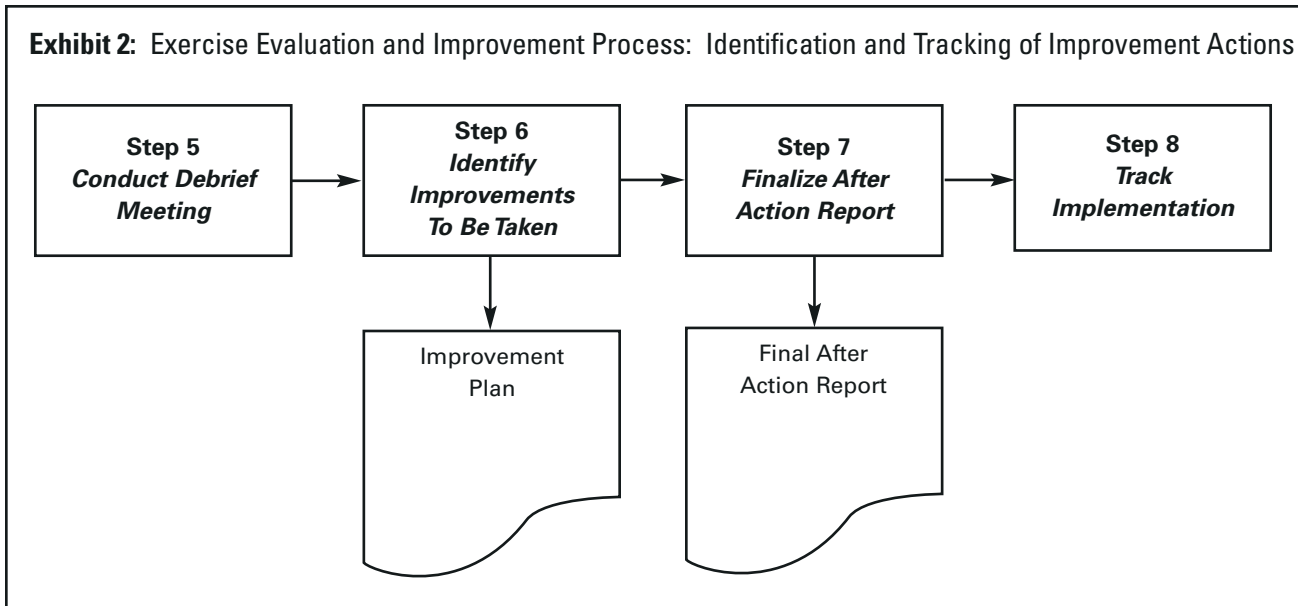


Exhibit 2: Exercise Evaluation and Improvement Process: Identification and Tracking of Improvement Actions



officials from the agencies and jurisdictions that participated in the exercise. They will also solicit feedback and validation from the officials on their observations and recommendations.

Step 6: Identify improvements to be implemented. Much of the Exercise Debrief meeting will be devoted to discussing the specific actions that the exercise jurisdictions will take to address the opportunities for improvement contained in the recommendations in the draft AAR. This list of actions, which identifies what will be done, who (person or agency) is responsible, and the timeframe for implementation, is known as the Improvement Plan (IP). Although the IP is a written document, it should be viewed not as a static document but as a dynamic program that is updated and modified regularly in a constant cycle of improvement.

Step 7: Finalize the After Action Report. Following the Exercise Debrief meeting, the evaluation team should finalize the AAR by incorporating any corrections or clarifications related to the observations or recommendations as well as the improvement steps that will be taken. Some of the actions may include only the preliminary step of a multistep activity (e.g., create a task force to review the issue and make recommendations for further action).

Step 8: Track implementation. Each jurisdiction should establish a process to track the implementation of the improvement steps to ensure that desired improvements are made.

Evaluating the Cycle of Exercises

The Exercise Evaluation and Improvement Process outlined above provides guidance on the evaluation and improvement process for a single exercise. It requires that each exercise be evaluated and that the jurisdictions and participating agencies implement an IP to address the findings.

HSEEP encourages each State and local jurisdiction to implement a cycle of exercises that cover a range of threats and test the capacity to perform the critical tasks needed to prevent, respond to, or recover from a terrorist attack. As a jurisdiction goes through the cycle, each exercise should build on the results of previous exercises, expand the range and mix of exercise activities, and increase in complexity and level of interaction. This does not suggest that each cycle will result in a straight line from seminars to full-scale exercise. When making significant changes in plans or procedures, there may be times that a seminar or workshop would be the most appropriate type of exercise to familiarize participants with changes.

The results of previous exercises and steps taken to enhance performance should always be reviewed and considered during the planning and design phase for subsequent exercises in the exercise cycle. Needed improvements should be made before conducting another exercise that tests the performance of the same or related tasks. The effectiveness of improvements made following one exercise should be tested and evaluated in subsequent exercises.

When completing an exercise cycle, which may take several years, the jurisdiction should review the results of all exercises conducted, improvements that have been made, and the range of threats and critical tasks that were addressed through the exercises. This information, along with information on new threats or improved prevention and response approaches or technologies, should be used to define the next exercise cycle.

CHAPTER 2

Evaluating Discussion-Based Exercises

The Homeland Security Exercise and Evaluation Program (HSEEP) employs a cycle, mix, and range of exercise activities of varying degrees of complexity and interaction. Generally, jurisdictions will start their exercise cycle with discussion-based exercises such as seminars, workshops, and tabletop exercises. These types of exercise are less expensive and time-consuming to implement and are an effective means of ensuring that plans, policies, procedures, resources, and agreements are in place and that response agencies and personnel are familiar with them.

This chapter provides guidance on evaluating discussion-based exercises, including seminars, workshops, tabletop exercises, and games.

- ◆ **Seminars** are instructional sessions employed to orient participants in, or provide an overview of, authorities, strategies, plans, policies, procedures, protocols, response resources, or concepts and ideas. Seminars provide a good starting point for jurisdictions that are developing or making major changes to their plans and procedures. The seminar leader may provide informal discussion, but communication is mostly one way.
- ◆ **Workshops** are meetings in which a facilitator guides a group to a conclusion about a specific problem in the form of a recommendation or written product. They are used to develop plans, work on particular issues, or design an exercise. In some cases, a workshop may result in further issues to be examined in a tabletop or other type of exercise.
- ◆ **Tabletop exercises** are designed to assess the adequacy of plans, policies, procedures, training, resources, and relationships or agreements that guide the prevention or response to a terrorist

attack. They should serve as the final “punch list” to check that the jurisdiction is ready to test its ability to perform the critical tasks during a full-scale exercise or during a real incident. This assessment is done by a group of officials from the various homeland security agencies in a jurisdiction talking through how they would respond to a simulated attack. In a typical tabletop exercise, players are presented with a scenario that provides information that would be available prior to, during, and following an attack. Players discuss the plans, policies, procedures, resources, and agreements that are in place to respond to the scenario and the problems presented by the leader/moderator. Problems are discussed as a group, and the resolution is generally agreed on and summarized by the leader. In more advanced tabletops, players are given prescribed messages that alter the original scenario.

- ◆ **Games** are simulations of operations that often involve two or more teams, usually in a competitive environment, using rules, data, and procedures designed to depict an actual or assumed real-life situation. The sequence of events affects, and is in turn affected by, the decisions made by the players. Each episode is moved to the next level of detail or complexity, taking into account the players’ earlier decisions. The decisions made by game participants determine the flow of the game. The goal is to explore decisionmaking processes and the consequences of decisions. Games stress the importance of the planners’ and players’ understanding and comprehension of interrelated processes.

For seminars and workshops, the evaluation process is simple and generally involves gathering participant feedback from a participant

survey or critique. There is no After Action Report (AAR) unless the effort is integrated into a larger exercise. Workshops may also result in documents that summarize recommendations regarding the particular topic being discussed.

Games evaluate decisionmaking processes and are not widely used in the homeland security community at this time. The evaluation process described for tabletop exercises can be adapted for games. As games become more developed and more commonly used, the U.S. Department of Homeland Security (DHS), Office for Domestic Preparedness (ODP), will include additional guidance on evaluating games in future editions of this document.

The remainder of this chapter will focus on planning and conducting an evaluation of a tabletop exercise. Tabletop exercises assess a jurisdiction's capacity to perform critical tasks required to prevent, respond to, or recover from a terrorist attack as defined by the exercise scenario. This is done as the participants discuss what plans, policies, procedures, trained personnel, equipment and other resources, and interagency and inter-jurisdictional agreements and relationships are in

place or need to be put in place to support the performance of the critical tasks required for an effective response.

The evaluation process documents the strengths and improvement opportunities identified by the participants during the exercise. Following the exercise, the evaluators compare what the participants said they would do to prevent or respond to and recover from the attack with existing plans, policies, procedures, and agreements to identify inconsistencies or gaps that should be addressed through training or other means of familiarizing personnel with established requirements. The evaluators also analyze how well these documents support the performance of essential tasks required to prevent or respond to and recover from a terrorist attack. This information is summarized in an AAR along with any recommendations for improvement. Exhibit 3 outlines the type of information that is collected and documented as part of each of these types of discussion exercises.

The sections below explain the evaluation process for a tabletop exercise, following the general process outlined in chapter 1.

Exhibit 3. Evaluating Discussion-Based Exercises: Summary of Data Collection and Documentation		
Event	Data Collection	Type of Report
Seminar	<ul style="list-style-type: none"> • Written participant critiques 	Critique summary retained by seminar sponsor
Workshop	<ul style="list-style-type: none"> • Workgroup issue papers or recommendations • Written participant critiques 	Memo summary or report of workshop retained by workshop sponsor
Tabletop exercise	<ul style="list-style-type: none"> • Facilitator notes • Participant discussion and issues recorded during exercise • Plans, policies, procedures, resources, and agreements • Participant hot wash • Written participant critiques 	After Action Report Improvement Plan
Games	<ul style="list-style-type: none"> • Facilitator notes • Participant decisions and issues recorded during exercise • Plans, policies, procedures, and agreements • Participant hot wash • Written participant critiques 	After Action Report Improvement Plan

Planning and Organizing the Evaluation

Planning the evaluation is a critical element of the Exercise Design process, which is discussed in volume III of the HSEEP. During this process, exercise designers and the lead evaluator take the following steps to plan the evaluation:

- ◆ **Define evaluation requirements:** Determine what will be evaluated and how information will be collected.
- ◆ **Prepare a plan for evaluating the exercise:** Prepare the complete package of information on the evaluation process.
- ◆ **Develop evaluation tools:** Develop the forms evaluators will use to capture information during exercise observation and data analysis.
- ◆ **Recruit, assign, and train facilitators and evaluators:** Determine the necessary qualifications of a facilitator or evaluator, identify appropriate individuals, obtain commitments from those individuals, and train them.
- ◆ **Finalize the plan for evaluation:** Undertake the activities necessary to organize the evaluation immediately before the exercise.

Define Evaluation Requirements

The planning team for a tabletop exercise develops a situation manual (SITMAN) that describes the exercise and provides the following information:

- ◆ Exercise goals and objectives
- ◆ Exercise participants
- ◆ Functional groups that will discuss response issues during the exercise
- ◆ Scenario that will be used, usually presented in several modules
- ◆ Questions to guide discussion following the presentation of each module

The evaluation planning team will use this information, as follows:

1. The evaluation planning team will first use the exercise goals and objectives to determine which tasks and associated plans, policies, procedures, resources, and agreements should be evaluated.
2. That information will be used to define the discussion questions that should be asked to focus the discussion on how well these documents, resources, and relationships support the performance of essential tasks.
3. The above information is reviewed to ensure that all required functions (e.g., individuals, teams, disciplines, organizations) will be involved in the exercise and discussion.
4. The functional groups and the number of participants in each group are used to determine the number and background of evaluators that will be required.
5. Once these steps have been completed, the evaluation planning team identifies or develops the appropriate evaluation tools for the evaluators to use.

Prepare the Evaluation Plan

Although the process for evaluating a tabletop exercise is less complex than that for a full-scale exercise, it is no less important. An evaluation plan or process should include the following items:

- ◆ **Exercise-specific information:** This is the scenario or a summary of the scenario, the functional groups for the exercise, and the exercise schedule (including the evaluation schedule).
- ◆ **Plans, policies, procedures, and agreements:** These are copies of or references to the jurisdiction's applicable plans, policies, procedures, and agreements that would be followed during a response.

- ◆ **Facilitator and evaluator assignments:** Identify how many facilitators and evaluators are needed, the background required, and the functional group that each will observe.
- ◆ **Facilitator and evaluator instructions:** Instructions on what facilitators and evaluators should do before they arrive (e.g., review exercise materials, jurisdictional plans and procedures, and the evaluation plan/process) as well as their role throughout the exercise.
- ◆ **Evaluation tools:** Include the data collection instruments and guides as discussed below.

Develop Evaluation Tools

Once the evaluation planning team has determined what will be evaluated, specific evaluation tools are developed for use in data collection and analysis. DHS/ODP has developed Evaluation Guides to assist with the evaluation of the tabletop exercises. These guides incorporate the critical tasks identified in ODP's Responder Guidelines and build on the experience from hundreds of terrorism exercises conducted under DHS/ODP's Nunn-Lugar-Domenici Domestic Preparedness Program, the Top Officials (TOPOFF) National Homeland Security Exercise Series, and the Federal Emergency Management Agency's (FEMA's) and U.S. Army's Chemical Stockpile Emergency Preparedness Program (CSEPP). In addition, the guides benefited from focus groups of subject-matter experts who came together to identify tasks essential to effectively prevent, respond to, and recover from a terrorist attack and measures of performance for these tasks.

The Evaluation Guides for tabletop exercises provide guidance on the data that should be recorded and questions that should be asked during the analysis phase. They focus on the plans, policies, procedures, and relationships needed to support the performance of the essential tasks required to achieve the mission outcomes.

Jurisdictions that conduct exercises with grant funds or contract support from DHS/ODP are encouraged to use the Evaluation Guides found in appendix B or, at a minimum, incorporate relevant elements or criteria from the guides into performance evaluation tools currently used by the State or jurisdiction. The current guides address essential tasks required to respond to any type of terrorist incident and specific tasks required to respond to chemical weapons. Additional guides are being developed to address tasks related to prevention and recovery as well as responses to attacks involving other types of weapons. DHS/ODP will continue to enhance, expand, and validate the Evaluation Guides.

Recruit, Assign, and Train Evaluators

Selection, recruitment, and assignment of evaluators are crucial components of exercise design. A Lead Evaluator should be identified early in the planning process and should fully participate as a member of the exercise planning team. The Lead Evaluator should be a senior-level person who is familiar with response functions; the plans, policies, and procedures of the jurisdiction; command and decisionmaking processes; and interagency coordination.

A number of evaluators will also be needed to observe and record participant discussion during the exercise. Evaluators should be chosen for their knowledge and understanding of the specific functional area they will be assigned to observe.

In addition to a facilitator to manage the exercise process, a facilitator and at least one evaluator will be needed for each functional group. The exercise facilitator sets the expectations for the exercise, introduces or presents the scenario and the various modules, manages the time and group report outs, and facilitates the discussion of any coordination issues between groups. The group facilitator keeps the group focused on the issues and discussion questions and ensures that all members have an opportunity to participate in the discussion. The role of the evaluator is to

Tips for Facilitators

- ◆ Keep discussion focused on how critical tasks would be performed.
- ◆ *Always* remain neutral, objective, and fair.
- ◆ Record all ideas and facts.
- ◆ Face the group.
- ◆ Involve the participants whenever you can.
- ◆ Don't be afraid to cut off people who are rambling on.
- ◆ Honor break times, lunchtimes, and quitting time.
- ◆ Call people by name.
- ◆ Use the space you're in.
- ◆ Allow group members to speak to each other, not to you.
- ◆ Know when to be quiet; don't answer too many questions.
- ◆ Don't allow the group to transfer ownership of the process, problem, or recommendation to you.
- ◆ Read the group and respond.
- ◆ Never say, "I told you so."
- ◆ Know your art, be confident, and be flexible.
- ◆ Preserve the integrity of the group and every individual.
- ◆ Learn to laugh at yourself.

Source: <http://www.c3i.osd.mil/bpr/bprcd/4122.htm>

observe and record the discussion during the exercise, participate in the data analysis, and assist with drafting the AAR.

Facilitators and evaluators are generally drawn from nonplaying members of participating organizations, contractors, or peer organizations.

Facilitators should have meeting facilitation or training skills so that they can guide the discussion without injecting themselves into it (see sidebar, "Tips for Facilitators").

The facilitators and evaluators should have copies of and be familiar with the jurisdiction's

plans, policies, procedures, and agreements. They should also have a reasonable level of subject-matter knowledge.

Evaluators need to be trained and thoroughly prepared to effectively perform their assigned duties. The training should address all aspects of the exercise to include exercise goals and objectives, the scenario, participants, and evaluator roles and responsibilities. The training should also include guidance on observing the exercise discussion, what to look for, what to record, how to use the Evaluation Guides or other evaluation tools, and how to analyze the data.

During the training, evaluators should be provided with copies of the following materials for review prior to the exercise:

- ◆ Exercise documents, such as the Situation Manual (SITMAN).
- ◆ Appropriate jurisdictional plans, policies, procedures, and agreements.
- ◆ Evaluation materials, Evaluation Guides and/or other evaluation tools, exercise agenda and schedule, and evaluator assignment.

Finalize Evaluation Plans

Just before an exercise actually takes place, the Lead Evaluator will meet with the facilitators and evaluators to verify roles, responsibilities, and assignments and to provide any updates to the scenario or evaluation tools. The briefing should include a review of exercise activities and the scenario. This briefing is the time for evaluators to ask questions and ensure that they completely understand their roles and responsibilities. Evaluator questions should be addressed and information clarified so evaluators feel confident they can effectively perform their assignments.

Observe the Exercise and Collect Data

In a tabletop exercise, data collection occurs when the evaluator records the discussion as it progresses. The evaluator should record the

issues that are identified, the discussion on each issue, how decisions are made, roles and responsibilities, coordination and cooperation issues, and recommendations from the group. The evaluator also needs to capture unresolved issues.

The role of the evaluator should not be confused with that of the group recorder. The discussion group will generally assign one of its members to serve as a recorder who will present the discussion group's report to the full group of participants. The recorder may use a whiteboard or flip charts to write down the group's issues or presentation points. The evaluator should not serve as the group recorder but instead should gather the recorder's notes or flip chart sheets to supplement his/her notes, as appropriate.

The evaluators should record the following types of information from the participant discussion:

- ◆ What plans, policies, and procedures would the participants follow to prevent or respond to and recover from a terrorist attack, as described in the exercise scenario?
 - ◆ Are roles and responsibilities of the various government agencies and private organizations clear?
 - ◆ How are various decisions made? Who has authority to make the decision?
 - ◆ What information about the scenario, the weapon, the victims, and the risks to responders and the public is collected? Who collects it, and what do they do with it?
 - ◆ How is information shared with other agencies and with the public? What information is shared?
 - ◆ What is the role of State and Federal agencies? How are State and Federal resources requested? Who makes the request? How are the resources distributed and controlled?
 - ◆ What mutual aid agreements exist? How would they be activated?
 - ◆ What recommendations for improvements were made by the group?
- ◆ What issues were unresolved or require followup?
 - ◆ What actions do participants plan to take to address outstanding issues?

Time is allotted during the exercise for participants to address, as a whole, any key issues, cross-disciplinary issues, or conflicting recommendations that were identified during group discussion. Although assigned to record discussion within an assigned group, all of the evaluators should capture information on cross-cutting issues.

A hot wash or critique with the exercise planning team, facilitators, and evaluators is held immediately following the exercise. The purpose of the hot wash is to collect observations and thoughts about what happened during the exercise and how well participants think it went. The hot wash also provides the evaluators with the opportunity to clarify points or collect any missing information.

Another source of information that should be collected is feedback from participants. Sample participant evaluation forms are provided in appendix A.

Analyze Data

Following the exercise (usually the next day), the evaluators will analyze the data. The analysis consists of the following steps:

- ◆ Review evaluator notes on the discussion, decisions, and recommendations from the exercise; results of the hot wash; and participants' feedback forms; and identify any inconsistencies captured from different discussion groups.
- ◆ Compare what the participants said they would do to respond to the incident with existing plans, policies, procedures, resources, and agreements, and identify whether there were differences and why.
- ◆ Review the Evaluation Guides to determine if the performance of essential tasks is supported by existing plans, policies, procedures, resources, and agreements.

- ◆ Identify what should be learned and provide recommendations for improvement.

The analysis focuses on the following types of issues:

- ◆ Clarity of current plans, policies, and/or procedures
- ◆ Consistency of plans, policies, and/or procedures across agencies or jurisdictions
- ◆ Determining who has the authority to take a specific action (e.g., order an evacuation) or the procedure required to act
- ◆ Adequacy of coordination or cooperation between agencies
- ◆ Sharing of information among agencies
- ◆ Ensuring that plans have been updated or new policies or procedures have been developed to address new issues arising from terrorism

As the evaluation team identifies issues and their causes, it develops recommendations for improvement. The recommendations should clearly state what the jurisdiction or participating agency should do to enhance plans, policies, procedures, resources, or relationships/agreements to support the performance of essential tasks. The recommendations should state what should be done and who should do it. The recommendations should have enough detail to make them useful. The analysis team should use the following questions as a guide for developing recommendations for improvement:

- ◆ What changes need to be made to plans, policies, procedures, and relationships/agreements to support the performance of essential tasks?
- ◆ What changes need to be made to organizational structures to support the performance of essential tasks?
- ◆ What changes need to be made to leadership and management processes to support the performance of essential tasks?
- ◆ What training is needed to support the performance of essential tasks?

- ◆ What changes to resources or additional resources are needed to support the performance of essential tasks?
- ◆ What practices should be shared with other communities?

Throughout this process, the analysis team should also document any lessons learned that should be shared with other jurisdictions. For additional guidance on developing recommendations and lessons learned, see the discussion on developing recommendations for operations-based exercises in chapter 3.

Draft the After Action Report

Following the analysis, the facilitator and/or recorders will take the issues, discussions, and recommendations identified during the exercise and synthesize them into the draft AAR. The AAR is the tool used to provide feedback on the results of the exercise to officials from the participating agencies and jurisdictions. The AAR summarizes the discussion related to the plans, policies, procedures, training, resources, agreements, and relationships that have been put into place to support the performance of tasks critical to the prevention of or response to the terrorist act defined by the exercise scenario. The report also captures issues that could not be resolved during discussion and therefore require followup as well as alternative or innovative approaches that could be implemented. Recommendations for improvements identified by the participants during the exercise or by the evaluators during the analysis process are presented in the AAR. The report and the recommendations provide a tool for jurisdictional and agency officials to establish priorities to implement improvements that would be needed to enhance performance during a full-scale exercise or when responding to a real incident. The improvement steps that will be implemented should be identified during the review of the draft AAR and should be incorporated into the final AAR. See chapter 4 for additional information on the review of the AAR and development and implementation of the Improvement Plan (IP).

Suggested After Action Report Format

Executive Summary

The executive summary is a 1- to 2-page summary of the exercise highlighting the scope, participants, key successes, and most significant areas for improvement.

Exercise Overview

This section provides background information on the exercise and participating jurisdictions/agencies, such as the dates and location of the exercise, the type of exercise, the sponsoring agencies, the participating agencies, an overview of the scenario, and a description of the evaluation process.

Exercise Goals and Objectives

The goals and objectives for the exercise are listed.

Analysis of Mission Outcomes

This section provides an analysis of the jurisdiction's capacity to perform the mission outcomes related to the exercise scenario. It provides an assessment of how well the jurisdiction(s) would be able to achieve the mission outcomes (e.g., public protection or victim care), based on its capacity to perform the critical tasks related to the mission outcome.

Analysis of Capacity to Perform Critical Tasks

This section provides an analysis of each task identified as critical to the response to the attack defined by the exercise scenario, with a focus on how prepared the jurisdiction is to perform the task in a full-scale exercise or actual event. It should be organized by task as described below. If the jurisdiction is prepared to perform a task and there are no issues, complete the analysis section with a brief description of what is in place and put "None" in the recommendations section.

- ◆ **Task Number and Description:** The number and title of the task from the exercise evaluation guides (EEG).
- ◆ **Issue Number and Description:** Number consecutively under the task and provide a statement that describes the issue. If multiple issues relate to a task, list issue number 1 followed by the relevant analysis and recommendations, then present issue number 2.
- ◆ **References:** Cite the source of the issue in the EEG, plans, procedures, mutual aid agreement, and so on.
- ◆ **Summary:** Provide a brief description of the issue.
- ◆ **Consequence:** Describe the anticipated effect of the issue on the ability of the community to respond as expected, with reference (as appropriate) to the effect on the mission outcomes, other functions or disciplines, or the performance of other tasks.
- ◆ **Analysis:** Briefly describe whether the jurisdiction has the plans, policies, procedures, trained personnel, equipment, mutual aid agreements, and so on needed to perform the required task.
- ◆ **Recommendations:** Provide a statement that describes what can be done to resolve the issue (e.g., changes in plans or procedures, organizational structures, leadership and management processes, training, equipment or resources, and interagency or interjurisdictional agreements).
- ◆ **Improvement Actions:** Describe what specific actions the jurisdiction will take to address the recommendation, who is responsible for addressing the recommendation, and when the action will be completed. This section is completed by the exercising jurisdiction(s) following a review of the draft AAR. See chapter 4 for further explanation.

Conclusion

This section should provide a brief summary of the major conclusions from the exercise.

Appendix A: Improvement Plan Matrix

The Improvement Plan Matrix lists, for each task, the recommendations, the improvement actions that will be taken, the responsible party or agency, and the expected completion date.

CHAPTER 3

Evaluating Operations-Based Exercises

This chapter provides guidance on evaluating operations-based exercises, which include drills, functional exercises, and full-scale exercises. As discussed in chapter 2, the evaluation process for each type of exercise will follow the same general steps:

- ◆ Plan and organize the evaluation before the exercise to determine what will be observed and where.
- ◆ Observe the exercise and collect data.
- ◆ Analyze the collected data to assess performance at the task, agency/discipline/function, and mission outcome levels.
- ◆ Identify opportunities for improvement.
- ◆ Draft the After Action Report (AAR).

Each of these steps is discussed below, whereas the steps related to improving preparedness are discussed in chapter 4.

Plan and Organize the Evaluation

Planning for the evaluation is a critical element of the Exercise Design process, discussed in volume III of the Homeland Security Exercise and Evaluation Program (HSEEP). During this process, exercise designers implement the following steps to plan for the evaluation:

- ◆ **Define evaluation requirements:** Determine what will be evaluated and where the observations will occur.
- ◆ **Prepare the EVALPLAN:** Prepare the complete package of information on the evaluation process.
- ◆ **Develop evaluation tools:** Develop the forms evaluators will use to capture information for evaluation during the exercise observation.

- ◆ **Recruit, assign, and train evaluators:** Determine the necessary qualifications of evaluators, identify appropriate individuals, obtain commitments from those individuals, and train them.
- ◆ **Finalize the evaluation plan:** Undertake the activities necessary to organize the evaluation just before the exercise.

Define Evaluation Requirements

While the exercise is being designed, the evaluation planning team will be provided, via the Exercise Plan (EXPLAN), the Master Scenario Event List (MSEL), and other exercise documents, with information on:

- ◆ Exercise goals and objectives
- ◆ Exercise flow
- ◆ Critical actions
- ◆ Exercise participants
- ◆ Functions and activities to be evaluated

The evaluation planning team will use this information to plan the evaluation, as follows:

1. The evaluation planning team will first use the exercise goals and objectives to determine what performance outcomes should be evaluated.
2. Once the outcomes to be evaluated are determined, the team identifies what activities should be evaluated.
3. Based on these activities, the team identifies which functions (e.g., individuals, teams, disciplines, organizations) should be evaluated.
4. From the functions, the evaluation planning team can identify where the observations

should take place (i.e., what locations) and which specific tasks should be evaluated.

5. Once these steps have been completed, the evaluation planning team can identify or develop the appropriate evaluation tools for the evaluators to use.

Prepare the EVALPLAN

The evaluation planning results in the Evaluation Plan (EVALPLAN), which consists of the following:

- ◆ **Exercise-specific information:** The EVALPLAN should include the scenario, the map of the play site (including evaluation locations), and the exercise schedule (including the evaluation schedule).
- ◆ **Evaluator team organization, assignments, and location:** The EVALPLAN should identify how many evaluators are needed, where they will be located, and how they are organized. Evaluators cannot see everything that occurs at any one location during a response. Yet, during the exercise, evaluators must be able to capture information that provides insight into how effective each group is as well as how well they operate with each other. Thus, the location and number of evaluators are crucial to the data collection process.
- ◆ **Evaluator instructions:** Evaluators should be given instructions on what to do before they arrive (e.g., review exercise materials, jurisdictional plans and procedures, and the EVALPLAN) as well as how to proceed upon arrival.
- ◆ **Evaluation tools:** The EVALPLAN should include the data collection instruments and guides, as discussed below.

Develop Evaluation Tools

Once the evaluation planning team has determined what will be evaluated and where the observations will occur, specific evaluation tools are developed for use in the data collection and analysis.

The U.S. Department of Homeland Security (DHS), Office for Domestic Preparedness (ODP), has developed Evaluation Guides to assist with the evaluation of performance demonstrated during operations-based exercises. These guides incorporate the critical tasks identified in ODP's Responder Guidelines and build on the experience from hundreds of terrorism exercises conducted under DHS/ODP's Nunn-Lugar-Domenici Domestic Preparedness Program; the Top Officials (TOPOFF) National Homeland Security Exercise Series; the Federal Emergency Management Agency's (FEMA's) and U.S. Army's Chemical Stockpile Emergency Preparedness Program (CSEPP); and focus groups of subject-matter experts who came together to identify tasks essential to effectively prevent, respond to, and recover from a terrorism attack and measures of performance for these tasks. The Evaluation Guides have been developed for use by experienced exercise evaluators as well as by practitioners who are subject-matter experts but have little or no exercise evaluation experience. The guides consist of four sections that provide evaluators with information on what they should expect to see, space to record observations, and questions to address after the exercise as the first step in the analysis process.

The Evaluation Guides are organized so that they can be used by individual evaluators assigned to observe individual tasks or groups of tasks. During the analysis phase, evaluators combine their observations with those of the other evaluators. They reconstruct the events and analyze outcomes and interactions across agencies, disciplines, and jurisdictions in achieving broad mission outcomes. The responsible team (agency or discipline), function, jurisdiction, and mission outcome are indicated on the guide to facilitate this analysis.

Jurisdictions that conduct exercises with grant funds or contract support from DHS/ODP are encouraged to use the Evaluation Guides, which are found in appendix C, or, at a minimum, incorporate relevant elements/criteria from the guides into performance evaluation tools currently used by the state or jurisdiction. The current guides cover universal tasks that are required to respond to any type of terrorist

Exhibit 4. Evaluation Guide Content	
Section 1: General Information	Identifies the mission outcome being addressed, the members of the response team, the observation location, jurisdiction, and evaluator contact information.
Section 2: What To Look For	Describes what the evaluator should expect to observe, including the inputs that trigger an action or decision, conditions that might affect the action or decision, expected outcomes, steps that the players will generally take, and the consequences of the effective completion of the task. These elements may be modified in accordance with jurisdictional plans and procedures.
Section 3: Observation Record	Provides a log to record observations that include the time, the action or decision, who took the action, what triggered it, and the result.
Section 4: Data Analysis Questions and Measures	Provides performance criteria and a series of questions to help the evaluator assess whether or not the expected activities occurred, how well they were performed, and why activities did or did not occur as expected. The evaluator should review the criteria and address the questions immediately following the exercise or during a lull in activity. The questions are also used throughout the analysis process to assess task performance, decisionmaking, and interactions.

incident and specific tasks related to response to a chemical weapon attack (see exhibit 4). Additional guides are being developed to address tasks related to prevention and recovery as well as response to attacks using other types of weapons. DHS/ODP will continue to enhance, expand, and validate the Evaluation Guides.

Recruit, Assign, and Train Evaluators

The selection, recruitment, and assignment of evaluators are crucial components of exercise design. The individual primarily responsible for these tasks is the Lead Evaluator. The Lead Evaluator may be assisted in this task by the other members of the evaluation planning team or the exercise design team.

Determining How Many Evaluators Are Needed

The Exercise Plan, which is developed by the exercise planning team, serves as the basis for determining the number and expertise of evaluators needed for the exercise. This document will define the scope and concept of play for the exercise. It describes the response tasks that

will be demonstrated by exercise players, and indicates whether simulations will be used for nonparticipating organizations. It also identifies exercise locations such as emergency operations centers, medical facilities, decontamination sites, and field locations.

The Lead Evaluator plays a critical role in operations-based exercises and should be identified early in the process to fully participate as a member of the exercise planning team. The Lead Evaluator should be a senior-level person who understands command and decisionmaking processes and interagency coordination as well as specific response functions. Exercises with play in multiple sites will need an Evaluation Team Leader for each site.

A number of evaluators will also be needed to observe and record player performance during the exercise. Evaluators should be chosen for their knowledge and understanding of the specific functional area they will be assigned to observe. Evaluators should be assigned to monitor all participating organizations and player locations. The following guidelines will help participants determine the number of evaluators that are needed:

- ◆ **Field response.** A minimum of one evaluator for each function evaluated (e.g., incident command, decontamination, and emergency medical services); additional evaluators are needed for functions that involve multiple activities that take place simultaneously or activities that take place in multiple locations.
- ◆ **Hospital.** A minimum of three to five evaluators at each participating medical facility, depending on hospital size and expected patient flow; additional evaluators are needed for functions that involve multiple activities taking place simultaneously or activities taking place in multiple locations.
- ◆ **Emergency Operations Center (EOC).** A minimum of three to five evaluators at each participating facility, depending on the size and organizational structure of the EOC.

Exhibit 5 shows the various functions that may be included in an exercise and the minimum number of evaluators needed to observe each function. A drill may focus on only one or two of the listed functions, whereas a full-scale exercise could include most or all of the listed functions. Additional evaluators would be needed for a large exercise with many players performing a function in a single location or for each location when the function is performed at multiple sites.

Identifying and Recruiting Evaluators

Where do you find 30 or more evaluators who are familiar with the functions, processes, and organizations being exercised? Generally, exercise evaluators will be peer reviewers identified by reaching out to participating agencies and departments or to other jurisdictions or agencies that perform similar functions. States or regions within States may consider establishing peer-review teams of practitioners who are trained and available to serve as evaluators for exercises conducted within the region or State. This peer-review approach may also be supplemented by independent evaluators who can assist in

Exhibit 5. Guide for Determining Evaluators Needed	
Incident Site—Function	# of Evaluators
Incident/unified command*	2 to 3
Fire operations*	1
Decontamination*	1
HazMat operations*	1
HazMat entry team(s)*	1
Emergency medical services operations*	1
Triage*	1
Treatment*	1
Transport *	1
Law enforcement operations*	1
Bomb squad/explosives ordnance disposal	1
Special ops/SWAT	1
Communications	1
Public health	1
Public information/Joint Information Center (JIC)	1 to 2
Mass care/evacuee reception center	1
Hospital—Function	
Incident command/Emergency Operations Center (EOC)*	1 to 3
Triage/treatment*	2 to 3
Decontamination*	1 to 2
Security	1
Public information	1
Communications	1
EOC—Function	
Command/policy*	1
Plans/logistics/finance*	1 to 3
Operations*	1 to 2
Public information/JIC	1
Communications	1
Volunteer agencies	1
Security	1
<i>*Indicates a critical function.</i>	

monitoring compliance. Potential evaluators can be identified from multiple sources, including the following:

- ◆ Members of the Exercise Design Team, who are fully versed in the scenario, the players, and expected action, are a good source for evaluators (if they are not already committed to other duties during the exercises).

- ◆ Experienced members of the participating agencies who are not involved in the play are a good choice for evaluators because they are familiar with the organizations, plans, and procedures.
- ◆ Professionals in similar agencies in adjacent or nearby jurisdictions can be a source for evaluators, especially when all of the participating jurisdiction's members of a specialized function, such as a HazMat team, are involved in the exercise.
- ◆ The State or jurisdictions within a region may establish a pool of evaluators who would be available to evaluate exercises within the State or region.
- ◆ Evaluators may also be obtained from contractors or other support organizations.

Although serving as an evaluator requires a considerable commitment of time, evaluators and their agencies can expect to gain significant benefit from the peer evaluation process. For example, observing other locations exercising their emergency response plans may help evaluators gain insight into best practices or other ways to provide emergency response, which could benefit their own communities.

Evaluators are generally expected to be available for the preexercise training and briefing/site visit, the exercise itself, the postexercise hot wash, and the data analysis and contribution to the AAR. This time commitment is usually equivalent to 1 day before the exercise, the exercise day(s), and 1 day after the exercise. One or more of the evaluators may devote additional time to drafting the AAR and briefing jurisdiction officials on findings and recommendations. If contractor support was available for the exercise, the contractors generally assume responsibility for drafting the AAR and briefing local officials.

Training Evaluators

Evaluators need to be trained and thoroughly prepared to effectively perform their assigned duties. The training should address all aspects of the exercise and include such topics as the exercise goals and objectives, the scenario, safety

procedures, participants, realism, simulation, free play, contingency messages, prompting, and player interface. Considerable time should be devoted to guidance on the evaluator's roles and responsibilities as well as the evaluation process, including observing the exercise play, noting what to look for and what to record, using the Evaluation Guides or other evaluation tools, and analyzing the data.

The training should include a discussion of various situations that could occur during an exercise and how the evaluators should handle deviations from the EVALPLAN. For example, suppose the local Incident Commander makes an unexpected protective action recommendation to evacuate a school that is well outside the hazard area of the weapons of mass destruction (WMD) device. The jurisdiction agrees with the recommendation and begins the evacuation process. Because the evaluation team did not anticipate this action, it has no predetermined guide for collecting information for the tasks associated with the school evacuation process. The team must now determine how they are going to observe this situation and what data to collect. Team members need to know how they will get instruction on implementing mid-exercise changes to the evaluation plan.

During the training, evaluators should be provided with copies of the following materials for review prior to the exercise:

- ◆ Exercise documents, such as the EXPLAN, including objectives and appendices
- ◆ Jurisdictional plans and procedures
- ◆ Evaluation materials, such as the EVALPLAN, Evaluation Guides and/or other evaluation tools, and supporting materials such as the exercise schedule of events and locations and evaluator assignments

Finalize Preexercise Evaluation Plans

Just before an exercise actually takes place, the Lead Evaluator will organize the evaluation team, verify the roles and functions of all evaluators on the team, provide any updates to the evaluation tools, and prepare contingency evaluation

procedures for deviations that may occur during the exercise.

Evaluators will be expected to attend the Controller and Evaluator Orientation Briefing, which is generally conducted at the exercise site the day before the exercise. Each evaluator should be given an Evaluator Package of procedures and outcomes to observe. The evaluator package contains evaluation forms, evaluator instructions, and other items. Evaluators should bring the package to the exercise. Evaluators may reorganize the material so the information critical to their specific assignment is readily accessible. Evaluators may also bring to the exercise additional professional materials specific to their assigned exercise activities.

The briefing should include a detailed review of exercise activities and the scenario. This briefing is the time for evaluators to ask questions and ensure that they completely understand their roles and responsibilities. Evaluator questions should be addressed and information clarified so evaluators feel confident that they can effectively perform their assignments. Evaluators will also be given any updates from exercise planners on changes to plans and procedures. The briefing often includes a tour of the exercise site so that evaluators are familiar with the venue and know where they should position themselves to observe the exercise play.

Observe the Exercise and Collect Data

During the exercise, the evaluators' primary duty is to observe and record what the players do. After the exercise, that information will be used to determine whether the expected performance outcomes were achieved and to identify strengths and opportunities for improvement.

Getting Started

Evaluators should be located in the appropriate position at least 15 minutes before the start of the exercise. Within the assigned location, evaluators must determine when and where to position themselves to observe exercise events and are expected to follow the movement of the

play. Evaluators should not simply attach themselves to the team, section, or organization leader. They can often see more from locations where players are doing critical tasks or where they can observe the overall flow of organization and actions. The best place to be is wherever the evaluator can best see and hear the action. However, an evaluator should not take a position where he or she might be a distraction or interfere with the exercise play.

Observing the Exercise

Evaluators must keep an accurate written record of what they see and hear. To be reliable, they should take notes as players take action and make decisions. Notes should identify the following:

- ◆ Who (by name or position) performed the action or made the decision
- ◆ What occurred (the observed action)
- ◆ Where (the location) the action or decision took place
- ◆ When (the time) the action took place
- ◆ Why the action took place or decision was made (the trigger)
- ◆ How they performed the action or made the decision (the process)

The Evaluation Guides provide space to create a chronological record of the action to address the above questions. Although evaluators should be familiar with the expected outcomes and steps outlined in the "Typical Steps" section of the guide and the questions in the "Follow-Up Analysis" section, they should not try to use these sections as a checklist. It is important to concentrate on simply recording what is happening. The analysis of how well the exercise met expectations is done later.

If the space provided in the Evaluation Guide does not provide a convenient tool for the evaluator, the evaluator should use any recording system that fits his or her need. When observing multiple tasks with multiple Evaluation Guides, it is generally easier for the evaluator to record observations on a single guide or other tool rather than flipping through several guides to locate the applicable one. Many evaluators

prefer to use notebooks, blank sheets, or index cards. If the jurisdiction uses an evaluation tool other than the Evaluation Guides, it should ensure that the evaluators are recording their observations and not simply making marks on a checklist. Evaluators who use a checklist often miss actions that vary from those identified on the list. Using a checklist also makes it difficult to recreate the exercise during the analysis phase to evaluate how long it took players to take certain actions and determine the order of the activities.

Evaluators should bring or be provided with a clipboard or another writing tool. Some evaluators may choose to supplement their record through the use of electronic devices, such as a portable tape recorder or video camera, but they should be aware of their limitations. In particular, it may be difficult to concentrate on and record the actions when focused on getting a good shot. Also, evaluators should be aware that the use of such devices may be intrusive or intimidate exercise participants. For example, an evaluator may speak more loudly than normal when using recording devices. Players may find this distracting.

What To Look for and Record

Because numerous events may be occurring simultaneously, evaluators may not be able to record all the action. Knowing which events are important makes recording the action manageable, eliminates superfluous information, and provides the kind of data most useful for exercise evaluation. Important events evaluators should record include the following:

- ◆ **Message in:** An individual or group receives information from somebody outside of their physical location. Messages can be sent via radio, telephone, e-mail, fax, or another means other than face-to-face conversation. If known, indicate if the message is an inject (see next page).
- ◆ **Message out:** An individual sends information to another individual or group of people outside of their physical location. Messages can be sent via radio, telephone, e-mail, fax, or another means other than face-to-face conversation.

Tips for Successful Observation

DO:

- ◆ Be at the appropriate position when players arrive.
- ◆ Get a good view of activities.
- ◆ Focus on critical activities.
- ◆ Take detailed notes, including time of events.
- ◆ Write legibly.

DO NOT:

- ◆ Leave your post at key times.
- ◆ Prompt players.
- ◆ Get in the way.
- ◆ Answer questions for players (refer questions to the controller).

- ◆ **Discussion:** A conversation involving several people.
- ◆ **Decision:** An individual or group arrives at a conclusion or makes a specific determination. Decisions might be made following a discussion or can be made independently. Decisions often, but not always, lead to directives.
- ◆ **Directive:** An individual gives an order or specific direction to one or more people. A directive is often, but not always, given by an individual in a position of authority. Directives can be given in person or via other types of communication such as radio or telephone.
- ◆ **Movement:** An individual, group, or piece of equipment relocates.
- ◆ **Activity:** An individual or group performs a specific, clearly definable action or function. Putting on a HazMat suit or checking patient status is considered an activity.
- ◆ **Inject:** Information, including directives, instructions, and decisions that are provided by exercise controllers to exercise players. Injects can be written, oral, or televised and can be transmitted via any

means (e.g., fax, phone, e-mail, voice, radio, or sign).

Other things to look for and note include the following:

- ◆ Initiating scenario events (including when players first detect abnormal conditions)
- ◆ Deviations from plans and implementation procedures
- ◆ Timeliness of critical actions
- ◆ Monitoring and assessing scenario events
- ◆ Command and control at the scene
- ◆ Creative player problem-solving beyond current plans and implementation procedures.
- ◆ Plans or procedures that affect player efforts
- ◆ Equipment issues that affect player efforts

Much of the above information will be obtained through watching and listening to the exercise players. However, the evaluators may also interact with players during the exercise if they have a question about something they observed. This may be especially important for those evaluators observing play in EOCs, Joint Information Centers, or similar locations where much of the activity is conducted over the phone. Because evaluators cannot hear what is happening on the other end of the line, they may have to ask who the player was talking to and what was discussed. Evaluators should not interrupt play to ask such questions but should wait until there is a break in activity.

The exercise planners may find it useful to share this information with the exercise participants so that the participants know what the evaluators will be looking for and that they are not focused on individual performance.

Analyze Data

The goal of data analysis is to assess performance by identifying what aspects of the exercise went well and what areas need improvement. The analysis compares players' actions with what was expected to happen. As discussed in

chapter 2, an exercise evaluation can be used to analyze performance at several levels, depending on the purpose, scope, and complexity of the exercise:

- ◆ Task-level performance (i.e., the performance of one or several individuals or a team's performance)
- ◆ Department/discipline/function-level performance (i.e., the performance at the department, discipline, and functional levels)
- ◆ Mission-level performance (i.e., how well the participating jurisdictions and agencies achieved expected prevention, response, and/or recovery missions such as managing the response, mitigating the hazard, protecting the public, and victim care)

The analysis phase generally involves four activities, each of which builds on the previous one.

1. Complete data collection: Immediately following (and sometimes during) the exercise play, evaluators should ensure that they have a complete record of their observations and have collected sufficient information to support the analysis.
2. Conduct a player hot wash or critique: This is typically a short discussion of about 1 hour, immediately following the exercise, to get player feedback on the exercise.
3. Reconstruct exercise events: In this analysis, the participants will reconstruct the exercise using evaluator observations and notes and supplemental data (e.g., electronic logs). This discussion involves a representative set of players, controllers, and evaluators from all exercise functions and locations who conduct separate analyses for each location. The purpose of this analysis is to compare what happened to what was supposed to happen and determine the root causes of differences. As part of the analysis, the participants identify lessons learned and recommendations for improvements.

4. Conduct cross-functional or cross-jurisdictional analysis: The purpose of this analysis is to identify any issues and areas for improvement that may have been missed in the previous analysis. This discussion involves one or two representative players and evaluators from each exercise function and location. This analysis allows those who were not directly involved in a particular task to identify the potential impacts of actions taken by others and examine how particular actions interrelate. As a result of this analysis, additional areas for improvement and recommendations may be identified that would not necessarily come out of focused group analysis of a particular task. This group also determines the degree to which players achieved overall response outcomes.

Using information collected during these analyses, the evaluation team begins to draft the AAR. Each of these steps is described in more detail below.

Collect Supplemental Data

Immediately following the exercise, the evaluators should review their notes, fill in any gaps, and review and respond to the questions in the section of the Evaluation Guide titled “Data Analysis Questions and Measures” or complete the alternative evaluation tool provided. The data analysis questions in the Evaluation Guide are designed to prompt the evaluator’s recollection of key activities. Evaluators may use lulls in action during the exercise to begin to complete this task. Evaluation materials, including notes and forms, become part of the exercise documentation.

In preparation for the detailed analysis necessary to reconstruct the exercise, evaluators should also attempt to collect supplemental data that may be useful in filling in data gaps that are identified by the group. For example, one useful source of information could be records produced by automated systems, communications networks, and responders. This action is similar to preserving evidence during an actual emergency. When appropriate, these records can help evaluators validate their observations, determine equipment status, and identify the effect of

During analysis, evaluators try to answer the following questions:

- ◆ What happened—what the observation team actually saw and supporting documentation
- ◆ What was supposed to happen—based on the plans and procedures
- ◆ Was there a difference and why—conduct a root cause analysis of why
- ◆ What was the impact—were the consequences of the action (or inaction, or decision) positive, negative, or neutral
- ◆ What should be learned and what are the recommendations for improvements—the fixes to the root cause

inaccurate information on response operations. The EVALPLAN should describe how these sources of data will be collected.

Automated records can come from a variety of sources. Many EOCs record all telephone conversations, allowing evaluators to later listen to the information flow between EOCs and field teams. Most siren system consoles produce printouts when sirens are sounded that show the time of activation and operational status. Many automated information management systems allow for record dumps of all actions recorded by the system during the event.

Written records typically consist of the duty logs and message forms completed by EOC staff or field responders. Additionally, evaluators need to be aware of information recorded on status boards and periodically copy down their contents. Although most status boards cannot make photocopies of what is written on them, a digital camera may provide an effective means of capturing the data.

Conduct Player Hot Wash

Immediately after the exercise, the evaluation team will attend a player-debriefing hot wash with the players and controllers. A hot wash is a facilitated meeting that allows players to participate in a self-assessment of the exercise play and provides a general assessment of how the

jurisdiction performed in the exercise. The hot wash also provides the evaluators with the opportunity to clarify points or collect any missing information from the players before they leave the area. The hot wash is conducted as soon as possible after the exercise, usually the same day. In full-scale exercises with several exercise sites, separate hot washes may take place at each location.

A hot wash will be most effective if it is led by an experienced facilitator who can ensure that the discussion stays on point. The box below provides some sample ground rules that a facilitator may present to the group at the beginning of the hot wash session.

To supplement the information collected during the player hot wash, the evaluation team should distribute exercise critique forms to get feedback from participants on their perception of the exercise and how well their unit performed. This information can provide insight into why events happened the way they did or why some expected actions did not take place. The analysis team should review these forms and record any useful information.

Reconstruct Exercise Events

A major component of the analysis process is the reconstruction of the activities that occurred during the exercise. Typically, the participants involved in a particular location or function (e.g., the evaluators, players, and controllers involved in the EOC) will conduct the analysis for that location. The evaluators will take the notes and other collected data (e.g., logs, records) and begin to build a picture of what

occurred during the response in their jurisdiction. This process usually occurs soon after the hot wash (either later in the day or the next morning) and generally takes several hours. The purpose of this analysis is for the participants to identify discrepancies between what happened at that location and what was supposed to happen, and develop recommendations for improvement to address those gaps.

The first step in creating the timeline is to identify what activities were expected to occur, and when, based on the Master Scenario Event List (MSEL). The times and events from the MSEL can be displayed by any manner useful to the analysis group. An easy form to use for organizing and later sorting of the information is a spreadsheet⁶ or Gantt⁷ chart. The evaluation team can prepare in advance a spreadsheet that lists the major events and allows participants to add in their recollections and observations. Index cards or whiteboards could also be used. Data used to develop the timeline includes such sources as evaluator notes and controller logs. Another important data source is the SIMCELL staff, who interacted with players throughout the exercise. These data can be used to resolve discrepancies regarding the timing or sequence of events.

An experienced facilitator familiar with the major key events in the exercise scenario should lead the reconstruction process to ensure that participants do not get bogged down in minute details. For most tasks, the exact minute that an action was taken is not critical and should not be labored over as long as the general time and the sequence can be determined. More effort can be devoted to resolving discrepancies for tasks that are time sensitive. One approach to ensure that the group stays on track is to require each group to prioritize the areas for discussion as follows:

Sample Hot Wash Ground Rules

- ◆ Short time duration
- ◆ Facilitated discussion format
- ◆ Constructive comments only
- ◆ Identify things that:
 - ◆ Went well
 - ◆ Need improvement

- ◆ Create a timeline that reconstructs the events that occurred at that location.
- ◆ Review the site-specific objectives and tasks to be accomplished at that location.
- ◆ Determine which tasks went well and which tasks need improvement.

- ◆ Rank the task improvements in order of importance (this can be done through multivoting or other technique).
- ◆ Identify the strengths and weaknesses in carrying out those tasks.
- ◆ For the highest priority areas for improvement:
 - Determine why the action was not accomplished (e.g., use the “why staircase” or another technique to identify the root cause).
 - Recommend a corrective action that defines who (position or agency) should take action and what the action should be.
- ◆ If there is still time, repeat this analysis for the next level of priority items, and so on.
- ◆ Present the results of the analysis (i.e., key strengths, key weaknesses, and recommended actions) to the entire analysis group.

Analyze Across Functions and Jurisdictions

Following the presentation by each group, a more limited group of evaluators, controllers, and players then meet to analyze performance across the various functions and locations. This analysis identifies areas for improvement by comparing the observations from different locations and functions. Whereas the analysis above allowed those participants involved in a particular location or function to assess their own performance and capabilities, this analysis allows a discussion of how the actions of one function or location may have affected or been affected by the actions of another function or location.

To facilitate this discussion, the evaluation team may want to provide the group with a list of the key tasks that were exercised at the various locations and then discuss whether the task was performed in a way that meets the objectives, and if not, why. It is important that this discussion not

Example of Cross Functional Analysis

An exercise was conducted to test the process for accessing and implementing the National Pharmaceutical Stockpile in response to a bioterrorism incident.

At the dispensing site where the pharmaceuticals were being distributed, the evaluator observed that patients were not initially being moved through the process very quickly. When the players assessed the situation, they concluded that the cause was the staffing level at the pharmacists’ station. To correct the situation, they moved staff from the greeting stations to the pharmacists’ station. The analysis team from the dispensing site observed this discrepancy during their timeline analysis and recommended that staffing levels be revisited periodically during any dispensing operation.

During the cross-functional analysis, an issue came to light that would not otherwise have been recognized. The events were as follows:

- ◆ The group began the analysis by discussing whether the State epidemiologist had effectively completed the task of issuing a statewide standing order prescription. Participants from the dispensing location commented that the order did not effectively explain how to use the injectable pediatric medicine that they had been provided.
- ◆ In response to this comment, staff from the State receiving and distribution site indicated that the dispensing site was not supposed to have received injectable medicine. They determined that the wrong medicine had been sent.
- ◆ Staff from the dispensing site then determined that the previous problem with the pharmacists was caused not by understaffing but by spending time trying to determine how to distribute a medication that should not have been there in the first place. Because the dispensing site was not aware that they had been sent the wrong medicine, they would not have known that the problem was more than just a matter of staffing.

repeat any of the weaknesses identified earlier but rather focus on issues that may not have been otherwise identified. One example is described in the sidebar at right.

More specific guidance on carrying out the following various elements of these analysis processes is provided below:

- ◆ Reconstructing the timeline of events
- ◆ Determining root causes for discrepancies
- ◆ Developing recommendations for improvement
- ◆ Identifying lessons learned

Determine the Root Causes of Differences

As the timeline is completed, the participants should be able to identify those tasks that were successfully accomplished and any disconnects or weaknesses. Questions to consider include:

- ◆ Was the task completed as expected?
- ◆ If yes, was it completed within the expected timeframe?
- ◆ If not, what effect did the delay have on other activities or on the overall response mission?
- ◆ If the task was completed using an alternative approach, is there something that can be learned from how the task was done? Is the alternative approach better or more efficient?
- ◆ What effect did not completing the task have on other tasks and on the ability of the jurisdiction to achieve mission success?

The participants should then search for the root cause of why an expected action did not occur or was not performed as expected. The analysis team should keep asking why an event happened or did not happen until it is satisfied that it has found the cause. It is important to reach this level of understanding to make recommendations to enhance preparedness.

A number of different analysis tools are available for root-cause analysis. One commonly used tool is the “why staircase.” This tool is used to help

Example of Root-Cause Analysis

During an exercise, it was observed that the field teams could not find certain environmental monitoring locations because their maps were different from the one used by the Field Team Coordinator. The recommendation was that “all maps used by the Coordinator and the field teams should be the same.”

However, this observation does not address the root cause of why field teams had different maps. Therefore, it is not clear how to ensure that the problem would not be repeated. For example, was it a problem in distributing the maps? Further discussion revealed that the field teams had actually been given the same map as the Coordinator, but they chose to use the old map because the new map was not as clear or well laid out. Thus, part of the solution to the problem would involve improving the map itself.

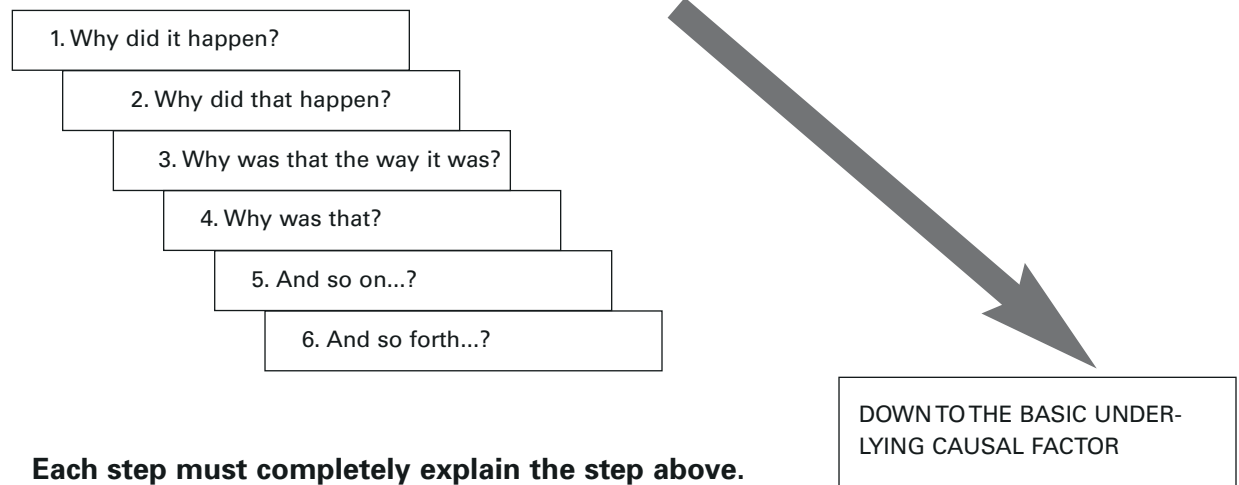
determine why there was a difference between what was planned and what actually occurred. It also helps an analysis team detect flaws in its reasoning.

Each step is a symptom (or effect) of the item below and a cause of the item above. It starts with the event, action, or decision and ends with the root cause for their occurrence. Its purpose is to get the analyst past the surface, where the true issue is rarely found. When using this process, analysts may want to develop a chart that shows the relationship between the causal factors found at each step of the staircase. The “Why Staircase” is presented in exhibit 6.

Identify Opportunities for Improvement

The identification of issues and their root causes enables the analysis team to develop recommendations for improvement. The recommendations should state what should be done and who should do it. The recommendations should have enough detail to make them useful. Recommendations such as “Train on alert and warning process” do not help the response community. However, a recommendation indicating that “the 24-hour warning point staff needs additional training on reading

Exhibit 6: The Why Staircase



siren system printouts so they can better identify system failures” focuses on a root cause. Sometimes it is not clear exactly what should be done (e.g., no resources exist to purchase new equipment) or who should do it (e.g., coordination is an issue). In these cases, the analysis team may recommend that the Emergency Management Agency Director appoint a task force to address the issue.

The analysis team should use the following questions as a guide for developing recommendations for improvement:

- ◆ What changes need to be made to plans and procedures to improve performance?
- ◆ What changes need to be made to organizational structures to improve performance?
- ◆ What changes need to be made to leadership and management processes to improve performance?
- ◆ What training is needed to improve performance?
- ◆ What changes to (or additional) equipment is needed to improve performance?

As part of identifying recommendations, the participants need to focus on who will be responsible for carrying out the action, which in turn will depend on whether the recommendation is

aimed at the individual, team, department, function, or jurisdiction level.

Identify Lessons Learned

For purposes of the Homeland Security Exercise and Evaluators Program (HSEEP), a “lesson

Tips for Writing Recommendations

- ◆ Don't be afraid to make honest recommendations; improvement is the primary goal of exercises.
- ◆ Recommend a specific action that can be implemented and measured.
- ◆ Use action verbs.
- ◆ Indicate who (which agency) should take responsibility for implementation.
- ◆ Recommendations should flow from the observations and analysis.
- ◆ Make each recommendation a stand-alone statement that can be understood without referring to the text; spell out acronyms.
- ◆ Check for consistency; resolve issues that lead to conflicting recommendations.
- ◆ Indicate where performance was good or adequate and no recommendations were needed.

learned” is knowledge gained from an innovation or experience that provides valuable evidence—positive or negative—recommending how to approach a similar problem in the future. A lesson learned is not just a summary of what went right or wrong; rather, it provides insight about a change that was made to address a particular issue. More broadly, these lessons should be suitable to share with other jurisdictions across the country in an effort to enhance preparedness. Although every recommendation that comes out of the analysis process may result in a lesson learned for the participating jurisdictions, those recommendations that may be applicable to other jurisdictions should be highlighted as lessons learned in the AAR.

Draft the After Action Report

The AAR is the tool used to provide feedback to the participating jurisdictions on their performance during the exercise. The AAR summarizes what happened and analyzes performance of the tasks identified through the planning process as critical to the response to the attack defined by the exercise scenario. The AAR also analyzes the demonstrated capacity of the participating jurisdictions to accomplish the overall mission outcomes, such as protecting the public or hazard mitigation. The draft AAR includes recommendations for improvements based on the analysis. As described further in the next chapter, an Improvement Plan (IP) is developed in response to the recommendations presented in the draft AAR, which is incorporated into the final AAR.

The AAR also provides State and Federal homeland security agencies with information needed to assess the preparedness of the Nation and to

identify and provide needed resources and support. Therefore, the final AARs will be provided through the State to DHS/ODP. It should include specific information about the exercise and the participating agencies and jurisdictions as defined in the Overview section of the sample AAR found in appendix D. An Improvement Plan Matrix should also be included in the AAR. It provides a summary of the recommendations, improvement actions, responsible individual/agency, and completion date for each task. The Improvement Plan Matrix provides a tool for the local jurisdictions that participated in the exercise as well as State and Federal agencies to track implementation of required improvements.

Although all or most of the evaluators will be involved in the analysis, the actual drafting of the AAR generally falls to one or two people, which may include the Lead Evaluator or contract support personnel. The following is a suggested format for presentation of the AAR. (See appendix D for a sample AAR.) After the AAR is drafted, the participants should follow the improvement actions outlined in chapter 4 of this manual, which discusses the recommended process for presenting the draft AAR to jurisdiction officials, developing the IP, and finalizing the AAR.

Suggested After Action Report Format

Executive Summary

The executive summary is a 1- to 2-page summary of the exercise highlighting the scope, participants, key successes, and most significant areas for improvement.

Exercise Overview

This section provides background information on the exercise and participating agencies and jurisdictions, such as the dates and location of the exercise, the type of exercise, the sponsoring agencies, the participating agencies, an overview of the scenario, and a description of the evaluation process.

Example of a Lesson Learned

During a chemical weapons exercise, the jurisdiction found that using buses to transport large numbers of walking wounded to medical facilities improved incident response by reducing strain on EMS vehicles and by decreasing transit times for victims. This lesson learned involved a number of agencies and disciplines and can be widely applied.

Exercise Goals and Objectives

The goals and objectives for the exercise are listed.

Exercise Events Synopsis

This section provides a synopsis by time of the major actions that were taken during the exercise at each of the exercise locations. This information is useful in understanding what happened, when and where it happened, and how the events affected performance of critical tasks and achievement of mission outcomes.

Analysis of Mission Outcomes

This section provides an analysis of the mission outcomes. It summarizes how the performance or nonperformance of the tasks and interagency/interjurisdictional interactions affected the ability of the jurisdiction to achieve the mission outcomes. It should include an analysis for each mission outcome that is applicable to the response to the exercise scenario.

Analysis of Critical Task Performance

This section analyzes the performance of each of the tasks identified as critical to responding to the exercise scenario. It should be organized by task and should address each task, including those that are performed as expected. Each task writeup should be organized as described below. If a task was performed well and there are no issues, complete the analysis section with a brief description of what happened and put “None” in the recommendations section.

- ◆ **Task Number and Description:** The number and title of the task from the exercise evaluation guides (EEGs).
- ◆ **Issue Number and Description:** Number consecutively under the task and provide a statement that describes the issue. If multiple issues relate to a task, list issue No. 1 followed by the relevant analysis and recommendations, then present issue No. 2.

- ◆ **References:** Cite the source of the issue in the EEGs, plans, procedures, mutual aid agreement, and so on.
- ◆ **Summary:** Provide a brief description of the issue.
- ◆ **Consequence:** Describe the effect of the issue on the ability of the community to respond as expected, with reference (as appropriate) to the effect on mission outcomes, other functions or disciplines, or performance of other tasks.
- ◆ **Analysis:** Briefly describe what happened, what was supposed to happen, why there was a difference (the underlying causal factor; see Root Cause Analysis), and what should be learned from what happened.
- ◆ **Recommendations:** Provide a statement that describes what can be done to resolve the issue (e.g., changes in plans or procedures, organizational structures, leadership and management processes, training, equipment or resources, interagency or interjurisdictional agreements, and so on).
- ◆ **Improvement Actions:** Describe what specific actions the jurisdiction will take to address the recommendation, who (position or agency) is responsible for addressing the recommendation, and when the action will be completed. This section is completed by the exercising jurisdiction(s) following a review of the draft AAR. See chapter 4 for further explanation.

Conclusion

This section should provide a brief summary of the major conclusions from the exercise.

Appendix A: Improvement Plan Matrix

The Improvement Plan Matrix lists, for each task, the recommendations, the improvement actions that will be taken, the responsible party or agency, and the expected completion date.

CHAPTER 4

Improving Preparedness

The purpose of an exercise is to evaluate capability to prevent, respond to, and recover from a terrorism incident. However, the effort of an exercise is wasted if the lessons from the exercise are not translated into actions that result in improvements to the capabilities tested. The draft After Action Report (AAR) presents observations and recommendations based on the data collection and analysis completed by the evaluation team. The evaluation team helps the jurisdictions that conducted the exercise turn those recommendations into action. The team debriefs the exercise to the participating agency officials and, as appropriate, to public officials, then helps them identify and document corrective actions for program improvement.

Debriefing the Exercise

As soon as possible after the analysis of data from the exercise and the drafting of the AAR, the Lead Evaluator and other evaluators, as appropriate, should set up a meeting with senior officials from the participating agencies and jurisdictions to debrief the exercise. The exercise debrief provides a forum for jurisdiction officials to hear the results of the analysis and validate the findings and recommendations presented in the draft AAR. The presentation generally includes a discussion of the exercise objectives, what happened during the exercise, any differences between expected performance and actual performance, the reasons for differences and their impact on the response, lessons learned, and recommendations for improvement.

The debrief should be interactive, with the jurisdiction officials validating the observations and recommendations and providing insight into activities that might have been missed or misinterpreted by the evaluation team. The draft AAR should be modified to incorporate any clarifying

information. The debrief should also include a facilitated discussion of ways in which the jurisdiction can build on strengths identified and begin to address recommendations for improvement.

Ideally, the exercise debrief should be scheduled for a time within several weeks of the end of the exercise and should be scheduled for a full day to allow adequate time to discuss the findings, recommendations, and corrective actions. The meeting should be held at a convenient location or at the site where the exercise action took place. Holding the meeting at the site provides a context for events that occurred and may facilitate the discussion of physical barriers to performance.

Developing the Improvement Plan

As mentioned above, the exercise debrief provides an opportunity for the evaluation team leaders to help exercise participants and community leaders understand what was planned to happen, what actually happened during the exercise, why it happened, and what could have been done differently to improve performance.

The Improvement Plan (IP) is the means by which the lessons learned from the exercise are turned into concrete, measurable steps that result in improved response capabilities. It is developed by the local jurisdiction and specifically details what actions will be taken to address each recommendation presented in the draft AAR, who or what agency will be responsible for taking the action, and the timeline for completion. An initial IP should be developed at the debrief while all key officials are together.

For some recommendations, the course of action will be clear and can be defined at the

debriefing meeting. For others, additional information will need to be gathered to determine the appropriate course of action. In those cases, the IP developed at the debriefing meeting should indicate at least the first step in the process (e.g., specify that the following agency heads will meet to explore the issue and determine actions to be taken, and provide the time-frame for that meeting).

Some improvement actions will require resources (e.g., recommendations related to training, equipment, or personnel). The IP should be realistic and establish priorities for the use of limited resources. Every effort should be made to address recommendations related to performance of critical tasks. Other recommendations should also be addressed as appropriate.

During the exercise debriefing and development of the IP, the meeting facilitator should help the participants explore options for obtaining needed resources, such as submitting a request to the City Council or to the State Administrative Agency (SAA) that manages the Federal grant funds. For some action items, it may be appropriate to enter into agreements with neighboring jurisdictions to share the response resource or capability and the associated costs.

When the availability of resources may not be immediate, the facilitator should help the participants develop short- and long-term solutions. For example, one of the recommendations identified the need to improve communications among the various city agencies, and the jurisdiction determined that new equipment was needed. However, the jurisdiction is not likely to receive needed funds from the city or be a high priority for funding from the SAA this year. Therefore, the IP should indicate that the Emergency Management Agency (EMA) will request funds to purchase new equipment and will also implement interim measures to improve communication in the short term, such as providing cell phones to essential personnel.

Generally, the initial IP is included in the final AAR. The final AAR should follow the same format as the draft AAR with the addition of the improvement actions that will be taken to address specific recommendations.

Distribution of the Final After Action Report/Improvement Plan

First and foremost, the AAR/IP is the product of the agencies and jurisdictions that participated in the exercise. The AAR/IP should address their needs and serve as an important tool to help them focus limited resources on improvements in preparedness.

The AAR/IP also provides valuable input into strategy development and program planning at the State and Federal levels as well as lessons learned that should be shared with other jurisdictions across the country to raise the preparedness of the Nation. Therefore, the U.S. Department of Homeland Security (DHS), Office for Domestic Preparedness (ODP) is requiring that copies of the AAR/IP for all exercises implemented with grant funds and/or DHS/ODP contractor support be forwarded to the SAA and to DHS/ODP within 60 days of completion of the exercise.

The goals and benefits of sharing the AAR/IP are several:

- ◆ The AAR/IP should be shared with officials from the agencies that participated in the exercise. For local jurisdictions, the IP will provide a workable and systematic process to initiate and document improvements to plans, policies, and procedures and to identify and secure needed training, equipment, and other resources. It is developed by local officials to address local needs.
- ◆ For the SAAs, the AAR/IP provides a method for collecting information about improvement actions from local governments and State agencies so the needs identified can be integrated into statewide strategy process and resource allocation plans.
- ◆ For DHS/ODP, the AAR/IP provides needed information for program planning, directing resources, and assessing national levels of preparedness. This information will also enable DHS/ODP to provide DHS officials and Congress with accurate information on Homeland Security Exercise and

Evaluation Program (HSEEP) performance as executed by Federal, State, and local agencies as well as a basis for integrating HSEEP initiatives with other programs in DHS/ODP, DHS, and other departments. The AAR/IP also provides information that can inform the development and refinement of performance standards and recommended practices and enhance federally sponsored training programs.

Monitoring Implementation of Improvement Plans

DHS/ODP is developing a secure Internet-based Exercise Management System that will provide a centralized calendar of exercises across the country, provide for the electronic submission of AARs/IPs to the SAA and DHS/ODP, and monitor implementation of IPs. The system is being designed so that all information flows through the SAA, providing it with a tool to enhance the management of their exercise program.

All AARs/IPs and followup information will be designated “For Official Use Only.”

Sharing Lessons Learned and Best Practices

DHS/ODP will provide copies of the AARs to the Memorial Institute for the Prevention of Terrorism’s (MIPT) Ready-Net, a Web-based best practices and lessons learned information network for first responders and emergency planners nationwide. The MIPT Ready-Net is funded by DHS/ODP and will be available by the end of 2003. MIPT Ready-Net will serve as the national repository for best practices and lessons learned and will be accessible to approved users within the response community through the DHS/ODP secure portal. Ready-Net will analyze the information and pull out the best practices, lessons learned, and trends. All AAR information will be secure and will be provided to approved users in summary form and with all identifying information removed.

ENDNOTES

1. The Emergency Responder Guidelines were developed by engaging subject-matter experts from both the public and private sectors in an iterative process of examining and defining critical tasks required to prevent, respond to, and recover from a WMD incident. They build on existing codes and standards of agencies, such as the National Fire Prevention Association, and Federal regulatory agencies, such as the U.S. Occupational Safety and Health Administration, and were reviewed by other Federal agencies involved in first responder and homeland security training.

2. “Variances from expected outcomes” are shortcomings identified through the evaluation of actual task-level, agency/discipline/function-level, or mission-level performance compared with the list of essential tasks and their performance measures.

3. For definitions of the various types of exercises, see DHS/ODP’s *Homeland Security Exercise and Evaluation Program (HSEEP), Volume I: Overview and Doctrine*.

4. The IP is called a Improvement Plan in *HSEEP, Volume I*, and the *FY 2003 Homeland Security Grant Program Application Kit*. The name of

the plan has been changed to acknowledge the current capabilities of homeland security agencies while recognizing the continuing need to enhance prevention, response, and recovery capabilities in light of new threats and technologies.

5. NIMS is under development by DHS. DHS will encourage State and local organizations to adopt NIMS by making it a requirement for Federal preparedness grants beginning in FY 2005.

6. A spreadsheet is a tool for organizing a sequence of events, tasks and timelines. Data can be placed in rows and columns for detailed clarification and task management.

7. A Gantt chart is a horizontal bar chart developed as a production control tool. Frequently used in project management, a Gantt chart provides a graphical illustration of a schedule that helps to plan, coordinate, and track specific tasks in a project. The length of the Gantt bars represents duration and the lines between tasks represent task relationships. Gantt charts may be simple versions created on graph paper or more complex automated versions created using project management applications such as Microsoft Project or Excel.

APPENDIX A

Participant Feedback Forms

Homeland Security Exercise Evaluation and Action Steps Tabletop Exercise

Sponsored by: U.S. Department of Homeland Security, Office for Domestic Preparedness

Delivered to: _____
City State

Exercise Name: _____ **Date:** _____

Participant Name: _____ **Title:** _____

Agency: _____ **Role:** ___ Player ___ Observer ___ Facilitator

Part I—Recommendations and Action Steps

1. Based on discussions today and the tasks identified, list the top three issues and/or areas that need improvement.

2. Identify the action steps that should be taken to address the issues identified above. For each action step, indicate if it is a high, medium, or low priority.

3. Describe the action steps that should be taken in your area of responsibility. Who should be assigned responsibility for each action item?

4. List the policies, plans, and procedures that should be reviewed, revised, or developed. Indicate the priority level for each.

Part II—Exercise Design and Conduct

1. What is your assessment of the exercise design and conduct?

*Please rate, on a scale of 1 to 5, your overall assessment of the exercise relative to the statements provided below, with 1 indicating **strong disagreement** with the statement and 5 indicating **strong agreement**.*

Assessment Factor	Rating of Satisfaction With Exercise				
	Strongly Disagree				Strongly Agree
a. The exercise was well structured and organized.	1	2	3	4	5
b. The exercise scenario was plausible and realistic.	1	2	3	4	5
c. The multimedia presentation helped the participants understand and become engaged in the scenario.	1	2	3	4	5
d. The facilitator(s) was knowledgeable about the material, kept the exercise on target, and was sensitive to group dynamics.	1	2	3	4	5
e. The Situation Manual used during the exercise was a valuable tool throughout the exercise.	1	2	3	4	5
f. Participation in the exercise was appropriate for someone in my position.	1	2	3	4	5
g. The participants included the right people in terms of level and mix of disciplines.	1	2	3	4	5
h. The exercise provided a good test of knowledge/skills obtained in WMD training courses. (If no training, check here: _____)	1	2	3	4	5
i. The WMD training course(s) enhanced my performance during the exercise.	1	2	3	4	5

2. What changes would you make to improve this exercise?

Please provide any recommendations on how the exercise could be improved or enhanced to better prepare emergency responders to safely and effectively respond to terrorism incidents.

Homeland Security Exercise Evaluation and Action Steps Operations-Based Exercise

Sponsored by: U.S. Department of Homeland Security, Office for Domestic Preparedness

Delivered to: _____
City State

Exercise Name: _____ **Date:** _____

Participant Name: _____ **Title:** _____

Agency: _____ **Role:** ___ Player ___ Observer ___ Facilitator

Part I—Recommendations and Action Steps

1. From your observation, list the top three issues and/or areas that need improvement. When and where did they happen?

2. Identify the action steps that should be taken to address the issues listed above. For each action step, indicate if it is a high, medium, or low priority.

3. Describe the action steps that should be taken in your area of responsibility. Who should be assigned responsibility for each action item?

4. List the policies, plans, and procedures that should be reviewed, revised, or developed. Indicate the priority level for each.

Part II—Design and Conduct Logistics

1. What is your assessment of the exercise design and conduct?

*Please rate, on a scale of 1 to 5, your overall assessment of the exercise relative to the statements provided below, with 1 indicating **strong disagreement** with the statement and 5 indicating **strong agreement**.*

Assessment Factor	Rating of Satisfaction With Exercise				
	Strongly Disagree				Strongly Agree
a. The exercise was well structured and organized.	1	2	3	4	5
b. The exercise scenario was plausible and realistic.	1	2	3	4	5
c. Participants understood their roles and become engaged in the scenario.	1	2	3	4	5
d. The controller(s) was knowledgeable about the area of play and kept the exercise on target.	1	2	3	4	5
e. The exercise material used to prepare for/ participate in the exercise was useful.	1	2	3	4	5
f. Participation in the exercise was appropriate for someone in my position.	1	2	3	4	5
g. The participants included the right people in terms of level and mix of disciplines.	1	2	3	4	5
h. The exercise provided a good test of knowledge/ skills obtained in WMD training courses. (If no training, check here: _____)	1	2	3	4	5
i. The WMD training course(s) enhanced my performance during the exercise.	1	2	3	4	5

2. What changes would you make to improve this exercise?

Please provide any recommendations on how the exercise could be improved or enhanced to better prepare emergency responders to safely and effectively respond to terrorism incidents.

APPENDIX B

Evaluation Guides—Tabletop Exercises

Homeland Security Exercise Evaluation Guide Tabletop Exercises

Task #	Outcome/Task	Response Element
I. Criminal Prevention and Deterrence		
	TBD	
	TBD	
	TBD	
	TBD	
	TBD	
	TBD	
II. Emergency Assessment		
II-1	Dispatch First Responders and Establish Initial Communications	Dispatch (911 Center Staff)
II-2	Make Immediate Incident Scene Reports	First Responders
II-3	Detect and Identify Agent	HazMat
II-4	Collect Input for Hazard Assessment	EOC/HazMat/Environmental Protection
II-5	Make Hazard Assessments and Predictions	EOC/HazMat/Environmental Protection
II-6	Coordinate Monitoring and Sampling Operations	EOC Staff or IC/UC
II-7	Conduct Monitoring and Sampling	Environmental Protection or HazMat
III. Emergency Management		
III-1	Alert and Mobilize EOC Staff	EOC Staff
III-2	Activate, Expand, and Operate the EOC	EOC Staff
III-3	Direct and Control Response Operations	EOC Staff
III-4	Notify Government Agencies and Officials	EOC Staff
III-5	Direct Activation of Traffic and Access Control Points	EOC Staff (Transportation)
III-6	Direct and Control Protection of At-Risk Population	EOC Staff (Transportation)/IC
III-7	Direct Protective Actions for Schools, Day Care Centers, and Special Populations	EOC Staff (Public Health/IC)
III-8	Direct and Control Distribution of Supplies and Equipment	IC/UC or EOC Staff
III-9	Request and Coordinate Additional Response Support	EOC Staff
III-10	Request State/Federal Assistance	EOC Staff
III-11	Direct and Control Critical Infrastructure Mitigation	EOC Staff (Public Works)
III-12	Direct and Control Public Information Activities	EOC (PIO)
III-13	Activate and Operate JIC	JIC
III-14	Provide Emergency Public Information to Media and Public	PIO/JIC
III-15	Establish and Maintain Rumor Control Operations	PIO
IV. Incident Site Hazard Mitigation		
IV-1	Isolate Incident Scene and Define Hazard Areas	First Responders
IV-2	Establish Incident Command/Unified Command	IC/UC
IV-3	Conduct Incident Command	IC/UC
IV-4	Maintain Accountability of Responders and Citizens	IC/UC

Homeland Security Exercise Evaluation Guide Tabletop Exercises

Task #	Outcome/Task	Response Element
IV-5	Preserve Incident Scene	First Responders/IC/UC
IV-6	Direct Agent Release Mitigation Efforts	IC/UC
IV-7	Conduct Agent Release Mitigation Efforts	HazMat
IV-8	Conduct Firefighting Operations	Fire Department
IV-9	Dispatch Bomb Squad	911 Center Dispatch
IV-10	Assess Incident and Develop Action Plan	Law Enforcement (Bomb Squad)
IV-11	Execute Incident Action Plan	Law Enforcement (Bomb Squad)
IV-12	Implement Post-Render-Safe Procedures	Law Enforcement (Bomb Squad)
IV-13	Decontaminate Responders and Equipment	Fire Department/HazMat
V. Protection		
V-1	Develop and Implement Protective Action Decisions	EOC Staff
V-2	Prepare and Disseminate Protective Action Messages	EOC Staff
V-3	Activate Traffic and Access Control Points	Law Enforcement
V-4	Coordinate Protective Actions for Special Populations	EOC Staff
V-5	Implement Protective Actions for Special Populations	Special Population Sites
V-6	Coordinate Protective Actions for Schools and Day Care Centers	EOC Staff
V-7	Implement Protective Actions for Schools and Day Care Centers	Schools and Day Care Centers
V-8	Direct Reception Center Operations	EOC Staff
V-9	Operate Reception Centers	Reception Centers
V-10	Direct Shelter Operations	EOC Staff
V-11	Operate Shelters	Shelters
V-12	Arrange for Veterinary Services	EOC Staff
VI. Victim Care		
VI-1	Provide Immediate Emergency Aid	First Responders (non-EMS)
VI-2	Conduct Search and Rescue Operations	Search and Rescue
VI-3	Provide Emergency Triage, Treatment, and Stabilization	EMS
VI-4	Decontaminate Patients at Incident Site	Fire and First Responders
VI-5	Screen Individuals for Agent Contamination	EMS
VI-6	Decontaminate Individuals at Screening Site	EMS
VI-7	Treat Patients at Screening Site	EMS
VI-8	Report Victim Status to EOC/Hospital	EMS
VI-9	Prepare to Receive Patients	Hospital Staff
VI-10	Transport Patients to Hospital	EMS
VI-11	Decontaminate Patients at Hospital	Hospital Staff
VI-12	Treat Patients at Hospital	Hospital Staff
VI-13	Track Patient Status/Location	EOC Staff/Hospital Staff
VI-14	Collect and Decontaminate Human Remains	EMS/Medical Examiner
VI-15	Coordinate Disposition of Human Remains	EOC Staff/Medical Examiner
VI-16	Notify Next-of-Kin	EOC Staff/Hospital staff

Homeland Security Exercise Evaluation Guide Tabletop Exercises

Task #	Outcome/Task	Response Element
VII. Criminal Investigation and Apprehension		
VII-1	Dispatch Law Enforcement	Law Enforcement
VII-2	Secure Crime Scene Control	Law Enforcement
VII-3	Conduct Criminal Investigation	Law Enforcement
VII-4	Dispatch SWAT Team	Law Enforcement/SWAT
VII-5	Assess Incident and Develop Action Plan	Law Enforcement/SWAT
VII-6	Conduct Hostage Negotiations	Law Enforcement/SWAT
VII-7	Conduct Tactical Deployment	Law Enforcement/SWAT
VII-8	Apprehend Suspect	Law Enforcement/SWAT

EOC Emergency Operations Center

IC Incident Command

UC Unified Command

JIC Joint Information Center

PIO Public Information Officer

EMS Emergency Medical Services

Homeland Security Exercise Evaluation Guide Tabletop Exercises

Outcome: Emergency Assessment		
Evaluator:		Contact #:
<p><i>Identify and check the tasks associated with the mission outcome that would be required to respond to the tabletop exercise scenario. For additional information on these tasks refer to appendix C, Homeland Security Exercise Evaluation Guide, Operations-Based Exercises.</i></p>		
Task #	Task	Response Elements
<input type="checkbox"/> II-1	Dispatch First Responders and Establish Initial Communications	Dispatch (911 Center Staff)
<input type="checkbox"/> II-2	Make Immediate Incident Scene Reports	First Responders
<input type="checkbox"/> II-3	Detect and Identify Agent	HazMat
<input type="checkbox"/> II-4	Collect Input for Hazard Assessment	EOC/HazMat/Environmental Protection Staff
<input type="checkbox"/> II-5	Make Hazard Assessments and Predictions	EOC/HazMat/Environmental Protection Staff
<input type="checkbox"/> II-6	Coordinate Monitoring and Sampling Operations	EOC Staff or IC/UC
<input type="checkbox"/> II-7	Conduct Monitoring and Sampling	Environmental Protection or HazMat

Homeland Security Exercise Evaluation Guide Tabletop Exercises

Followup Analysis

Upon completion of the exercise, evaluators should compile their notes and address the followup analysis questions for each selected task. More detailed analysis questions on performance of these tasks during a full-scale exercise are found in appendix C, Homeland Security Exercise Evaluation Guide, Operations-Based Exercises.

1. How would response personnel perform this task?
2. What decisions would need to be made and who would make them?
3. Are personnel trained to perform this task?
4. Are other resources needed and how will they be obtained?
5. Do plans, policies, and procedures support the performance of this task? Are response personnel familiar with these documents?
6. Do response personnel from multiple agencies or jurisdictions need to work together to perform this task? If yes, are the agreements or relationships in place to support its performance?
7. What should be learned from this task?
8. What improvement actions are recommended?

**Homeland Security Exercise Evaluation Guide
Tabletop Exercises**

Outcome: Emergency Management

Evaluator:

Contact #:

Identify and check the tasks associated with the mission outcome that would be required to respond to the tabletop exercise scenario. For additional information on these tasks refer to appendix C, Homeland Security Exercise Evaluation Guide, Operations-Based Exercises.

Task #	Task	Response Elements
<input type="checkbox"/> III-1	Alert and Mobilize EOC Staff	EOC Staff
<input type="checkbox"/> III-2	Activate, Expand, and Operate the EOC	EOC Staff
<input type="checkbox"/> III-3	Direct and Control Response Operations	EOC Staff
<input type="checkbox"/> III-4	Notify Government Agencies and Officials	EOC Staff
<input type="checkbox"/> III-5	Direct Activation of Traffic and Access Control Points	EOC Staff (Transportation)
<input type="checkbox"/> III-6	Direct and Control Protection of At-Risk Population	EOC Staff (Transportation)/IC
<input type="checkbox"/> III-7	Direct Protective Actions for Schools, Day Care Centers, and Special Populations	EOC Staff (Public Health)/IC
<input type="checkbox"/> III-8	Direct and Control Distribution of Supplies and Equipment	IC/UC or EOC Staff
<input type="checkbox"/> III-9	Request and Coordinate Additional Response Support	EOC Staff
<input type="checkbox"/> III-10	Request State/Federal Assistance	EOC Staff
<input type="checkbox"/> III-11	Direct and Control Critical Infrastructure Mitigation	EOC Staff (Public Works)
<input type="checkbox"/> III-12	Direct and Control Public Information Activities	EOC/PIO
<input type="checkbox"/> III-13	Activate and Operate JIC	JIC
<input type="checkbox"/> III-14	Provide Emergency Public Information to Media and Public	PIO/JIC
<input type="checkbox"/> III-15	Establish and Maintain Rumor Control Operations	PIO

Homeland Security Exercise Evaluation Guide Tabletop Exercises

Followup Analysis

Upon completion of the exercise, evaluators should compile their notes and address the followup analysis questions for each selected task. More detailed analysis questions on performance of these tasks during a full-scale exercise are found in appendix C, Homeland Security Exercise Evaluation Guide, Operations-Based Exercises.

1. How would response personnel perform this task?
2. What decisions would need to be made and who would make them?
3. Are personnel trained to perform this task?
4. Are other resources needed and how will they be obtained?
5. Do plans, policies, and procedures support the performance of this task? Are response personnel familiar with these documents?
6. Do response personnel from multiple agencies or jurisdictions need to work together to perform this task? If yes, are the agreements or relationships in place to support its performance?
7. What should be learned from this task?
8. What improvement actions are recommended?

Homeland Security Exercise Evaluation Guide Tabletop Exercises

Outcome: Incident Site Hazard Mitigation		
Evaluator:		Contact #:
<p><i>Identify and check the tasks associated with the mission outcome that would be required to respond to the tabletop exercise scenario. For additional information on these tasks refer to appendix C, Homeland Security Exercise Evaluation Guide, Operations-Based Exercises.</i></p>		
Task #	Task	Response Elements
<input type="checkbox"/> IV-1	Isolate the Incident Scene and Define Hazard Areas	First Responders
<input type="checkbox"/> IV-2	Establish Incident Command/Unified Command	IC/UC
<input type="checkbox"/> IV-3	Conduct Incident Command	IC/UC
<input type="checkbox"/> IV-4	Maintain Accountability of Responders and Citizens	IC/UC
<input type="checkbox"/> IV-5	Preserve Incident Scene	First Responders/IC/UC
<input type="checkbox"/> IV-6	Direct Agent Release Mitigation Efforts	IC/UC
<input type="checkbox"/> IV-7	Conduct Agent Release Mitigation Efforts	HazMat
<input type="checkbox"/> IV-8	Conduct Firefighting Operations	Fire Department
<input type="checkbox"/> IV-9	Dispatch Bomb Squad	911 Center/Dispatch
<input type="checkbox"/> IV-10	Assess Incident and Develop Action Plan	Law Enforcement (Bomb Squad)
<input type="checkbox"/> IV-11	Execute Incident Action Plan	Law Enforcement (Bomb Squad)
<input type="checkbox"/> IV-12	Implement Post-Render-Safe Procedures	Law Enforcement (Bomb Squad)
<input type="checkbox"/> IV-13	Decontaminate Responders and Equipment	Fire Department/HazMat

Homeland Security Exercise Evaluation Guide Tabletop Exercises

Followup Analysis

Upon completion of the exercise, evaluators should compile their notes and address the followup analysis questions for each selected task. More detailed analysis questions on performance of these tasks during a full-scale exercise are found in appendix C, Homeland Security Exercise Evaluation Guide, Operations-Based Exercises.

1. How would response personnel perform this task?
2. What decisions would need to be made and who would make them?
3. Are personnel trained to perform this task?
4. Are other resources needed and how will they be obtained?
5. Do plans, policies, and procedures support the performance of this task? Are response personnel familiar with these documents?
6. Do response personnel from multiple agencies or jurisdictions need to work together to perform this task? If yes, are the agreements or relationships in place to support its performance?
7. What should be learned from this task?
8. What improvement actions are recommended?

Homeland Security Exercise Evaluation Guide Tabletop Exercises

Outcome: Protection		
Evaluator:		Contact #:
<p><i>Identify and check the tasks associated with the mission outcome that would be required to respond to the tabletop exercise scenario. For additional information on these tasks refer to appendix C, Homeland Security Exercise Evaluation Guide, Operations-Based Exercises.</i></p>		
Task #	Task	Response Elements
<input type="checkbox"/> V-1	Develop and Implement Protective Action Decisions	EOC Staff
<input type="checkbox"/> V-2	Prepare and Disseminate Protective Action Messages	EOC Staff
<input type="checkbox"/> V-3	Activate Traffic and Access Control Points	Law Enforcement
<input type="checkbox"/> V-4	Coordinate Protective Actions for Special Populations	EOC Staff
<input type="checkbox"/> V-5	Implement Protective Actions for Special Populations	Special Population Sites
<input type="checkbox"/> V-6	Coordinate Protective Actions for Schools and Day Care Centers	EOC Staff
<input type="checkbox"/> V-7	Implement Protective Actions for Schools and Day Care Centers	Schools and Day Care Centers
<input type="checkbox"/> V-8	Direct Reception Center Operations	EOC Staff
<input type="checkbox"/> V-9	Operate Reception Centers	Reception Centers
<input type="checkbox"/> V-10	Direct Shelter Operations	EOC Staff
<input type="checkbox"/> V-11	Operate Shelters	Shelters
<input type="checkbox"/> V-12	Arrange for Veterinary Services	EOC Staff

Homeland Security Exercise Evaluation Guide Tabletop Exercises

Followup Analysis

Upon completion of the exercise, evaluators should compile their notes and address the followup analysis questions for each selected task. More detailed analysis questions on performance of these tasks during a full-scale exercise are found in appendix C, Homeland Security Exercise Evaluation Guide, Operations-Based Exercises.

1. How would response personnel perform this task?
2. What decisions would need to be made and who would make them?
3. Are personnel trained to perform this task?
4. Are other resources needed and how will they be obtained?
5. Do plans, policies, and procedures support the performance of this task? Are response personnel familiar with these documents?
6. Do response personnel from multiple agencies or jurisdictions need to work together to perform this task? If yes, are the agreements or relationships in place to support its performance?
7. What should be learned from this task?
8. What improvement actions are recommended?

Homeland Security Exercise Evaluation Guide Tabletop Exercises

Outcome: Victim Care		
Evaluator:		Contact #:
<p><i>Identify and check the tasks associated with the mission outcome that would be required to respond to the tabletop exercise scenario. For additional information on these tasks refer to appendix C, Homeland Security Exercise Evaluation Guide, Operations-Based Exercises.</i></p>		
Task #	Task	Response Elements
<input type="checkbox"/> VI-1	Provide Immediate Emergency Aid	First Responders (non-EMS)
<input type="checkbox"/> VI-2	Conduct Search and Rescue Operations	Search and Rescue
<input type="checkbox"/> VI-3	Provide Emergency Triage, Treatment, and Stabilization	EMS
<input type="checkbox"/> VI-4	Decontaminate Patients at Incident Site	Fire and First Responders
<input type="checkbox"/> VI-5	Screen Individuals for Agent Contamination	EMS
<input type="checkbox"/> VI-6	Decontaminate Individuals at Screening Site	EMS
<input type="checkbox"/> VI-7	Treat Patients at Screening Site	EMS
<input type="checkbox"/> VI-8	Report Victim Status to EOC/Hospital	EMS
<input type="checkbox"/> VI-9	Prepare to Receive Patients	Hospital Staff
<input type="checkbox"/> VI-10	Transport Patients to Hospital	EMS
<input type="checkbox"/> VI-11	Decontaminate Patients at Hospital	Hospital Staff
<input type="checkbox"/> VI-12	Treat Patients at Hospital	Hospital Staff
<input type="checkbox"/> VI-13	Track Patient Status/Location	EOC Staff/Hospital Staff
<input type="checkbox"/> VI-14	Collect and Decontaminate Human Remains	EMS/Medical Examiner
<input type="checkbox"/> VI-15	Coordinate Disposition of Human Remains	EOC Staff/Medical Examiner
<input type="checkbox"/> VI-16	Notify Next-of-Kin	EOC Staff/Hospital Staff

Homeland Security Exercise Evaluation Guide Tabletop Exercises

Followup Analysis

Upon completion of the exercise, evaluators should compile their notes and address the followup analysis questions for each selected task. More detailed analysis questions on performance of these tasks during a full-scale exercise are found in appendix C, Homeland Security Exercise Evaluation Guide, Operations-Based Exercises.

1. How would response personnel perform this task?
2. What decisions would need to be made and who would make them?
3. Are personnel trained to perform this task?
4. Are other resources needed and how will they be obtained?
5. Do plans, policies, and procedures support the performance of this task? Are response personnel familiar with these documents?
6. Do response personnel from multiple agencies or jurisdictions need to work together to perform this task? If yes, are the agreements or relationships in place to support its performance?
7. What should be learned from this task?
8. What improvement actions are recommended?

APPENDIX C

Evaluation Guides—Operations-Based Exercises

**Homeland Security Exercise Evaluation Guide
Operations-Based Exercises**

Task #	Outcome/Task	Location	Response Element
I. Criminal Prevention and Deterrence			
	TBD		
	TBD		
	TBD		
	TBD		
	TBD		
	TBD		
II. Emergency Assessment			
II-1	Dispatch First Responders and Establish Initial Communications	Emergency Call Center	Dispatch (911 Center Staff)
II-2	Make Immediate Incident Scene Reports	Incident Site	First Responders
II-3	Detect and Identify Agent	Incident Site	HazMat
II-4	Collect Input for Hazard Assessment	EOC/Incident Site	EOC/HazMat/ Environmental Protection
II-5	Make Hazard Assessments and Predictions	EOC/Incident Site	EOC/HazMat/ Environmental Protection
II-6	Coordinate Monitoring and Sampling Operations	EOC/Incident Site	EOC Staff or IC/UC
II-7	Conduct Monitoring and Sampling	Incident Site or in Community	Environmental Protection or HazMat
III. Emergency Management			
III-1	Alert and Mobilize EOC Staff	EOC	EOC Staff
III-2	Activate, Expand and Operate the EOC	EOC	EOC Staff
III-3	Direct and Control Response Operations	EOC	EOC Staff
III-4	Notify Government Agencies and Officials	EOC	EOC Staff
III-5	Direct Activation of Traffic and Access Control Points	EOC	EOC Staff (Transportation)
III-6	Direct and Control Protection of At-Risk Population	EOC/Incident Site	EOC Staff (Transportation)/ IC
III-7	Direct Protective Actions for Schools, Day Care Centers, and Special Populations	EOC/Incident Site	EOC Staff (Public Health)/IC
III-8	Direct and Control Distribution of Supplies and Equipment	Incident Site/ EOC	IC/UC or EOC Staff
III-9	Request and Coordinate Additional Response Support	EOC	EOC Staff
III-10	Request State/Federal Assistance	EOC	EOC Staff
III-11	Direct and Control Critical Infrastructure Mitigation	EOC	EOC Staff (Public Works)
III-12	Direct and Control Public Information Activities	EOC	EOC (PIO)
III-13	Activate and Operate JIC	JIC	JIC
III-14	Provide Emergency Public Information to Media and Public	JIC	PIO/JIC
III-15	Establish and Maintain Rumor Control Operations	JIC	PIO

**Homeland Security Exercise Evaluation Guide
Operations-Based Exercises**

Task #	Outcome/Task	Location	Response Element
IV. Incident Site Hazard Mitigation			
IV-1	Isolate Incident Scene and Define Hazard Areas	Incident Site	First Responders
IV-2	Establish Incident Command/Unified Command	Incident Site	IC/UC
IV-3	Conduct Incident Command	Incident Site	IC/UC
IV-4	Maintain Accountability of Responders and Citizens	Incident Site	IC/UC
IV-5	Preserve Incident Scene	Incident Site	First Responders/IC/UC
IV-6	Direct Agent Release Mitigation Efforts	Incident Site	IC/UC
IV-7	Conduct Agent Release Mitigation Efforts	Incident Site	HazMat
IV-8	Conduct Firefighting Operations	Incident Site	Fire Department
IV-9	Dispatch Bomb Squad	911 Center	911 Center/Dispatch
IV-10	Assess Incident and Develop Action Plan	Incident Site	Law Enforcement (Bomb Squad)
IV-11	Execute Incident Action Plan	Incident Site	Law Enforcement (Bomb Squad)
IV-12	Implement Post-Render-Safe Procedures	Incident Site	Law Enforcement (Bomb Squad)
IV-13	Decontaminate Responders and Equipment	Incident Site	Fire Department/HazMat
V. Protection			
V-1	Develop and Implement Protective Action Decisions	EOC	EOC Staff
V-2	Prepare and Disseminate Protective Action Messages	EOC	EOC Staff
V-3	Activate Traffic and Access Control Points	In Community	Law Enforcement
V-4	Coordinate Protective Actions for Special Populations	EOC	EOC staff
V-5	Implement Protective Actions for Special Populations	In Community	Special Population Sites
V-6	Coordinate Protective Actions for Schools and Day Care Centers	EOC	EOC Staff
V-7	Implement Protective Actions for Schools and Day Care Centers	In Community	Schools and Day Care Centers
V-8	Direct Reception Center Operations	EOC	EOC Staff
V-9	Operate Reception Centers	In Community	Reception Centers
V-10	Direct Shelter Operations	EOC	EOC Staff
V-11	Operate Shelters	In Community	Shelters
V-12	Arrange for Veterinary Services	EOC	EOC Staff
VI. Victim Care			
VI-1	Provide Immediate Emergency Aid	Incident Site	First Responders (non-EMS)
VI-2	Conduct Search and Rescue Operations	Incident Site	Search and Rescue
VI-3	Provide Emergency Triage, Treatment, and Stabilization	Incident Site	EMS
VI-4	Decontaminate Patients at Incident Site	Incident Site	Fire and First Responders
VI-5	Screen Individuals for Agent Contamination	In Community/ Incident Site	EMS
VI-6	Decontaminate Individuals at Screening Site	In Community	EMS

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Task #	Outcome/Task	Location	Response Element
VI-7	Treat Patients at Screening Site	In Community/ Screening Site	EMS
VI-8	Report Victim Status to EOC/Hospital	Incident Site/ In Community	EMS
VI-9	Prepare to Receive Patients	Hospital	Hospital Staff
VI-10	Transport Patients to Hospital	In community	EMS
VI-11	Decontaminate Patients at Hospital	Hospital	Hospital Staff
VI-12	Treat Patients at Hospital	Hospital	Hospital Staff
VI-13	Track Patient Status/Location	EOC/Hospital	EOC Staff/Hospital Staff
VI-14	Collect and Decontaminate Human Remains	Incident Site/ In Community	EMS/Medical Examiner
VI-15	Coordinate Disposition of Human Remains	EOC	EOC staff/Medical Examiner
VI-16	Notify Next-of-Kin	EOC/Hospital	EOC Staff/Hospital Staff
VII. Criminal Investigation and Apprehension			
VII-1	Dispatch Law Enforcement	Incident Site	Law Enforcement
VII-2	Secure Crime Scene Control	Incident Site	Law Enforcement
VII-3	Conduct Criminal Investigation	Incident Site	Law Enforcement
VII-4	Dispatch SWAT Team	Incident Site	Law Enforcement/SWAT
VII-5	Assess Incident and Develop Action Plan	Incident Site	Law Enforcement/SWAT
VII-6	Conduct Hostage Negotiations	Incident Site	Law Enforcement/SWAT
VII-7	Conduct Tactical Deployment	Incident Site	Law Enforcement/SWAT
VII-8	Apprehend Suspect	Incident Site	Law Enforcement/SWAT

EOC Emergency Operations Center

IC Incident Command

UC Unified Command

JIC Joint Information Center

PIO Public Information Officer

EMS Emergency Medical Services

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Task # II-1: Dispatch First Responders and Establish Initial Communications	
Outcome: Emergency Assessment	Location: Emergency Call Center
Response Element: Dispatch (911 Center Staff)	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Receipt of incident information, direct observation, and 911 call.</p> <p>Conditions: Person-to-person, and electronic or telephone conversation.</p> <p>Expected Outcomes: 911 center receives information and dispatches appropriate response units.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Record information. 2. Analyze 911 calls for information, which may indicate a weapons of mass destruction incident (e.g., large volume of calls reporting sick or injured persons with no known reason; reports of mist or cloud; unusual odors; and chemical exposure symptoms, explosion, etc.) 3. Assess response requirements (if not automatic based on dispatch matrix already determined). 4. Alert response units. 5. Convey hazard information to responders: <ol style="list-style-type: none"> a. Reported signs/symptoms b. Approach to the incident (upwind) c. Staging areas d. Use of personal protective equipment (PPE) if available 6. Alert other dispatchers and agencies. 7. Notify adjacent jurisdiction 911 centers and nearby military bases. 8. Identify communication mechanisms being used by various response elements (e.g., police, fire, and emergency medical services [EMS]). 9. Coordinate communication requests for resources. 10. Address technical difficulties with interoperability among response elements and communication overloads. 11. Establish and maintain communication link between incident site and Emergency Operations Center (EOC). <p>Consequences: Appropriate first responders are quickly dispatched to the incident scene.</p> <p>Note: <i>These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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Communications Protocols

1. Was the initiation of the alert, notification, and dispatch of assets conducted in accordance with established procedures? Discuss areas that may require improvement or additional attention if appropriate.
2. Were the pre-established protocols for response adequate to ensure the correct number and type of units and equipment were dispatched? Is the response matrix appropriate for the call type?
3. How did dispatch ensure appropriate administrative personnel and city officials were alerted/notified of the incident?
4. What procedures are established to maintain a communications link or liaison with the incident scene and the EOC?

Information Assessment

5. What pertinent data were collected to facilitate the response?
6. Describe the adequacy of protocols to obtain threat and victim information from callers, especially as they relate to a terrorist incident.
7. Did the initial notification contain information needed to execute a safe response?
8. Were personnel able to use data to identify trends and patterns outside normal response for which they were dispatched?

Interoperability

9. Describe how communications were maintained between the various response elements (e.g., police, fire, EMS). How were communication requests for resources coordinated between agency dispatchers?
10. How did dispatch facilitate communications between responding units with interoperability difficulties?
11. How effective was dispatch in establishing liaison with the EOC?

Communications System Capacity

12. Was the communication system adequate to handle calls and demands?
13. How did dispatch respond to communications overload?
14. What capability exists to provide backup personnel for dispatch during a critical incident?
15. What procedures were in place to address personnel rotation?

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Task # II-2: Make Immediate Incident Scene Reports	
Outcome: Emergency Assessment	Location: Incident Site
Response Element: First Responders	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Observations of witnesses, and the incident scene.</p> <p>Conditions: Time available; incident scene limitations (e.g., injuries, facility damage, fire, wreckage, etc.); response team composition; availability of communications systems; weather; and knowledge of plans and procedures.</p> <p>Expected Outcomes: Prompt and accurate (as possible) immediate informal report(s) from the incident scene.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Arrive at incident scene from safe direction. 2. Stop at safe distance and quickly obtain information that describes the incident: <ol style="list-style-type: none"> a. Number and nature of injuries b. Description and nature of the incident scene (type of event) 3. Communicate the information available to the appropriate dispatch center. 4. Promptly request additional response units as necessary. <p>Consequences: Incident Commander is able to analyze data, assess the seriousness of the incident, make an initial estimate of the incident's impact, and mobilize appropriate response.</p> <p><i>Note: These are "typical" steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction's plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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- ✓ What corrective actions are recommended?

Initial Assessment

1. Did first responders recognize event as terrorism event? What type of event (biological, chemical, explosive, etc.)?
2. What information was used to make this assessment (e.g., victim symptoms, agent-specific signs, etc.)?
3. How quickly was the determination made?
4. Did responding units take proper precautions? What were they?
5. How did initial units recognize a seriously escalating situation?
6. How did initial units convey this to other incoming units?
7. How did responding units consider possible secondary devices?

Communication and Coordination

8. Which responders arrived first?
9. What information did first arriving responders relay to the communications center? Were the initial reports adequate?
10. In what order did other responders arrive, and how did they coordinate?
11. Were additional and/or specialty units requested? Which ones?

Protection and Equipment

12. Were responding units equipped with appropriate personal protective equipment (PPE) to handle the situation?
13. Were any response personnel contaminated?
14. Did responders re-assess PPE needs after identifying the incident?
15. Was appropriate equipment readily available?
16. Was equipment properly maintained?
17. Was interchangeable or compatible equipment considered?

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Task # II-3: Detect and Identify Agent	
Outcome: Emergency Assessment	Location: Incident Site
Response Element: HazMat	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Preliminary information on agent from first responders' observations of signs and symptoms.</p> <p>Conditions: Sampling and monitoring equipment and teams. Recognition and analysis of signs and symptoms presented by victims.</p> <p>Expected Outcomes: HazMat team determines type of and/or identifies agent from collected data.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Arrive on scene. 2. Don appropriate personal protective equipment (PPE). 3. Set up equipment. 4. Collect information: <ol style="list-style-type: none"> a. To identify agent b. To characterize the incident (e.g., offsite meteorological information, and readings from air monitoring devices) c. About other hazards of concern (e.g., fire, explosives, other hazardous materials) 5. Determine reportable quantity. 6. Notify Incident Commander of findings. <p>Consequences: Emergency Operations Center is able to obtain sufficient information to begin hazard assessment.</p> <p>Note: <i>These are "typical" steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction's plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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- ✓ What corrective actions are recommended?

Responder Protection

1. Were HazMat personnel equipped with appropriate PPE to handle the situation?
2. Were any personnel contaminated? Why did they become contaminated?

Agent Identification Procedures and Equipment

3. How was the agent identified (e.g., what equipment was used, where was sampling conducted)?
4. Was sampling conducted in hot and warm zones? Was appropriate equipment readily available?
5. Did the equipment used function properly?
6. Did personnel follow standard procedures for using the equipment?
7. Was interchangeable or compatible equipment considered?
8. Was specific equipment lacking that could have been useful in agent identification?
9. Could agent identification time be shortened? How?
10. Was agent sampling coordinated among all sampling teams, including those provided by other agencies or jurisdictions?
11. Were all teams proficient with the equipment being used (particularly when equipment is shared among multiple teams)?

Notification

12. Once the agent was identified, who was notified, and how was notification made (e.g., law enforcement, hospitals)?
13. Whose responsibility is it to notify all the agencies on the scene? How was this done?
14. Were any notifications missed? Why?
15. If appropriate, was correct information sent to the National Response Center (NRC) in a timely manner, using the NRC Standard Report Form?
16. Was the agent information relayed to hospitals?

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Task # II-4: Collect Input for Hazard Assessment	
Outcome: Emergency Assessment	Location: EOC/Incident Site
Response Element: EOC/HazMat/Environmental Protection	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Initial reports describing the accident (include information about the hazards present, modes of release of the agent, and potential for additional releases); periodic update reports describing changes in the hazards posed by the accident; hazard description source documents; results from monitoring and sampling operations; and guidance from the Incident Commander (IC).</p> <p>Conditions: Time available; availability of communications systems, meteorological monitoring system, and emergency management information system; changing conditions at the incident site; changing meteorological conditions; and knowledge of plans and procedures.</p> <p>Expected Outcomes: Hazard analysts are able to assess the seriousness of the incident, make an initial estimate of the incident's impact, and produce initial and subsequent hazard assessments and predictions.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Receive and confirm initial reports about the incident. 2. Request additional information as necessary from the IC to allow representatives at the Emergency Operations Center (EOC) to make an accurate initial hazard prediction. 3. Collect other information to characterize the incident (e.g., offsite meteorological information and readings from air monitoring devices). 4. Collect information about other hazards of concern (e.g., fire, explosives, and other hazardous materials). 5. Continuously review collected data to support the hazard assessment. Request the additional information as required. 6. Continuously monitor reports and other data to change or refine the hazard analysis. 7. Archive all data in formats that allow for quick retrieval and for subsequent analysis, investigation, and official reports. <p>Consequences: Production of hazard assessments and predictions is not delayed or compromised by incorrect or incomplete information.</p> <p>Note: <i>These are "typical" steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction's plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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- ✓ What should be learned from this?
- ✓ What corrective actions are recommended?

Information Sharing

1. Comment on frequency and adequacy of the information flow between the incident command post and the EOC.
2. What could have been done to improve the information flow?
3. Were problems encountered by the EOC in filling resource requests from the IC? What actions could have been taken to alleviate those problems?

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Task # II-5: Make Hazard Assessments and Predictions	
Outcome: Emergency Assessment	Location: EOC/Incident Site
Response Element: EOC/HazMat/Environmental Protection	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Data collected for making hazard assessments and predictions.</p> <p>Conditions: Time available, availability of hazard analysis equipment, changing conditions at the accident site, changing meteorological conditions, guidance and priorities from the Incident Commander (IC), and knowledge of plans and procedures.</p> <p>Expected Outcomes: Hazard area plots (maps) showing risk areas and a predicted hazard area, identification of populations at risk, protective action options, monitoring guidance, and information on projected plume behavior.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Determine the initial actual and predicted hazard area. 2. In coordination with activities already potentially underway by the IC: <ol style="list-style-type: none"> a. If an airborne hazard, determine plume direction and length, and populations at risk b. Support field operations by identifying areas to monitor beyond the immediate incident scene c. Predict plume behavior (tail/tip times) to aid in protective action decision-making d. Conduct new analyses in near real time to reflect changing conditions and site mitigation efforts 3. Conduct consequence management analyses to determine if other populations might become at risk and determine areas to conduct monitoring operations to validate the hypothetical situation. 4. Confirm the validity and reliability of model outputs. 5. Provide model and analysis results to surrounding communities as necessary. <p>Consequences: Accurate information is developed as input to making protective action decisions (e.g., evacuation/shelter-in-place). Appropriate adjustments are made as conditions change.</p> <p><i>Note: These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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- ✓ What is the impact of that difference?
- ✓ What should be learned from this?
- ✓ What corrective actions are recommended?

1. Was information/data coordinated and communicated among response elements?
2. Did the Emergency Operations Center (EOC), in consultation with the IC, analyze information/data to formulate mitigation and corrective actions?
3. What additional resources did the EOC consider activating to support the IC (e.g., Environmental Protection Agency Emergency Response Team, U.S. Coast Guard Strike Team, National Guard Weapons of Mass Destruction Civil Support Team, FBI Hazardous Materials Response Unit)?
4. What hazard modeling software was used to make chemical plume predictions?
5. How did the hazard plume generated by the model compare with "exercise truth"?
6. What assumptions were used as data inputs in the model?
7. Were data limitations and error potential in the model provided to decision-makers?

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Task # II-6: Coordinate Monitoring and Sampling Operations	
Outcome: Emergency Assessment	Location: EOC/Incident Site
Response Element: EOC Staff or IC/UC	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Hazard analysis results showing predicted extent of the hazard. Monitoring and sampling requests from the accident site.</p> <p>Conditions: Time available, availability of communications systems, availability of monitoring and sampling equipment, availability of monitoring and sampling teams, availability of laboratory support, meteorological and topographical conditions, physical constraints at monitoring and sampling locations, plans and procedures, and memorandums of agreement/memorandums of understanding regarding response phase monitoring and sampling.</p> <p>Expected Outcomes: Monitoring and sampling teams are deployed to the correct locations to collect information that accurately characterizes the hazard area.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Develop a wide-area monitoring and sampling plan that provides for sample chain-of-custody and independent confirmation of sample results, and is consistent with hazard analysis results. 2. Coordinate with field locations and other affected jurisdictions to determine safe routes to monitoring and sampling locations. 3. Coordinate third-party observation of monitoring and sampling teams. 4. Dispatch monitoring and sampling teams in support of field operations. 5. Provide dispatch instructions that include safe routes to each monitoring and sampling location and access to public and private property. 6. Track the deployment of all monitoring and sampling teams. 7. Arrange for laboratory testing of samples. 8. Obtain hardcopy sampling assay results from laboratories. 9. Re-deploy monitoring and sampling teams based on results of monitoring, sampling, and laboratory analysis or changes in priorities made by the Incident Commander or the Emergency Operations Center. 10. Coordinate the return of deployed monitoring assets. 11. Store monitoring and sampling results in a hazard assessment and prediction database. <p>Consequences: Monitoring and sampling results are available to make decisions about protecting emergency responders and populations at risk, site mitigation, and reentry.</p> <p>Note: <i>These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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1. Comment on the appropriateness and effectiveness of monitoring and sampling operations by all resources utilized.
2. What might have been done differently to create greater effectiveness of operations?
3. Was information that was developed coordinated, and shared among the response agencies?
4. Which agency coordinated the monitoring and sampling operations?
5. Would effectiveness have been enhanced if a different agency were lead? Which agency and why?

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Task # II-7: Conduct Monitoring and Sampling	
Outcome: Emergency Assessment	Location: Incident Site or in Community
Response Element: Environmental Protection or HazMat	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Instructions to monitor and sample for the presence of a chemical agent.</p> <p>Conditions: Time available, availability of communications systems, availability of monitoring and sampling equipment, availability of monitoring and sampling teams, availability of laboratory support, availability of plans and procedures, availability of position locating tools, meteorological and topographical conditions, physical constraints at monitoring and sampling locations, plans and procedures, and memorandums of agreement /memorandums of understanding regarding offsite response phase monitoring and sampling.</p> <p>Expected Outcomes: Monitoring and sampling teams collect authentic, credible information about chemical agent hazards.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Perform pre-operation checks and inventory of vehicles, equipment, supplies, and systems. 2. Bring all vehicles and equipment needed for field operations to operating status; calibrate the monitoring equipment. 3. Establish reliable communication with hazard analysts coordinating the monitoring and sampling operations. 4. Proceed to the designated monitoring or sampling locations by the designated safe route. 5. Conduct monitoring and sampling operations. 6. Maintain sample chain-of-custody and avoid cross-contamination. Allow for verification of sample by independent third-party observers during the collection process. 7. Validate monitoring results in the field IAW monitoring protocols. 8. Field assay of samples from the IAW sample collection protocols. 9. Deliver samples for assay to approved laboratories IAW sample collection and analysis protocols. 10. Process equipment and personnel for decontamination. <p>Consequences: Monitoring and sampling information is not compromised by lack of authenticity or credibility.</p> <p>Note: <i>These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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1. What equipment was used to conduct monitoring and sampling? Was the equipment used appropriate for the incident?
2. Where were monitoring and sampling conducted?
3. Which agency determined these locations?
4. Were available resources properly coordinated on-scene?
5. How could monitoring and sampling operations be improved?
6. Note any innovative or unusual procedures used by monitoring and sampling teams.

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Task # III-1: Alert and Mobilize EOC Staff	
Outcome: Emergency Management	Location: EOC
Response Element: EOC Staff	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Incident notification and determination that partial or full Emergency Operations Center (EOC) staffing is necessary.</p> <p>Conditions: Availability of communications systems, availability of EOC staff, plume direction, knowledge of plans and procedures, and current EOC staff rosters.</p> <p>Expected Outcomes: The EOC is staffed with personnel to manage the jurisdiction's response.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Determine whether plume direction restricts EOC staff routes to the EOC. 2. Recall required EOC staff using appropriate procedures and advise of route restrictions, if any. 3. Safely proceed to the EOC. <p>Consequences: Direction and control of critical public protection operations are provided for the duration of the jurisdiction's response.</p> <p><i>Note: These are "typical" steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction's plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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- ✓ What corrective actions are recommended?

1. Was the emergency management director or designated alternate notified of the incident in a timely manner? How was this notification made?
2. Did the appropriate authority authorize activation of the EOC? Who authorized the activation (name and title)?
3. Did dispatch/communications initiate alert/recall procedures for EOC personnel? Was the recall list current?
4. Was the EOC accessible to the agencies or participants represented? Where was it located?
5. Was the EOC established in a safe and secure area? What security measures were used?
6. Did the appropriate staff respond to the recall?

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Task # III-2: Activate, Expand, and Operate the EOC	
Outcome: Emergency Management	Location: EOC
Response Element: EOC Staff	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Decision to activate the Emergency Operations Center (EOC) and EOC staff mobilization.</p> <p>Conditions: Current facility operating status, time available for EOC staff to respond to the EOC, availability of needed equipment and facilities, availability of communication systems, availability of EOC staff, and knowledge of plans and procedures.</p> <p>Expected Outcomes: The EOC achieves its full operational status quickly and maintains this level of effort for the duration of the response.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Upgrade facility from current to emergency status. 2. Follow procedures for removing equipment from storage locations, ensure equipment is operating properly, prepare facility for emergency use, and review plans and procedures appropriate to the incident. 3. Concurrently with EOC activation or expansion, confirm that EOC communications systems (primary, backup, and alternate) are operational. Maintain an uninterrupted capability for the duration of the response. Immediately correct communications system malfunctions. 4. Brief EOC staff on the status of the incident and current response activities upon their arrival and at regular intervals thereafter. 5. Provide command, control, coordination, and leadership of emergency response activities. 6. Establish and maintain security throughout the response. 7. Promptly post information about the incident and decisions in the EOC. The information is archived for subsequent analysis, investigation, and preparation of official reports. 8. Plan for uninterrupted 24-hour operation to include publication of schedules that cover all shifts with adequate staff. 9. Maintain continuous EOC operations during rest, meal breaks, and shift changes. Conduct shift transition briefings in accordance with plans and procedures. <p>Consequences: Direction and control of critical response operations are performed without interruptions caused by lapses in EOC staffing, communications systems malfunctions, or shortfalls in facility capabilities.</p> <p>Note: <i>These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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- ✓ What is the impact of that difference?
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- ✓ What corrective actions are recommended?

Activation/Notification

1. Did the Emergency Management Director (EMD) declare a local emergency in accordance with the Emergency Operations Plan (EOP)?
2. What procedures were established to maintain a communications link or liaison with the incident scene and the EOC?
3. Were current listings of key personnel and their telephone numbers for EOC activation available and used? What procedures are established to ensure the list(s) are current?
4. Were the participants you observed stopped and identified prior to entering the EOC? How was this conducted?
5. Were all agencies advised of the EOC's location? What agencies were notified?
6. Were copies of the EOP made available for all EOC personnel? When was this plan last updated?
7. Were the plan implemented appropriately? Was the EOC organized by functions according to the EOP? What were the functional areas activated in the EOC?
8. Was the activation and response coordinated and efficient?
9. Were arriving staff appropriately briefed upon their arrival?

Roles and Responsibilities

10. Did the EMD or the designated alternate assume overall control of EOC operations?
11. What were the name and title of the person assuming control?
12. Describe the overall level of control maintained in the EOC—did the EMD maintain appropriate control?
13. Describe the EMD's use of available resources and staff positions—were they appropriately used to maximize efficiency and effective response operations? Were staff sufficiently trained to accomplish their duties?
14. Did the EMD understand all functions to be carried out by different staff?
15. Does the EMD have authority to use necessary resources to mitigate the emergency and coordinate additional elements?
16. What liaisons from participating agencies/departments were present at the EOC?
17. Did the liaisons have decision-making authority for their respective agencies? If not, who had this authority?
18. Were the agencies/departments you observed properly equipped to perform their functions? Please list any missing tools.
19. Were a determination of incident stabilization and termination of command made? How and by whom?

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Task # III-3: Direct and Control Response Operations	
Outcome: Emergency Management	Location: EOC
Response Element: EOC Staff	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Reports from the incident site and the incident command post (ICP).</p> <p>Conditions: Time available, conditions at the incident site, availability of trained emergency responders, emergency plans and procedures, and conditions at variance with plans and procedures.</p> <p>Expected Outcomes: Direction and control of response activities are established, and activities of responders are properly directed and coordinated to ensure maximum efficiency of response operations.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Assist the Incident Commander (IC) and staff in developing/implementing action plans and alternate plans to confine, collect, and contain the release. 2. Monitor communication between responders and the ICP, and receive reports regarding the status of search and rescue and site mitigation operations. Make recommendations to the IC and staff regarding adjustments to these operations based on the situation presented. 3. Direct the dispatch of available additional responders if on-scene needs are beyond the capabilities of the responders. 4. Direct the dispatch of specialized responders (e.g., firefighters, Emergency Operations Director [EOD]) if such assets are required to support site operations. 5. Assist the IC and staff in developing and implementing mitigation plans. 6. Monitor communication between responders and the ICP, and receive reports regarding the status of mitigation operations. Make recommendations to the IC and the ICP staff regarding adjustments to these operations based on the situation presented. <p>Consequences: Search and rescue and site mitigation operations occur quickly and successfully, eliminating further risk to the environment, workers, and general population.</p> <p><i>Note: These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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- ✓ What corrective actions are recommended?

Operations

1. Were Emergency Operations Center (EOC) operations consistent with plans, procedures, and protocols? Were plans sufficient for response to a weapons of mass destruction incident?
2. Does the EMD have authority to use necessary resources to mitigate the emergency and coordinate additional elements?
3. Did the EOC, in consultation with the Incident Commander (IC), analyze information/data to formulate mitigation and corrective actions?
4. Did EOC personnel maintain an account of incident events? How was this done?
5. Did the liaisons have decision-making authority for their respective agencies? If not, who had this authority?
6. Did members of the agencies/departments that you evaluated maintain personnel accountability throughout the incident? How was this maintained?
7. Were progress reports given to all agencies when necessary? How often and by whom?

Coordination

8. Was the response to the incident unified and integrated? Did the agencies involved in this exercise demonstrate good teamwork and coordination?
9. Were there written agreements in place between appropriate agencies?
10. Were functional areas of responsibility assigned for direction/control and coordination?
11. How was the multijurisdiction/regional incident coordinated?
12. Were mutual aid plans implemented?
13. Was information/data coordinated and communicated among response elements?
14. Based on your observations, would you say communication with other agencies was adequate? On site, face to face? On site, radio? On site, agency to agency?

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Task # III-4: Notify Government Agencies and Officials	
Outcome: Emergency Management	Location: EOC
Response Element: EOC Staff	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Reports describing the incident, and initial and updated hazard analyses.</p> <p>Conditions: Time available; availability of communications systems; knowledge of plans, procedures, laws, regulations, and memorandums of agreement/memorandums of understanding.</p> <p>Expected Outcomes: All appropriate Federal, State, and local officials and agencies are informed about the incident and significant changes to the situation before the media and the public.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Make initial and followup notifications to local (adjacent and nonadjacent), State, and Federal response and law enforcement agencies. 2. Notify local government officials of significant changes to the situation prior to distributing press releases concerning the incident. <p>Consequences: Local, State, and Federal government officials have correct information. The near-site Emergency Operations Center's credibility as being responsible for public health and safety is not compromised.</p> <p><i>Note: These are "typical" steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction's plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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- ✓ What corrective actions are recommended?

1. What led to the decision to notify county, State, and higher offices?
2. Was there a coordinated response in sharing of information with local, State, and Federal agencies and officials?
3. Are the roles and functions of each level of government recognized, understood, and adequately performed?
4. Were all potentially impacted jurisdictions considered and included in coordination?

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Task # III-5: Direct Activation of Traffic and Access Control Points	
Outcome: Emergency Management	Location: EOC
Response Element: EOC Staff (Transportation)	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Evacuation order for the population at risk, selected evacuation routes, and defined predicted hazard area.</p> <p>Conditions: Time available; availability of communications systems; availability of personnel; availability of vehicles, barricades, and other traffic control equipment; predetermined access control points (ACP)/traffic control points (TCP) locations; pertinent maps, diagrams, and plans; weather and environmental conditions; and situations at variance with assumptions in plans and procedures.</p> <p>Expected Outcomes: TCPs are in place in time to support the evacuation order and facilitate an orderly evacuation, and access to the predicted hazard area is prevented.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Review selected evacuation routes. Identify situations that could cause traffic queues to form. Modify the evacuation routes to mitigate the effects of these conditions. 2. Select ad hoc traffic control points, which support the selected evacuation routes. Identify locations for access control points. Determine whether locations are to be staffed or not. 3. Dispatch traffic and access control crews (e.g., police, fire, and public works) with appropriate vehicles, equipment, and materials to specified control points. 4. Direct changing of traffic lights at locations to facilitate traffic movement. 5. Dispatch highway department crews to clear evacuation routes of snow or debris as required. 6. Dispatch tow trucks to locations for handling disabled vehicles and dispensing emergency gasoline supplies. 7. Brief TCP crews on modifications to evacuation routes. Provide all evacuation support crews appropriate maps, diagrams, and implementing instructions. 8. Contact appropriate government organizations or businesses to block access to the predicted hazard area by rail, water, and air traffic. 9. Coordinate traffic and access control activities with the adjacent jurisdictions. 10. Direct the repositioning of TCPs or ACPs and/or mobilizing additional resources as changes in conditions occur. 11. Review rosters to assure continuous, 24-hour operation, and assign traffic and access control personnel to tasks and shifts where they are most needed. Provide a transition or situation briefing to later shift personnel before they begin work. <p>Consequences: The population at risk and population at large are protected from exposure to a chemical agent.</p> <p>Note: <i>These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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Decision-Making

1. Did the Emergency Operations Center (EOC) transportation representative identify situations that might result in traffic jams (e.g., tollbooths, railroad crossings, lane reductions, barriers)? How were the problems handled?
2. How were TCPs identified? Were they predetermined? Did they support the selected evacuation routes?
3. How were ACPs selected? Were they sufficient to prevent unauthorized people from entering the hazard area?

Communication and Coordination

4. How well did the EOC communicate with traffic and access control crews? Which departments were contacted and what responsibilities did each perform?
5. How were TCP crews briefed? What information was provided? Was it sufficient?
6. Which agencies were contacted to prevent transport access to the hazard area? What actions did these agencies take to prevent access?
7. What other jurisdictions were contacted? How was this decision made? How often were these agencies provided updates?
8. How often were TCPs and ACPs repositioned? What information was used to make this decision? Who was notified of these changes (e.g., other jurisdictions)?

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Task # III-6: Direct and Control Protection of At-Risk Population	
Outcome: Emergency Management	Location: EOC/Incident Site
Response Element: EOC Staff (Transportation)/IC	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Protective action decisions warning provided to the population at risk; selected evacuation routes; and pertinent maps, diagrams, and plans.</p> <p>Conditions: Time available; availability of communications systems; availability of responders; availability and condition of evacuation routes; availability of transportation assets; warning information given to the at-risk population; preselected traffic control points (TCPs), assembly points, and evacuation routes; situations at variance with assumptions in plans and procedures; and population’s familiarity with evacuation plans and procedures.</p> <p>Expected Outcomes: Appropriate support is provided for protecting the population inside the predicted hazard area until all personnel are safe and accounted for, and no persons remain inside the predicted hazard area except for authorized emergency responders.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Obtain information from first responders on who was inside the predicted hazard area when the incident occurred. 2. Confirm that the population inside the predicted hazard area was alerted and given correct, specific sheltering and evacuation instructions, using appropriate warning systems. 3. Coordinate evacuation routes with appropriate authorities and agencies, including other jurisdictions. 4. Receive accountability and protection status reports for the population inside the security cordon and predicted hazard area from security forces, field supervisors, and the Incident Commander. 5. Direct and coordinate additional assistance as required. 6. Determine when it is appropriate for the sheltered population to leave their shelters and begin subsequent evacuation. 7. Adjust the assembly points, evacuation routes, TCPs, and ACPs to accommodate unforeseen events and to facilitate reentry when this is authorized. <p>Consequences: No unprotected persons are exposed to hazards from the incident.</p> <p>Note: <i>These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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- ✓ What should be learned from this?
- ✓ What corrective actions are recommended?

1. What information did first responders provide about who was inside the hazard area?
2. How did the Emergency Operations Center (EOC) confirm that this population was given appropriate information?
3. Which agencies were contacted regarding coordination of evacuation routes?
4. What information was provided from the Incident Command Post?
5. How did the EOC make decisions regarding sheltered population? What decision was made? Who was involved in decision-making?

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Task # III-7: Direct Protective Actions for Schools, Day Care Centers, and Special Populations	
Outcome: Emergency Management	Location: EOC/Incident Site
Response Element: EOC Staff (Public Health)/IC	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Protective action decision for schools, day care centers, and special populations.</p> <p>Conditions: Time available; availability of communications systems; information on size and location of affected populations; sheltering options (expedient, enhanced, pressurized) for the school; lists of host facilities; weather and other environmental conditions; selected evacuation routes; availability of transportation assets; and situations at variance with assumptions in plans and procedures.</p> <p>Expected Outcomes: All school and day care students and staff as well as special populations are sheltered in place or are promptly and safely evacuated to host facilities, and caretakers are notified.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Identify at-risk schools, day care centers, and special population facilities. 2. Contact at-risk schools, day care centers, and special population facilities to inform them of the protective action to be implemented for their specific situation. Obtain information about any assistance they may need. 3. Compile resource requests and contact resource providers to obtain needed support. 4. Stage transportation assets. Brief drivers on the hazard area, routes to follow, emergency procedures, pickup points, and final destinations. 5. Coordinate with traffic control personnel to expedite movement of transportation assets to and from affected facilities. 6. Emergency Operations Center (EOC) notifies host schools, day care facilities, or other facilities and reception centers to prepare to receive evacuees. 7. If affected facilities were directed to shelter in place, provide appropriate assistance for implementing sheltering measures. 8. Promptly communicate changes in directed protective actions (e.g., from shelter in place to evacuation) to the affected facilities. Repeat previous steps, as appropriate, to support the change in protective action. 9. Provide caretakers and public at large with information regarding protective actions taken at individual affected facilities, the location of host facilities, and procedures for reuniting with their family members. <p>Consequences: The population at risk and population at large are protected from exposure to an agent.</p> <p>Note: <i>These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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1. How were at-risk facilities identified? What information was used, how was it provided, and who provided it?
2. How were facilities contacted? What information was requested of them?
3. How was transportation coordinated? Who was involved in obtaining the appropriate transportation assets and directing them to the appropriate location?
4. How were host facilities identified? What information were they provided?
5. How was the decision made to evacuate or shelter in place?
6. How were the caretakers of the affected population notified? What information were they provided?

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Task # III-8: Direct and Control Distribution of Supplies and Equipment	
Outcome: Emergency Management	Location: Incident Site/EOC
Response Element: IC/UC or EOC Staff	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Team: Incident command post staff, staging area, and Emergency Operations Center (EOC).</p> <p>Inputs: Agent contamination remaining at and around the incident site following release control operations, and other contaminated equipment, supplies, and materials.</p> <p>Conditions: Time available; conditions at the incident scene; availability of communications systems; availability of trained workers; availability of equipment and supplies; and plans, procedures, and regulations regarding mitigating the effects of an agent release.</p> <p>Expected Outcomes: Sufficient equipment, vehicles, and supplies are available to control and mitigate the release and to perform related support tasks.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Dedicate available supplies, equipment, and vehicles to support release control and mitigation operations at the incident site. 2. Test, inspect, and repackage supplies and equipment for issue to response teams. 3. Issue supplies to responders on demand. 4. Track supply and equipment usage rates to forecast rates of issue and to accurately account for costs associated with the response. Factor contamination losses for durable and non-expendable supplies and equipment used at the incident site when compiling usage rates. Report high supply and equipment issue rates to the EOC logistical staff. 5. Have equipment and vehicles identified for release control and mitigation operations prepared for use by motor pool or facility engineer personnel. <p>Consequences: Release control and mitigation operations are sustained for the duration of the response to the incident.</p> <p><i>Note: These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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- ✓ What corrective actions are recommended?

1. Were appropriate procedures in place to locate, acquire, distribute, and account for services, resources, materials, and facilities procured or donated to support the response?
2. Was the resource allocation plan applied appropriately?
3. How were equipment/supply priorities established?
4. How was equipment usage tracked? What information was provided and by whom?

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Task # III-9: Request and Coordinate Additional Response Support	
Outcome: Emergency Management	Location: EOC
Response Element: EOC Staff	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Reports from the incident scene or incident command post (ICP) identifying the need for personnel, supplies, and equipment for response operations.</p> <p>Conditions: Availability of communications systems; availability of responders; availability of supplies and equipment; memorandums of agreement; and plans and procedures.</p> <p>Expected Outcomes: Sufficient personnel, equipment, and supplies are available for search and rescue and site mitigation operations, and to perform related support tasks.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Solicit information about usage rates for supplies and equipment from the ICP. 2. Compare inventory of available supplies and equipment with known and projected requirements to support search and rescue, containment, and mitigation operations. Identify shortfalls and priorities. Determine the most expedient sources for obtaining needed supplies and equipment. 3. Solicit information about the need for additional trained responders and resources above those available from jurisdiction resources. Determine shortfalls and priorities. Determine the most expedient sources for obtaining additional resources. 4. Obtain responders and emergency supplies and equipment from the State or adjacent jurisdictions. 5. Arrange for the receipt and internal distribution of supplies and equipment to sustain response operations. 6. Arrange for the arrival, transportation, feeding, and lodging of augmentees. Assign augmentees to tasks and shifts. <p>Consequences: Response operations are sustained for the duration of the response to the incident.</p> <p><i>Note: These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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- ✓ What corrective actions are recommended?

1. What information did the ICP provide about usage rates? How often were updates provided?
2. Who compared the inventory with projected usage? Where did inventory information come from?
3. How was information obtained about additional trained responders? Who was contacted?
4. How was new equipment tracked?
5. How were priorities for distributing additional equipment made?
6. Was the need for additional resources or specialized teams (e.g., Metropolitan Medical Strike Team, Weapons of Mass Destruction – Civil Support Team, and U.S. Public Health Service) assessed, in consultation with the Incident Commander, and were steps taken to obtain their help?

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Task # III-10: Request State/Federal Assistance	
Outcome: Emergency Management	Location: EOC
Response Element: EOC Staff	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Need for additional personnel, supplies, and equipment for response operations; 42 US Code 68 (Disaster Relief); and memorandums of agreement/memorandums of understanding with other jurisdictions for provision of emergency personnel, supplies, and equipment.</p> <p>Conditions: Availability of trained responders, and inventory of supplies and equipment versus requirements.</p> <p>Expected Outcomes: Local and State declarations of emergency are prepared, signed, and transmitted to higher authorities. Sufficient personnel, equipment, and supplies are made available.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Identify any shortfalls in personnel, emergency supplies, equipment, or other resources that affect the ability to respond to the emergency. 2. Confirm that appropriate emergency management officials have determined that effective response is beyond local capability and that additional assistance is necessary. Local declaration of emergency is prepared and forwarded to the Governor's office or other appropriate agency. At the State level, the Governor makes a determination that the emergency situation is of such severity and magnitude that Federal assistance is necessary. 3. Prepare the State declaration of emergency describing the State and local efforts and resources that have been, or will be, used to alleviate the emergency, and defining the type and extent of Federal aid required. The Governor signs the declaration and forwards it to appropriate Federal authorities. <p>Consequences: Hazard is mitigated because appropriate assistance and resources become available.</p> <p><i>Note: These are "typical" steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction's plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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1. Was the need for additional resources or specialized teams (e.g., Metropolitan Medical Strike Team, Weapons of Mass Destruction – Civil Support Team, U.S. Public Health Service) assessed, in consultation with the Incident Commander, and were steps taken to obtain their help?
2. Were the State and county advised of the local declaration and updated on the city's activities?
3. Did the emergency management director request (from the State) that the State EOC be activated and a State emergency be declared?

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Task # III-11: Direct and Control Critical Infrastructure Mitigation	
Outcome: Emergency Management	Location: EOC
Response Element: EOC Staff (Public Works)	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Reports from the incident scene or incident command post (ICP) identifying the need for personnel, supplies, and equipment for debris removal, infrastructure stabilization, and damage assessment.</p> <p>Conditions: Availability of communications systems, availability of public works staff, availability of supplies and equipment, knowledge of plans and procedures, and knowledge of plans and procedures for contaminated equipment.</p> <p>Expected Outcomes: Sufficient personnel, equipment, and supplies are available for debris removal, damage assessment and infrastructure stabilization, mapping, and performance of related public works support tasks.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Establish priorities to clear roads, repair damaged water/sewer systems, and coordinate the provision of temporary, alternate, or interim sources of emergency power and water/sewer services. 2. Identify water and sewer service, restoration, debris management, potable water supply, and engineering requirements as soon as possible. 3. Evaluate status of current resources to support public works operations. 4. Allocate existing and available resources. 5. Request additional resources as needed. 6. Accurately account for costs associated with response. 7. Begin damage assessment for recovery. 8. Identify equipment exposed to the agent for decontamination. <p>Consequences: Direction and control of critical public works operations are provided for the duration of the jurisdiction's response.</p> <p><i>Note: These are "typical" steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction's plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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Notification

1. Why was public works notified? By whom? What preliminary information was given?
2. Did personnel arrive in a timely manner? Were appropriate equipment/resources brought on scene?

Response

3. What type of resources or assistance did public works provide?
4. Were public works personnel able to apply the appropriate equipment?
5. Did they recognize the capability and limitations of the equipment?
6. How was coordination among responding assets organized?
7. Was the response coordinated efficiently? What methods could have been incorporated that would have improved these efforts?
8. Was debris removal conducted appropriately and safely?
9. Were precautions, safeguards, or any additional coordination implemented to protect responders from contamination?
10. How was evidentiary integrity of debris and contaminated debris maintained to an appropriate degree?
11. Was damage assessment conducted according to standard procedures?

Safety

12. Was a safety supervisor assigned?
13. What plans and procedures were in place to ensure worker safety?

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Task # III-12: Direct and Control Public Information Activities	
Outcome: Emergency Management	Location: EOC
Response Element: EOC (PIO)	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Reports describing the incident, information regarding the State’s response, other emergency information, and broadcast and published media reports.</p> <p>Conditions: Availability of communications systems, the impact of the incident statewide, the location of the Joint Information Center (JIC), availability of safe routes to the JIC, availability of public information staff, plans and procedures for emergency public information programs, memorandums of agreement (MOA) and procedures for using a Joint Information System, and activating and operating a JIC.</p> <p>Expected Outcomes: The JIC is activated and operated in accordance with established protocols and MOAs, and without interruptions in providing timely and accurate emergency information to the public.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. The Public Information Officer (PIO) and public information staff conduct initial public information activities from the Emergency Operations Center (EOC) or other designated area(s). 2. The PIO coordinates with PIOs from other agencies to determine their ability to support, activate, and operate the JIC. The PIO advises the Emergency Management Director (EMD) on the status of public information and makes recommendations for activating the JIC. 3. The EMD directs the activation of the JIC (see Task III-13). 4. The EMD assigns the PIO and/or public affairs to the EOC and the JIC according to staff availability, response priorities, and the JIC plan. 5. The PIO announces the shift of focus for the jurisdiction’s public information activities from the EOC to the JIC once it is activated and operating. 6. The PIO and/or the public affairs staff keep the EMD informed about JIC operations so that the direction and control of public information activities can be adjusted to suit the circumstances. <p>Consequences: The public receives accurate and timely information about the incident, and the credibility of public authorities and public confidence in the State EOC is maintained.</p> <p>Note: <i>These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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Communications Plan

1. Was a single media point of contact established early in the incident? Who and where?
2. Was a media conference area established? Was the need for regular briefings and information releases recognized and acted upon? Who provided the briefings?
3. How did the agencies involved prepare and coordinate news releases for dissemination, and/or conduct press conferences for the local media?
4. What actions were taken within dispatch to handle public inquiries?
5. What procedures were used to ensure essential incident information was provided to the PIO?
6. How was the media plan developed? Was it implemented in an effective and timely manner?

Dissemination of Public Information

7. What procedures were used to publicly disseminate information?
8. What information was provided to the public to educate them about potential hazards and risk reduction methods?
9. How was use of the Emergency Broadcast System coordinated to disseminate information to the public?
10. How did the media plan use media outlets to keep the public informed?

Agency Coordination Protocols

11. Were progress reports given to all agencies where necessary? How often and by whom?
12. Were updates given to supporting agencies/organizations? How often were updates provided?
13. How was critical/sensitive information disseminated to agencies (e.g., in person, by telephone, by radio)?
14. What measures were taken to coordinate with the Governor's press secretary on a recurring basis?
15. How was coordination established with the myriad of Federal and State agencies before their inclusion in the JIC?
16. What measures were taken to ensure a common government message?
17. Was a JIC established? Why or why not?

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Task # III-13: Activate and Operate JIC	
Outcome: Emergency Management	Location: JIC
Response Element: JIC	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Decision to activate the Joint Information Center (JIC).</p> <p>Conditions: Availability of communications systems; the impact of the incident on the community; the location of the JIC; availability of safe routes to the JIC; availability of public information staff; plans and procedures for emergency public information programs; memorandums of agreement; plans and procedures for activating and operating a JIC; and availability of JIC facilities, supplies, and equipment.</p> <p>Expected Outcomes: A JIC fully capable of performing all emergency public information operations is established. There is a continual flow of information among the JIC, the respective Emergency Operations Centers (EOCs), and other participating response organizations; interruptions in providing timely and accurate emergency public information do not occur.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Open the JIC. 2. Inform EOC and other appropriate authorities that the JIC is operational and that direction and control of public affairs/public information activities have shifted from the EOC to the JIC. 3. Promptly post response information in the JIC. Archive this information upon receipt of subsequent analysis and investigations and preparation of official reports. 4. Plan for and maintain uninterrupted 24-hour operation to include publication of schedules that cover all shifts with adequate staff. 5. Provide the media with briefings on significant events in a coordinated, complete, accurate, and timely manner. 6. Monitor media reports for accuracy to identify items that may cause a misunderstanding of emergency instructions to the public or that misrepresent the response. Contact the media to amplify, clarify, or correct information. 7. Arrange use of a facility for media briefings. 8. Maintain a log of all media inquiries. 9. Track rumors or misinformation from either media accounts or the public and bring to the attention of the Public Information Officer (PIO) for clarification and correction as appropriate. <p>Consequences: Information disseminated to the public is coordinated and consistent; the credibility of public authorities and public confidence in their ability to respond to the incident are not compromised; and JIC operations are sustained for the duration of the response to the incident.</p> <p>Note: <i>These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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JIC Activation

1. What factors drove the establishment of a JIC?
2. Did public information staff report to the EOC or JIC in a timely manner?
3. What agencies and organizations were represented in the JIC?
4. Were any agencies missing that should have been included in the JIC? Who and why?
5. What local procedures were followed to establish a JIC?
6. Discuss which agency has the lead and who has final policy and decision authority over the JIC (e.g., director of emergency management, mayor, or city manager).

JIC Operation

7. How was the location of the JIC determined? How was information disseminated to agencies and media?
8. Was the JIC organized to effectively execute its role? Were supporting agencies adequately staffed and equipped to perform their functions in the JIC?
9. What plans have been developed to support a JIC expansion to accommodate Federal and State involvement?
10. What actions were taken to set criteria for and control of access to the JIC?
11. How was coordination established with the myriad of Federal and State agencies before their inclusion in the JIC?
12. Did media and public affairs personnel report to the EOC or JIC in a timely manner?
13. What was the procedure for the approval of press releases? Who had final approval authority?
14. Were public messages correct and consistent among JIC staff and remote public information staff?
15. What messages were inconsistent? Why? What was the impact?

JIC Staffing and Equipment

16. What volume of calls (media and public) did the JIC have to manage?
17. How adequate was the staffing in relation to the call volume and need to prepare press releases and briefings?
18. How adequate was the equipment provided (computers, fax, copiers, telephones, etc.) to manage the volume of public and media inquiries?

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Task # III-14: Provide Emergency Public Information to Media and Public	
Outcome: Emergency Management	Location: JIC
Team: PIO/JIC	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Reports describing the incident, information regarding the State's response, protective action decisions or other emergency information, and broadcast and published media reports.</p> <p>Conditions: Availability of communications systems, the impact of the incident on the community, the location of the Joint Information Center (JIC), availability of public information staff, plans and procedures for emergency public information programs, memorandums of agreement, and procedures for activating and operating a JIC.</p> <p>Expected Outcomes: Prompt, accurate, consistent, and responsive emergency information is provided to the public.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Gather information about the incident, the response, and the emergency information to be provided to the public. 2. Prepare media releases to provide the public with updated or new emergency information. 3. Coordinate the content of the media releases prior to dissemination. 4. Disseminate media releases according to plans and procedures. 5. Send copies of all media releases via fax or e-mail to the affected jurisdictions' Emergency Operations Centers (EOCs), and others as appropriate. 6. Spokespersons from appropriate agencies provide the media with briefings on significant events in a coordinated, complete, accurate, and timely manner. 7. Monitor media reports for accuracy to identify items that may cause a misunderstanding of emergency instructions to the public or that misrepresent the response. The Public Information Officer (PIO) or the JIC staff contact the media to amplify, clarify, or correct information. 8. Arrange use of a facility for media briefings; prepare graphic materials, video or still photos, and copies of news releases, and announce the time and place for the briefing in sufficient time to permit media coverage. 9. Reply to media inquiries with coordinated, authorized information that is accurate, clear, and complete in a timely manner. 10. Maintain a log of all media inquiries. <p>Consequences: The correct populations identify themselves as being in danger and comply with suggested protective actions; the credibility of public authorities and public confidence in their ability to respond to the incident are not compromised.</p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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Information Gathering and Analysis

1. How did the public information staff gather and share essential incident information from the response organization?
2. How did the public information staff gather information from the public and media to ensure that their message was being properly received?
3. What trends in media reporting were identified and provided to the PIO and emergency management officials?
4. What trends in public inquiries and rumors were identified and provided to the PIO and emergency management officials?

Dissemination of Public Information

5. What procedures were used to publicly disseminate information?
6. How frequently were press releases issued?
7. What information was provided to the public to educate them about potential hazards and risk reduction methods?
8. How was this information checked with technical experts to ensure it was accurate before release?
9. What procedures were used for press release approval?
10. How was use of the Emergency Broadcast System coordinated to disseminate information to the public?
11. How did the media plan use media outlets to keep the public informed?

Agency Coordination Protocols

12. Were progress reports given to all agencies where necessary? How often and by whom?
13. Were updates given to supporting agencies/organizations? How often were updates provided?
14. How was critical/sensitive information disseminated to agencies (e.g., in person, by telephone, by radio)?
15. What measures were taken to coordinate with the Governor's press secretary on a recurring basis?
16. How was coordination established with the myriad of Federal and State agencies before their inclusion in the JIC?
17. What measures were taken to ensure a common government message?
18. Was a JIC established? Why or why not?

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Task # III-15: Establish and Maintain Rumor Control Operations	
Outcome: Emergency Management	Location: JIC
Team: PIO	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Reports describing the biological incident/outbreak, information regarding the State’s response, protective action decisions or other emergency information, and broadcast and published media reports.</p> <p>Conditions: Availability of communications systems, the impact of the incident on the community, the location of the Joint Information Centers (JIC), availability of public information staff, plans and procedures for emergency public information programs, memorandums of agreement, and procedures for activating and operating a JIC.</p> <p>Expected Outcomes: Public information is delivered in a coordinated and timely manner. Public inquiries are handled with a consistent, unified response.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Set up rumor control operation consisting of volunteers trained to handle incoming calls from concerned public. 2. Provide scripted message to each rumor control staff member and conduct staff briefing. 3. Provide to public, via media outlets, the telephone number for inquiries regarding incident. 4. Rumor control staff work 24/7 in shifts taking calls from public and are updated regularly as situation changes. 5. Rumor control staff advise the Public Information Officer (PIO) of trends in rumors based on incoming telephone calls or monitoring of media reporting. <p>Consequences: Rumors or misinformation from either media accounts or the public is tracked and brought to the attention of PIOs and corrected as appropriate.</p> <p><i>Note: These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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1. How did the lead PIO or JIC activate a Rumor Control Center?
2. What rumors were detected and corrected?
3. What rumors were not detected or not corrected?
4. What impact did the rumors have on response operations?

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Task # IV-1: Isolate Incident Scene and Define Hazard Areas	
Outcome: Incident Site Hazard Mitigation	Location: Incident Site
Response Element: First Responders	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Initial reports of hazards from witnesses and/or other first responders at the incident scene.</p> <p>Conditions: Time available, availability of communications systems, and availability of properly equipped security forces with vehicles.</p> <p>Expected Outcomes: A preliminary perimeter is established to control the hazards.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Survey the area. 2. Identify personnel other than first responders and direct them to assembly points outside the assumed hazard area. 3. Obtain preliminary information regarding the hazards at the site. 4. Define hazard zones around the predicted hazard area and contamination control areas (hot and warm zones). 5. As appropriate, redefine hazard zones in coordination with the Incident Commander (IC) throughout the response. <p>Consequences: An appropriately defined hazard zone is established and no additional personnel are contaminated by unauthorized entry into the hazard area.</p> <p>Note: <i>These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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Protection and Equipment

1. Did responders recognize the need to don personal protective equipment (PPE)?
2. Did responding personnel don appropriate PPE to prevent their becoming contaminated?
3. Were any response personnel contaminated? Why?
4. Did responders reassess PPE needs after identifying the agent?

Hazard Zone Identification

5. Did first responders establish a hot zone around the hazard area?
6. How soon after arrival was the hot zone established?
7. What information was used to establish the zones?
8. Were the zones established in an efficient and effective manner?
9. How were the zones marked?

Communication and Coordination

10. How was information about the hazard zones communicated and to whom?
11. How did fire, emergency medical services, and law enforcement coordinate in establishment of the zones?

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Task # IV-2: Establish Incident Command/Unified Command	
Outcome: Incident Site Hazard Mitigation	Location: Incident Site
Response Element: IC/UC	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Information from dispatch, witnesses, and initial first responders.</p> <p>Conditions: Environmental conditions and standard operating procedure (SOP).</p> <p>Expected Outcomes: Effective control is established to assure minimum additional loss of life and property; safety of responders is not compromised.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Assess the scene from a safe distance: <ol style="list-style-type: none"> a. Assess damage (what has already occurred) b. Identify hazards and vulnerabilities (potential for further injuries, contamination, and damage) 2. Determine immediate goals for: <ol style="list-style-type: none"> a. Life safety b. Victim rescue c. Protection of critical systems d. Incident stabilization 3. Establish incident site control: <ol style="list-style-type: none"> a. Define the initial predicted hazard area and contamination control areas (hot and warm zones, clean area), if not done already by initial first responders b. Select the initial incident command post (ICP) c. Select the staging area d. Make initial assessments and response assignments e. Organize and direct response elements f. Make initial situation reports to the Emergency Operations Center (if activated) 4. Develop incident action plan, including goals and strategies, and revise based on effective performance and changing conditions. <p>Consequences: Incident command/unified command is established to direct response operations.</p> <p><i>Note: These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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Scene Assessment

1. What information did the Incident Commander (IC) use to make an initial assessment?
2. Did the IC assessment differ from any initial establishment of hazard zones?

Incident Site Control

3. Which first responder unit initially established command?
4. How soon after arrival was command established?
5. Where was the command post set up in relation to the on-scene activity? Discuss appropriateness of the ICP location.
6. How was the location of the command post communicated to others on the scene?

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Task # IV-3: Conduct Incident Command	
Outcome: Incident Site Hazard Mitigation	Location: Incident Site
Response Element: IC/UC	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Building of the incident command post (ICP) staff and field reports regarding the incident.</p> <p>Conditions: Time available, availability of response personnel and equipment, availability of communications systems, and plans and procedures for Incident Command (IC) operations.</p> <p>Expected Outcomes: Activities of responders are properly coordinated to ensure maximum efficiency of response operations.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Obtain and direct issuance of equipment, personnel, and supplies. 2. Ensure safety procedures are established and followed. 3. Brief ICP staff on status of response operations and provide safety directives and mission directives. 4. Direct response operations to bring the incident scene under control. 5. Direct establishment of access control points (in coordination with law enforcement). 6. Develop incident action plans and alternate plans, incorporating goals and strategies. 7. Adjust the initial predicted hazard area and contamination control area as conditions change. 8. Adjust responder personal protective equipment (PPE) requirements as conditions dictate. 9. Expand or contract the ICP as necessary with key positions (e.g., operations officer, staging officer, safety officer). 10. Conduct briefings to update command staff on accomplishments, assignments, plans, etc. <p>Consequences: Response operations do not result in needless damage to property or the environment, or cause injury or loss of life to civilians and responders, and assure the greatest practical preservation of the incident scene.</p> <p>Note: <i>These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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Overall IC structure

1. How were responding units and resources coordinated? Did responding units coordinate with the IC?
2. What other agency liaisons were present at the ICP? Were they effectively used?
3. How was command passed from the first arriving unit to the command officer? Was it passed in accordance with agency protocols?
4. Was there one IC or was responsibility shared? Between whom was command shared and why?
5. What were the strategies and goals of command, who formulated them, and how were they discussed among the participants?
6. As the incident escalated, what additional command support was requested and when?
7. How and to whom was command passed as additional units were called in?

Unified Command

8. Did the IC transition to Unified Command (UC)? If so, was transition appropriate and timely? What agencies were brought into the UC and when?
9. Was a unified command post (UCP) vehicle identified? Describe vehicle used and effectiveness as UCP.
10. Comment on the effectiveness of the overall establishment and expansion of UC. Was the UC appropriately and efficiently built to manage the incident effectively? If not, why not?
11. What liaisons were present at the UCP?
12. What sectors/branches/divisions were established at the UCP?
13. How were the sector/branch/division officers identified? Were they established in a timely manner?
14. What security measures were provided at or around the UCP?
15. Was the UCP operating tactically or strategically, and why?

Communication

16. What initial information did the IC communicate to responding units?
17. How were incoming units advised of the ICP location?
18. How were first responders (law enforcement, fire, and emergency medical services) able to communicate with each other?
19. How were field operational units from the various agencies able to communicate with each other?
20. How effectively was pertinent information received from the field conveyed to other agencies on the scene?
21. How did the IC communicate initial goals, mission directives, safety procedures, and so on.
22. Did the IC obtain updates from ICP staff?
23. How often did the IC provide briefings for ICP staff and responding units?
24. What information was conveyed during these briefings?
25. Was information provided in a timely manner?
26. How did the IC handle the media and information flow to the public?

Protection of First Responders

27. How did the IC communicate procedures to be followed by responding units (safety procedures)?
28. How did the IC ensure that procedures were followed?
29. Were PPE and equipment appropriate for the response throughout the duration of the response?
30. Were PPE and equipment requirements changed as needed?
31. Was there a safety officer present? Where was the safety officer located?
32. Was the safety officer used effectively?

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Task # IV-4: Maintain Accountability of Responders and Citizens	
Outcome: Incident Site Hazard Mitigation	Location: Incident Site
Response Element: IC/UC	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Alert and warning to the population at risk, extent of damage, nature and extent of injuries, law enforcement personnel orders, and deployment of emergency responders.</p> <p>Conditions: Availability of communications systems, availability of first responder and law enforcement forces and vehicles, and extent of information given to the public via alert and warning systems.</p> <p>Expected Outcomes: First responders and citizens are accounted for, and their health and safety is assured.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Establish staging area and check-in point for all incoming response units and personnel. 2. Instruct all first responders at the incident site to don appropriate respiratory protection and relocate to positions outside of the predicted hazard area. 3. Ensure accountability for all units and personnel operating on the scene. 4. Ensure controlled ingress and egress to hazard area and control areas. 5. Ensure all citizens are accounted for and are appropriately protected. <p>Consequences: No response personnel and citizens are exposed to hazards from the event.</p> <p><i>Note: These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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1. Were incident command procedures for personnel and resource management effective?
2. Did responding units have an accountability policy and procedures?
3. Did they follow them?
4. Did HazMat units have appropriate safety policies and procedures (e.g., for medical monitoring of entry crews, monitoring time in the hot zone, using buddies, etc.)?
5. Did they follow them?
6. Was there a law enforcement liaison at the incident command post to ensure protection of responders and civilians?
7. Were all onsite actions taken under the directions of the Incident Commander?

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Task # IV-5: Preserve Incident Scene	
Outcome: Incident Site Hazard Mitigation	Location: Incident Site
Response Element: First Responders/IC/UC	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Reports from the incident site, and response decisions and operations.</p> <p>Conditions: Conditions at the incident site, and plans, procedures, and guidance on incident investigations.</p> <p>Expected Outcomes: The incident scene is preserved to the degree it does not interfere with criminal investigation, rescue, and agent mitigation; records that document the decisions and operations associated with the response are secured and preserved.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. The Incident Commander (IC) communicates to first responders that the site is a crime scene, and that evidence must be preserved. 2. IC obtains advice and recommendations regarding which physical conditions to document and preserve at the incident scene. 3. IC considers incident scene preservation recommendations when directing and controlling containment and mitigation operations at the incident site. 4. Responders take all actions necessary to rescue victims, secure the incident scene, identify and render safe any other devices, and contain the hazard but, to the greatest extent possible, avoid disturbing equipment, materials, and conditions at the site other than what is required for rescue, security, containment, and decontamination. 5. Responders assist law enforcement with documenting conditions at the incident site as thoroughly as the situation allows throughout the response (sketches, photographs, and audio or video recordings). 6. Responders assist law enforcement with maintaining chain-of-custody procedures. 7. Responders document their decisions and response activities (e.g., all handwritten notes, duty logs, other documents, electronic records, records of decisions) in a permanent record as soon as possible after leaving the site. <p>Consequences: Investigators can accurately determine the cause of the incident. Investigations are not compromised by lack of evidence or suggestions of evidence tampering.</p> <p>Note: <i>These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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- ✓ What corrective actions are recommended?

1. Did first responders recognize the scene as a crime scene?
2. Did the IC adequately communicate with first responders regarding processes for preserving evidence?
3. Did first responders adequately document any evidence identified, and coordinate with law enforcement?
4. Did first responders coordinate with law enforcement regarding site control and sharing of initial information? Explain.

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Task # IV-6: Direct Agent Release Mitigation Efforts	
Outcome: Incident Site Hazard Mitigation	Location: Incident Site
Response Element: IC/UC	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Agent released as a liquid spill, a vapor plume, or aerosol deposition; and the incident scene.</p> <p>Conditions: Time available; conditions at the incident scene; availability of communications systems; availability of trained responders; availability of equipment and supplies; and plans, procedures, and regulations regarding confining, collecting, and containing an agent release.</p> <p>Expected Outcomes: The migration of the agent release is limited to the smallest possible area. The release is terminated at its source.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. In coordination with the HazMat team leader: <ol style="list-style-type: none"> a. Assess the situation and develop a plan and alternate plans for confining, collecting, and containing the release b. Approve work plans prior to beginning release control operations c. Monitor release control operations d. Provide additional personnel or equipment as needed 2. In coordination with appropriate environmental and/or public health agencies, determine decontamination procedures for personal protective equipment (PPE), equipment, and vehicles used in the response. <p>Consequences: Further damage to property and the environment is prevented; there is no further risk to workers and the public caused by an agent release.</p> <p><i>Note: These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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1. Did the HazMat team leader communicate with the Incident Commander (IC) regarding contaminant mitigation and identification plans?
2. Did the IC communicate with appropriate agencies regarding decontamination?
3. Who made the decision regarding what equipment would be decontaminated, how, and where?

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Task # IV-7: Conduct Agent Release Mitigation Efforts	
Outcome: Incident Site Hazard Mitigation	Location: Incident Site
Response Element: HazMat	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Agent contamination remaining at and around the incident site following release control operations; and other contaminated equipment, supplies, and materials.</p> <p>Conditions: Time available; conditions at the incident scene; availability of communications systems; availability of trained responders; availability of equipment and supplies; and plans, procedures, and regulations regarding mitigating the effects of an agent release.</p> <p>Expected Outcomes: Contaminated materials are safely contained and disposed of in a safe and legal manner.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Don appropriate personal protective equipment (PPE) before proceeding to the release location to begin release control operations. 2. Absorb, neutralize, or collect residual liquid agent and aerosol deposition. 3. Collect and package contaminated equipment, decontamination by-products, materials, and soil. Items are processed through the contamination reduction zone for appropriate disposal. 4. If the release occurred in a structure, thoroughly decontaminate it. 5. Monitor clean areas within the contamination control line and sample for agent residue and hazardous decontamination by-products. Continue mitigation efforts until cleanliness standards have been met. 6. Record and archive monitoring and sampling results for response records. 7. Report mitigation operations to the Incident Commander (IC). Request additional personnel or equipment from the IC and/or Emergency Operations Center. <p>Consequences: The incident site is restored to an acceptable level of risk for access and future use.</p> <p>Note: <i>These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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1. Were HazMat personnel wearing appropriate PPE for the situation? Was PPE use consistent among all responders operating within the hot and warm zones?
2. Describe agent mitigation methods within the structure (if applicable) and throughout the contaminated area. Comment on the effectiveness of the efforts.

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Task # IV-8: Conduct Firefighting Operations	
Outcome: Incident Site Hazard Mitigation	Location: Incident Site
Response Element: Fire Department	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Initial reports of a chemical incident, evidence of fire or smoke, need for firefighting equipment, and the incident scene.</p> <p>Conditions: Time available; conditions at the incident scene; availability of communications systems; availability of firefighters; availability of firefighting equipment; and plans, procedures, firefighting standards (e.g., National Fire Protection Association standards, Occupational Safety and Health Administration, National Institute for Occupational Safety and Health), and regulations.</p> <p>Expected Outcomes: Fires at the incident scene are fought safely. Additional equipment and manpower are available for response operations.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Deploy personnel and firefighting equipment to the incident scene. 2. Don appropriate personal protective equipment (PPE) prior to entering any area suspected of being contaminated. 3. Extinguish or suppress fires at the incident scene using good firefighting practices. Take care to avoid causing unnecessary migration of released agent and to preserve the incident scene. Fires involving explosives are not fought. 4. As appropriate, use firefighting equipment for other hazard mitigation activities (e.g., vapor suppression, tank cooling, etc.) 5. Inform the incident command post (ICP) of the status of firefighting operations. 6. Redirect to other functions or release firefighters when activities are completed. 7. Process firefighters and firefighting equipment through the decontamination process after completing operations in the hot zone. <p>Consequences: Response operations are able to be conducted without the additional risk imposed by fire. Reduce the threat posed to response operations.</p> <p><i>Note: These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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1. Were incoming crews properly protected for the type of incident dispatched? Explain.
2. Did first responders become contaminated and become victims? How could this have been prevented?
3. Were firefighting operations conducted in a manner appropriate to the incident?

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Task # IV-9: Dispatch Bomb Squad	
Outcome: Incident Site Hazard Mitigation	Location: 911 Center
Team: 911 Center/Dispatch	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Initial incident report or bomb threat received via facsimile, e-mail, telephone, or other means.</p> <p>Conditions: Time available, availability of communications systems, emergency management information system, changing conditions, and knowledge of plans and procedures.</p> <p>Expected Outcomes: The 911 dispatch center is able to assess the seriousness of the bomb threat, make an initial estimate of the impact, and recall and dispatch bomb squad.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Receive and confirm initial bomb threat and complete the appropriate bomb threat report as established in plans and procedures. 2. Request additional information from caller (number of device, location of primary bomb device, location of secondary device, device is rigged with booby traps, time device is expected to detonate). 3. Maintain contact with caller long enough to trace the call. 4. Request appropriate first responders to assist with bomb threat, (e.g., fire, law enforcement, medical/emergency medical services, director/administrator Emergency Operations Center, bomb squad, etc.) in accordance with plan and procedures. 5. Collect other information pertinent to the situation and forward to appropriate agency/organization. 6. Continuously monitor bomb threat incident, complete duty log, and immediately forward updated reports to the appropriate agency/organization. 7. Maintain contact with threat caller and incident command until the Incident Commander assumes full control of the bomb threat. 8. Archive all data in appropriate format that allows for quick retrieval and for subsequent analysis, investigation, and official reports. <p>Consequences: Potential mass casualties due to delay or compromise by incorrect or incomplete information being passed to bomb squad.</p> <p>Note: <i>These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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Incident Recognition

1. How adequate is the communications system to handle calls and demands?
2. Was dispatch able to quickly and accurately distinguish clusters or patterns or emergency service requests?
3. What reference materials were available to verify incident patterns? How were they used?
4. What surveillance systems were available to fuse data and identify trends and patterns? How were they used?

Bomb Squad Dispatch

5. Was alert, notification, and dispatch of the bomb squad conducted in accordance with established procedures?
6. How detailed and adequate was the initial alert information provided to the bomb squad?
7. How was intelligence related to the incident obtained?
8. When and how were threat updates provided to the bomb squad as new information was received?

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Task # IV-10: Assess Incident and Develop Action Plan	
Outcome: Incident Site Hazard Mitigation	Location: Incident Site
Team: Law Enforcement (Bomb Squad)	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: 911 dispatch center initial bomb threat report.</p> <p>Conditions: Time available, availability of communications systems, type and yield of explosive device, and changing conditions.</p> <p>Expected Outcomes: Bomb squad is able to assess the seriousness of the bomb threat; make an initial estimate of the impact; and prepare action plan to render safe, remove, or destroy the bomb.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Obtain intelligence on the explosive device, including: <ol style="list-style-type: none"> a. Exact time it was discovered or reported b. Expected time of detonation c. Suspect group modus operandi 2. Conduct a 360-degree visual sweep for command detonation, secondary devices, and booby traps. 3. Secure and evacuate the crisis site interior and exterior perimeter (depending on the size and type of the bomb, a safe detonation/back blast distance) with local law enforcement agency. 4. Suspend use of all radios and electronic communication devices in the exclusion area around the suspect device. 5. Determine the exact number of personnel required to execute the tactical operations plan. 6. Determine the appropriate support teams/agencies needed. 7. Prepare tactical action plan to include: <ol style="list-style-type: none"> a. Overall course of action b. Search procedures c. Render-safe procedures (RSP) d. Removal of explosive device e. Decontamination procedures; processing and containment of explosive runoff following RSP f. Personnel rotation plan (for extended tactical operations) g. Emergency rotation plan for stressed team members h. Emergency extraction plan for bomb squad team i. Equipment replacement plan due to damage/contamination j. Communication plan 8. Coordinate the tactical action plan with the Incident Commander (IC)/On-Scene Commander and appropriate teams/agency/organizations. 9. Determine best location for the bomb squad forward command center (away from and within a safe distance from the incident command post [ICP]) to safely conduct tactical rehearsal(s). <p>Consequences: Bomb squad is ready to render safe the explosive device without injury to responders or the public.</p> <p><i>Note: These are "typical" steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction's plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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Assessment

1. How detailed and adequate was the initial alert information provided to the bomb squad?
2. How was intelligence related to the incident obtained?
3. How did this information affect the formulation of the plan of attack?
4. What specific information was requested by the squad and how quickly was it obtained?
5. Has the bomb squad been adequately trained and equipped for operations in a contaminated sector? Discuss their capability and recommended improvements.
6. Did the bomb squad conduct a long-range reconnaissance, including a 360-degree visual sweep for command detonation? What other physical or structural hazards were identified in the surrounding area, if any? What precautions were taken?
7. What precautions were taken for secondary devices?

Site Control and Monitoring

8. What priorities were established and actions taken to ensure site evacuation was completed prior to initiating any procedure?
9. How were ingress and egress controlled during bomb squad operations?
10. How was area monitoring done for chemical agent presence on approach?
11. What equipment was available to the bomb squad to conduct area monitoring?
12. What procedures were followed for point monitoring of the device?

Tactical Action Planning and Coordination

13. How were the assessment and action plan development coordinated with the IC and other responding entities?
14. How did the action plan address contingencies (e.g., bomb squad extraction plan in the event of bomb detonation, personnel injuries, and stress)?
15. Did the plan prioritize actions and responsibilities? If so, how?
16. Did the bomb squad ensure that the ICP was established at a safe location and distance?

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Task # IV-11: Execute Incident Action Plan	
Outcome: Incident Site Hazard Mitigation	Location: Incident Site
Team: Law Enforcement (Bomb Squad)	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Tactical action plan, Incident Commander (IC)/On-Scene Commander (OSC) approval of actions, ongoing intelligence, bomb squad response equipment, and personal protective equipment (PPE).</p> <p>Conditions: Time available, availability of communications systems, degree of population evacuation, changing conditions, and knowledge of plans and procedures.</p> <p>Expected Outcomes: Bomb squad is able to render safe, remove, or destroy the explosive device.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Continuously receive updates on bomb threat from the IC/OSC. 2. Ensure that the perimeter is secure and evacuated before removing or detonating the explosive device. 3. Conduct equipment inventory and operational checks (robotics, bomb containment shell, detection and monitoring device, breathing apparatus tanks, etc). 4. Don appropriate PPE. 5. As time permits, coordinate and conduct tactical rehearsal (entrance, retrieval, and removal) with integrated first responders. 6. Conduct final render-safe procedures (RSP) communications clearance with the IC/OSC and other appropriate teams/agencies/organizations prior to commencing tactical operations. 7. Synchronize bomb squad team watches and clocks with Incident Command center. If available, ensure that the IC is issued a bomb squad stopwatch and coordinate activation of the stopwatch. 8. Conduct search of facility for primary and secondary bomb device. 9. Prepare containment for any explosive runoff. 10. Reconnoiter the bomb facility, prior to RSP, to identify emergency escape routes and internal safe shelter(s). 11. Conduct RSP according to tactical action plan. 12. Maintain 100 percent personnel accountability of bomb squad teams. 13. In the event of an accident, safely extract all personnel. 14. Assess the potential degradation of bomb squad capabilities and equipment and coordinate immediate replacement for each. 15. Immediately following the bomb detonation (accidentally or intentionally), conduct initial monitoring to determine the explosive components of the bomb. <p>Consequences: Bomb squad prevents potential mass casualties due to detonation of the explosive device.</p> <p>Note: <i>These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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Protective Measures

1. What protective measures for access to the fragmentation area or the contaminated area were directed? Describe capabilities to conduct a mechanical approach.
2. What guidance was provided regarding secondary devices and booby traps?
3. Does the bomb squad have proper PPE?
4. Were modifications of PPE made to address both the chemical and explosive hazards? If so, what were they?

Diagnostic Procedures

5. What diagnostic procedures were performed? Were they adequate?
6. Was significant data obtained by the diagnostic procedures? How were the x-rays interpreted and were additional diagnostics required?
7. Describe how the squad addressed the threat of the chemical agent filler identified and plans for mitigation. Discuss how this was shared with other sectors and what impact it could have on the rest of the response.

Render-Safe Procedures

8. Did the RSP developed further complicate the incident? Discuss the anticipated/actual effect an unintended release of additional chemical agent would have and who was the final authority to approve RSP.
9. What were the criteria used to formulate the final RSP and support instrument selection? Did the criteria follow FBI guidelines?
10. Upon completion of the RSP, was a secondary search of the surrounding area conducted? Was anything found? Were additional response units warned?

Personnel Safety

11. What actions and procedures were followed to monitor the exposure level of bomb squad personnel?
12. Describe the bomb squad's concept for personnel rotation.
13. What active measures were in place to monitor the accountability of bomb squad and support personnel?
14. What actions were taken to extract the primary team in the event of an accident on site?
15. How was the extraction accomplished?

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Task # IV-12: Implement Post-Render-Safe Procedures	
Outcome: Incident Site Hazard Mitigation	Location: Incident Site
Team: Law Enforcement (Bomb Squad)	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Rendered-safe bomb, evacuation distances, intelligence requirements, availability of transportation routes, and explosive transportation vehicles.</p> <p>Conditions: Time available, availability of communications systems, weather, and populated areas.</p> <p>Expected Outcomes: Bomb squad is able to gather intelligence on the bomb's maker and source materials; bomb squad safely disposes of bomb.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Conduct secondary search of surrounding area. 2. Alert responders and implement render-safe procedures (RSP) for secondary devices, if any. 3. Determine a safe location for forensic investigation/intelligence exploitation and dispose of explosive device. 4. Plan safe transportation route in coordination with government transportation officials. 5. Transport explosive device with security escort to location for final disposition. 6. Coordinate debris removal with public works. 7. When incident site is declared clear, restore normal activities in area. 8. Coordinate forensic investigation/intelligence exploitation of explosive device with FBI and military explosive ordnance disposal units. 9. Dispose of or destroy explosive device in approved explosives destruction area in accordance with local plans and procedures. 10. Archive all data in appropriate format to allow for quick retrieval and for subsequent analysis, investigation, and official reports. <p>Consequences: Gathered intelligence is used to track down suspects; no personnel or property damage occurs during post-RSP.</p> <p><i>Note: These are "typical" steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction's plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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Post-Render-Safe Actions

1. Upon completion of RSP, was a secondary search of the surrounding area conducted? Was anything found? Were additional response units warned?
2. What protective actions were taken to coordinate destruction in place or transportation for destruction of the explosive device?
3. How quickly was intelligence about the device design and construction forwarded promptly to investigation teams? What information was provided?
4. Did the Incident Commander approve all post-RSP actions?
5. What actions were taken to preserve evidence for investigation?
6. What actions were taken to coordinate post-explosion debris removal with public works?

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Task # IV-13: Decontaminate Responders and Equipment	
Outcome: Incident Site Hazard Mitigation	Location: Incident Site
Response Element: Fire Department/HazMat	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Operations at the accident site.</p> <p>Conditions: Time available, availability of personnel, availability of decontamination equipment, and plans and procedures regarding decontamination operations.</p> <p>Expected Outcomes: Contaminated personnel and equipment do not leave the scene until decontaminated or properly packaged for later decontamination. Personnel and equipment in the cold zone are protected from contamination.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Select locations for personnel decontamination operations that are large enough for efficient operations, have direct approaches from both the incident site and the staging area, and are between the hot line and the contamination control line. 2. Set up the operations in accordance with local policies and procedures. 3. Confirm that sufficient personnel, materials, and supplies are available to assist responders exiting from the incident site and to sustain decontamination operations for the duration of the response. 4. Conduct decontamination operations. 5. Record the method of decontamination, conduct decontamination monitoring, and note monitoring instrument used for all persons processed through the operation. 6. Once through the decontamination process, ensure that responders report to the rehabilitation area for rest and subsequent assignment to duty. 7. Report decontamination operations to the incident command post (ICP). Request additional personnel or equipment as needed from the ICP. 8. If appropriate, establish procedures for onsite and/or offsite decontamination of equipment. <p>Consequences: Agent hazards are not spread beyond the contamination control line.</p> <p><i>Note: These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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1. Why were the specific decontamination areas selected?
2. Where was first responder decontamination placed in proximity to victim decontamination?
3. What decontamination solutions were used? Were they appropriate?
4. How were runoff considerations handled? What additional agencies were contacted concerning runoff issues?
5. What provisions were made to cover and warm responders after completing decontamination?
6. What equipment was used to scan the responders for remaining contamination? Was it adequate?
7. Was agent information passed on to the Incident Commander and the decontamination sector? Did this have an effect on the procedures used?

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Task # V-1: Develop and Implement Protective Action Decisions			
Outcome:	Protection	Location:	EOC
Response Element:	EOC Staff	Jurisdiction:	
Evaluator:		Contact #:	

Task Information	Notes
<p>Inputs: Information from the incident scene and recommendations from Emergency Operations Center (EOC) staff and public health officials.</p> <p>Conditions: Time limitations; conditions at variance to plans (e.g., road conditions, availability of shelters, etc.); availability of senior elected official or designated decision-maker; availability of communications systems; preexisting or default protective action decision (PAD) agreements; and knowledge of plans and procedures.</p> <p>Expected Outcomes: PADs (evacuation/shelter-in-place) appropriate for the risk are presented to the jurisdiction’s population.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Receive information on population at risk from the Incident Commander at the scene. 2. Obtain decision on protective action recommendation (PAR) from EOC leadership and public health official or designee with regard to projected exposure from computer models, exposure from field measurements, protective action guides in the jurisdiction plan, shelter availability, evacuation time estimates, and relative exposure savings between evacuation and sheltering. 3. EOC leadership (senior elected official or designated decision-maker) develops the PAD (e.g., evacuation or shelter in place). 4. Communicate the PAD to the IC and other jurisdictions as soon as practical. 5. Be aware of any conflicts, updates, adjustments, or cancellation of the PAD. <p>Consequences: Appropriate warning information is provided to the population at risk; public is protected from exposure to agents.</p> <p>Note: <i>These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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- ✓ If there is a difference, why?
- ✓ What is the impact of that difference?
- ✓ What should be learned from this?
- ✓ What corrective actions are recommended?

Coordination

1. What was the timeline for development and implementation of the PAD?
2. Who was responsible for the details and accuracy of the PAD?
3. Who ensured that the PADs were consistent with preexisting or default PAD agreements and plans and procedures?

Planning

4. What PADs were made?
5. What time limitations for the implementation and/or compliance with the PADs existed?
6. What additional resources were needed to implement the PADs?
7. At what time were the IC, the onsite responders, and other jurisdictions notified of the PAD? Was it in a timely manner?
8. At what time was the declaration of emergency declared?

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Task # V-2: Prepare and Disseminate Protective Action Messages	
Outcome: Protection	Location: EOC
Response Element: EOC Staff	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Jurisdiction protective action decision (PAD).</p> <p>Conditions: Time limitations, activated Emergency Operations Center (EOC), availability of staff, availability of prescribed messages, and knowledge of plans and procedures.</p> <p>Expected Outcomes: Appropriate protective action messages (PAMs) can be transmitted and/or disseminated to the affected population.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Identify and select prescribed protective action message appropriate for the PAD for broadcast via the Emergency Alert System (EAS) or other broadcast media. Fill in blanks or modify selected messages with information specific to the accident. 2. Prepare ad hoc message if there are no prescribed messages appropriate for the PAD. 3. Place EAS stations or other local broadcast media on standby to receive messages. 4. Provide PAMs and inform participating EAS stations or local broadcast media of the time interval that PAMs are to be broadcast. 5. Select individual sirens/radios or groups of sirens/radios for activation as appropriate for the area at risk. 6. Ensure that needs of mobility, visual, or hearing impaired, non-English speakers, and institutions are addressed in the PAM. 7. Provide copies of selected message(s) to other local EOCs and response agencies if required by procedures. 8. Monitor EAS stations or other media to ensure they broadcast the message(s) within specified time and at the specified interval. <p>Consequences: Affected community populations are alerted and notified of the PAD and recommended protective actions; population takes protective action; population is protected from the effects of exposure to chemical agents.</p> <p>Note: <i>These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

Homeland Security Exercise Evaluation Guide Operations-Based Exercises

Followup Analysis

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- ✓ What happened?
- ✓ What was supposed to happen?
- ✓ If there is a difference, why?
- ✓ What is the impact of that difference?
- ✓ What should be learned from this?
- ✓ What corrective actions are recommended?

Coordination

1. Who was responsible for the preparation, coordination, and dissemination of news releases? What press conferences were conducted to explain the PAD?
2. Were the State and county advised of the local declaration and updated on the city's activities?
3. What organization(s) was responsible for the coordination of the EAS and the dissemination of information to the public?
4. Did the EOC directly notify specified facilities such as large businesses, highway administrators, major recreational facilities, airports, railroads, or institutions?
5. Who was responsible for placing the EAS stations or other local broadcast media on standby to receive PAMs?
6. Did the EAS stations or local broadcast media use prepositioned and prescribed messages or ad hoc messages?

Planning

7. Describe how dispatch or the EOC alerted sites with special warning requirements (e.g., hospitals and schools)?
8. Were updates given to supporting agencies/organizations? How often were updates provided?
9. Were backup systems available to ensure transmission of the message?
10. Were alternate or supplementary methods (e.g., route alerting, pagers, signs, visual signals, etc.) of alert and warning identified?
11. Was route alerting used to notify special populations and rural areas not supported by conventional notification methods?
12. What communication equipment did the vehicle used for route alerting have?
13. Were maps, a copy of the message, and directions for the route alerting area provided for the vehicle?
14. Who was responsible for briefing the team on safe routes to and from the area, expected stay times, and other hazard protection information?

Implementation

15. Was the transmission of the EAS message successful in all affected sectors or zones?
16. Were there time intervals between broadcast of the PAMs?
17. Who was responsible for monitoring the EAS stations or local broadcast media to ensure the message(s) was accurately broadcast within the specified time period and intervals?

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Task # V-3: Activate Traffic and Access Control Points	
Outcome: Protection	Location: In Community
Response Element: Law Enforcement	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Direction to establish traffic control points (TCPs) and access control points (ACPs).</p> <p>Conditions: Time available; availability of communications systems; availability of personnel; availability of vehicles, barricades, and other traffic control equipment; selected evacuation routes; selected ACP/ TCP locations; pertinent maps, diagrams, and plans; weather and environmental conditions; and situations at variance with assumptions in plans and procedures.</p> <p>Expected Outcomes: TCPs are in place in time to support the evacuation order; an orderly evacuation is facilitated; and access to the predicted hazard area is prevented.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. If sufficient time is available, inventory and stage crews, vehicles, and equipment to support establishment of the specified ACPs and TCPs. 2. Move to designated locations. 3. Set up equipment in the proper locations to prevent access to restricted area and to direct movement out of the area. 4. Make communications checks and report operational status to the appropriate supervisor or EOC staff. Make followup reports at regular intervals. 5. Direct evacuees along evacuation routes. 6. Prevent unauthorized access into the predicted hazard area. 7. Facilitate the movement of emergency vehicles and crews through restricted areas. 8. Promptly relocate TCPs and ACPs as directed by supervisors. <p>Consequences: The population at risk and population at large is protected from exposure to the agent.</p> <p><i>Note: These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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- ✓ What happened?
- ✓ What was supposed to happen?
- ✓ If there is a difference, why?
- ✓ What is the impact of that difference?
- ✓ What should be learned from this?
- ✓ What corrective actions are recommended?

Coordination

1. Who was responsible for ensuring that inventoried and staged crews, vehicles, and equipment were available to support the establishment of specified ACPs/TCPs? Was it performed in a timely manner?
2. Who received the operational reports and status checks from the field locations? Were followup reports received at regular intervals?

Operations

3. Who directed the law enforcement personnel to move to designated ACP/TCP locations?
4. What are the responsibilities of law enforcement at ACP/TCP locations?
5. What equipment did the ACP/TCP officer use to assist in the completion and operation of ACPs/TCPs?

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Task # V-4: Coordinate Protective Actions for Special Populations	
Outcome: Protection	Location: EOC
Response Element: EOC Staff	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Protective action decisions for special populations.</p> <p>Conditions: Time available; availability of communications systems; the identity, location, and numbers of disabled, institutionalized, and transit-dependent people; knowledge of institutions equipped for enhanced or pressurized sheltering in place; knowledge of plans and procedures; weather and other environmental conditions; selected evacuation routes; availability of vehicles to transport special populations; and situations at variance with assumptions in plans and procedures.</p> <p>Expected Outcomes: All special populations are sheltered in place or are promptly and safely evacuated to host facilities or reception centers.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Identify at-risk special populations and facilities. 2. According to established procedures, contact at-risk special populations and facilities and inform them of the protective action to be implemented for their specific situation. Obtain information about any assistance they may need. 3. Compile resource requests and contact resource providers to obtain needed support. 4. Stage transportation assets. Brief drivers on the hazard area, routes to follow, emergency procedures, pickup points, and final destinations. 5. Coordinate with traffic control personnel to expedite the movement of transportation assets to and from special population pickup routes and special facilities. 6. Through public information assets, inform transportation-dependent populations on how to obtain transportation out of the hazard area. 7. According to plans and procedures, Emergency Operations Center (EOC) notifies host facilities or reception centers to prepare to receive special population evacuees. 8. If special populations or facilities were directed to shelter in place, provide appropriate assistance for implementing sheltering measures. 9. Promptly communicate changes in directed protective actions (e.g., from shelter in place to evacuation) to the affected special populations and facilities. Repeat previous steps, as appropriate, to support the change in protective action. 10. Through public information assets, provide the public at large with information regarding protective actions taken by special populations and facilities, the location of host facilities or reception centers the special populations have been evacuated to, and procedures for reuniting with family members who may be part of a special population. <p>Consequences: The population at risk and population at large is protected from exposure to a chemical agent.</p> <p>Note: <i>These are "typical" steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction's plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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- ✓ What happened?
- ✓ What was supposed to happen?
- ✓ If there is a difference, why?
- ✓ What is the impact of that difference?
- ✓ What should be learned from this?
- ✓ What corrective actions are recommended?

Coordination

1. Who is responsible for compiling and delegating resource requests?
2. Who contacted resource providers to obtain needed support?
3. Who was responsible for ensuring that transportation assets were available?

Planning

4. Who was responsible for briefing drivers on the hazard area, routes to follow, emergency procedures, pickup points, and their final destinations?
5. What was the protocol for responding to changes to protective action decisions?
6. Did the EOC and/or school staffs notify reception centers and host facilities to prepare to receive special population evacuees?
7. Did traffic control personnel expedite movement of transportation assets to and from special population pickup routes and special facilities?
8. What support information was available to transportation-dependent populations?

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Task # V-5: Implement Protective Actions for Special Populations	
Outcome: Protection	Location: In Community
Response Element: Special Population Sites	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Notification of protective actions to be taken for special populations.</p> <p>Conditions: Time available; availability of communications systems; sheltering options (expedient, enhanced, and pressurized) available to the special population or facility; weather and other environmental conditions; selected evacuation routes; availability of transportation assets; and situations at variance with assumptions in plans and procedures.</p> <p>Expected Outcomes: All special populations are sheltered in place or are promptly and safely evacuated to host facilities or reception centers.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. If directed to shelter in place, implement normal, expedient, or pressurized shelter-in-place procedures, following local procedures. 2. If directed to evacuate, identify transportation resources needed and request their prompt deployment, including requesting additional resources. 3. Ensure that transportation providers: <ol style="list-style-type: none"> a. Mobilize vehicles and crews b. Brief drivers on emergency procedures, location of pickup point, location of host facility (destination), emergency procedures, and routes to follow to the pickup point and final destination c. Establish and maintain communication for the duration of the evacuation 4. If privately owned vehicles are used, provide drivers with maps and brief them on emergency procedures, the destination, and the route to follow. 5. Assemble institutional populations, load on buses or other transportation assets, and transport to the host facility. 6. Respond promptly and correctly to changes in protective action (e.g., from sheltering in place to evacuation). <p>Consequences: No special populations are exposed to the agent.</p> <p><i>Note: These are "typical" steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction's plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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Followup Analysis

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- ✓ What happened?
- ✓ What was supposed to happen?
- ✓ If there is a difference, why?
- ✓ What is the impact of that difference?
- ✓ What should be learned from this?
- ✓ What corrective actions are recommended?

Coordination

1. Who is responsible for compiling and delegating resource requests?
2. Who contacted the resource providers to obtain needed support?
3. Who was responsible for ensuring that transportation assets were available?

Planning

4. Who was responsible for briefing drivers on the hazard area, routes to follow, emergency procedures, pickup points, and their final destinations?
5. What was the protocol for responding to changes to protective action decisions?
6. Did the Emergency Operations Center and/or special population facilities notify reception centers to prepare to receive special population evacuees?
7. Did traffic control personnel expedite movement of transportation assets to and from special population pickup routes and special facilities?
8. What support information was available to transportation-dependent populations?

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Task # V-6: Coordinate Protective Actions for Schools and Day Care Centers	
Outcome: Protection	Location: EOC
Response Element: EOC Staff	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Protective action decision for schools and day care centers.</p> <p>Conditions: Time available; availability of communications systems; the identity, location, and capacity of public and private schools and day care centers; sheltering options (expedient, enhanced, and pressurized) for the school; lists of host schools; weather and other environmental conditions; selected evacuation routes; availability of transportation assets; and situations at variance with assumptions in plans and procedures.</p> <p>Expected Outcomes: All school and day care students and staff are sheltered in place or are promptly and safely evacuated to host schools, day care facilities, or reception centers; parents are notified when and where to reunite with their children.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Identify at-risk schools and day care centers. 2. According to established procedures, contact at-risk schools and day care centers and inform them of the protective action to be implemented for their specific situation. Obtain information about any assistance they may need. 3. Compile resource requests and contact resource providers to obtain needed support. 4. Stage transportation assets. Brief drivers on the hazard area, routes to follow, emergency procedures, pickup points, and final destinations. 5. Coordinate with traffic control personnel to expedite the movement of transportation assets to and from schools and day care centers. 6. According to plans and procedures, Emergency Operations Center (EOC) and/or school staffs notify host schools, day care facilities, or reception centers to prepare to receive school and day care center evacuees. 7. If schools and day care centers were directed to shelter in place, provide appropriate assistance for implementing sheltering measures. 8. Promptly communicate changes in directed protective actions (e.g., from shelter in place to evacuation) to the affected schools. Repeat previous steps, as appropriate, to support the change in protective action. 9. Through public information assets, provide parents and guardians with information regarding protective actions taken at individual schools and day care centers, the location of host schools and day care facilities, and procedures for reuniting with their children. <p>Consequences: The population at risk and population at large is protected from exposure to the agent.</p> <p>Note: <i>These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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Followup Analysis

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- ✓ What happened?
- ✓ What was supposed to happen?
- ✓ If there is a difference, why?
- ✓ What is the impact of that difference?
- ✓ What should be learned from this?
- ✓ What corrective actions are recommended?

Coordination

1. Who was responsible for compiling and delegating resource requests?
2. Who contacted the resource providers to obtain needed support?
3. Who was responsible for ensuring that transportation assets were available?

Planning

4. Who was responsible for briefing drivers on the hazard area, routes to follow, emergency procedures, pickup points, and their final destinations?
5. What was the protocol for responding to changes to protective action decisions?
6. Did the Emergency Operations Center (EOC) and/or school staffs notify host schools, day care facilities, or reception centers to prepare to receive school and day care center evacuees?
7. Did traffic control personnel expedite movement of transportation assets to and from schools and day care centers?

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Task # V-7: Implement Protective Actions for Schools and Day Care Centers	
Outcome: Protection	Location: In Community
Response Element: Schools and Day Care Centers	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Protective action decisions (PADs) for schools and day care centers.</p> <p>Conditions: Time available; availability of communications systems; the identity, location, and capacity of public and private schools and day care centers; sheltering options (expedient, enhanced, and pressurized) for the school; lists of host schools; weather and other environmental conditions; selected evacuation routes; availability of transportation assets; and situations at variance with assumptions in plans and procedures.</p> <p>Expected Outcomes: All school and day care students and staff are sheltered in place or are promptly and safely evacuated to host schools, day care facilities, or reception centers.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. If directed to shelter in place, implement normal, expedient, or pressurized shelter-in-place procedures, following local procedures. 2. If directed to evacuate, identify transportation resources needed and request their prompt deployment, including requesting additional resources. 3. Ensure that transportation providers: <ol style="list-style-type: none"> a. Mobilize vehicles and crews b. Brief drivers on emergency procedures, location of pickup point, location of host facility (destination), emergency procedures, and routes to follow to the pickup point and final destination c. Establish and maintain communication for the duration of the evacuation 4. If privately owned vehicles are used (e.g., by a small day care facility), provide drivers with maps and brief them on emergency procedures, destination, and route to follow. 5. Assemble children and accompanying adults, load on buses or other transportation assets, and transport to the host facility. 6. Respond promptly and correctly to changes in protective action (e.g., from sheltering in place to evacuation). <p>Consequences: No special populations are exposed to the agent.</p> <p>Note: <i>These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

Homeland Security Exercise Evaluation Guide Operations-Based Exercises

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- ✓ What happened?
- ✓ What was supposed to happen?
- ✓ If there is a difference, why?
- ✓ What is the impact of that difference?
- ✓ What should be learned from this?
- ✓ What corrective actions are recommended?

Coordination

1. Who was responsible for compiling and delegating resource requests?
2. Who contacted the resource providers to obtain needed support?
3. Who was responsible for ensuring that transportation assets were available?

Planning

4. Who was responsible for briefing drivers on the hazard area, routes to follow, emergency procedures, pickup points, and their final destinations?
5. What was the protocol for responding to changes to PADs?
6. Did the Emergency Operations Center and/or school staffs notify reception centers to prepare to receive school evacuees?
7. Did traffic control personnel expedite movement of transportation assets to and from schools and day care centers?
8. Was sufficient capacity available at the reception or host school/day care?

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Task # V-8: Direct Reception Center Operations	
Outcome: Protection	Location: EOC
Response Element: EOC Staff	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Protective action decision that includes evacuation.</p> <p>Conditions: Availability of communications systems, time available prior to evacuee arrival, list of reception centers, availability of reception center staff and equipment, selected evacuation routes, weather and other environmental conditions, and other conditions at variance with assumptions in plans and procedures.</p> <p>Expected Outcomes: Direction and control of reception center activities are established; reception center activities are coordinated to ensure the efficiency of evacuee support.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Determine number of reception centers to be activated. Select predetermined locations or identify ad hoc locations along evacuation routes where they will not impede evacuation. 2. Notify the government or nongovernment agencies identified to operate reception centers and direct them to mobilize their staff and equipment to establish the facilities. 3. Notify agencies that provide support to the reception center (e.g., emergency medical services, law enforcement). 4. Provide operating and supporting agencies with information on which reception centers will be activated, the hazard area, routes to take to the reception centers, and en route emergency procedures. 5. Coordinate with traffic control personnel to expedite movement of reception center assets to the designated locations and direct evacuees to them. 6. Notify adjacent jurisdiction Emergency Operations Centers (EOCs) of decision to activate reception centers and their location. 7. Receive reports and solicit information regarding the status of reception center operations, paying special attention to the need for additional staff or equipment. 8. Obtain and arrange for distribution of supplies and equipment needed to sustain reception center operations. 9. Coordinate for additional manpower to assure continuous, 24-hour operation. Assign augmenting personnel to reception centers where they are most needed. <p>Consequences: Evacuees desiring shelter are quickly screened, registered, and assigned to a shelter.</p> <p>Note: <i>These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

Homeland Security Exercise Evaluation Guide Operations-Based Exercises

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- ✓ What happened?
- ✓ What was supposed to happen?
- ✓ If there is a difference, why?
- ✓ What is the impact of that difference?
- ✓ What should be learned from this?
- ✓ What corrective actions are recommended?

1. At what time was the reception center activated?
2. Who is responsible for notifying adjacent jurisdiction EOCs of the decision to activate reception centers and their locations?
3. Who was responsible for maintaining contact with the reception center?
4. Who was responsible for fulfilling requests for resources from the reception center? Did response to requests happen in a timely manner?

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Task # V-9: Operate Reception Centers	
Outcome: Protection	Location: In Community
Response Element: Reception Centers	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Decision to activate reception centers.</p> <p>Conditions: Availability of communications systems, time available prior to evacuee arrival, list of reception centers, availability of reception center staff and equipment, selected evacuation routes, weather and other environmental conditions, and other conditions at variance with assumptions in plans and procedures.</p> <p>Expected Outcomes: A fully staffed and functioning reception center.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Notify agency staff that reception centers are being activated. 2. Stage reception center assets. Brief staff on reception center locations, the hazard area, routes to follow to the reception centers, and en route emergency procedures. 3. Set up the reception center facility according to established plans and procedures. Report to the Emergency Operations Center (EOC) when the center is ready to process evacuees. 4. Using established protocols and procedures, register evacuees as they arrive at the reception center. 5. Assign evacuees to shelters based upon their needs and desire for shelter. 6. Make periodic reports to the EOC according to local plans and procedures. 7. Review rosters to assure continuous, 24-hour operation, and assign registration personnel to tasks and shifts where they are most needed. Provide a transition or situation briefing to later shift personnel before they begin work. <p>Consequences: Evacuees are registered and referred to shelters or other facilities for their safety and protection.</p> <p><i>Note: These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

Homeland Security Exercise Evaluation Guide Operations-Based Exercises

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- ✓ What happened?
- ✓ What was supposed to happen?
- ✓ If there is a difference, why?
- ✓ What is the impact of that difference?
- ✓ What should be learned from this?
- ✓ What corrective actions are recommended?

Coordination

1. At what time was the reception center activated?
2. Who is responsible for notifying adjacent jurisdiction EOCs of the decision to activate reception centers and their locations?

Planning

3. How were reception center assets staged?
4. At the reception center, who was responsible for maintaining contact with the EOC?
5. At the reception center, which staff member was responsible for requesting resources from the EOC?
6. Did the EOC respond to resource requests from the reception center in a timely manner?
7. What was the primary objective of the reception center?
8. What contingency plans and locations did the reception center have in place to compensate for overflow?

Implementation

9. How was the reception center able to meet the needs of special populations, mobility impaired, or medically dependent individuals?
10. What was the intended evacuee throughput of the reception center?
11. How many evacuees did the reception center process each hour?
12. What bottlenecks occurred in evacuee processing? How could they be remedied?
13. To which shelters were evacuees directed?

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Task # V-10: Direct Shelter Operations	
Outcome: Protection	Location: EOC
Response Element: EOC Staff	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Protective action decision that includes evacuation.</p> <p>Conditions: Availability of communications systems, time available prior to evacuee arrival, list of shelters, availability of shelter staff and equipment, selected evacuation routes, weather and other environmental conditions, memorandums of agreement (MOAs)/ memorandums of understanding (MOUs) with host communities and facility operators; MOAs/MOUs with nongovernment agencies, and other conditions at variance with assumptions in plans and procedures.</p> <p>Expected Outcomes: Direction and control of shelter activities are established; shelter activities are coordinated to ensure the efficiency of evacuee support.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Notify the government or nongovernment agencies identified to operate shelters and direct them to mobilize their staff and equipment to establish the facilities. 2. Notify agencies that provide support to shelters (e.g., emergency medical services, law enforcement). 3. In coordination with the operating agency, determine number of shelters to be activated. Select predetermined locations or identify ad hoc locations along evacuation routes where they will not impede evacuation. 4. Provide operating and supporting agencies with information about which shelters will be activated, the hazard area, routes to take to the shelters, and en route emergency procedures. 5. Coordinate with traffic control personnel to expedite movement of shelter assets to the designated locations and to direct evacuees to them. 6. Notify adjacent jurisdiction Emergency Operations Centers (EOCs) of decision to activate shelters and their location. 7. Receive reports and solicit information regarding the status of shelter operations, paying special attention to the need for additional staff, equipment, or shelters. 8. Obtain and arrange for distribution of supplies and equipment needed to sustain shelter operations. 9. Coordinate for additional manpower to assure continuous, 24-hour operation. Assign augmenting personnel to shelters where they are most needed. <p>Consequences: Evacuees are provided with adequate care.</p> <p><i>Note: These are "typical" steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction's plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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Followup Analysis

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- ✓ What happened?
- ✓ What was supposed to happen?
- ✓ If there is a difference, why?
- ✓ What is the impact of that difference?
- ✓ What should be learned from this?
- ✓ What corrective actions are recommended?

Coordination

1. At what time was the shelter activated?
2. Who is responsible for notifying adjacent jurisdiction EOCs of the decision to activate shelters and their locations?
3. Who was responsible for maintaining contact with the shelter?
4. Who was responsible for fulfilling requests for resources from the shelter? Did the response to requests happen in a timely manner?

Planning

5. How were shelters selected?
6. How many people were estimated to need shelter?
7. What is the capacity of the available shelters?

**Homeland Security Exercise Evaluation Guide
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Task # V-11: Operate Shelters	
Outcome: Protection	Location: In Community
Response Element: Shelters	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Decision to activate shelters.</p> <p>Conditions: Availability of communications systems, time available prior to evacuee arrival, list of shelters, availability of shelter staff and equipment, selected evacuation routes, weather and other environmental conditions, memorandums of agreement (MOAs)/memorandums of understanding (MOUs) with host communities and facility operators, MOAs/MOUs with nongovernment agencies, and other conditions at variance with assumptions in plans and procedures.</p> <p>Expected Outcomes: Evacuees receive essential care services until it is safe to return home.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Notify agency staff that shelters are being activated. 2. Stage shelter assets. Brief staff on shelter locations, the hazard area, routes to follow to the shelters, and en route emergency procedures. 3. Set up the shelter facility according to plans and procedures. 4. Verify that food service, security, first aid and medical service, childcare, sanitation, social services, counseling and religious support, and disaster welfare information services are in place. 5. Report to the Emergency Operations Center (EOC) when the shelter is ready to receive evacuees. 6. Check evacuees to indicate they have been through reception and registration, including screening for contamination as necessary. 7. Meet the needs of special populations, mobility impaired, or medically dependent individuals. 8. Provide evacuees with assistance in locating and uniting with family members from whom they have become separated. As needed, poll other shelters to determine if someone has been registered elsewhere, and handle inquiries from other locations seeking information on registrants. 9. Make arrangements for the care and handling of evacuees' pets. 10. Make periodic reports to the EOC according to local plans and procedures. 11. Arrange to open other facilities as capacity is reached. 12. Review rosters to assure continuous, 24-hour operation and assign registration personnel to tasks and shifts where they are most needed. Provide a transition or situation briefing to later shift personnel before they begin work. <p>Consequences: Evacuees are provided with adequate care.</p> <p>Note: <i>These are "typical" steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction's plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

Homeland Security Exercise Evaluation Guide Operations-Based Exercises

Followup Analysis

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- ✓ What happened?
- ✓ What was supposed to happen?
- ✓ If there is a difference, why?
- ✓ What is the impact of that difference?
- ✓ What should be learned from this?
- ✓ What corrective actions are recommended?

Coordination

1. At what time was the shelter activated?
2. Who is responsible for notifying adjacent jurisdiction EOCs of the decision to activate shelters and their locations?
3. Who was responsible for maintaining contact with the EOC?

Planning

4. How were shelter assets staged?
5. Who was responsible for requesting resources from the EOC? Did responses to requests happen in a timely manner?
6. What was the primary objective of the shelter?
7. What contingency plans and locations did the shelter have in place to compensate for overflow?

Implementation

8. Was the shelter able to meet the needs of special populations, mobility impaired, or medically dependent individuals?
9. What was the intended capacity of the shelter?
10. How many evacuees did the shelter accept?
11. How many evacuees were turned away, if any? Where were they sent?
12. What shortcomings, if any, were there in food, water, sanitation, and beds? How could they be corrected?

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Task # V-12: Arrange for Veterinary Services	
Outcome: Protection	Location: EOC
Response Element: EOC Staff	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Reports describing the incident; hazard analysis results; and information regarding exposure, injuries, or fatalities to companion animals, livestock, and wildlife.</p> <p>Conditions: Availability of communications systems; veterinarians and veterinary specialists available; plans and procedures for providing veterinary support; and plans, procedures, and official guidance regarding veterinary support.</p> <p>Expected Outcomes: Livestock, companion animals, and wildlife that are injured or exposed to an agent, or are at risk of injury or exposure, are identified and treated humanely.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Determine the need for veterinary support. 2. Request available veterinarian assets based on the composition and circumstances of the potentially affected livestock, companion animals, and fauna to ensure an appropriate response. 3. Assign veterinary services personnel to tasks and shifts. 4. Provide a transition or situation brief to newly arrived personnel. 5. Monitor veterinary services (e.g., medical treatment or euthanasia for livestock, companion animals, and wildlife using good veterinary practice). <p>Consequences: The veterinary support needs of affected residents are met; services provided comply with environmental protection regulations.</p> <p>Note: <i>These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

Homeland Security Exercise Evaluation Guide Operations-Based Exercises

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1. Who requested veterinary support?
2. Who is responsible for allocating the veterinary support assets?
3. At what time did veterinary services receive their initial task request?
4. Who is responsible for assigning and tasking veterinary services personnel?
5. What are the laws and authorities governing the roles and responsibilities of veterinary services?

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Task # VI-1: Provide Immediate Emergency Aid	
Outcome: Victim Care	Location: Incident Site
Response Element: First Responders (non-EMS)	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Contaminated or potentially contaminated, exposed or potentially exposed, and injured civilians or workers at the incident site or in the safety restricted area or projected hazard area (wedge).</p> <p>Conditions: Time available; incident scene limitations (facility damage, fire, wreckage, number of victims, etc.); nature and extent of illness, injury, contamination, or exposure; availability of trained and equipped nonmedical emergency responders; availability of communications equipment; and knowledge of local laws, memorandums of agreement/memorandums of understanding, plans, procedures, and regulations.</p> <p>Expected Outcomes: Victims are protected from additional trauma, injury, and chemical agent exposure. Appropriate life-saving self aid and first aid is accomplished.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Perform immediate aid until medical response teams assume treatment. This includes: <ol style="list-style-type: none"> a. Donning personal protective equipment (PPE) as appropriate and available b. Moving victims from the immediate danger area c. Providing the airway, breathing, and circulation (ABC) of CPR, controlling blood loss, supporting fractures, and administering antidotes 2. Remove gross contamination from the victim's exposed skin and PPE. 3. Move victims to the emergency decontamination area, continuing life-support and first aid treatment during movement. 4. If a personnel decontamination station is not established, conduct expedient decontamination. 5. Arrange victims for immediate triage by the medical response team upon completion of decontamination procedures. 6. Contribute to patient history, with particular attention given to the agent antidote regimen (as appropriate), and to decontamination processes accomplished. <p>Consequences: No patients die or are permanently incapacitated as a result of gaps in victim care.</p> <p>Note: <i>These are "typical" steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction's plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

Homeland Security Exercise Evaluation Guide Operations-Based Exercises

Followup Analysis

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Initial Assessment

1. What steps were taken to isolate the immediate area and contain the victims?
2. How did first responders approach victims?
3. Did first responders determine appropriate treatment and request emergency medical services?
4. What initial assessment was made regarding agent identification? What symptoms were observed (e.g., breathing difficulties, pupil abnormalities, other physiological reactions to agents)?

Responder Preparation

5. Were incoming crews properly protected for the type of incident dispatched? Explain.
6. Were the first responders adequately prepared to treat the victims?
7. Did first responders become contaminated and become victims? How could this have been prevented?

Victim Care

8. How were patients extracted or otherwise removed from immediate danger?
9. Were patients removed in the appropriate order?
10. Were the victims quickly assessed and given timely and reasonable treatment?
11. What basic assessments were done (e.g., airway, breathing, circulation)?
12. What immediate aid was given?
13. What method of mass decontamination was used by the initial units on the scene?
14. What steps were taken regarding "walking wounded" who may have left the area?

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Task # VI-2: Conduct Search and Rescue Operations	
Outcome: Victim Care	Location: Incident Site
Response Element: Search and Rescue	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Initial reports of witnesses or first responders from the incident scene.</p> <p>Conditions: Time of day structure collapsed, type of construction and usage, extent of structural damage, availability of communications systems, and availability of properly equipped Urban Search and Rescue personnel and equipment.</p> <p>Expected Outcomes: Trapped victims are located, medically stabilized, extracted from debris, and evacuated for definitive medical treatment.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Survey the area, and identify and interview individuals who may have information about the structure and potential location of entrapped victims. 2. Structure triage, assessment, and marking. 3. Establish a safety plan for incident site. 4. Develop and implement search strategy and tactics: <ol style="list-style-type: none"> a. Physical search b. Technical search (visual/acoustic) c. Canine search 5. Prioritize potential search sites. 6. Develop and implement rescue strategy and tactics. 7. Ensure appropriate medical personnel are standing by to stabilize victims prior to and during extrication. 8. Develop plan for disposition of victims to definitive medical care following extrication. <p>Consequences: Trapped survivors of the initial weapons of mass destruction event are rescued, thereby reducing loss of life.</p> <p>Note: <i>These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

Homeland Security Exercise Evaluation Guide Operations-Based Exercises

Followup Analysis

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- ✓ If there is a difference, why?
- ✓ What is the impact of that difference?
- ✓ What should be learned from this?
- ✓ What corrective actions are recommended?

Assessment

1. Were time of day of incident and site usage factored into planning the response?
2. Were the initial first responders and building engineer/manager contacted and interviewed to pinpoint locations where victims might be trapped?
3. Were site plans requested/utilized?
4. Was the area to be searched clearly defined?

Responder Protection

5. Was the structure collapse analyzed and shored as needed?
6. Was a safety plan developed and briefed?
7. What personal protective equipment (PPE) was used? Was it appropriate for the degree of chemical hazard?

Resources and Coordination

8. Were special search units (canine, visual, acoustic) available and utilized?
9. Were potential rescue sites prioritized? By what means?
10. Was an operations chief established for each site?
11. Was appropriate equipment brought in to support operations?

Medical Care

12. Were plans, personnel, and equipment in place for medical stabilization of the victims prior to and during extrication?
13. Were plans in place to transport victims to definitive medical care?

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Task # VI-3: Provide Emergency Triage, Treatment, and Stabilization	
Outcome: Victim Care	Location: Incident Site
Response Element: EMS	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Contaminated or potentially contaminated; exposed or potentially exposed; and injured civilians, workers, or responders at the incident site or in the safety restricted area or projected hazard area (wedge).</p> <p>Conditions: Time available; nature and extent of injury or illness; agent type; extent of contamination by or exposure to the agent; prior expedient field care administered; availability of emergency medical teams and equipment; availability of communications equipment; and knowledge of local laws, memorandums of agreement/memorandums of understanding, plans, procedures, and regulations.</p> <p>Expected Outcomes: Patients are stabilized and taken to a hospital in time to prevent death or permanent incapacitation.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Don appropriate personal protective equipment (PPE). 2. Begin proper triage procedures at the emergency patient decontamination site (PDS). 3. Conduct primary patient assessment/decontamination (if needed). 4. Address life-threatening issues and establish patient history. 5. Treat signs and symptoms; continually assess the patient. 6. Determine the hospital to which the patient will be transported. 7. Arrange for ambulances or other transport vehicles. 8. Prepare victims for transport to the hospital. Continue patient treatment while preparing patients for transport. 9. Provide patient tracking information to medical services coordinator. <p>Consequences: No patients die or are permanently incapacitated as a result of gaps in victim care.</p> <p>Note: <i>These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

Homeland Security Exercise Evaluation Guide Operations-Based Exercises

Followup Analysis

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- ✓ What is the impact of that difference?
- ✓ What should be learned from this?
- ✓ What corrective actions are recommended?

Initial Actions

1. At what point during the incident were the first emergency medical services (EMS) personnel on the scene?
2. What preliminary information was given to the first responding units?
3. What steps were taken to isolate the immediate area and contain the victims?
4. How did EMS personnel approach victims?
5. What initial assessment did EMS personnel make regarding agent identification? What symptoms were observed (e.g., breathing difficulties, pupil abnormalities, other physiological reactions to agents)?

Responder Preparation

6. Were incoming EMS personnel properly protected for the type of incident? Explain.
7. Was treatment conducted within the capability of the PPE?
8. Were EMS personnel properly equipped with necessary tools to treat victims (e.g., suction, bag valve masks)?
9. What preestablished procedures were used to mobilize the necessary equipment and personnel?
10. Did EMS personnel become contaminated and become victims? How could this have been prevented?
11. What actions were implemented to protect responders from the threat of secondary devices (time, distance, shielding)?

EMS Organization and Control

12. Was someone appointed to be in command of EMS activities? Was this person easily identifiable? Where was he or she located?
13. What assessments were made regarding the need for additional medical resources?
14. Were communications problems encountered between the EMS sectors and other operational sectors (e.g., HazMat) with the Incident Commander (IC)?
15. How were patient data tracked? Were they passed on to the receiving hospital and the Emergency Operations Center (EOC)?
16. Was a triage officer appointed and identified? Did the triage officer perform his or her role effectively?
17. How were treatment and triage areas for the victims designated? Discuss their size and location in relation to the transportation area and their overall suitability.
18. Was a treatment officer appointed and identified? Did the treatment officer perform his or her role effectively?
19. How were the treatment sector and medical care activities organized?
20. Were the treatment personnel advised of the type of agent by the IC? Did treatment personnel recognize what the agent type might be based on signs and symptoms?
21. How was coordination between agencies accomplished (face to face, radio)?
22. Was evidence obtained and/or preserved without compromising the life and health of the patient?

Victim Care

23. What actions did medical personnel take to provide the earliest possible intervention, including basic life support?
24. How was need for treatment prioritized?
25. How were the "worried well" handled?
26. Was there a medical doctor on the scene? Were there other specialists on the scene (e.g., priests, critical incident stress management)? If so, how were they identified? Were their skills effectively used?
27. Were all EMS personnel used effectively?
28. What provisions were made for protection of victims from the environment, the press/media, and secondary contamination?
29. Were established triage protocols followed? Were there sufficient personnel available to initiate triage?
30. What procedures were followed for treatment? Were they effectively conducted? Were they adequate to deal with the complex patient care issues confronting EMS personnel and the command staff?
31. Was the treatment rendered noted completely on the triage tags?
32. How was the medical monitoring of first responders accomplished?

**Homeland Security Exercise Evaluation Guide
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Task # VI-4: Decontaminate Patients at Incident Site	
Outcome: Victim Care	Location: Incident Site
Response Element: Fire and First Responders	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Contaminated or potentially contaminated, exposed or potentially exposed, and injured civilians, workers, or responders in the vicinity of the incident site, in the safety restricted area, or projected hazard area (wedge).</p> <p>Conditions: Time available; nature and extent of injury; agent type; extent of contamination by or exposure to the chemical agent; availability of decontamination and emergency medical teams and equipment; availability of an established decontamination site in the contamination reduction (warm) zone; availability of communications equipment; and knowledge of local laws, memorandums of agreement/memorandums of understanding, plans, procedures, and regulations.</p> <p>Expected Outcomes: Effective decontamination or making the patient as clean as possible to reduce contamination to a level that is no longer a threat to the patient or the responder.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Don personal protective equipment (PPE). 2. Conduct gross decontamination at the decontamination station: <ol style="list-style-type: none"> a. Remove all patient clothing and belongings and secure b. Begin with the least aggressive decontamination methods, using warm water and soap. Wash exposed areas gently under a stream of water c. Decontaminate patient from the head down; prevent contamination of open wounds. Decontaminate exposed wounds and eyes before intact skin. Cover wounds with waterproof dressing after decontamination 3. Remove contaminants to the level that they are no threat to the patient or response personnel. 4. Isolate the patient to prevent the spread of any remaining contaminants and prepare patient for transport to a hospital. 5. Identify level of decontamination in patient history and identify (tag) the patient as decontaminated. 6. Coordinate transportation of victims to a hospital. <p>Consequences: No patients die or are permanently incapacitated as a result of gaps in victim care.</p> <p>Note: <i>These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

Homeland Security Exercise Evaluation Guide Operations-Based Exercises

Followup Analysis

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- ✓ If there is a difference, why?
- ✓ What is the impact of that difference?
- ✓ What should be learned from this?
- ✓ What corrective actions are recommended?

Initial Actions

1. What initial actions were taken to contain and control the crowd? Explain their effectiveness.
2. What alerted the responders to the need for emergency mass decontamination?
3. How was mass decontamination initiated? Was it effective?

Responder Protection

4. Were emergency medical services staff wearing appropriate level of PPE, based on the agent and conditions?
5. What actions were taken to minimize responder exposure to the victims' contaminants?
6. Were first responders contaminated by the victims? If so, how could this have been prevented?

Decontamination Procedures

7. What method of mass decontamination was used by the initial units on the scene?
8. To what extent was initial decontamination timely and effective?
9. What instructions were given to responders regarding the initial decontamination? To victims?
10. Who was present to direct the victims at the end of the decontamination corridor? What directions were given to the victims?
11. Why was each decontamination area placed where selected?
12. How were modesty and cultural considerations handled?
13. What provisions were made to secure and protect individuals' belongings?
14. Was the equipment adequate to perform the task?
15. How were the victims monitored to ensure thorough decontamination?
16. What decontamination solutions were used? Were they appropriate?
17. What provisions were made to cover and warm the victims after completing decontamination?
18. Were triage, treatment, and transport personnel available at the end of the decontamination corridor?
19. What equipment was used to scan the victims for residual contamination? Was equipment properly maintained?
20. To what extent was runoff a consideration? How were runoff considerations handled? What additional agencies were contacted concerning runoff issues?

Communication and Coordination

21. Did the first responders obtain any agent type information? How and to whom did they pass the information?
22. At what point were additional units called to assist in decontamination?
23. Where were the emergency antidotes staged during the exercise?
24. What information was given to the victims at the beginning and end of the decontamination corridor?
25. How were mutual-aid assets incorporated into the decontamination sector?
26. How did public health personnel serve as technical advisors for decontaminating victims?
27. Did public health personnel confer with the appropriate agencies regarding decontamination issues? With whom did they confer?

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Task # VI-5: Screen Individuals for Agent Contamination	
Outcome: Victim Care	Location: In Community/ Incident Site
Response Element: EMS	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Evacuation order for the population at risk, selected evacuation routes, and defined predicted hazard area.</p> <p>Conditions: Availability of communications systems; availability of personnel, equipment, and material; and conditions at variance with plans and procedures.</p> <p>Expected Outcomes: Potentially exposed persons are identified and screened for decontamination.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Select evacuee screening locations according to established plans and procedures. 2. Set up the screening location according to local plans and procedures, paying special attention to contamination and access control measures. 3. Conduct differential screening of evacuees by determining: <ol style="list-style-type: none"> a. Whether they present signs and symptoms of agent exposure b. Whether they have been evacuated from the predicted hazard area c. Their time of departure from the predicted hazard area (to determine if they have traveled through the plume) d. Whether they desire decontamination even though they have not or are not likely to have been exposed 4. Escort exposed evacuees (those presenting signs and symptoms) directly to the decontamination area. 5. Direct potentially exposed evacuees and others desiring decontamination to a holding area. 6. Direct all other evacuees to reception centers or shelters. 7. Review rosters to assure continuous, 24-hour operation and assign screening personnel to tasks and shifts where they are most needed. Provide a transition or situation briefing to later shift personnel before they begin work. 8. Provide reports to the Emergency Operations Center (EOC). <p>Consequences: Exposed or potentially exposed evacuees are not incapacitated as a result of lapses in care.</p> <p><i>Note: These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

Homeland Security Exercise Evaluation Guide Operations-Based Exercises

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- ✓ What corrective actions are recommended?

1. Were emergency medical services (EMS) personnel able to quickly and accurately recognize the type of agent based on presenting signs and symptoms?
2. What equipment was exercised to identify the agent?
3. Were EMS personnel able to accurately identify agents based on clusters of calls?
4. Were EMS personnel able to coordinate with law enforcement, health care, and fire and rescue?
5. Was specific equipment lacking that could have been useful in agent identification?
6. Once the agent was identified, who was notified, and how was notification made?

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Task # VI-6: Decontaminate Individuals at Screening Site	
Outcome: Victim Care	Location: In Community
Response Element: EMS	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Unprotected, exposed or potentially exposed, ill, or injured people; screened evacuees requiring or requesting decontamination; and established decontamination site.</p> <p>Conditions: Time available; nature and extent of illness and/or injury; agent type; extent of exposure to the agent; availability of decontamination and emergency medical teams and equipment; availability of clean clothing; availability of communications equipment; and knowledge of local laws, memorandums of agreement/memorandums of understanding, plans, procedures, and regulations.</p> <p>Expected Outcomes: Contamination is reduced to a level that is no longer a threat to the patient or the responder.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Set up decontamination areas according to local plans and procedures, 2. Don appropriate personal protective equipment (PPE) before starting operations. 3. At the holding area, segregate evacuees by exposure, symptoms, and gender. 4. Prepare individuals for decontamination; secure clothing and other removed personal items. 5. Conduct gross decontamination of victims, including secondary decontamination for injured victims. 6. Remove contaminants to the level that they are no longer a threat to the patient or response personnel. Rescreen and decontaminate again as necessary. 7. Isolate the patient from the environment. Tag patient as decontaminated. Provide clean clothing. Coordinate transportation of victims to a hospital or shelter. 8. Review rosters to assure continuous, 24-hour operation and to assign decontamination personnel to tasks and shifts where they are most needed. Provide a transition or situation briefing to later shift personnel before they begin work. <p>Consequences: No patients die or are permanently incapacitated as a result of lapses in victim care; responders are protected from exposure to effects of a chemical agent.</p> <p>Note: These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

Homeland Security Exercise Evaluation Guide Operations-Based Exercises

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Decontamination Areas

1. What was the decision process to designate and establish the selected decontamination area?
2. Were there problems with the decontamination area setup (e.g., inside, outside, adequate size)?
3. How was information regarding decontamination location disseminated?
4. How was the decontamination area made safe for use (e.g., negative ventilation used, air ducts covered with HEPA filters, environmental readings taken)?
5. How were contaminant control measures addressed at the decontamination areas?
6. Did the area provide sufficient supplies of water, fuel, and electricity?
7. Describe the adequacy of training and equipping staff assigned to the decontamination area. Identify other requirements for them to operate effectively in a chemical environment.

Responder Protection

8. Did personnel employ self-protection measures, both equipment-based and evasive, quickly and appropriately?
9. Did the responders select the appropriate PPE for incident, based on available information?
10. Were the chemical agents identified quickly and accurately?
11. Were the chemical agents' properties and risk to health identified properly?
12. What actions were taken to minimize responder exposure to the victims' contaminants?

Decontamination Preparation

13. How were victims segregated and prioritized for decontamination (e.g., by exposure or potential exposure)?
14. Was decontamination conducted for victims who were not exposed? How were victims' personal belongings handled (e.g., automobiles)?
15. How did evacuees know how to collect their property?
16. Describe process for victim preparation decontamination.
17. What provisions were made to secure and protect individuals' belongings? How was collection of patient clothing/eyeglasses managed?
18. How were modesty and cultural considerations handled?
19. What information was given to the victims at the beginning and end of the decontamination corridor?

Decontamination Procedures

20. How were the victims monitored to ensure thorough decontamination?
21. Describe the decontamination process for an individual. Was the process conducted head down?
22. What decontamination solutions were used and where? Were the least aggressive methods used first (e.g., did crews start with just warm water and soap)? Under what circumstances were chemicals and mechanical methods introduced?
23. How were injured patients decontaminated? What actions were taken for wounds?
24. What provisions were made to cover and warm the victims after completing decontamination?
25. Were triage, treatment, and transport personnel available at the end of the decontamination corridor?
26. How effective was decontamination for ambulatory and nonambulatory patients?

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Task # VI-7: Treat Patients at the Screening Site	
Outcome: Victim Care	Location: In Community (Screening Site)
Response Element: EMS	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Unprotected, exposed or potentially exposed, or ill civilians, workers, or responders in the predicted hazard area.</p> <p>Conditions: Time available; nature and extent of injury or illness; agent type; extent of exposure to the chemical agent; availability of emergency medical teams and equipment; availability of communications equipment; and knowledge of local laws, memorandums of agreement/memorandums of understanding, plans, procedures, and regulations.</p> <p>Expected Outcomes: Patients are stabilized and taken to a hospital in time to prevent death or permanent incapacitation.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Don personal protective equipment (PPE) and take other measures to protect medical providers from danger due to contamination, bloodborne pathogens, bodily fluids, etc. 2. In a multiple patient situation, begin proper triage procedures. 3. Conduct primary patient assessment while simultaneously conducting decontamination (if needed). Assign highest priorities to life-threatening issues (airway, breathing, circulation) and decontamination. Except for the administration of antidotes, perform invasive procedures only in uncontaminated areas. 4. Once life-threatening issues have been addressed, and as conditions allow, direct attention to secondary patient assessment and establish patient history. 5. If not already done, arrange for and coordinate transportation of victims to a hospital. 6. Using good medical practice, treat presenting signs and symptoms as appropriate and when conditions allow. 7. Reassess the patient continuously because of possible latent physiological effects of agent exposure. 8. Delay prophylactic measures until the patient is decontaminated. 9. Prepare victim for transport to hospital. 10. Provide patient tracking information in accordance with established protocols and procedures. <p>Consequences: No patients die or are permanently incapacitated as a result of lapses in victim care; and responders are protected from exposure to effects of a chemical agent.</p> <p>Note: <i>These are "typical" steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction's plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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Followup Analysis

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- ✓ What was supposed to happen?
- ✓ If there is a difference, why?
- ✓ What is the impact of that difference?
- ✓ What should be learned from this?
- ✓ What corrective actions are recommended?

Responder Preparation

1. Were incoming emergency medical services (EMS) properly protected for the type of incident? Explain.
2. Was treatment conducted within the capability of the PPE?
3. Were EMS personnel properly equipped with necessary tools to treat victims (e.g., suction, bag valve masks)?
4. What preestablished procedures were used to mobilize the necessary equipment and personnel?
5. Did EMS personnel become contaminated and become victims? How could this have been prevented?

Victim Care

6. How were treatment and triage areas for the victims designated? Discuss their size and location in relation to the transportation area and overall suitability.
7. What actions did medical personnel take to provide the earliest possible intervention, including basic life support?
8. How was need for treatment prioritized?
9. Were established triage protocols followed?
10. Were there sufficient personnel available to initiate triage?
11. What procedures were followed for treatment? Were they effectively conducted? Were they adequate to deal with the complex patient care issues confronting EMS personnel and the command staff?
12. How were treated patients reassessed?
13. How were the "worried well" handled?
14. What provisions were made for protection of victims from the press/media?
15. Was the treatment rendered noted completely on the triage tags?
16. How was the medical monitoring of first responders accomplished?
17. What did EMS do with the materials to be disposed?

Communication and Coordination

18. What assessments were made regarding the need for additional medical resources?
19. Were communications problems encountered between the EMS sectors and other operational sectors (e.g., HazMat)?
20. How were patient data tracked? Were they passed on to the receiving hospital and the Emergency Operations Center?
21. How was coordination between agencies accomplished (face to face, radio)?
22. What actions were taken to arrange for transportation?

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Task # VI-8: Report Victim Status to EOC/Hospital	
Outcome: Victim Care	Location: Incident Site/In Community
Response Element: EMS	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Location and condition of civilians, workers, and responders in the safety restricted area or projected hazard area who are injured, ill, or exposed to a chemical agent.</p> <p>Conditions: Time available to make reports while treating victims; nature and extent of injuries and decontamination; availability of communications equipment and knowledge of local laws, memorandums of agreement/memorandums of understanding, plans, procedures, and regulations.</p> <p>Expected Outcomes: The Emergency Operations Center (EOC)/hospital has current information about the location and status of all victims of injury or agent exposure.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Make initial reports to the EOC/hospital about the location and status (extent of injury and exposure, and care being provided) of all injured or exposed persons. 2. Make regular update reports to EOC/hospital (from the incident site or screening site) about the location and status (extent of injury and exposure, and care being provided) of all injured or exposed persons. 3. Make regular update reports to EOC/hospital about delays in care for victims, and recommend or request assistance to remedy the delay. <p>Consequences: No victims of injury or agent exposure die or are permanently incapacitated as a result of higher priorities given to other response activities.</p> <p>Note: <i>These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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- ✓ What was supposed to happen?
- ✓ If there is a difference, why?
- ✓ What is the impact of that difference?
- ✓ What should be learned from this?
- ✓ What corrective actions are recommended?

1. How were appropriate hospitals identified?
2. Were tracking procedures, including tagging and identifying, demonstrated?
3. What was the process for releasing public information to the health care community?
4. How often did the dissemination of information to hospitals and urgent care centers occur? What information was provided?
5. What actions were taken to ensure patient data were completely and accurately recorded and passed on to the receiving hospital and the EOC?

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Task # VI-9: Prepare to Receive Patients	
Outcome: Victim Care	Location: Hospital
Team: Hospital Staff	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Advance notice of the arrival of injured, ill, or exposed civilians, workers, or responders who were at the incident site or in the safety restricted area or projected hazard area.</p> <p>Conditions: Time available; nature and extent of reported injuries or illness; treatment by emergency medical services (EMS) and decontamination; availability of emergency medical staff; availability of appropriate medical equipment and supplies; availability of communications equipment; and knowledge of local laws, memorandums of agreement/memorandums of understanding, plans, procedures, and regulations.</p> <p>Expected Outcomes: The hospital is prepared for the arrival and treatment of patients.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Receive notification that an incident has occurred and requests to receive patients. 2. Notify all services involved in the plan and mobilize the emergency department. 3. If any incoming patients were potentially contaminated or exposed to a chemical agent, implement the hazardous material plan for the facility: <ol style="list-style-type: none"> a. Prepare the decontamination and treatment areas b. Select personal protective equipment (PPE) and prepare the triage and decontamination teams to receive patients 4. Notify patient transports of any special approach or entrance to the hospital. 5. Receive initial and followup patient information from the incident site and patient transports. 6. Make arrangements to identify and isolate potentially contaminated patients that present themselves to the hospital unannounced or outside of regular EMS channels. 7. Report the status of requests to receive patients and the state of preparedness to accommodate the requests to the local medical services coordinator. <p>Consequences: No patients die or are permanently incapacitated as a result of gaps in victim care.</p> <p>Note: <i>These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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- ✓ If there is a difference, why?
- ✓ What is the impact of that difference?
- ✓ What should be learned from this?
- ✓ What corrective actions are recommended?

1. What actions were taken to provide security to the hospital? Discuss internal capabilities and dependency on and availability of outside support.
2. How were nonincident-related patients isolated and relocated? Discuss the decision process, external coordination, and support required.
3. How did the staff initiate proper notifications (e.g., emergency department staff, hospital administration, public relations, local walk-in providers)?
4. What means were used to conduct external communication and coordination (e.g., HazMat, Emergency Operations Center [EOC], poison control)? Discuss how the procedures affected the response effort.
5. How was information disseminated within the hospital?
6. How are interhospital communications anticipated to occur? Is this type of coordination anticipated to ensure critical technical and medical information is shared between providers?
7. What information did the EOC and other external policymakers require from the hospital on a recurring basis? Discuss the capability of the hospital to provide this in a timely manner.
8. What level of PPE was worn by the hospital staff?
9. Was the dress-out area in close proximity to the decontamination sector, adequate in size, and effectively organized?
10. What medical monitoring was done before and after the staff used PPE? Was inclusion/exclusion criteria used to determine who can get dressed?
11. Were there adequate amounts and sizes of proper PPE for the staff to wear? For how many staff rotations?
12. Did the staff don and doff the PPE properly? How long did personnel remain in PPE?
13. Were problems encountered during the staff use of PPE?
14. Were the staff able to communicate effectively with one another and patients while wearing PPE (e.g., radios, public address system, white boards)?

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Task # VI-10: Transport Patients to Hospital	
Outcome: Victim Care	Location: In Community
Response Element: EMS	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Contaminated or potentially contaminated, exposed or potentially exposed, and injured or ill civilians, workers, or responders who have been treated at or near the incident site.</p> <p>Conditions: Time available; nature and extent of injury or illness; nature and extent of treatment and decontamination; availability of emergency medical teams and transport equipment; availability of communications equipment; and knowledge of local laws, memorandums of agreement/memorandums of understanding, plans, procedures, and regulations.</p> <p>Expected Outcomes: Patients are taken to a hospital in time to prevent death or permanent incapacitation; vehicle, crew, and emergency medical services (EMS) personnel are returned to service.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Coordinate patient surface or air transport to the hospital. 2. If patient is to be directly transported to a hospital, coordinate patient admission in accordance with facility procedures. 3. Prepare the transport vehicle. If practical, drape surfaces and remove all nonessential equipment from the transport vehicle. 4. Don personal protective equipment. 5. Before placing patient in the transport vehicle, ensure the patient has been decontaminated as appropriate and wrapped to prevent cross-contamination. 6. Coordinate with the Emergency Operations Center (EOC) to ensure that the patient transfer will be via a safe route, and will be expedited through any traffic control points and access control points that have been set up. 7. Transport patient to the designated hospital. Continue appropriate treatment during transfer and transport. Provide treatment and patient history updates to the receiving hospital. 8. Upon arrival at the hospital, park the ambulance in an area away from the emergency department or at an area designated by the facility. Do not bring a patient into the hospital until permission is received from the hospital staff. 9. After unloading the patient, check with the hospital to determine where the transport vehicle can be safely decontaminated so the vehicle can be returned to service. 10. As appropriate, decontaminate exposed vehicle, crew, and EMS personnel. <p>Consequences: No patients die or are permanently incapacitated as a result of lapses in victim care.</p> <p>Note: <i>These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

Homeland Security Exercise Evaluation Guide Operations-Based Exercises

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- ✓ What corrective actions are recommended?

Communication and Coordination

1. Was a transport officer appointed and identified? Were sufficient resources available for transport?
2. Did the transport officer perform his or her role effectively?
3. Did the EMS personnel conducting transport coordinate with health care, HazMat, and facilities?
4. How did the transportation officer organize the transportation sector?
5. What coordination occurred among the transportation, evacuation, and loading sectors? Describe its adequacy and highlight areas needing further refinement.
6. How did the transportation officer determine what hospitals would receive patients?
7. Were maps, special instructions, or escorts provided to transport teams going to hospitals with which they might be unfamiliar?
8. Were alternative transportation vehicles (e.g., buses and vans) used effectively?
9. Did the transportation officer use a preprinted log to record patient destination information?
10. Was pertinent patient destination information shared with the Incident Commander?

Transportation Procedures

11. Did the EMS personnel transport the patients in a safe and timely manner?
12. Did the EMS personnel transport patients to the appropriate receiving or transfer facility?
13. How were appropriate transportation corridors identified and utilized?
14. How were patients monitored during transportation?
15. Were tracking procedures, such as identification and tagging, demonstrated?
16. Were basic and advanced life support units easily identifiable?
17. Were transport assets adequately staffed with trained EMS personnel?

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Task # VI-11: Decontaminate Patients at Hospital	
Outcome: Victim Care	Location: Hospital
Response Element: Hospital Staff	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Arrival of contaminated or potentially contaminated, exposed or potentially exposed, injured, ill, or exposed civilians, workers, or responders who were at the incident site or in the safety restricted area or projected hazard area.</p> <p>Conditions: Time available; nature and extent of reported injuries or illness; previous treatment and decontamination; availability and completeness of patient history documentation; availability of emergency medical staff; availability of appropriate medical equipment and supplies; availability of communications equipment; and knowledge of local laws, memorandums of agreement/memorandums of understanding, plans, procedures, and regulations.</p> <p>Expected Outcomes: Effective decontamination, making the patient as clean as possible, to reduce contamination to a level that is no longer a threat to the patient or the medical staff.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Prepare the staging area to receive, treat, and monitor incoming patients. 2. Don personal protective equipment (PPE). 3. Meet the ambulance or transport vehicle upon arrival and begin triage. 4. Remove and secure personal belongings. 5. Conduct gross decontamination at the decontamination station. 6. Remove contaminants to the level that they are no threat to the patient or response personnel. 7. Isolate the patient to prevent the spread of any remaining contaminants and prepare patient for transport to a hospital. 8. Identify level of decontamination in patient history and identify (tag) the patient as decontaminated. 9. Review patient history; assess patient's condition (note type and quantity of antidote administered and the method and extent of decontamination). 10. If patient comes directly from the hazard area and has not previously been decontaminated, have the decontamination team perform gross and secondary decontamination before the patient enters the hospital. <p>Consequences: No patients die or are permanently incapacitated as a result of lapses in victim care.</p> <p>Note: <i>These are "typical" steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction's plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

Homeland Security Exercise Evaluation Guide Operations-Based Exercises

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- ✓ If there is a difference, why?
- ✓ What is the impact of that difference?
- ✓ What should be learned from this?
- ✓ What corrective actions are recommended?

Decontamination Preparation

1. Did the health care/hospital personnel select the appropriate PPE for the incident based on available information?
2. Was the hospital prepared to receive patients needing decontamination and medical treatment?

Decontamination Procedures

3. Was patient transfer between emergency medical services and hospital medical emergency response staff adequately performed? What directions were given to patients?
4. Was patient marking, identifying, and tracking performed?
5. What method of patient decontamination did the hospital medical emergency response staff use?
6. To what extent was initial decontamination timely and effective?
7. What instructions were given with the initial decontamination?
8. Did the hospital obtain any additional agent information? How and to whom did they pass the information?
9. Was the layout of the patient decontamination area consistent with the emergency response plan?
10. What provisions were made to secure and protect patients' belongings?
11. What information was given to the victims at the beginning and end of the decontamination corridor?
12. How were the victims monitored to ensure thorough decontamination?
13. Was the equipment adequate to perform the task?
14. What actions were taken to minimize responder exposure to the victims' contaminants? Were hospital staff contaminated by the victims? If so, how could this have been prevented?
15. What decontamination solutions were used? Were they appropriate?
16. What provisions were made to cover and warm the victims after completing decontamination?
17. Were triage, treatment, and transport personnel available at the end of the decontamination corridor?
18. What equipment was used to scan the patient for residual contamination?
19. How effective was decontamination for ambulatory and nonambulatory patients?
20. How was the facility decontaminated and how was it certified as clear of any contamination?

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Task # VI-12: Treat Patients at Hospital	
Outcome: Victim Care	Location: Hospital
Response Element: Hospital Staff	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Arrival of injured, ill, or exposed civilians, workers, or responders who were at the incident site or in the safety restricted area or projected hazard area.</p> <p>Conditions: Time available; nature and extent of reported injuries or illness; previous treatment and decontamination; availability and completeness of patient history documentation; availability of emergency medical staff; availability of appropriate medical equipment and supplies; availability of communications equipment; and knowledge of local laws, memorandums of agreement (MOA)/memorandums of understanding (MOU), plans, procedures, and regulations.</p> <p>Expected Outcomes: Patients are given appropriate medical treatment consistent with their injuries, illness, or extent of exposure. Patients are stabilized and admitted, transferred, or discharged as appropriate.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Don appropriate personal protective equipment (PPE). 2. Meet the ambulance or transport vehicle upon arrival and begin triage. 3. Begin proper triage procedures at the emergency personal decontamination station. 4. Conduct primary patient assessment/decontamination (if needed). 5. Treat presenting signs and symptoms according to good medical practice. 6. Address life-threatening issues and establish patient history. 7. Review patient history; assess patient's condition (note type and quantity of antidote administered and the method and extent of decontamination). 8. Treat signs and symptoms; continually assess the patient. 9. If treatment required exceeds the hospital's capability, refer patient to another hospital. 10. Admit, transfer, or discharge patients. 11. Provide patient tracking information to the Emergency Operations Center (EOC). <p>Consequences: No patients die or are permanently incapacitated as a result of lapses in victim care.</p> <p>Note: <i>These are "typical" steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction's plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

Homeland Security Exercise Evaluation Guide Operations-Based Exercises

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Hospital Preparation

1. Did health care/hospital personnel use appropriate PPE?
2. Was PPE used consistently for the same hazards?
3. Was operational data requested and obtained in a timely manner (e.g., beds, ventilators, pharmaceuticals)?

Hospital Coordination and Communication

4. Does the hospital use a formal incident management system?
5. Were command officers physically identified?
6. Were personnel familiar with their assigned areas of responsibility? Did the Incident Command System work effectively?
7. Were staff used effectively in each operational area?
8. Were long-term operational issues addressed?
9. Were actions taken to alter the staff rotation policy to meet the demands of the incident?
10. Does the hospital have a published weapons of mass destruction emergency preparedness plan? Is it regularly exercised? What adjustments could be made to improve procedures?
11. Were there evacuation plans for the relocation of patients who were already admitted? How is the evacuation coordinated?
12. How were patient records maintained? Were patients effectively tracked through the system?
13. What procedures were followed to ensure the hospital's status and appropriate victim data were shared with outside agencies? Discuss the efficiency of the system and recommended systematic and equipment improvements.

Patient Treatment

14. Was a proper diagnosis developed early in the treatment of the victims? What could have been done to expedite these efforts?
15. Was treatment of the patients appropriate and on a timely basis? Was the correct protocol used?
16. Was triage done quickly and accurately? Were collaboration and communication demonstrated between health care/hospital and first responder personnel?
17. How was patient clothing collected and managed?
18. Was evidence obtained and or preserved without compromising the life and health of the patient?
19. Was the hospital staff cognizant of requirements to support crime scene evidence recovery?

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Task # VI-13: Track Patient Status/Location	
Outcome: Victim Care	Location: EOC/Hospital
Team: EOC Staff/Hospital Staff	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Reported information about the location and status of civilians, workers, or responders in the safety restricted area or projected hazard area who are ill, injured, or exposed to a chemical agent.</p> <p>Conditions: Availability of communications equipment and knowledge of local laws, memorandums of agreement/memorandums of understanding, plans, procedures, and regulations.</p> <p>Expected Outcomes: The Emergency Operations Center (EOC) and hospital are satisfied that patients' identities are confirmed, that their medical needs are taken care of, and that accurate information is available to notify patients' next-of-kin. No patient's identity or information is mistakenly released in reports or news releases.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Receive initial and followup reports (e.g., from emergency medical services (EMS) or the hospital) about the location and status (extent of injury and exposure, and care being provided) of all persons who are ill, injured, or exposed as a result of the incident. 2. Postpatient information to status boards and brief senior officials in accordance with local procedures. 3. Periodically solicit updates on patients if they are not forthcoming from EMS. 4. Identify delays in patient care. 5. Coordinate with county and State health department/medical services coordinator and exchange information regarding the status and location of patients. 6. Ensure that the identities of patients are positively confirmed by a medical professional or a supervisor before next-of-kin notifications are made or reports or news releases are made that identify patients by name. <p>Consequences: No victims of injury or agent exposure die or are permanently incapacitated as a result of higher priorities given to other response activities; no names of injured or deceased persons are released to families or the news media without positive confirmation.</p> <p>Note: <i>These are "typical" steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction's plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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- ✓ What happened?
- ✓ What was supposed to happen?
- ✓ If there is a difference, why?
- ✓ What is the impact of that difference?
- ✓ What should be learned from this?
- ✓ What corrective actions are recommended?

1. What actions were taken to ensure patient data were completely and accurately recorded and passed on to the receiving hospital and the EOC?
2. How was information disseminated within the hospital?
3. How are interhospital communications anticipated to occur? Is this type of coordination anticipated to ensure that critical technical and medical information is shared between providers?
4. What information did the EOC and other external policymakers require from the hospital on a recurring basis? Discuss the capability of the hospital to provide this in a timely manner.
5. Are patients monitored during treatment and residence?
6. How was patient marking, identifying, and tracking performed?
7. Are active (trend-tracking) and passive (cases reported from physicians and hospitals) surveillance systems in place and functioning appropriately, benchmarked against baselines?

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Task # VI-14: Collect and Decontaminate Human Remains	
Outcome: Victim Care	Location: Incident Site/In Community
Response Element: EMS/Medical Examiner	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Civilian, worker, or responder fatalities in the incident area or projected hazard area.</p> <p>Conditions: Availability of victim recovery teams; availability of decontamination equipment and teams; availability of graves registration/mortuary facilities; knowledge of local laws, memorandums of agreement/memorandums of understanding, plans, procedures, and regulations.</p> <p>Expected Outcomes: Remains are treated with dignity and respect at all times, and are made available to the next-of-kin.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Ensure that remains are not moved until authorized by a designated official, unless movement is required to prevent destruction of the body or to protect life, safety, or health. 2. If contamination is suspected, tag remains and move to a decontamination site when movement is authorized. 3. Remove, monitor, and decontaminate (if possible without destruction) the personal effects of the deceased; segregate by contamination status and secure. Make special provisions for personal effects that cannot be decontaminated without being destroyed. 4. If the remains are identified as potentially contaminated or exposed, thoroughly decontaminate the remains using the same procedures as used for exposed persons who were not fatalities. Make a record of the methods used for decontamination and confirm that decontamination is complete. 5. Contain remains and properly store pending arrangements for transfer to a mortuary or other appropriate facility. 6. Report location and status of remains to the Emergency Operations Center (EOC). <p>Consequences: Human remains can be interred in accordance with the wishes of the next-of-kin.</p> <p>Note: <i>These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

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- ✓ What was supposed to happen?
- ✓ If there is a difference, why?
- ✓ What is the impact of that difference?
- ✓ What should be learned from this?
- ✓ What corrective actions are recommended?

Responder Protection

1. Did personnel implement established procedures for handling contaminated remains, including the use of personal protective equipment (PPE)? What specifically?

Handling of Remains

2. What steps were implemented to identify victims?
3. What procedures were implemented for handling personal effects?
4. How were religious and cultural considerations handled?
5. What procedures were followed regarding decontamination of deceased before they were taken to the morgue?
6. Were personal effects decontaminated? What method was used to determine that personal effects were adequately decontaminated?
7. Were personnel, equipment, and vehicles decontaminated after handling contaminated remains? What method was used to determine whether personnel and equipment were adequately decontaminated?
8. Were temporary morgue areas established? What and where specifically?
9. Was the morgue sector identifiable, secure, and adequately staffed?
10. Who was in charge of the morgue sector?
11. How were the bodies transported to the morgue? Were there sufficient transportation resources? If not, what solution was implemented?
12. Did the medical examiner (ME)/coroner's office have adequate storage facilities to handle the deceased? What specifically? If not, what remedy was used?
13. Did the ME/coroner implement appropriate procedures for preserving remains for evidentiary purposes? What specifically?

Communication and Coordination

14. Did the local disaster plan adequately address fatality management?
15. What role did the ME/coroner play?
16. Did the ME/coroner coordinate with the incident command HazMat team? How was liaison established with the EOC?
17. Did the ME/coroner request assistance for mutual aid or disaster mortuary operational response? How were these agencies used?
18. Did the ME/coroner have a coordinated plan with the hospitals for the storage/pickup of contaminated bodies? Were the hospitals aware of the protocols necessary for storing contaminated bodies?
19. What documentation was prepared regarding deceased personnel? Were different procedures/considerations given to deceased first responders?

**Homeland Security Exercise Evaluation Guide
Operations-Based Exercises**

Task # VI-15: Coordinate Disposition of Human Remains	
Outcome: Victim Care	Location: EOC
Response Element: EOC Staff/Medical Examiner	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Confirmed fatalities from the projected hazard area that have been exposed or potentially exposed to a chemical agent.</p> <p>Conditions: Availability of communications equipment and knowledge of local laws, memorandums of agreement/memorandums of understanding, plans, procedures, and regulations.</p> <p>Expected Outcomes: Legal requirements for handling remains are met; next-of-kin receive assistance with claiming the remains of the deceased.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Receive reports of fatalities from field locations, record information, and inform the emergency services coordinator/senior elected official or designated representative. 2. Contact coroner/medical examiner (ME) to determine whether an investigation as to cause of death will be required, if the coroner/ME will require custody of the remains, and if the remains can be moved. 3. Track decontamination status and location of remains and personal effects. 4. Confirm that the victims are deceased, confirm their identity, and report the information to the Emergency Operations Center (EOC). 5. If identity cannot be immediately determined, move remains to an ME's or coroner's facility for later identification. 6. Determine next-of-kin wishes for movement of remains to a mortuary or other appropriate facility (part of the notification process). <p>Consequences: Human remains can be turned over to the next-of-kin.</p> <p><i>Note: These are "typical" steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction's plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

**Homeland Security Exercise Evaluation Guide
Operations-Based Exercises**

Followup Analysis

*Upon completion of the day's exercise play, evaluators should compile their observations into a chronological narrative of events, describing outcomes achieved or not achieved. For any outcomes that are not achieved, the evaluator should analyze the sequence of events and attempt to determine the cause using the questions **at right**. The questions **below** may further help determine root cause.*

- ✓ What happened?
- ✓ What was supposed to happen?
- ✓ If there is a difference, why?
- ✓ What is the impact of that difference?
- ✓ What should be learned from this?
- ✓ What corrective actions are recommended?

1. Were arrangements made for primary and temporary morgue facilities?
2. What provisions were made to augment capabilities through mutual support or Federal and State assistance?
3. What documentation was prepared regarding deceased personnel? Were there different procedures/considerations given to deceased first responders?
4. Was the disposition of remains coordinated with law enforcement agencies?

**Homeland Security Exercise Evaluation Guide
Operations-Based Exercises**

Task # VI-16: Notify Next-of-Kin	
Outcome: Victim Care	Location: EOC/Hospital
Response Element: EOC Staff/Hospital Staff	Jurisdiction:
Evaluator:	Contact #:

Task Information	Notes
<p>Inputs: Confirmed information about the identity, location, and status of people who are fatalities or were ill, injured, or exposed to a chemical agent.</p> <p>Conditions: Time available; nature and extent of reported injuries or illness, treatment by EMS, and decontamination; availability of notification staff; availability of communications equipment; and knowledge of local laws, memorandums of agreement/memorandums of understanding, plans, procedures, protocols, and regulations.</p> <p>Expected Outcomes: The next-of-kin of fatalities or ill, injured, and exposed persons are promptly notified and their immediate needs are supported. Information about the victims or their next-of-kin are not reported or released unless authorized.</p> <p>Typical Steps:</p> <ol style="list-style-type: none"> 1. Collect all information needed to contact the next-of-kin. 2. Ensure that an individual trained in next-of-kin notification contacts the next-of-kin and provides them with essential information about the victims. 3. Follow appropriate limitations on releasing the identity of the victims and/or the next-of-kin both prior to and following the notification. <p>Consequences: The next-of-kin of victims learn about the location and status of the victims from the appropriate source first, with due consideration for their special circumstances. The privacy of victims and their next-of-kin is respected.</p> <p><i>Note: These are “typical” steps that you might expect to see a player carry out when performing this task. Please consult the specific jurisdiction’s plans and procedures for actual requirements.</i></p>	<p><i>Record time task starts and is completed. Describe any actions that appear to significantly help or impede achievement of the outcome.</i></p>

Homeland Security Exercise Evaluation Guide Operations-Based Exercises

Followup Analysis

*Upon completion of the day's exercise play, evaluators should compile their observations into a chronological narrative of events, describing outcomes achieved or not achieved. For any outcomes that are not achieved, the evaluator should analyze the sequence of events and attempt to determine the cause using the questions **at right**. The questions **below** may further help determine root cause.*

- ✓ What happened?
- ✓ What was supposed to happen?
- ✓ If there is a difference, why?
- ✓ What is the impact of that difference?
- ✓ What should be learned from this?
- ✓ What corrective actions are recommended?

1. Were protocols in place to ensure privacy?
2. Who is responsible for the notification of the next-of-kin?
3. Were staff available to assist with family notification and to provide other essential information about the victims?
4. Were procedures in place to describe how information about the victims and/or the next-of-kin would be released?

APPENDIX D

Sample After Action Report

SAMPLE AFTER ACTION REPORT

Executive Summary

The Executive Summary provides a brief overview of the exercise, major strengths demonstrated during the exercise, and areas that require improvement.

Homeland security preparedness involves a cycle of outreach, planning, capability development, training, exercising, evaluation, and improvement. Successful exercises lead to an ongoing program of process improvements. This report is intended to assist agencies striving for preparedness excellence by analyzing exercise results and:

- ◆ Identifying strengths to be maintained and built upon.
- ◆ Identifying potential areas for further improvement.
- ◆ Recommending exercise followup actions.

The suggested actions in this report should be viewed as recommendations only. In some cases, agencies may determine that the benefits of implementation are insufficient to outweigh the costs. In other cases, agencies may identify alternative solutions that are more effective or efficient. Each agency should review the recommendations and determine the most appropriate action and the resources needed (time, staff, funds) for implementation.

The Strategic National Stockpile (SNS; formerly the National Pharmaceutical Stockpile [NPS]) held a 2-day full-scale weapons of mass destruction (WMD) exercise June 17–18, 2003. The exercise was cosponsored by the State Department of Public Health (DPH) and the State Emergency Management Agency (EMA) with assistance from the U.S. Department of Health and Human Services, Centers for Disease Control and Prevention (CDC), and the U.S. Department of Homeland Security, Office for Domestic Preparedness (DHS/ODP). This exercise was the State's first using newly developed procedures to receive, distribute, and dispense SNS supplies in response to a statewide bioterrorism incident.

The exercise included CDC delivery of mock SNS supplies to a central receiving warehouse in the capital city. The participating agencies coordinated the unloading, reapportionment, and distribution of those supplies to two actual and four simulated distribution points. The Capital County Public Health Department activated a temporary Dispensing Site and conducted emergency dispensing operations for 5 hours, treating 600 role-playing patients.

Strengths

Key strengths identified during this exercise include the following:

- ◆ The participants of all agencies at the State and local levels demonstrated excellent teamwork.
- ◆ A new cooperative partnership was established between DPH and EMA.
- ◆ The planning forethought demonstrated by State and local agencies in designing their SNS receipt, distribution, and dispensing procedures was excellent.
- ◆ The participating agencies successfully demonstrated an initial capability to manage a statewide bioterrorism incident including the supply and operation of a temporary dispensing clinic.

- ◆ The participants demonstrated a positive attitude and the ability to recognize and react to shortfalls in the new SNS plans as they were uncovered and to smoothly adjust operations.

In addition, several successes of this exercise should be recognized, among them:

- ◆ This was the first major DPH exercise.
- ◆ This was the first test of the State's new SNS Standard Operating Procedures.
- ◆ This was the first joint DPH/EMA exercise.
- ◆ This was one of the Nation's first exercises to comprehensively test SNS request, delivery, redistribution, and dispensing operations in a single, near-real-time exercise.
- ◆ In response to the quality, scope, and scale of the exercise, CDC provided three SNS training packages rather than the usual single package, and it piggybacked a no-notice CDC SNS deployment exercise onto the State exercise.

Areas for Improvement

Through the exercise, several opportunities for improvement in the State's ability to respond to a bioterrorism incident were identified. Major recommendations include the following:

- ◆ Electronic emergency management information system access and training should be expanded to all State agencies and all counties in the State.
- ◆ State quarantine plans and procedures should be reviewed and enhanced.
- ◆ Communication between the State and county Emergency Operations Centers and the temporary SNS distribution network should be enhanced.
- ◆ Efficiency improvements should be made to the implementing procedures for the Receiving, Staging, and Storage (RSS) site and dispensing center.
- ◆ Improvements should be made to the dispensing center exterior security and to crowd control.

Planners should use the results of this exercise to forecast dispensing and treatment center locations and staffing requirements for a large-scale bioterrorism event requiring implementation of mass prophylaxis. Planners should consider scenarios to serve 1,000; 10,000; 100,000; and 1 million patients for contagious or noncontagious threats.

Subsequent exercises should test specific improvements instituted as a result of this exercise and should include a focus on public information measures. Planners should consider exercising the alternate RSS site should the primary site be unavailable in an emergency. Additional Dispensing Sites should be exercised to ensure that emergency prophylaxis measures can be instituted at key areas across the State. For cost effectiveness, planners should consider rotating Dispensing Site exercises across the State, with or without an SNS stockpile deployment exercise.

Chapter 1: Exercise Overview

The Exercise Overview describes the exercise, identifies the agencies/organizations that participated in it, and describes how it was structured and implemented. This information will be gathered in a database on the National Exercise Program and will be available for planning, scheduling, and evaluation purposes.

Exercise Name

Strategic National Stockpile Tabletop and Full-Scale Exercise

Duration

2 days

Exercise Date

June 17, 2003: Tabletop Exercise

June 17-18, 2003: Full-Scale Exercise

Sponsor

U.S. Department of Homeland Security (DHS)/Office for Domestic Preparedness (ODP)

Type of Exercise

Tabletop Exercise

Full-Scale Exercise

Funding Source (Agency Receiving Funding)

State Emergency Management Agency

Program

Homeland Security Exercise and Evaluation Program, State 03 Funding

Focus

Response

Recovery

Prevention

Other

Classification

Unclassified (U)

For Official Use Only (FOUO)

By Invitation Only (IO)

Scenario

Chemical release or threat (C)

Biological release or threat (B)

Radiological release or threat (R)

Nuclear detonation or threat (N)

Explosive detonation or threat (E)

- ___ Cyber (Y)
- ___ Other/Specify (O)

Location

Anytown, US

Participating Organizations

Cosponsors

Local Agencies

- ◆ County Emergency Management

State Agencies

- ◆ State Department of Public Health
- ◆ State Emergency Management Agency

Federal Agencies

- ◆ U.S. Department of Homeland Security, Office for Domestic Preparedness
- ◆ U.S. Department of Health and Human Services, Centers for Disease Control and Prevention

Contract Support (if applicable)

- ◆ (Name of Consulting Firm)

Participants

Federal Agencies

- ◆ Centers for Disease Control and Prevention
- ◆ U.S. Marshals Service

State Agencies

- ◆ Attorney General's Office
- ◆ Bureau of Radiological Health
- ◆ Department of Agriculture
- ◆ Department of Personnel
- ◆ Department of Public Health
- ◆ Department of Public Safety
- ◆ Department of Transportation
- ◆ National Guard
- ◆ Emergency Management Agency
- ◆ Department of Health and Human Services

Local Agencies

- ◆ Capital City Fire Department
- ◆ Capital City Police Department
- ◆ Capital City Public School District
- ◆ Capital County Health Department
- ◆ Suburban County 1 Health Department
- ◆ Suburban County 2 Health Department
- ◆ Capital County Air Quality Division
- ◆ Capital County Department of General Services
- ◆ Capital County Emergency Management Agency
- ◆ Capital County Health Department
- ◆ Capital County Sheriff's Office
- ◆ Suburban County 1 Emergency Management Agency
- ◆ Suburban County 1 Fire Department
- ◆ Suburban County 2 Emergency Management Agency
- ◆ Suburban County 2 Department of Public Health
- ◆ Other organizations
 - Various county public health department and hospital volunteer role players
 - American Red Cross
 - Downtown pharmacy
 - Central pharmacy
 - State Board of Medical Examiners
 - State Board of Pharmacy Examiners
 - State Motor Truck Association
 - State Pharmacy Association
 - State Veterans Affairs
 - State Visiting Nurse Services
 - Capital City Hospital
 - Central Medical Center
 - Capital County Health Advisory Board
 - Capital County Medical Society
 - Private Business Partners
 - University Hygienic Laboratory

International Agencies

- ◆ None

Number of Participants

- ◆ Players 136
- ◆ Victim role players 100
- ◆ Controllers 28
- ◆ Evaluators 28
- ◆ Observers 89

Exercise Overview

The Strategic National Stockpile (SNS) Full-Scale Exercise was designed to be a 2-day terrorism exercise. The goal of the exercise was to familiarize the necessary agencies with the protocols in place for deploying SNS supplies. Exercise play focused on the logistics associated with ordering, delivering, distributing, and dispensing SNS supplies.

The exercise was designed to:

1. Continue to solidify the partnership between the State and the Federal Government.
2. Assess the inter/intraagency coordination of Federal agencies, the State, and local jurisdictions during a public health crisis triggered by a terrorist attack using weapons of mass destruction (WMD).
3. Improve the operational readiness of the State emergency management system, and augment the capabilities of that system to respond to emergency situations.
4. Provide an opportunity for individual training and agency cross-training to achieve a high level of collective preparedness.
5. Assist the State in assessing, validating, and updating the State's Emergency Operations Plan (August 1999) and its Terrorism Incident Response Annex (January 2003), the State Emergency Operations Center Standard Operating Procedures (May 2000), and the SNS Standard Operating Procedures (March 2003).
6. Revisit and validate some of the lessons learned during the State's SNS Tabletop Exercise of January 2003.

Participants were advised that the exercise was an "evaluated practice," a format that allowed players to test their plans and procedures within a no-fault learning environment. At the same time, Evaluators, Controllers, and Simulators collected information to assess performance of critical tasks during exercise play using State and local plans and procedures.

The scope of play required activation of the State Emergency Operations Center (EOC), the Department of Public Health (DPH) Emergency Coordination Center (ECC), the Receiving, Staging, and Storage (RSS) Site, the RSS Forward Command Post (FCP), two State-operated Distribution Nodes, and a locally operated Dispensing Site.

Organizations that were not directly involved as participants at one of the exercise locations and actions that took place outside of these play locations were played by Controllers in the simulation cell (SIMCELL). From the SIMCELL, the Controllers injected messages and implemented the scenario through phone calls, faxes, and electronic messages.

The exercise consisted of a half-day tabletop exercise followed by a day-and-a-half full-scale exercise.

- ◆ **Tabletop Exercise:** Executive-level players from the Governor's Office, the State DPH, and the State Emergency Management Agency (EMA) participated in a tabletop component that exercised their decision-making procedures for requesting the SNS 12-Hour Push Package from the CDC. After the executive group had decided to request the SNS, players predesignated to staff the EOC, DPH ECC, and RSS FCP were notified through normal processes to report to their respective locations by 1230.
- ◆ **Full-Scale Exercise:** The State's SNS Receiving Team reported to the RSS and began preparing to receive the SNS supplies. At 1230, players at each site received an introductory briefing including exercise rules and the scenario background. Full-scale exercise play continued until 1630. Players returned to the EOC, DPH ECC, and RSS FCP at 0730 the next day. Players also activated two additional exercise locations: the Capital County Distribution Node and the Capital City Dispensing Site. Full-scale play continued until 1530 that afternoon, including 3 hours of dispensing supplies to role-players at the Capital City Dispensing Site.

Onsite hot washes were conducted at the EOC, DPH ECC, RSS FCP, and the Capital City Dispensing Site. Information from those hot washes was incorporated into the Exercise Evaluation Conference conducted on the day after the exercise.

Exercise Evaluation

The exercise was designed to provide participants with an opportunity to assess current capabilities to perform the critical tasks required to respond to a public health emergency resulting from a bioterrorist attack. Through assessment of those capabilities, participants identified strengths, weaknesses, and future training needs.

Evaluators were positioned at all exercise locations to observe and record exercise events, including player actions. Immediately following the conclusion of the tabletop segment and the termination of the entire exercise, Controllers at each location facilitated hot washes to capture observations and opinions from players. In addition, all participants were provided with exercise critique forms to record their observations of the exercise.

An Exercise Evaluation Conference was conducted on June 19, 2003. At the conference, Evaluator observations were analyzed, compared, and prioritized through a facilitated process with key players and Controllers to determine lessons learned, make recommendations for improvement actions, and identify key areas of emphasis for future planning.

In keeping with the no-fault nature of this exercise, the evaluation in this report examines the plans, procedures, and response systems used. As an evaluated practice, individual and team player performances were observed and documented to make recommendations for future improvements. Evaluator observations focus primarily on overall unit actions and the interaction between response units rather than on individual players.

Chapter 2: Exercise Goals and Objectives

The Exercise Goals and Objectives section lists the goals and objectives for the exercise. These are developed during the exercise planning and design phase and are used to define the scope and content of the exercise as well as the agencies and organizations that will participate.

The State established the following goals and corresponding objectives for this exercise. All exercise goals were demonstrated during exercise play and ultimately accomplished. Through demonstration of these objectives, the exercise players successfully simulated an effective response to scenario events. At the same time, exercise play revealed ways that future responses could be made more effective.

Goal 1: Test and improve the draft State Strategic National Stockpile (SNS) Standard Operating Procedures for a terrorist biological weapons of mass destruction (WMD) attack.

Objective 1: Demonstrate the ability of the executive management team to assess the public health threat in accordance with the State SNS Standard Operating Procedures.

Objective 2: Demonstrate the ability of the executive management team to initiate a request for SNS deployment in accordance with the State SNS Standard Operating Procedures.

Goal 2: Test the interoperability of the State SNS Standard Operating Procedures with the State Emergency Operations Plan and Terrorism Incident Annex.

Objective 1: Demonstrate the ability to alert and activate personnel, facilities, and systems required to support a large-scale response to a biological incident using SNS supplies.

Objective 2: Demonstrate the ability of State public health personnel to develop a decision aid and to prioritize the allocation of SNS supplies.

Objective 3: Demonstrate the ability to establish a Forward Command Post to coordinate logistics and security for receipt and distribution of SNS supplies.

Objective 4: Demonstrate the ability to coordinate public information, including rumor control, among multiple Federal, State, and local agencies to effectively notify, warn, and instruct, and disseminate to, the public during a biological WMD attack.

Objective 5: Demonstrate the ability to effectively communicate and coordinate among State and local agencies through established emergency response protocols including the utilization of State and local Emergency Operations Centers.

Goal 3: Demonstrate the ability to receive, break down, distribute, and dispense SNS supplies to minimize casualties in a large-scale biological attack.

Objective 1: Demonstrate the ability to establish and maintain security at all sites involved in the handling of SNS supplies.

Objective 2: Demonstrate the ability to establish and operate a distribution network for SNS supplies including a Receiving, Staging, and Storage center and at least one Distribution Node.

Objective 3: Demonstrate the ability to establish and operate at least one Dispensing Site for SNS supplies.

Objective 4: Evaluate the response times to receive, distribute, and dispense SNS supplies under the draft State SNS Standard Operating Procedures.

Objective 5: Demonstrate the capability to implement SNS supplies and patient tracking procedures under the draft State SNS Standard Operating Procedures.

Chapter 3: Exercise Events Synopsis

The Exercise Events Synopsis provides an overview of the scenario used to facilitate exercise play and the actions taken by the players to respond to the simulated terrorism attack. The activities are presented in the general sequence and timeline that unfolded at each site. The events synopsis provides officials and players with an overview of what happened at each location and when. It is also used to analyze the effectiveness of the response, especially the time-sensitive actions. It provides a means of looking at the ramifications of one action not happening when expected on actions taken by other players and on the overall response. The following example presents the synopsis for the first of three modules for the following tabletop and action at the Emergency Operations Center (EOC) on Day 1 of the full-scale exercise. Similar writeups would be included for each element of play.

Scenario

The events depicted in the scenario take place during a period of heightened alert throughout the United States. The threat of international terrorism is a continual source of concern, and the Homeland Security Advisory System is set at threat condition Orange. In particular, the region of the country where the State is located has been warned that a domestic terrorist group, the Allies of Islam, has purportedly made vague but aggressive statements aimed at the heartland.

The scenario takes place in the early summer after an average winter during which influenza cases were common. There have been higher than usual caseloads of patients experiencing severe respiratory distress and other influenza symptoms because of several new virus strains that spread periodically throughout the winter.

Executive Tabletop Component: Morning, Exercise Day 1

Module 1: June 13–15, 2003

Scenario events begin on June 13, 2003, when Capital City-area hospitals and clinics see an above-average number of patients complaining of flu-like symptoms. Eight of these patients have symptoms severe enough to be admitted to hospitals. The scenario then follows these patients through the next few days as their symptoms worsen and their sickness is reclassified as suspected pneumonia. The illness continues to spread across the State with more and more people being admitted to hospitals and clinics complaining of flu- and pneumonia-like symptoms.

As the epidemic spreads to more and more areas, the State Department of Public Health (DPH) begins to monitor the situation, requesting samples from hospitals with suspicious cases. On June 15, 2003, a doctor treating patients in Capital City receives test results that confirm some of his patients are afflicted with pneumonic plague. At the same time, DPH receives presumptive test results indicating that pneumonic plague has spread to every region of the State.

An Executive Group consisting of the Director of DPH, the Director of the Office for Disease Control, the State Epidemiologist, the Director of Clinical Services, the Director of the State Emergency Management Agency (EMA), the Homeland Security Advisor, and the Director of the Department of Health and Hospitals convened to discuss the growing emergency and determine appropriate State actions.

Players discussed notifying neighboring States and contacting the Centers for Disease Control and Prevention to acquire additional information from those sources regarding further potential pneumonic plague outbreaks. Players also indicated that DPH would use the Health Alert Network to notify hospitals and clinics statewide of the emerging situation and that EMA would activate the State EOC, with DPH representation, to monitor the emergency. Because the media had already become aware of the problem, players stressed that Public Information Officers (PIOs) would be engaged to manage

public information and rumor control. Players also considered the availability and adequacy of local and State medical supplies to treat the epidemic and discussed how the Governor's Office would make State-level assistance available to the affected counties. Finally, the players acknowledged that quarantine measures would have to be considered.

Full-Scale Component: Afternoon, Exercise Day 1

State Emergency Operations Center

By 1230: Players reported to the State EOC for a briefing on the public health emergency and the exercise Rules of Play. In the briefing, the players were informed of the reported numbers of persons infected with pneumonic plague, the distribution of the epidemic across the State, the actions taken so far at the direction of the Executive Group, and other pertinent background information. Scenario information indicated that 10 counties were affected, with 432 reported cases and 181 reported deaths attributed to pneumonic plague.

1320: Full-scale exercise play began.

By 1330: The Governor issued a Health Disaster Proclamation, making State assets available to assist the overwhelmed localities. The Executive Office in the EOC made contact with the appropriate agencies in the neighboring States and began discussing issues such as quarantine and accessing Emergency Management Assistance Compact resources.

The EOC received notifications from affected localities that their county EOCs were activated, and many were being overwhelmed with inquiries from worried well individuals. The EOC established a rumor control line staffed by a PIO to relieve some of the public information pressure from the county EOCs. The Joint Information Center also began receiving media inquiries from newspapers and radio and television stations.

The EOC directed the 21 counties preidentified in State plans to set up Distribution Nodes to receive the Strategic National Stockpile (SNS) Push Package supplies. The EOC also directed the affected counties to begin setting up their Dispensing Sites in preparation for the SNS supplies.

The FBI contacted the State Department of Public Safety to coordinate the criminal investigation.

By 1420: The Executive Office, in consultation with DPH support personnel at the Emergency Coordination Center and officials from neighboring States, decided that enforcing a statewide quarantine was unfeasible. Instead, the State encouraged citizens to voluntarily limit their travel and avoid public places until the epidemic was controlled.

1430: The Receiving, Staging, and Storage Center contacted the EOC inquiring about SNS Push Package distribution allocation and repackaging guidance. DPH decided to break down and distribute half of the Push Package supplies to the identified counties and hold the other half in reserve in case the epidemic spread to other areas of the State before the arrival of Vendor Managed Inventory supplementary supplies.

The Executive Office remained in contact with the neighboring States. It was eventually decided that the State would refuse the offers of assistance from neighboring States so those States could have their resources available in the event the epidemic spread beyond State lines.

The players in the Executive Office also discussed elevating the State's internal threat level from Orange to Red. This elevation was rejected in favor of keeping the State's threat level the same as that of the national Homeland Security Advisory System (Orange).

The State issued press releases indicating that DPH and its local and Federal partners were investigating an apparent outbreak of pneumonic plague. The releases described symptoms, outlined measures

citizens should take to reduce their risk of contracting the disease, and summarized the actions being taken by the State to control the epidemic.

1630: Exercise play was suspended for the day at the scheduled time.

Chapter 4: Analysis of Mission Outcomes

This section of the After Action Report (AAR) analyzes how well the participating agencies and jurisdictions addressed the mission outcomes. Mission outcomes are those broad outcomes or functions that the public expects from its public officials and agencies. As defined in ODP's *Homeland Security Exercise and Evaluation Program, Volume II: Exercise Evaluation and Improvement*, the mission outcomes include prevention and deterrence, emergency assessment, emergency management, hazard mitigation, public protection, victim care, investigation and apprehension, and recovery and remediation. The exercise goals and objectives will define the mission outcomes that are addressed by the exercise and that should be analyzed in this section of the AAR.

This section of the report analyzes how well the participating jurisdictions as a whole (i.e., across disciplines and across jurisdictions) achieved the expected mission outcomes in their response to the simulated terrorist event. The focus of this analysis is on outcomes rather than processes. The mission outcomes are actions the public expects from its public officials and agencies when faced with a terrorist threat or attack. Results for each mission outcome are summarized below by outcome area. A detailed analysis of the activities and processes that contributed to results related to the mission outcomes is found in "Analysis of Critical Task Performance."

Emergency Management

Direction and Control of State Response

State agency participants effectively demonstrated the ability to manage a bioterrorism incident. Alert and activation of the Emergency Operations Center (EOC) and the Emergency Coordination Center (ECC) were accomplished through a previously scheduled limited activation order. The EOC was staffed primarily with Emergency Management and Public Health personnel in accordance with the Exercise Plan, with limited participation from the State Department of Transportation, State Department of Public Safety, and other selected State staff. The EOC is a well-equipped, state-of-the-art facility. The Emergency Management staff are well trained and serve as the primary personnel to facilitate operations involving staff assigned from other agencies. The EOC was fully operational at the start of the exercise and maintained operations for the scheduled operations (single-day shift only).

The State Department of Public Health (DPH) and Emergency Management Agency (EMA) demonstrated excellent coordination in directing and controlling response operations, operating as a nearly seamless integrated team. An Executive Policy Team managed key decisions such as requesting Strategic National Stockpile (SNS) supplies from the Centers for Disease Control and Prevention (accomplished during the tabletop component). Agency officials generally found it easy to attain consensus on a course of action. Problem-solving was accomplished as a team.

The EOC did not activate a Planning, Information, and Intelligence Cell. Therefore, ad hoc policy teams were formed to examine urgent issues such as the decision to implement quarantine. Although the use of issue teams is an effective information management technique, the absence of a dedicated Planning, Information, and Intelligence Cell somewhat inhibited the ability of the State to forecast future requirements and decisions. As a result, exercise players often were reacting to events rather than anticipating events. For example, high school students were the primary infected population and thus the primary disease vector. Exercise controllers introduced the issue of school closure several times before players recognized school closure as a means to disrupt disease progression.

Activation of a limited SNS supply network occurred per the Exercise Plan and included the central Receiving, Staging, and Storage (RSS) site at the airport, two Distribution Nodes (located in Capital County and Suburban County 2), and a single Dispensing Site in Capital City. The RSS received the

SNS 12-Hour Push Package supplies and rapidly dispatched them to the Distribution Nodes. A slight lag in determining the allocation of supplies among Distribution Nodes resulted in an initial 30- to 60-minute delay in the loading of supplies. However, supplies reached the Capital City Dispensing Site in time for planned operations to begin on schedule.

Decision-making for allocation of SNS supplies was resourceful; approximately half of the inventory was distributed to known impacted counties and half reserved for anticipated, developing impacts. On Day 2, as it became evident that the population at risk of infection exceeded supplies available in the 12-Hour Push Package, the ECC was tasked with determining the allocation of Vendor Managed Inventory supplies. The Hospital Preparedness Coordinator and Assistant State Epidemiologist considered the utility of issuing prophylaxes to the entire State versus only to potentially exposed citizens. It is not clear whether a decision was reached before the conclusion of the exercise.

The EOC demonstrated the capability to direct and control distribution of supplies and equipment, with some limitations. The EOC considered the use of Statewide Mutual Aid Compact resources and correctly determined that the statewide impact of the epidemic precluded any significant sharing of resource among counties. The EOC made good use of Emergency Management Assistance Compact resources to provide assistance to affected counties. However, communications between the EOC and RSS were very limited, resulting in some disconnect in operational direction.

Players commented that they underutilized State resources (e.g., State buildings, public works organizations, and the State's National Guard) and Federal resources (disaster medical assistance teams and Federal funds to allocate resources). The EOC has no consistent method for tracking resources used or needed, which players attributed to "uncertainty" in the adequacy of department inventory methods. No resource-tracking displays (status boards or electronic projections) were evident in the EOC.

Chapter 5: Analysis of Critical Task Performance

This section of the report reviews performance of the individual tasks as defined in the Evaluation Guides. Each task identified by the exercise planning team as critical to the response required by the scenario should be discussed in this section. Tasks that were performed as expected require only a short writeup that describes how the task was performed and generally would not be followed by recommendations. For tasks that were not performed as expected, the writeup should include 1) an issue statement; 2) references to plans, procedures, and evaluation guides; 3) a brief summary of the issue; 4) the consequence of the issue on the response; and 5) an analysis of what happened or did not happen and the root causes for the variance from the expected outcome. Recommendations for improvement should be presented to address identified issues. To facilitate tracking of recommendations and improvements, acronyms should be spelled out in each recommendation. The Analysis of Critical Task Performance section of the report also should be used to document a variance from expected performance that may have resulted in an improved response or innovative approaches that were used during the response.

Note: At some point in the future, when the performance criteria have been validated and enhanced, jurisdictions will be asked to rate the performance of each task and to provide an overall performance rating for the exercise.

Following the review and validation of the draft report findings by key officials from the participating agencies/jurisdictions (during the debriefing meeting), the officials define the actions that will be taken to address the recommendations. These improvement actions are presented following each recommendation and include the action, the responsible party/agency, and the timeline for completion.

Task III-14: Provide Emergency Public Information to the Media and the Public

Issue 1: Some counties did not receive press releases.

Reference: Joint Information Center (JIC) standard operating procedures, EEG III-14.

Summary of Issue: JIC staff prepared a series of press releases to convey information to the public. Each release was coordinated with the Executive Management Team. The press releases were distributed over the Emergency Management System (EMS). However, not all counties use the EMS to obtain their information. For example, the Capital County Dispensing Site did not receive any news releases because they do not use EMS.

Consequence: Outdated and conflicting information was put out by one county that had not seen the latest press release.

Analysis: The JIC relied solely on the EMS as its method of distributing the press releases. The procedures for the JIC require that press releases be faxed to counties that do not have access to or use the EMS. However, when the second press release was sent, the Deputy Public Information Officer (PIO) asked if he should fax the release to the counties and was told by the PIO that it is the county's responsibility to ensure access to and use of the EMS. Capital County has access to the EMS but does not generally use it because staff are not trained for its use. The Capital County PIO indicated that the system was not properly installed and therefore they could not use it.

Recommendations and Improvements

Recommendation 1: The Emergency Management Agency (EMA) should establish procedures or protocols to ensure that news releases reach all affected counties or agencies, regardless of their EMS capabilities.

Action 1: The director of EMA issued a directive on September 1, 2003, requiring that all personnel assigned to work in the JIC receive a copy of the operating procedures, become familiar with them, and follow them during an emergency.

Action 2: The director of EMA will convene a working group with representatives from selected counties to develop a plan to provide all counties with access to the EMS and train county staff. The working group will be established within a month. The plan will be completed by February 1, 2004, and training will be available by March 1, 2004.

Action 3: The EMS system director will develop and implement a backup system (e.g., fax, e-mail) to ensure that all counties receive news releases.

Task III-15: Establish and Maintain Rumor Control Operations

Issue 1: Rumor Control was not provided with a script or other written instructions on the message to be conveyed to the public.

Reference: JIC standard operating procedures, EEG III-15.

Summary of the Issue: The JIC established a Rumor Control Center staffed by two people for the exercise. Rumor Control directed callers to other telephone numbers and Emergency Alert System (EAS) stations for additional information and developed responses based on the latest information available to them. However, staff did not always have the most recent information and sometimes released information that had not been approved by the PIOs.

Consequence: The information provided to the public was not always consistent or up to date.

Analysis: When Rumor Control received a call, staff would provide a response based on the best information they had or would discuss the request with the PIOs. On several occasions, the PIOs were busy, so the Rumor Control staff developed a response that reflected outdated information. The two Rumor Control staff worked independently but generally coordinated their responses. Each kept a folder of information that they had gathered. However, because they were developing their own responses, the information was not consistent.

Recommendations and Improvements

Recommendation 1: The EMA should develop procedures for the PIOs to place a high priority on developing a script for Rumor Control staff to use in responding to public inquiries.

Action 1: The director of EMA will work with a group of State and local PIOs to develop procedures for the development and distribution of a script that can be used by Rumor Control staff during an emergency.

Issue 2: Rumor Control was not provided with adequate reference materials.

Reference: JIC standard operating procedures, EEG III-14.

Summary: Several callers were told to contact their local EMA or stay tuned to the local EAS station. However, Rumor Control did not have the telephone numbers for some of the agencies and the radio frequencies for the EAS stations.

Consequence: Callers were frustrated and felt that they were getting the “runaround” because they could not get the information they needed from one source.

Analysis: The JIC, where the Rumor Control staff were located, had some of the reference materials and telephone numbers but they were not pulled together in a single resource that could be accessed by all staff. Various staff members had developed their own references. Although staff were willing to

share reference information, it was not easy to access and was not available at all when the person who developed the information was not present.

Recommendations and Improvements

Recommendation 2: The EMA should develop a list of EAS stations and frequencies as a reference tool for Rumor Control.

Action 1: A list of EAS stations and frequencies has been developed and is available in the Emergency Operations Center, the 911 Center, and the Emergency Control Center, and has been distributed to all State and county PIOs.

Action 2: The EMA PIO will review the list at the beginning of each month and report any changes that are required.

Task V-1: Develop and Implement Protective Action Decisions

Issue: None.

Summary: Public Health demonstrated the ability to implement a representative sample of population protective measures for a terrorist-induced statewide pneumonic plague outbreak. Following confirmation of the agent, participants requested the Strategic National Stockpile (SNS) push package from the Centers for Disease Control and Prevention (CDC), following the procedures outlined in their plans. Once the SNS arrived at the designated receiving site, responsibility for the package was transferred to the State and local authorities, who began the breakdown and distribution. Public Health established geographic and risk-group dispensing priorities and adjusted them as information continued to develop throughout the scenario. Public Health arranged additional pharmaceutical and medical supplies through the Vendor Managed Inventory to ensure a continued supply of prophylaxis.

Recommendations and Improvements

None.

Conclusions

This exercise was the State's first exercise of newly developed procedures to receive, distribute, and dispense Strategic National Stockpile (SNS) supplies in response to a statewide bioterrorism incident. Exercise participants demonstrated an initial capability to

- ◆ assess an emerging bioterrorism event,
- ◆ request National Pharmaceutical Stockpile supplies from the Centers for Disease Control and Prevention (CDC),
- ◆ institute coordinated emergency management with State and local public health agencies,
- ◆ institute population protective measures for a bioterrorism incident,
- ◆ establish a distribution network for SNS supplies, and
- ◆ operate a temporary clinic for the emergency distribution of antibiotic prophylaxis.

Exercise participants completed all planned exercise objectives. In a no-notice deployment test, CDC delivered SNS supplies within 11 hours of the State request, which meets CDC's 12-hour delivery target. The State sent (mock) SNS supplies to two Distribution Nodes for further shipment to Dispensing Sites and treatment centers. A Capital City Dispensing Site received SNS supplies and was ready to begin dispensing operations within 34 hours of the SNS request. The temporary dispensing clinic exceeded the planned goal of processing 300 patients through the temporary dispensing clinic within 3 hours by actually processing 398 patients.

Exercise participants identified several lessons learned for improvements in the State's ability to respond to a bioterrorism incident. Major recommendations include:

- ◆ Expand Emergency Management System access and training to all State agencies and all counties in the State.
- ◆ Review State quarantine plans and procedures.
- ◆ Improve communications processes between the State Emergency Operations Center (EOC), county EOCs, and the temporary SNS distribution network.
- ◆ Implement Receiving, Staging, and Storage (RSS) and dispensing center efficiency improvements.
- ◆ Improve dispensing center exterior security and crowd control.

The State can use the results of this exercise to further refine plans, procedures, and training for a bioterrorism incident. The State should prepare expected dispensing and treatment center locations and staffing requirements for incidents that will require mass prophylaxis through multiple Dispensing Sites. CDC recommends preparing plans to serve 1,000; 10,000; 100,000; and 1 million patients for contagious or noncontagious threats. Plans should address transportation management for large incidents.

In addition, the State should review public information protocols for a large-scale bioterrorism incident. Preplanned messages and a coordinated State and local public information effort will help public health officials efficiently direct citizens to centers for prophylaxis or medical treatment. Effective communication of risk and protective measures to citizens can reduce disease propagation and public anxiety.

Subsequent exercises should test specific improvements instituted as a result of this exercise and should include a focus on public information measures. Planners should consider exercising the alternate Receiving, Staging, and Storage site if the primary site is unavailable in an emergency. Additional Dispensing Sites should be exercised to ensure that emergency prophylaxis measures can be instituted at key areas across the State. For cost effectiveness, planners should consider rotating Dispensing Site exercises across the State, with or without an SNS deployment exercise.

AAR Appendix A: Improvement Plan Matrix

Task	Recommendations	Improvement Action	Responsible Party/Agency	Completion Date
III-14: Provide Emergency Public Information to the Media and the Public	<ol style="list-style-type: none"> The Emergency Management Agency (EMA) should establish procedures or protocols to ensure that news releases reach all affected counties or agencies, regardless of their Emergency Management System (EMS) capabilities. 	<ol style="list-style-type: none"> The director of EMA issued a directive on September 1, 2003, requiring that all personnel assigned to work in Joint Information Center (JIC) receive a copy of the operating procedures, become familiar with them, and follow them during an emergency. The director of EMA will convene a working group with representatives from selected counties to develop a plan to provide all counties with access to the EMS and train county staff. The EMS system director will develop and implement a backup system (e.g., fax, e-mail) to ensure that all counties receive news releases. 	EMA Director	Completed 9-01-03
III-15: Establish and Maintain Rumor Control Operations	<ol style="list-style-type: none"> The Emergency Management Agency (EMA) should advise Public Information Officers (PIOs) to place a high priority on developing a script (in coordination with the Emergency Control Center (ECC)) for Rumor Control staff to use in responding to public inquiries. The EMA should develop a list of Emergency Alert System (EAS) stations and frequencies as a reference tool for Rumor Control 	<ol style="list-style-type: none"> The director of EMA will work with a group of State and local PIOs to develop procedures for the development and distribution of a script that can be used by Rumor Control staff during an emergency. A list of EAS stations and frequencies has been developed and is available in the Emergency Operations Center, the 911 Center, the Emergency Control Center, and has been distributed to all State and county PIOs. The EMA PIO will review the list at the beginning of each month and report any changes that are required. 	EMA Director	1-15-04
V-1: Develop and Implement Protective Action Decisions	None.		EMA PIO	Complete
			EMA PIO	Monthly

