

CBERS 2023 Emergency Preparedness Exercise Design for Community Partners



VDH Office Partners:
Office of Epidemiology,
Office of Emergency
Preparedness, Healthcare-
Associated Infections &
Antimicrobial
Resistance Office of
Family Health Services



HOUSEKEEPING

- Sign in
- Emergency Exits
- Restrooms
- Turn cell phones on silent/vibrate
- Evaluations
- Resources:
 - Workbook/Situational Manual
 - CBERS 2023 Webpage



To Access CBERS
Website

OBJECTIVES

By the end of the course, participants will be able to:

- Identify the 8 Steps in Developing an Emergency Preparedness Exercise
- Participate in a Table-top Exercise
- Describe the public health disease reporting process in Virginia
- Identify the steps for developing an After-Action Report

CBERS AGENDA

- Unit 1: Training Exercise Design
- Unit 2: “Operation Malevolent Maladies” Tabletop Exercise
- Working Lunch
- Unit 3: Virginia Public Health Disease Reporting Requirements
- Unit 4: Exercise Evaluation and After- Action Report

UNIT I TRAINING EXERCISE DESIGN



UNIT OBJECTIVES

In this unit we will:

- Define what an exercise is
- Discuss the types of exercises
- Discussed elements of a progressive exercise program
- List, explain and demonstrate the eight- step exercise design process

EXERCISE

A focused practice activity
using a simulated situation

- Requires students to function in the same capacity as they would in a real event
- Promotes preparedness
- Tests emergency management policies, plans, procedures, and resources
- Can serve as “training” in some instances
- May meet legal or funding requirement

BENEFITS OF EXERCISING

- Provides individual and team training
- Leads to system improvement
- Identifies gaps and capabilities

What are some specific reasons we plan and conduct exercises?

EXERCISE TYPES

- Discussion-based exercises:
 - Seminars
 - Workshops
 - **Tabletop Exercises (TTX)**
 - Games

- Operations-based exercises
 - Drills
 - Functional Exercises (FE)
 - **Full-Scale Exercises (FSE)**



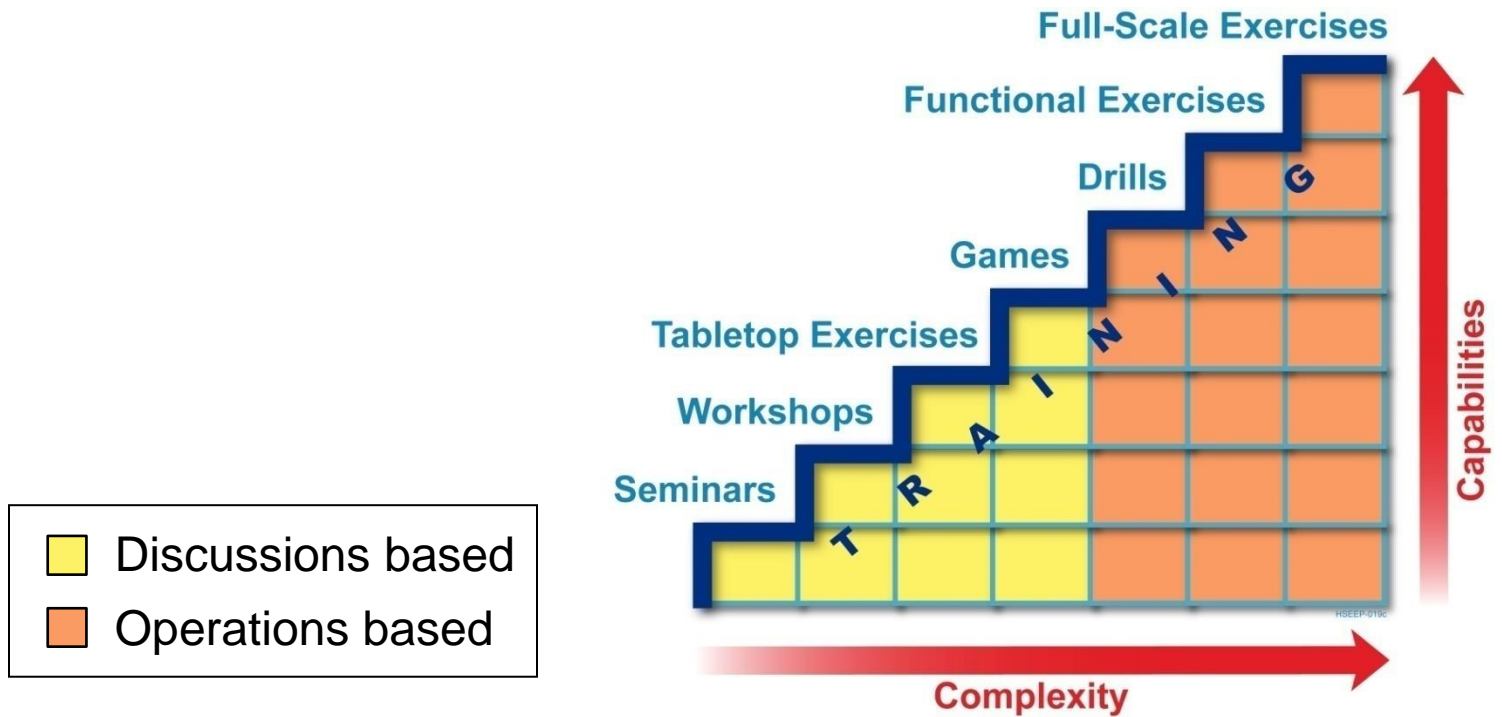
BENEFITS OF PROGRESSIVE EXERCISE PROGRAM

Successful exercise experiences breed new successes:

- Officials/stakeholders more willing to commit resources
- Personnel are more motivated/look forward to the next exercise
- Confidence increases
- Operating skills improve
- Plans and procedures are validated

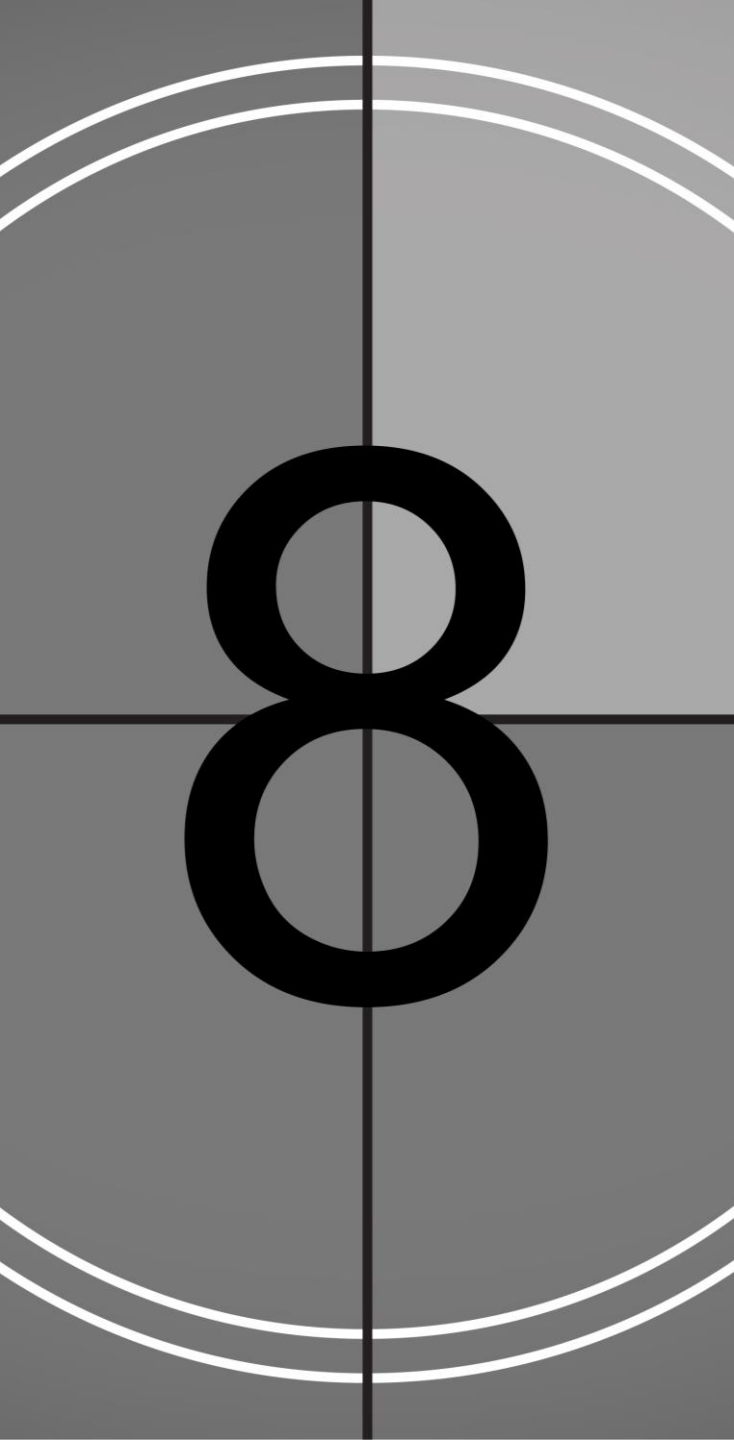
TYPES OF EXERCISE ACTIVITIES

Exercise activities “encourage” a building-block approach to exercise design



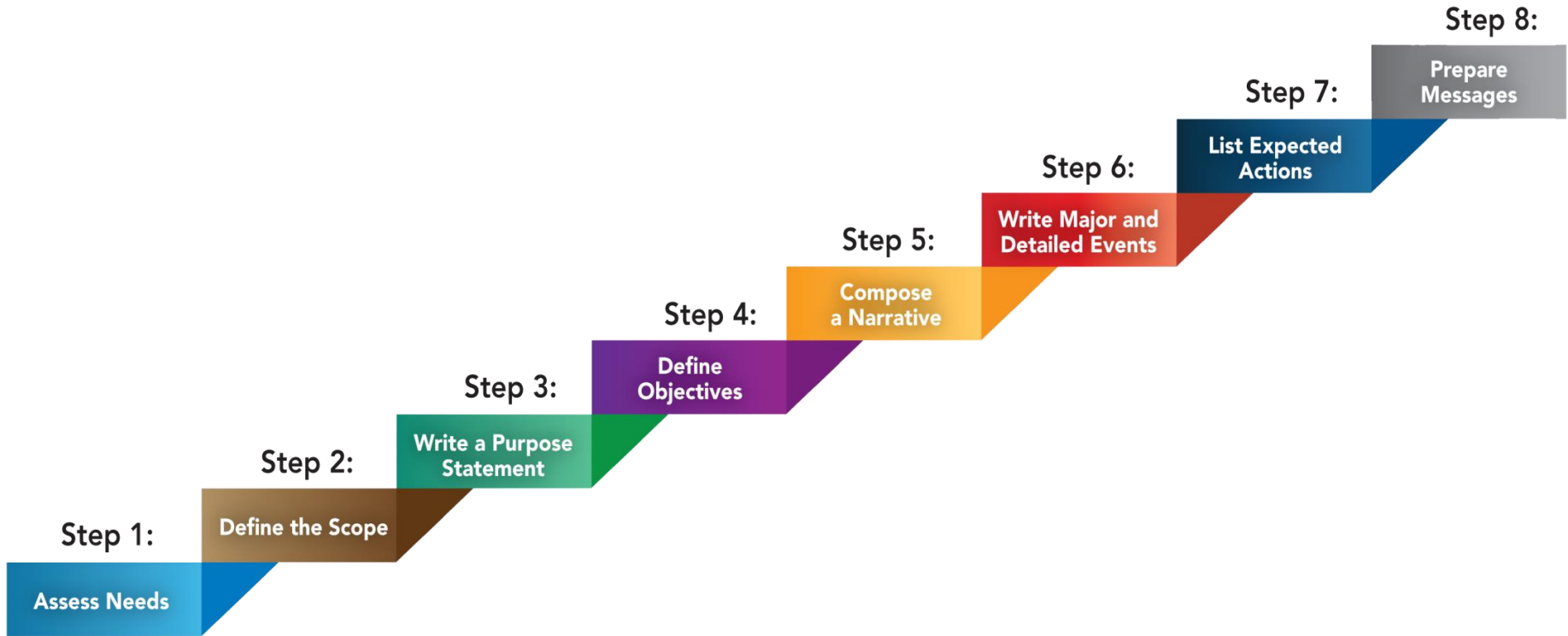
BUILDING AN EXERCISE PROGRAM

- Built by a team
- Based on operating plan
- May be needed to meet legal or funding requirements
- Involves:
 - Analysis of capabilities and costs
 - Scheduling
 - Public relations
 - Development of long-term plan
- Provides basis for individual exercise design



THE EIGHT STEPS OF EXERCISE DESIGN

EXERCISE DESIGN PROCESS



STEP 1: ASSESS NEEDS

Begin with your plan:

- Hazards and priorities
- Vulnerable areas
- Functions/Capabilities in need of rehearsal
- Potential participants and program areas
- Past exercises
- Exercise requirements

Step 1:

Assess Needs

ACTIVITY I-ASSESS NEEDS

Objective:

- Conduct a basic exercise needs assessment

Step 1:

Assess Needs

Instructions:

- Locate Activity I in your workbook and review and complete the steps in completion of a basic exercise needs assessment
- Time = 10 Minutes

STEP 2: DEFINE THE SCOPE

Step 2:

Define the Scope

Defining the scope = Setting realistic limits

Factors that help define scope:

- Expense
- Availability of resources
- Seriousness of the problem
- Capacity of the exercise to address the problem
- Designers' skills and experience
- Exercise length

DEFINING SCOPE

Step 2:

Define the Scope

Scope includes the:

- Type of emergency
- Location
- Capabilities or Functions
- Participants
- Exercise type

STEP 3: WRITE A PURPOSE STATEMENT

Step 3:

Write a Purpose Statement

Purpose statement: A broad statement of the exercise goal

- Governs objectives, which determine subsequent steps
- Clarifies reasons for the exercise
- Useful for communicating with media and community

ACTIVITY 2-DEVELOP EXERCISE SCOPE AND PURPOSE

Step 2:

Define the Scope

Step 3:

Write a Purpose
Statement

Objective:

- Apply learning to develop a purpose statement and define the scope for an exercise

Instructions:

- Complete Activity 2 Worksheet located in your workbook and define the scope of the exercise and write a statement of purpose
- Time = 10 Minutes

STEP 4: DEFINE OBJECTIVES

Step 4:

Define
Objectives

Objectives: Descriptions of the performance you expect from participants to demonstrate competence

Objectives are essential for:

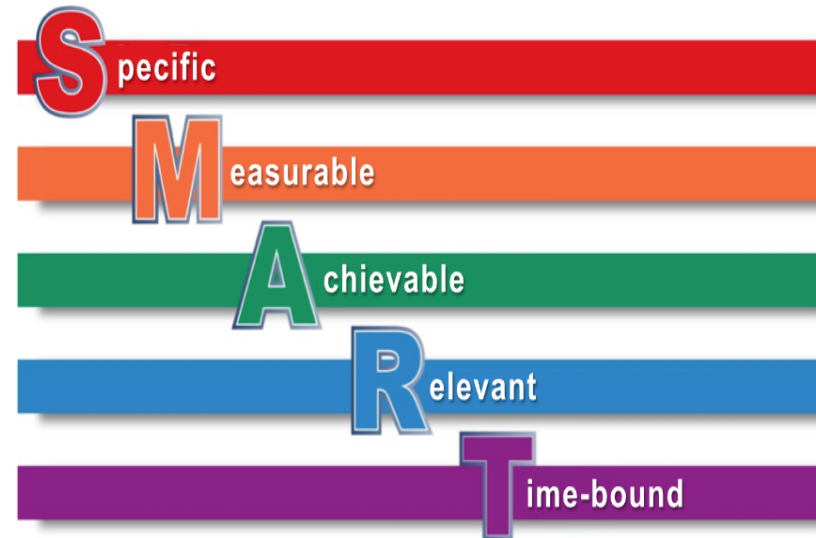
- Design process
- Exercise conduct
- Evaluation
- Follow-up

WHAT ARE OBJECTIVES?

Step 4:

Define Objectives

- Driven by Exercise Program priorities
- Cornerstone of scenario design, development, exercise conduct, and evaluation
- Follows SMART guidelines for development



Suggested Practice

Limit the number of objectives to those that can be reasonably addressed and evaluated during exercise conduct.

CHARACTERISTICS OF GOOD OBJECTIVES

Step 4:

Define Objectives

SMART Guidelines for Exercise Objectives

Specific	Objectives should address the five Ws: who, what, when, where, and why . The objective specifies what needs to be done with a timeline for completion.
Measurable	Objectives should include numeric or descriptive measures that define quantity, quality, cost, etc. Their focus should be on observable actions and outcomes.
Achievable	Objectives should be within the control, influence, and resources of exercise play and participant actions.
Relevant	Objectives should be instrumental to the mission of the organization and link to its goals or strategic intent.
Time-Bound	A specified and reasonable timeframe should be incorporated into all objectives.

CREATION OF PERFORMANCE OBJECTIVES

Step 4:

Define Objectives

Element	Tip	Example
Action Statement	Select observable action verb to describe what task(s) responders must perform.	Incident Safety Officer (SO) conducts scene survey to identify hazard(s) and establish “Hot Zone” perimeter.
Condition by which the tasks must be performed	What is given/expected in executing the task? Skill, knowledge, tool(s), equipment, reference(s), chats(s)/scene survey, or standard operating procedures (SOPs) on which action should be based.	Using knowledge of HazMat classification and OSHA’s Hazardous Waste Operations and Emergency Response (HAZWOPER) standard (29 Code of Federal Regulations [CFR] 1910.120)
Performance Statement	List what the player must be able to do/accomplish.	Determine hazard-specific health and safety risk to personnel in immediate range of incident.
Criteria Statement	The performance standard used to measure achievement of objective. Described as: <ul style="list-style-type: none"> • Degree of accuracy—how well? • Timeframe—when? • Speed/Distance—how much? 	Within 30 minutes of arrival on scene.

OBJECTIVES FOR DISCUSSION-BASED EXERCISE

Step 4:

Define Objectives

STRATEGIC PLANS, POLICY-ORIENTED ISSUES

Example:

Validate Central City's existing response plan for (2) *incident command* (3) activation of essential HazMat personnel (1) **during a chemical incident** (4) to ensure alignment with the National Incident Management System and HazMat Response criteria.

- 1) **Condition**
- 2) **Who**
- 3) **Action**
- 4) **Standard**

OBJECTIVES FOR OPERATIONS-BASED EXERCISES

Step 4:

Define Objectives

RESPONSE SYSTEMS/TACTICAL-LEVEL:

Example:

During **(1) a chemical incident**, evaluate the ability of **(2) Central City HazMat personnel**, to **(3) establish a Hot Zone and decontamination site** **(4)** within 30-minutes of arrival on scene in accordance with existing Standard Operating Procedures.

- 1) **Condition**
- 2) **Who**
- 3) **Action**
- 4) **Standard – jurisdiction/agency-specific**

IS THIS A SMART OBJECTIVE?

“To demonstrate an understanding of the procedures necessary in protecting responder health and safety.”

WORD CHOICE

Step 4:

Use action-oriented, measurable words

Avoid vague verbs, such as:

- Know
- Understand
- Appreciate
- Be aware of

Define
Objectives

- What are some SMART action verbs for objectives?

ACTIVITY 3-DEVELOP OBJECTIVES

Step 4:

Define Objectives

Objective:

- Develop objectives for your exercise

Instructions:

- Using the provided worksheet, write three objectives for your exercise and identify the responsible organization. Each objective must include
 - Action, stated in observable terms
 - Conditions
 - Standards

Time=10 Minutes

STEP 5: COMPOSE A NARRATIVE

- Narrative: A brief description of the scenario events that have occurred up to the exercise beginning.
- Sets the mood
- Provides information that sets the stage for later action

NARRATIVE CHARACTERISTICS

Step 5:

Compose
a Narrative

A good narrative:

- Is usually 1-to-5 paragraphs long
- Is very specific
- Is phrased in present tense
- Is written in short sentences
- May develop the situation chronologically (event with warning time)
- May emphasize the emergency environment

NARRATIVE DISCUSSION

Step 5:

Compose
a Narrative

- What is the event?
- How fast, strong, deep, or dangerous?
- How did you find out?
- What response has been made?
- What damage has been reported?
- What is the sequence of the events?
- How much time has elapsed?
- Was there advance warning?
- Where does it take place?
- What are the relevant weather conditions?
- What other factors would influence emergency procedures?
- What is predicted for the future?

NARRATIVE DISCUSSION (CONT.)

Step 5:

Compose
a Narrative

- Storyline for response activity or discussion
- Three basic elements:
 - Context
 - Conditions
 - Technical details
- Based on:
 - Realistic
 - Plausible threat
 - Challenging
- Mechanism for assessing objectives



ACTIVITY 4-OUTLINE A NARRATIVE

Step 5:

Compose
a Narrative

Objective:

- Outline the key points for a narrative

Instructions:

- Using the provided worksheet; outline the key points of a narrative for your exercise

Time = 10 Minutes

STEP 6: WRITE MAJOR & DETAILED EVENTS

Step 6:

Write Major and Detailed Events

Events are:

- Occurrences that happen as a result of the emergency described in the narrative
- Problems requiring actions that will meet the objectives

Careful scripting is required to:

- Produce a convincing, unified scenario
- Create an exercise governed by objectives

To develop **major** events:

1. Identify major occurrences that would follow the narrative events
2. Select those that might generate situations to test the objectives

To develop **detailed** events:

- Plan detailed events and expected actions together
- Work backwards from the actions
- List specific problems likely to stem from major events, and actions that would be expected to address them

EVENTS EXAMPLES

Possible detailed events:

- Patients cannot get to their Dialysis appointments
- Staff are unable to get to their assigned work locations
- Local hospitals lack specialized facilities and personnel to treat large numbers of severe burn victims.
- The Red Cross has agreed to set up an information center to link victims and their families.

STEP 7: LIST EXPECTED ACTIONS

Step 7:

List Expected
Actions

Types of actions:

- Verification
- Consideration
- Deferral
- Decision

•How do you know what actions are appropriate in response to a given event?

RELATIONSHIP TO OBJECTIVES

Step 7:

List Expected
Actions

- Expected action – actions taken by organization or individual to meet an objective
- Expected actions closely tied to objectives
- Expected actions are a breakdown of objectives
- List only those that involve the participating organizations
- List expected actions for all exercise participants
- Not necessary for each detailed event to generate responses from all participants

ACTIVITY 5- MAJOR AND DETAILED EVENTS & EXPECTED ACTIONS

Step 6:

Write Major and Detailed Events

Step 7:

List Expected Actions

Objective:

- Write major and detailed events for your objectives
- List expected actions for those events chosen

Instructions:

- Using the planning sheet provided, write major and detailed events for the objective developed earlier
- List the expected actions and the organizations responsible for the detailed events
- Time = 10 Minutes

STEP 8: PREPARE MESSAGES

Step 8:

Prepare
Messages

Messages:

- Communicate detailed events
- Evoke a response (decision or action) to meet objectives
- Are transmitted by various mediums
- Must come from credible source through credible channels
 - One message may represent one event or...
 - Several messages may be needed to notify participants of an event
 - Each message is designed to generate one or more expected actions



MESSAGE VARIABLES

Step 8:

Prepare
Messages

- Message source
 - Transmission method
 - Message content
 - Recipient
 - These variables influence the action taken
- WHO?
 - HOW?
 - WHAT?
 - TO WHOM?
 - To what EFFECT?

COMPOSING A MESSAGE

Step 8:

Prepare
Messages

- Begin with an expected action
- Decide:
 - **What message would provoke that action?**
 - **Who will send it? Who will receive it?**
 - **How will the message be transmitted?**
- Keep it realistic!
- Practice with a partner ... does the message “work?”

ACTIVITY 6-COMPOSING MESSAGES

Step 8:

Prepare Messages

Objective:

- Compose a message to generate a selected action

Instructions:

- Using the activity sheet provided; select one of the expected actions that you listed in the last activity and compose a message that would generate the selected action. The message should include the following items on the provided form:
 - To
 - From
 - Method
 - Content

Time = 10 Minutes

UNIT 2 SUMMARY

In Unit 2, we:

- Discussed the eight-step design process
- Applied each step in the initial development of an exercise



**UNIT 2 "OPERATION
MALIGNED MALADIES"
TABLETOP EXERCISE**



Step 1:

Assess Needs

EXERCISE SCOPE AND PURPOSE

- **Scope:** In a 90-minute Tabletop Exercise participants will review and discuss emergency preparedness and response and recovery actions in a relaxed and non-threatening manner.
- **Purpose:** The Purpose of the 2023 CBERS TTX is to provide a learning environment for participants to discuss organizational emergency preparedness and response plans and procedures in response to a Infectious Disease Outbreak that affects their facility/organization and the communities they serve.

Step 2:

Define the Scope

Step 3:

Write a Purpose Statement

TABLETOP EXERCISE OBJECTIVES

Step 4:

Define
Objectives

- Discuss participant knowledge of appropriate internal and external points of contact in response to an emergency that impacts the facility or organizations routine operations in accordance with existing plans, policies and procedures.
- Examine the ability of participants to clearly identify trigger points for escalating notification and response actions in response to an emergency that impacts the facility or organizations routine operations in accordance with existing plans, policies and procedures.
- Assess the ability of participants to consult their Emergency Operations Plans to guide actions and decision making in response to an emergency that impacts the facility or organizations routine operations.
- Examine participants understanding of roles and responsibilities of partner organizations in response to an emergency that impacts their community/area of operations in accordance with existing plans, policies and procedures.

EXERCISE STRUCTURE

Tabletop scenario consists of two modules:

- **Module 1: Seasonal Indicators**
- **Module 2: Incident Response and Recovery**
- **Take Home Module**
 - **Module 3: An Added Wrinkle**

TTX ROLES AND RESPONSIBILITIES

Four groups represented today:

- **Players:** Respond to situation presented based on current emergency plans, expert knowledge or response protocols
- **Facilitators:** Provide situation updates, moderate discussions and function as exercise subject matter experts
- **Partners:** Provide outside point of view on external agency response protocols
- **Evaluator:** Tabulate player response, capture comments, and assess exercise objectives

ASSUMPTIONS AND ARTIFICIALITIES

- The following Assumptions and Artificialities apply:
 - Scenario is plausible - events occur as they are presented
 - No hidden agendas or trick questions
 - Local, state, and federal responders are also initiating plans, procedures, and protocols
 - Assume that cooperation and support would be forthcoming from outside agencies

EXERCISE PLAY

- Modules begin with situation briefings
- Everyone gets the information at the same time
- Players will have extended consultation among themselves prior to receiving the next exercise module
- Players discuss issues involving a variety of preparedness, response and recovery actions
- This is a “no-fault” exercise—there are no wrong answers
- Don’t “fight” the scenario

TABLETOP EXERCISE MODULE I: SEASONAL INDICATORS

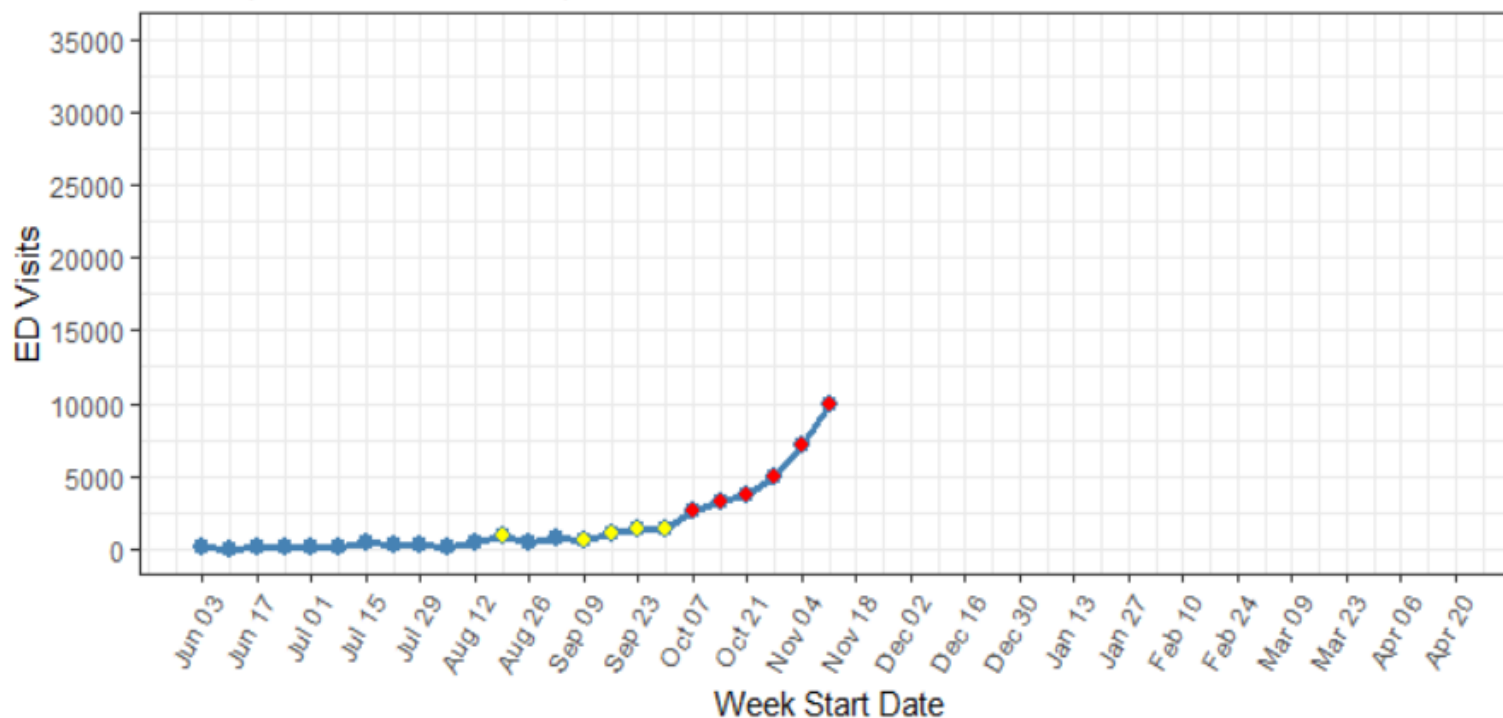
NOVEMBER 11, 2023

- At this stage, COVID-19 is an endemic respiratory pathogen that shows moderately cyclic seasonal surges worldwide.
- These illness surges, are caused by S-CoV-2. Omicron variants and their descendent lineages, can for the most part be predicted through ongoing genomic surveillance and disease forecasting/modeling.
- A new SARS-CoV-2 TK.4 variant, named 'Tau' was first detected in the United States in September 2023.
- A few months into fall and with winter approaching, surveillance indicators from the Virginia Department of Health show increases in respiratory illnesses and hospitalizations occurring across the commonwealth.
- The uptick in illness activity seems to be driven by a recently identified SARS-CoV-2 Tau sublineage.

NOVEMBER 11, 2023 (CONT)

Weekly ED and Urgent Care Visits for Respiratory Illness - Virginia

June 03, 2023 to November 11, 2023



MODULE I- KEY SCENARIO POINTS

Step 6:

Write Major and Detailed Events

- A representative sampling of positive laboratory specimens tested by whole genome sequencing has confirmed that majority of respiratory illnesses are caused by the variant sublineage TK.4.2.1
- This variant sublineage demonstrates a higher change of reinfection or breakthrough infections.
- Preliminary data shows no increase in severity or adverse outcomes compared to previous variant sublineages.
- Emergency department and urgent care visits for all respiratory illnesses have increased by 265% over three weeks.

Group Discussion



- Read/Review scenario
- Discuss and answer scenario questions
- Report Outs

**TABLETOP EXERCISE MODULE 2:
INCIDENT RESPONSE AND
RECOVERY**

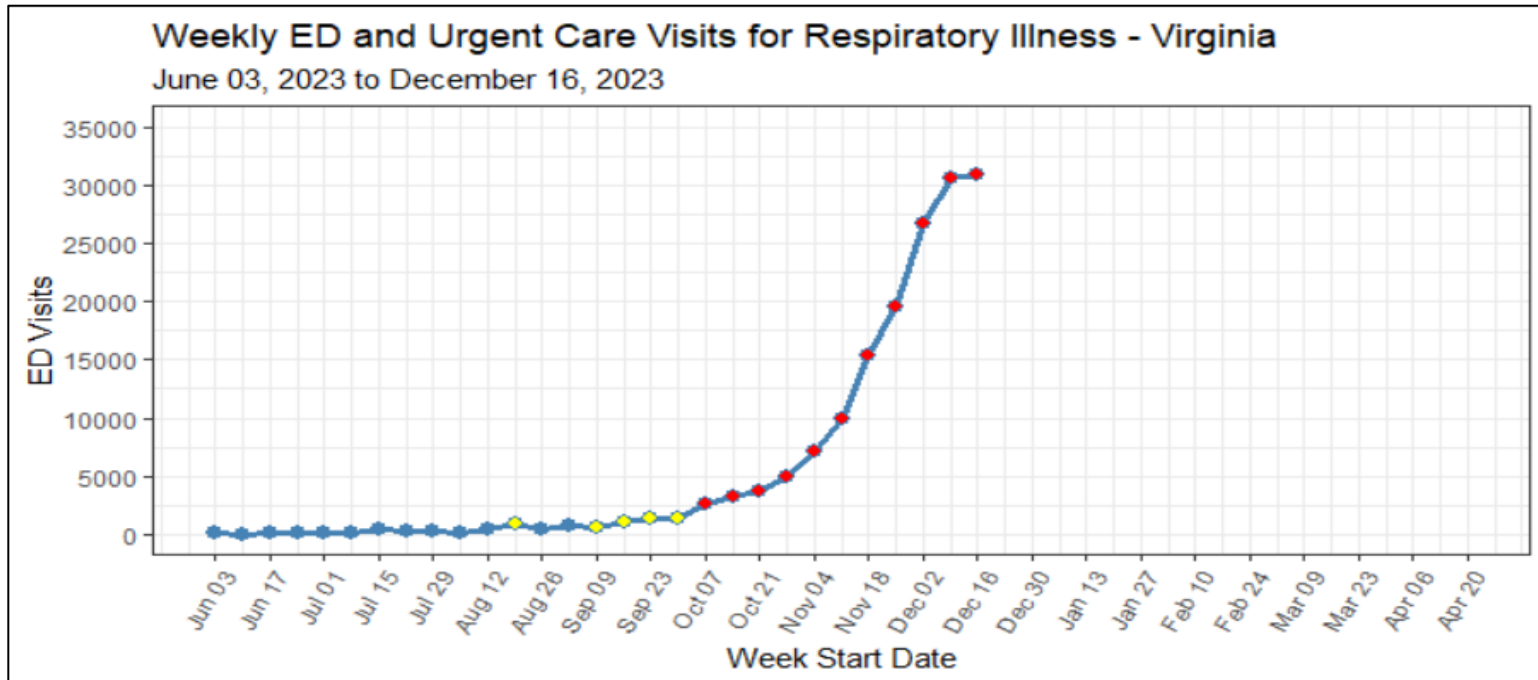
DECEMBER 16, 2023

- The seasonal COVID-19 bivalent mRNA booster dose (August 2023) provides added protection against symptomatic TK/TK.4.2.1 infection for at least the first 3 months after vaccination in persons previously vaccinated.
- Additional CDC analysis found that hospitalization and case-fatality rate estimates were comparable to the Omicron BA.5, BQ.1, and BQ.1.1 sublineages circulating during the winter of 2022.
- Healthcare facilities are hearing about shortages of N95 masks and saline due to supply chain management issues. Several hospitals have reported that they are holding admissions in the ER, some for multiple days.
- Anecdotal reports describe an increase in absenteeism at schools and workplaces ranging from normal levels in some isolated parts of the state to 30% in other areas. Your facility has reported 22% of your staff having been absent due to respiratory illnesses for the last three days.

DECEMBER 16, 2023 (CONT)

Step 6:

Write Major and Detailed Events



MODULE 2-KEY SCENARIO POINTS

Step 6:

Write Major and Detailed Events

- The current vaccine offers some protection to those previously vaccinated and severe outcomes from the variant sublineage will be like the previous respiratory season.
- Supply chain shortages, absenteeism increases, hospitals holding admissions in the ER, and increases in ambulance turnaround times have been reported.
- Your facility has seen an increase in reported cases of COVID-19 with 22% of your staff having been absent due to respiratory illnesses for the last three days. Additionally, one staff member was reported hospitalized due to meningitis.

Group Discussion



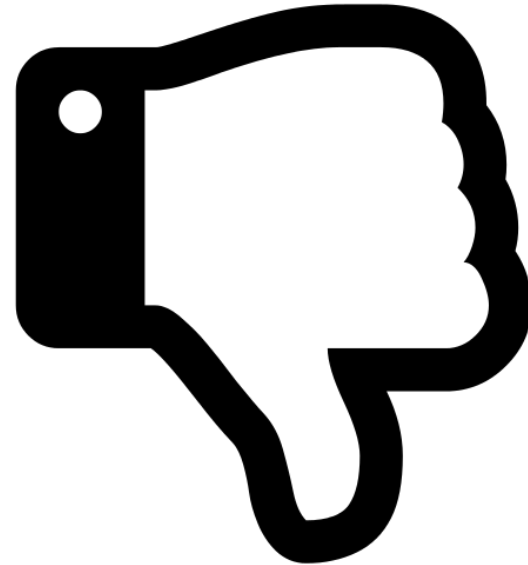
- Read/Review scenario
- Discuss and answer scenario questions
- Report Outs

HOT WASH...WHAT IS IT?

- Short debriefing (Usually 30 minutes or less)
- Conducted immediately after exercise
- Players provide feedback
- Strengths/weaknesses identified – areas of improvement

ACTIVITY 8: OPERATION MALIGNED MALADIES TTX HOTWASH

- *So, What worked today in the exercise?*
- *What areas did you identify that may need improvement?*



UNIT 2 SUMMARY

- In this unit we:
 - Participated in a Tabletop Exercise that applied the eight design steps
 - Participated in an exercise Hotwash



Unit 3

Virginia Public Health Disease Reporting Requirements

Code and Regulations

Where to look

- [The VDH website](#)
 - Contains links to Virginia's disease reporting regulations and resources.
- [Virginia's Legislative Information System](#)
 - Code of Virginia
 - [Title 32.1 Chapter 2:](#)
 - Disease Prevention and Control
 - Administrative Code
 - [Title 12 Agency 5 Chapter 90:](#)
 - Regulation for Disease Prevention and Control

Things to Consider in the Code

- [§ 32.1-35](#)
 - The Board of Health will create a list of reportable diseases.
- [§ 32.1-36](#)
 - Physicians and Directors of Laboratories must report diagnosed or reasonably suspected cases of diseases required by the Board.
 - The Commissioner may disclose the patient's identity and disease to their employer if it is a threat to the public's health.
 - Physicians and Directors of Laboratories may voluntarily report additional information for surveillance or epidemiological studies.
- [§ 32.1-38](#)
 - Those reporting disease shall be immune from civil liability or criminal penalty and their identity will not be made public.

Reportable Diseases

- State Law **REQUIRES** certain diseases to be reported
 - [Virginia Reportable Disease List](#)
 - Some must be reported immediately, and others within a 3-day window
- [12VAC 5-90-80](#) of the administrative code details what diseases must be reported and specifies those that must be reported immediately.

Paragraph A

*Outbreaks, all (including foodborne, health care-associated, occupational, toxic substance-related, waterborne, and any other outbreak)

Paragraph F

Outbreaks. The occurrence of outbreaks or clusters of any illness that may represent a group expression of an illness that may be of public health concern shall be reported to the local health department immediately by the most rapid means available, preferably by telephone.

VIRGINIA REPORTABLE DISEASE LIST

Reporting of the following diseases is required by state law (Sections 32.1-36 and 32.1-37 of the Code of Virginia and 12 VAC 5-90-80 of the [Board of Health Regulations for Disease Reporting and Control](#)). Report all conditions when suspected or confirmed to your [local health department \(LHD\)](#). Reports may be submitted by [Confidential Morbidity Report Portal \(Epi-1 form\)](#), computer-generated printout, CDC or VDH surveillance form, or upon agreement with VDH, by means of secure electronic submission.



Reportable Disease List

REPORT IMMEDIATELY

- Anthrax (*Bacillus anthracis*) 📍
- Botulism (*Clostridium botulinum*) 📍
- Brucellosis (*Brucella* spp.) 📍
- Cholera (*Vibrio cholerae* O1/O139) 📍
- Coronavirus infection, severe (e.g., SARS-CoV, MERS-CoV) 📍
- Diphtheria (*Corynebacterium diphtheriae*) 📍
- Disease caused by an agent that may have been used as a weapon
- *Haemophilus influenzae* infection, invasive 📍
- Hepatitis A 📍
- Influenza-associated deaths if younger than 18 years of age
- Influenza A, novel virus 📍
- Measles (Rubeola) 📍
- Meningococcal disease (*Neisseria meningitidis*) 📍
- Outbreaks, all (including foodborne, healthcare-associated, occupational, toxic substance-related, waterborne, and any other outbreak) 📍
- Pertussis (*Bordetella pertussis*) 📍
- Plague (*Yersinia pestis*) 📍
- Poliovirus infection, including poliomyelitis 📍
- Psittacosis (*Chlamydia psittaci*) 📍
- Q fever (*Coxiella burnetii*) 📍
- Rabies, human and animal 📍
- Rubella [a], including congenital rubella syndrome 📍
- Smallpox (Variola virus) 📍
- Syphilis (*Treponema pallidum*), congenital, primary, secondary, and other 📍
- Tuberculosis, active disease (*Mycobacterium tuberculosis* complex) 📍
- Tularemia (*Francisella tularensis*) 📍
- Typhoid/Paratyphoid infection (*Salmonella* Typhi, *Salmonella* Paratyphi (all types)) 📍
- Unusual occurrence of disease of public health concern
- Vaccinia, disease or adverse event 📍
- Vibriosis (*Vibrio* spp.) 📍
- Viral hemorrhagic fever 📍
- Yellow fever 📍

LEGEND

- 📍 Reportable by directors of laboratories. Additional condition-specific requirements for directors of laboratories available [here](#). These and all other conditions listed must be reported by physicians and directors of medical care facilities.
- 📋 Laboratories must submit initial isolate or other initial specimen to the [Division of Consolidated Laboratory Services \(DCLS\)](#) within 7 days of identification. All specimens must be identified with patient and physician information, and the LHD must be notified within the timeframe specified below.
- 📊 Include available antimicrobial susceptibility findings in report.
 - a Laboratories report AFB, *M. tuberculosis* complex or any other mycobacteria, and antimicrobial susceptibility for *M. tuberculosis* complex.
 - b Includes submission of *Candida haemulonii* specimens to DCLS.
 - c Laboratories that use EIA without a positive culture should forward positive stool specimens or enrichment broth to DCLS.
 - d Includes reporting of *Photobacterium damselae* and *Grimontia hallisae*.
 - e By culture, antigen detection by direct fluorescent antibody (DFA), or nucleic acid detection.

REPORT WITHIN 3 DAYS

- Amebiasis (*Entamoeba histolytica*) 📍
- Arboviral infections (e.g., CHIK, dengue, EEE, LAC, SLE, WNV, Zika) 📍
- Babesiosis (*Babesia* spp.) 📍
- Campylobacteriosis (*Campylobacter* spp.) 📍
- *Candida auris*, infection or colonization 📍
- Carbapenemase-producing organism, infection or colonization 📍
- Chancroid (*Haemophilus ducreyi*) 📍
- Chickenpox (Varicella virus) 📍
- Chlamydia trachomatis infection 📍
- Coronavirus disease 2019 (COVID-19 or SARS-CoV-2) 📍
- Cryptosporidiosis (*Cryptosporidium* spp.) 📍
- Cyclosporiasis (*Cyclospora* spp.) 📍
- Ehrlichiosis/Anaplasmosis (*Ehrlichia* spp., *Anaplasma phagocytophilum*) 📍
- Giardiasis (*Giardia* spp.) 📍
- Gonorrhea (*Neisseria gonorrhoeae*) 📍
- Granuloma inguinale (*Calymatobacterium granulomatis*) 📍
- Hantavirus pulmonary syndrome 📍
- Hemolytic uremic syndrome (HUS) 📍
- Hepatitis B (acute and chronic) 📍
- Hepatitis C (acute and chronic) 📍
- Hepatitis, other acute viral 📍
- Human immunodeficiency virus (HIV) infection 📍
- Influenza, confirmed 📍
- Lead, blood levels 📍
- Legionellosis (*Legionella* spp.) 📍
- Leprosy/Hansen's disease (*Mycobacterium leprae*) 📍
- Leptospirosis (*Leptospira interrogans*) 📍
- Listeriosis (*Listeria monocytogenes*) 📍
- Lyme disease (*Borrelia* spp.) 📍
- Lymphogranuloma venereum (*Chlamydia trachomatis*) 📍
- Malaria (*Plasmodium* spp.) 📍
- Mumps 📍
- Neonatal abstinence syndrome (NAS) 📍
- Ophthalmia neonatorum 📍
- Rabies treatment, post-exposure 📍
- Salmonellosis (*Salmonella* spp.) 📍
- Shiga toxin-producing *Escherichia coli* infection 📍
- Shigellosis (*Shigella* spp.) 📍
- Spotted fever rickettsiosis (*Rickettsia* spp.) 📍
- Streptococcal disease, Group A, invasive or toxic shock 📍
- *Streptococcus pneumoniae* infection, invasive and <5 years of age 📍
- Syphilis (*Treponema pallidum*), if not primary, secondary, or congenital 📍
- Tetanus (*Clostridium tetani*) 📍
- Toxic substance-related illness 📍
- Trichinosis (Trichinellosis) (*Trichinella spiralis*) 📍
- Tuberculosis infection 📍
- Vancomycin-intermediate or vancomycin-resistant *Staphylococcus aureus* infection 📍
- Yersiniosis (*Yersinia* spp.) 📍

ALL REPORTS ARE CONFIDENTIAL AND SHOULD INCLUDE -

1. the disease or condition diagnosed or suspected
2. patient's name, date of birth, age, sex, race/ethnicity, pregnancy status, address, and telephone number
3. physician's name, address, and telephone number
4. method of diagnosis, if available

Who needs to report?

Physicians

- Report when treats or examines any person who is suffering from or who is suspected of having a reportable disease or condition.
- Reports person's name, address, age, date of birth, race, sex, and pregnancy status for females; name of disease diagnosed or suspected; the date of onset of illness; available laboratory tests and results; and the name, address, and telephone number of the physician and medical facility where the examination was made.

Laboratories

- Report any laboratory examination of any clinical specimen, whether performed in-house or referred to an out-of-state laboratory, which yields evidence, by the laboratory method indicated or any other confirmatory test, of a disease listed in [12 VAC 5-90-80 B](#).
- Source of the specimen and the laboratory method and result; the name, address, age, date of birth, race, sex, and pregnancy status for females (if known) of the person from whom the specimen was obtained; and the name, address, and telephone number of the physician at whose request and medical facility at which the examination was made.

Persons in charge of a medical care facility

- The occurrence in or admission to the facility of a patient with a reportable disease listed in [12 VAC 5-90-80](#).
- Patient's name, address, age, date of birth, race, sex, and pregnancy status for females; name of disease being reported; available laboratory tests and results; the date of admission; medical record number; date expired (when applicable); and attending physician.

For questions about determining whether you need to report refer to [12 VAC 5-90-90](#)

Who needs to report?

Adult Daycare and Assisted Living Facilities

- Licensed by Virginia Department of Social Services (VDSS) Required to report all suspected or confirmed outbreak to VDSS and the local health department.

Hospitals and Nursing Homes:

- Required to report single cases for the conditions on the Virginia reportable Disease List, including all suspected or confirmed outbreak to the local health department.

Correctional Facilities:

- Required to report single cases for the conditions on the Virginia reportable Disease List, including all suspected or confirmed
- outbreak to the local health department.

For questions about determining whether you need to report refer to [12 VAC 5-90-90](#)

Who needs to report?

These entities are required to report “common symptoms suggesting an outbreak situation”

Schools

- Any public school from kindergarten through grade 12 operated under the authority of any locality within the Commonwealth.
- Any private or religious school that offers instruction at any level or grade from kindergarten through grade 12.
- Any private or religious nursery school or preschool, or any private or religious childcare center required to be licensed by the Commonwealth.

Childcare Centers

- A child day center, child day program, family day home, family day system, or registered family day home as defined by [§ 63.2-100](#) of the Code of Virginia, or a similar place providing day care of children by such other name as may be applied.

Summer Camps

- As defined in [§ 35.1-1](#).
- A building, tent, or vehicle, or group of buildings, tents, or vehicles, if operated as one place or establishment, or any other place or establishment, public or private, together with the land and waters adjacent thereto, that is operated or used in this Commonwealth for the entertainment, education, recreation, religious instruction or activities, physical education, or health of persons under 18 years of age who are not related to the operator of such place or establishment by blood or marriage within the third degree of consanguinity or affinity, if 12 or more such persons at any one time are accommodated, gratuitously or for compensation, overnight and during any portion of more than two consecutive days.

Other Things to Consider in the Code

- [§ 32.1-37.01](#)
 - Upon declaration of an emergency by the Governor in response to a communicable disease of public health threat, information regarding outbreaks of such communicable disease of public health threat will be publicly posted.
- [§ 32.1-38](#)
 - Those reporting disease shall be immune from civil liability or criminal penalty and their identity will not be made public.
- [§ 32.1-40](#)
 - The Commissioner or his designee may examine and review medical records.
 - No such practitioner or person shall be liable in any action at law for permitting such examination and review.
- [§ 32.1-41](#)
 - The Commissioner or his designee shall preserve the anonymity of each patient and practitioner of the healing arts whose records are examined.
 - The Commissioner, in his sole discretion, may divulge the identity of such patients and practitioners if pertinent to an investigation, research or study at his discretion. Any person to whom such identities are divulged shall preserve their anonymity.

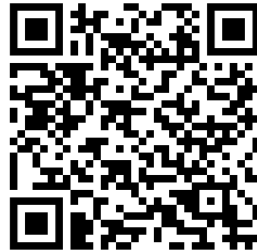
Where to Report?

Local Health District Info

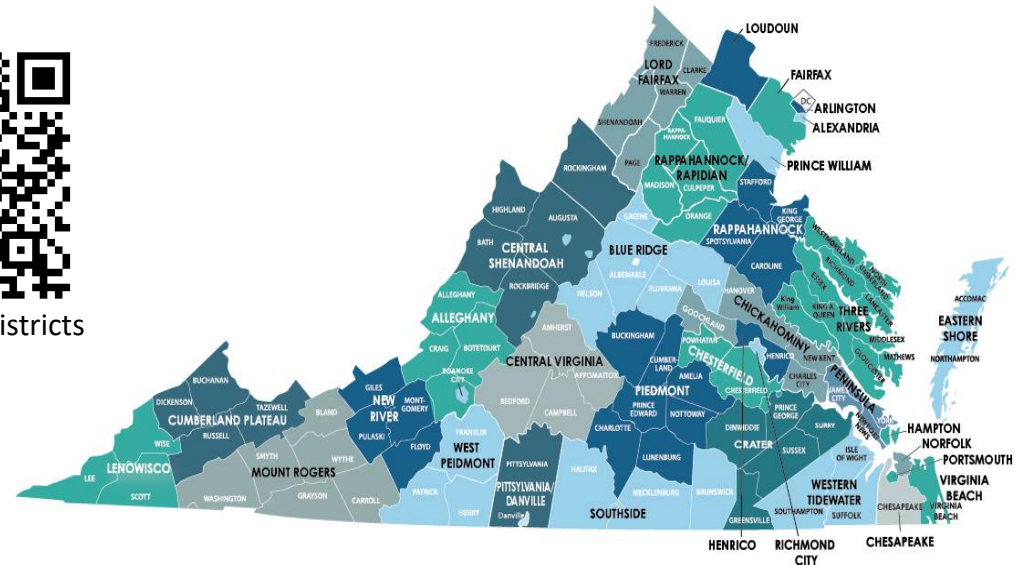
- Report to your [local health district](#)
- Contact information for your local health district can be found online or [here](#)



VIRGINIA DEPARTMENT OF HEALTH DISTRICTS



Local Health Districts



How to Report?

Forms for Reporting

- [Epi-1 Reporting Portal](#)
- [Epi-1 PDF Form](#)
- [Suspected Outbreak Reporting Portal](#)

Epi-1 PDF Form

MAIL THE TOP TWO COPIES TO YOUR LOCAL HEALTH DEPARTMENT

VIRGINIA DEPARTMENT OF HEALTH
Confidential Morbidity Report

Patient's Name (Last, First, Middle Initial):		SSN: _____
Patient's Address (Street, City or Town, State, Zip Code):		Home #: () _____
		Work #: () _____
		City or County of Residence
Date of Birth: (mm/dd/yyyy)	Age:	Race: <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> Hawaiian/Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Unknown <input type="checkbox"/> Other (specify):
DISEASE OR CONDITION:		Pregnant: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
Date of Onset:		Influenza: (Report # and type only. No patient identifiers) Number of Cases: _____ Type, if Known: _____
Physician's Name: Address:		Death: <input type="checkbox"/> Yes <input type="checkbox"/> No Death Date: _____
Hospital Admission? <input type="checkbox"/> Yes <input type="checkbox"/> No		Phone: () _____
Date of Admission:		Hospital Name: _____ Medical Record Number: _____
Laboratory Information and Results		
Source of Specimen:		Date Collected: _____
Laboratory Test and Findings:		
Name/Address of Lab: CLIA Number: _____		
Other Information		
Comments: (e.g., Risk situation [food handling, patient care, day care], Treatment [including dates], Immunization status [including dates], Signs/Symptoms, Exposure, Outbreak Associated, etc.)		
Name, Address, and Phone Number of Person Completing this Form:		Date Reported: _____
		Check here if you need more of these forms, or call your local health department. (Be sure your address is complete.) <input type="checkbox"/>
For Health Department Use		
		Date Received: _____
		NEDSS Patient ID: _____

Please complete as much of this form as possible

Form Epi-1, 10/07

BREAK



UNIT 4 EXERCISE AFTER ACTION REPORTS AND IMPROVEMENTS PLANNING



UNIT OBJECTIVES

- Describe the need for a systematic approach to exercise evaluation
- Explain the purpose of the Exercise Evaluation Guide
- Demonstrate the development of an After Action Report and Improvement Plan

WHY EVALUATE?

- Evaluation can identify:
 - Whether objectives are achieved
 - Areas of strength
- Needed improvements in:
 - Emergency plan, procedures, guidelines
 - Emergency management system
- Training and staffing deficiencies
- Equipment deficiencies
- Need for continued exercise development and overall preparedness and improvement

RECORDING OBSERVATIONS

- **If** and **how** quantitative or qualitative targets were met
- Actual **time required** for exercise players to complete the critical task(s)
- **How** target was or was not met
- **Decisions** made and information gathered to make decision
- **Requests** made and how requests were handled
- **Resources** utilized
- **Plans, policies, procedures, or legislative authorities used** or implemented
- Any **other factors** contributed to the outcomes.

Observation Example:

“Staff noted during the exercise that contact information listed in the Emergency Response Plan only business hours numbers for emergency contacts other than 911 and would have been unable to reach critical partners”

ACTIVITY 9: RECORDING OBSERVATIONS-COMPLETING AN EXERCISE EVALUATION GUIDE

Objective:

- Record observations you have made during the Tabletop Exercise

Instructions:

- Using the evaluation guide provided, record your observations based on your participation in the tabletop exercise

AFTER ACTION REPORT

- AAR includes:
 - Summary of what happened
 - Analysis of performance of essential tasks
 - Analysis of demonstrated capacity to accomplish overall mission outcomes
 - Recommendations for improvements based on analysis
 - Improvement Plan Matrix

ACTIVITY 10: WRITE AND AFTER ACTION REPORT CONTRIBUTION

- Objective:
 - Develop an input, or “write-up” for your Tabletop exercise After Action Report (AAR)
- Instructions:
 - Utilizing the format provided in the workbook, develop an After Action Report contribution that outlines:
 - The objective the input is related to
 - Any noted strengths
 - The Area For Improvement
 - References
 - Analysis

AAR CONTRIBUTION EXAMPLE

- **Objective:** *Discuss participant knowledge of appropriate internal and external points of contact in response to an emergency that impacts the facility or organizations routine operations in accordance with existing plans, policies and procedures.*
- **Area For Improvement 1:** *After Hours/24 Hour Contact Information*
- **References:** *Acme LTCF Emergency Response Plan Annex 1: Emergency Contact List*
- **Analysis:** *“Staff noted during the exercise that contact information listed in the Emergency Response Plan only business hours numbers for emergency contacts other than 911 and would have been unable to reach critical partners”. Upon additional review, it was found that the plan had been updated six months prior to the exercise with expanded contact information, however, it was placed in a different part of the plan with a different title which caused confusion to staff therefore this led to staff being unable to locate correct information during the exercise.*

DEVELOPING RECOMMENDATIONS

- Recommendations should:
 - Both sustain and improve
 - Be forthright
 - Be specific and measurable
 - Use the active voice
 - Link to observations and analysis
 - Be consistent with other recommendations
 - Action items within the Improvement Plan should address the problem, not the recommendation

IDENTIFY IMPROVEMENTS

- Improvement planning should always take into account the current operational picture
- Plans should be targeted to a specific timeframe
- Budgetary concerns may be limiting
- Resources are limited
- Stress improvements that have the highest impact-to-cost ratio

IMPROVEMENT PLAN MATRIX

- A template for identifying recommendations and improvement actions and assigning responsibilities
- Includes:
 - Recommendations
 - Improvement actions
 - Responsible party
 - Completion date

Recommendation	Improvement Action	Responsible Party/Agency	Completion Date

ACTIVITY II: DEVELOP AN IMPROVEMENT PLAN

Objective:
Develop an Improvement Plan based on your exercise outcomes

Instructions: Place Improvement Plan inputs into the template:

- Recommendation
- Corrective Action
- Start Date
- Completion Date (Tentative)

IMPROVEMENT PLAN EXAMPLE

Recommendations	Improvement Action	Responsible Party/Agency	Start Date	Completion Date
<ul style="list-style-type: none"> Place all contact information for partners in one place in the Emergency Response Plan 	<ul style="list-style-type: none"> All contact information has been combined into one annex and it has been renamed “ACME LTCF ERP Annex I: Combined Emergency Contact Information” 	<ul style="list-style-type: none"> Dave Smith- Safety Manager, ACME Long Term Care, Dsmith@acme-LTCF.org 	<ul style="list-style-type: none"> 4/28/2023 	<ul style="list-style-type: none"> 6/21/2023

UNIT 4 SUMMARY

In this unit we:

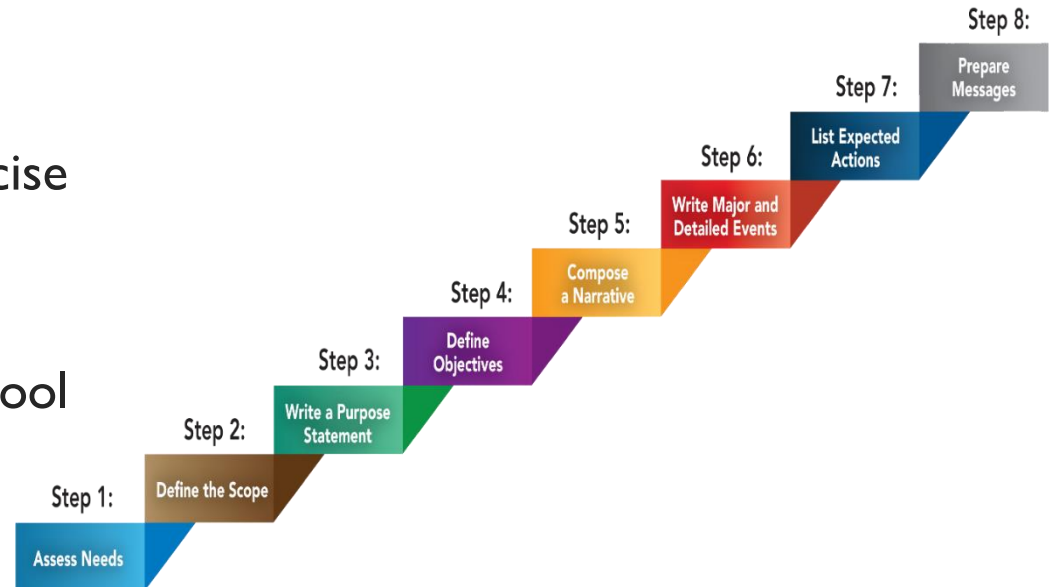
- Discussed the foundation for evaluation
- Recorder our exercise observations
- Developed an After Action Report and Improvement Plan based on todays exercise

WRAP UP

ACCOMPLISHMENTS, CONT.

You have:

- Learned about the types of exercise activities and the exercise process
- Assessed/reviewed your jurisdiction's/Agency/Office/School exercise needs
- Learned and practiced eight design steps
- Completed an Exercise Evaluation Guide
- Drafted an After Action Report and Improvement Plan



ADDITIONAL EXERCISE TRAINING COURSES

- Federal Emergency Management Agency Independent Study Courses:
 - IS-120.c-Introduction to Exercises
 - IS 130-How to be an Exercise Evaluator
- Classroom Courses:
 - L-146-Homeland Security Exercise and Evaluation Program Course (HSEEP)
 - E/L-131-Exercise Evaluation and Improvement Planning
 - E/L-139 Exercise Design and Development



QUESTIONS?

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SURVEY

