

**For Limited Distribution – Internal Use Only  
Responder Safety and Health**

**EXERCISE EVALUATION GUIDE**

<i>Exercise Name:</i> Orange County CA Point of Dispensing Full Scale Exercise <i>Exercise Date:</i> <b>October 18, 2018</b>	<i>Organization/Jurisdiction:</i> Orange County Health Care Agency/Health Disaster Emergency Management	<i>Venue/POD Site (check one):</i> <b>City of Irvine</b>
<b>Response</b>		
<i>Exercise Objective:</i> Demonstrate the ability to maintain security throughout each operational period.		
<i>Core Capability:</i> <b>Responder Safety and Health</b> The ability to protect public health agency staff responding to an incident.		
<b>Activities:</b> <ul style="list-style-type: none"><li>• Identify responder safety and health risks</li><li>• Monitor responder safety health actions</li><li>• Identify safety and personal protective needs</li></ul>		

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Associated Critical Tasks	Time	Observation Notes and Explanation of Rating	Target Rating (P,S,M,U)
Incident Command Post (ICP) is identified and secured.			
Plans and procedures are maintained to ensure interoperable communications during public safety and security response.			
Public safety and security operations are coordinated with Unified Command.			
An on-scene personnel identity system via vests and badging is implemented and maintained.			
Security plan is reviewed, revised and updated throughout the various stages of the operational period			
Security assets are activated and deployed to the POD.			
Appropriate personnel (sworn versus unsworn) were deployed for public safety and security of the POD site.			
Security personnel are briefed on POD staff and visitor access protocols.			
Security maintains POD site access control through security checkpoints.			
Security controls traffic and crowds within drive-through and walk-through areas.			

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Sworn or unsworn security is visible at the medication/supply storage location and during medication transportation to dispensing area.			
Identified first responders are checked in at the registration area (Nursing Students).			
Identified first responders are directed to the walk through to receive “medication”. (Nursing Students)			
Bottlenecks and throughput issues for first responders in the walkthrough area are identified and resolved efficiently.			
Pedestrian and vehicular traffic is controlled.			
Identified first responders are checked in at the registration area (Nursing Students).			
Identified first responders are directed to the walk through to receive prophylaxis. (Nursing Students.)			
Volunteer first responders signed out appropriately.			

Overall Rating \_\_\_\_\_

Evaluator Name \_\_\_\_\_

Evaluator E-mail \_\_\_\_\_

Phone \_\_\_\_\_

<b>Ratings Key</b>
P – Performed without Challenges
S – Performed with Some Challenges, but Adequately
M – Performed with Major Challenges
U – Unable to be Performed

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Task Number	Additional Observations

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**Ratings Definitions**

<b>Performed without Challenges (P)</b>	The activities and critical tasks associated with the core capability were completed in a manner that achieved the objective(s) and did not negatively impact the performance of other activities. Performance of this activity did not contribute to additional health and/or safety risks for the public or for emergency workers, and it was conducted in accordance with applicable plans, policies, procedures, regulations, and laws.
<b>Performed with Some Challenges (S)</b>	The activities and critical tasks associated with the core capability were completed in a manner that achieved the objective(s) and did not negatively impact the performance of other activities. Performance of this activity did not contribute to additional health and/or safety risks for the public or for emergency workers, and it was conducted in accordance with applicable plans, policies, procedures, regulations, and laws. However, opportunities to enhance effectiveness and/or efficiency were identified.
<b>Performed with Major Challenges (M)</b>	The activities and critical tasks associated with the core capability were completed in a manner that achieved the objective(s), but some or all of the following were observed: demonstrated performance had a negative impact on the performance of other activities; contributed to additional health and/or safety risks for the public or for emergency workers; and/or was not conducted in accordance with applicable plans, policies, procedures, regulations, and laws.
<b>Unable to be Performed (U)</b>	The activities and critical tasks associated with the core capability were not performed in a manner that achieved the objective(s).

**How to Document EEG Observations**

This EEG is used to annotate evaluator observations of critical tasks performed by players, which aligns to organizational capability target(s); it is not intended to be used for the annotation of corrective actions, recommendations or strengths/areas for improvement.

For example, a critical task may state: *Track resource supply/re-supply requests using established LDC tracking and documentation procedures.*

The observations may include information on how resource supply requests were tracked and documented; how the critical task was achieved or not achieved; and how players completed this task according to the policies, plans, and procedures.

After documenting observations, assign target ratings for each of the capability targets. To assign a target rating, review the documented observations of all the critical tasks aligned to the capability target and determine if the target was achieved. Then, assign the target one of three ratings: Performed without Challenge (P), Performed with Some Challenges (S), or Performed with Major Challenges (M). These categories differ according to how well critical tasks were performed, and are described further in your EEG Rating Definitions. Targets that were not performed can receive only one rating: Unable to be Performed (U). Once you have completed rating the targets, review your EEG observation notes section; if the section does not adequately explain the rating, please add further detail.

After the end of the exercise the completed EEGs are given to the Lead Evaluator for further processing.