

# Koochiching County Health Department

## Transportation Tabletop

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## Exercise

After-Action Report / Improvement Plan 2014

February 11, 2014

<b>Exercise or Incident Name</b>	Koochiching County Health Department Transportation Tabletop Exercise
<b>Exercise or Incident Dates</b>	Friday, January 17, 2014
<b>Scope</b>	This exercise is a tabletop, lasting from 10-11:30 a.m. at Koochiching County Health Department. Exercise play is limited to the discussion of local health department staff at the Koochiching County Health Department between 10 a.m. and 11:30 a.m.
<b>Mission Area(s)</b>	Response
<b>Capabilities</b>	1: Community Preparedness 8: Medical Countermeasure (MCM) Dispensing 9: Medical Materiel (MM) Management and Distribution
<b>Objectives</b>	Increase understanding of transportation procedures in an emergency like a pandemic flu outbreak so we can provide prophylaxis vaccine to community members.
<b>Threat or Hazard</b>	Pandemic influenza outbreak
<b>Scenario or Incident Description</b>	We (KCHD) just received a phone call from the Minnesota Department of Health: There is pandemic flu reported in North Dakota and Wisconsin as well as in counties throughout Minnesota. Koochiching County residents must be vaccinated.
<b>Sponsor</b>	None
<b>Participating Organizations</b>	See Appendix B
<b>Point of Contact</b>	Lindsi Barnhart, Health Educator Koochiching County Health Department 1000 5 <sup>th</sup> Street International Falls, MN 56649

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## EXERCISE / INCIDENT SUMMARY

Transportation is an essential element of Emergency Preparedness (EP). Based on the tabletop exercise (TTX) conducted July 26, 2013, Koochiching County Health Department (KCHD) staff members need a clearer understanding (and a more specific plan) of transportation protocol in an emergency.

### *Scenario:*

We (KCHD) just received a phone call from the Minnesota Department of Health:

“There is pandemic flu reported in North Dakota and Wisconsin as well as in counties throughout Minnesota. Koochiching County residents must be vaccinated.”

### *Questions:*

What is the protocol for receiving the vaccine (focus specifically on the transportation aspect)?

We do not have a large staff and can only staff one mass dispensing site (at Rainy River Community College). How do we get people from throughout the county here?

- not everyone can drive

- even if they did drive, traffic/parking would be a bear. Ideas to manage that?

- what are our transportation options for people in International Falls to get to the College?

Who do we need to partner with and what needs to be done?

What is difficult about this transportation plan?

What is good about this transportation plan?

What other issues does this discussion raise?

### *Summary:*

Public Health staff members are responsible for obtaining, managing, educating about, and dispensing prophylaxis.

The Sheriff's Department is responsible for providing transportation in evacuations, delivering anything State Troopers may bring in an emergency that is needed in Koochiching County, and transporting prophylaxis to closed pods throughout the county.

In an emergency, KCHD staff members need to contact the Sheriff's Department, let them know what our transportation needs are, and work together from there.

But we also need to fill a gap in our plan. Regarding transporting residents of greater Koochiching County to an International Falls-based mass dispensing site, we need a more detailed plan.

EP is about working effectively with partners, not doing everything ourselves.

Notes were taken throughout the exercise and used to create this AAR/IP.

## ANALYSIS OF CAPABILITIES

Aligning exercise objectives and capabilities provides a consistent taxonomy for evaluation that transcends individual exercises to support preparedness reporting and trend analysis. Table 1 includes the exercise objectives, aligned capabilities, and performance ratings for each capability as observed during the exercise and determined by the evaluation team.

**Table 1 Summary of Capability Performance**

The following sections provide an overview of the performance related to each exercise or incident objective and the associated HPP, PHEP, or Core Capability, highlighting strengths and areas for improvement.

Objective	Capability	Performed without Challenges (P)	Performed with Some Challenges (S)	Performed with Major Challenges (M)	Unable to be Performed (U)
Identify groups to engage for partnerships (F1-2, T1)	1: Community Preparedness	P			
Engage private sector and gov't partners to fill response roles (F8-1, T2)	8: Medical Countermeasure (MCM) Dispensing				U
Identify transportation assets (F9-1, T2)	9: Medical Materiel (MM) Management and Distribution	P			

**Ratings Definitions:**

- Performed without Challenges (P): The targets and critical tasks associated with the 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 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 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

Objective	Capability	Performed without Challenges (P)	Performed with Some Challenges (S)	Performed with Major Challenges (M)	Unable to be Performed (U)
<p>workers; and/or was not conducted in accordance with applicable plans, policies, procedures, regulations, and laws.</p> <ul style="list-style-type: none"> <li>• Unable to be Performed (U): The targets and critical tasks associated with the capability were not performed in a manner that achieved the objective(s).</li> </ul>					

**Capability 1** 1: Community Preparedness & 9: Medical Materiel (MM) Management and Distribution

**Objective 1:** Identify groups to engage for partnerships (F1-2, T1) & Identify transportation assets (F9-1, T2)

**Gap Addressed:** A previous corrective action, and a recognized gap in a procedure or plan.

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

**Strengths**

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

Strength 1: Recognition of the gap

Strength 2: Commitment to and efforts toward closing the gap

**Areas for Improvement**

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

**Area for Improvement 1:** The current lack of engagement between Public Health and our local transportation resources

**Reference:** Lack of direction regarding specific transportation resources in our plans

**Analysis:** We are aware of the work we need to do, the relationships we need to build, and the MOUs we need to establish, but they have not been done yet

## **Capability 2 8: Medical Countermeasure (MCM) Dispensing**

**Objective 1:** Engage private sector and government partners to fill response roles (F8-1, T2)

**Gap Addressed:** A previous corrective action, and a recognized gap in a procedure or plan.

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

### **Strengths**

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

**Strength 1:** Appropriate transportation partners in our community are easy to identify and contact

### **Areas for Improvement**

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

**Area for Improvement 1:** The current lack of engagement between Public Health and our local transportation resources

**Reference:** Lack of formal arrangement (MOU) with area transportation resources

**Analysis:** We are aware of the work we need to do, the relationships we need to build, and the MOUs we need to establish, but they have not been done yet



## APPENDIX A: IMPROVEMENT PLAN

This Improvement Plan (IP) has been developed for Koochiching County Health Department as a result of Transportation Tabletop Exercise occurring on January 17, 2014.

Capability	Issue/Area for Improvement	Corrective Action	Capability Element <sup>1</sup>	Primary Responsible Organization	Organization Point of Contact	Start Date	Completion Date
Capability 1: 1: Community Preparedness & 9: Medical Materiel (MM) Management and Distribution	1.1 The current lack of engagement between Public Health and our local transportation resources	1.1.1 Engage with community transportation partners	Planning	KCHD	Lindsi Barnhart	February 18, 2014	August 22, 2014
		1.1.2 Establish MOUs with appropriate transportations partners					
Capability 2: 8: Medical Countermeasure (MCM) Dispensing	2.1. The current lack of engagement between Public Health and our local transportation resources	2.1.1 Engage with community transportation partners	Planning	KCHD	Lindsi Barnhart	February 18, 2014	August 22, 2014
		2.1.2 Establish MOUs with appropriate transportations partners					

Draft After Action Report submitted by: Name   Lindsi Barnhart   Date   February 11, 2014  

AAR/IP approved by designated agency representative: Name   Susan Congrave, Director   Date   February 11, 2014  

<sup>1</sup> Capability Elements are : Planning, Organization, Equipment, Training or Exercise

