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| ***Drill Name: 2018 SWMHE Functional Exercise******Drill Date: November 15, 2018*** | ***Organization/Jurisdiction:*** | ***Venue:*** |
| **--- Hospice & Home Health Providers Capabilities & Objectives ---** ***Health Care Preparedness and Response Capability 2: Health Care and Medical Response and Recovery Coordination**** Objective 1 – Activate the Incident Command System (ICS) and the facility Command Center (if applicable) within 45 minutes of incident  notification, to provide a structured and successful emergency response.
* Objective 2 – Maintain situational awareness by gathering and sharing real-time information related to the emergency, and the current  state of the health care delivery system through coordination with their local jurisdiction emergency management and local  Health Care Coalition partners

***Health Care Preparedness and Response Capability (HCPRC) 3: Continuity of Health Care Service Delivery*** * Objective 1 – Determine the center’s priorities for ensuring key functions are maintained throughout the emergency, including the provision  of care to existing patients within 2 hours

***Health Care Preparedness and Response Capability 4: Medical Surge*** * Objective 1 – Prepare for medical surge operations by activating appropriate plans (e.g., Emergency Operation Plan, Medical Surge Plan,  Pandemic Plan, Mass Casualty Plan, etc.) for all levels of care and populations, and ensure all personnel have been trained  in their use
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| Hospice & Home Health Based Objectives |
| **Drill Objective** | **Associated Critical Tasks** | **Observation Notes and** **Explanation of Rating** | **Target Rating** |
| **HCPR, Cap 2, Obj. 1**Activate the Incident Command System (ICS) and the facility Command Center (if applicable) within 45 minutes of incident notification, to provide a structured and successful emergency response. | * Identify immediate resource needs for the next operational period and communicate them to their city emergency management (SimCell) within 60 minutes
* Initiate and coordinate Incident Action Planning by conducting a briefing for all staff and beginning to compile an Incident Action Plan (IAP) within 30 minutes
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| **HCPR, Cap 2, Obj. 2**Maintain situational awareness by gathering and sharing real-time information related to the emergency, and the current state of the health care delivery system through coordination with their local jurisdiction emergency management and local Health Care Coalition partners.  | * Develop information sharing procedures specific to the response and document these procedures for staff.
* Utilize and test redundant communication systems such as email, fax, phone, etc., to notify staff and response partners of the status and resource needs of their patients.
* Ensure that business operations are sustainable for a potentially long-term event, and identify strategies, such as triaging, for sustainability in a long-term recovery plan and/or objectives.
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| **HCPR, Cap 3, Obj. 1**Determine the center’s priorities for ensuring key functions are maintained throughout the emergency, including the provision of care to existing patients within 2 hours. | * Activate the Emergency Operations Plan (EOP) and notify all staff of plan activation
* Consider the need for notification for staff of infectious disease event and reporting of staff and patients exhibiting symptoms.
* Put in place succession planning to maintain operations if primary positions become vacant due to the implications of the event
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| **HCPR, Cap 4, Obj. 1**Prepare for medical surge operations by activating appropriate plans (e.g., Emergency Operation Plan, Medical Surge Plan, Pandemic Plan, Mass Casualty Plan, etc.) for all levels of care and populations, and ensure all personnel have been trained in their use | * Activate any medical surge and/or pandemic procedures in the Emergency Operations Plan
* Assign present staff roles and responsibilities in preparing to redistribute patients to adjusted staffing levels.
* Reevaluate surge patient status in order adjust appropriate staffing.
* Reevaluate staff PPE and distribute appropriately.
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|  |  | **Final Core Capability Rating** |  |

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| **Ratings Key** |
| P – Performed without ChallengesS – Performed with Some ChallengesM – Performed with Major ChallengesU – Unable to be Performed  |

Evaluator Name

Evaluator E-mail

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## Ratings Definitions

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| **Performed without Challenges (P)** | The targets 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. |
| **Performed with Some Challenges (S)** | The targets 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. |
| **Performed with Major Challenges (M)** | The targets 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. |
| **Unable to be Performed (U)** | The targets and critical tasks associated with the core capability were not performed in a manner that achieved the objective(s). |