

# Operational Readiness Review (ORR) Workshop



**Natalie Sanchez, Jaime Jones-Wormley and Mike Staley**  
CDC  
Division of State and Local Readiness

**Post-Workshop Webinar**  
August 3, 2017



Office of Public Health Preparedness and Response  
Division of State and Local Readiness

# Agenda

- ❑ **Activity and Form Overview**
- ❑ **Multi-Year Training and Exercise Form (MYTEP)**
- ❑ **After Action Review (AAR)**
- ❑ **Table Top Exercise (TTX)**
- ❑ **Full Scale Exercise (FSE)**
- ❑ **Dispensing Throughput Drill**

# Activity and Form Overview: Due Every 12 Months

Activity	ORR System Form	Submission Cycle	State	DFL	Territory	CRI
Staff Notification/Assembly Drill	Staff Notification and Assembly Drill	every 12 months		✓	Optional	✓
Site Activation/Availability Drill	Site Activation Drill	every 12 months		✓	Optional	✓
Facility Set Up Drill	Facility Set Up Drill	every 12 months		✓	Optional	✓
Training and Exercise Plan Workshop (TEPW)	Training and Exercise Planning Form	every 12 months	✓	✓	✓ (within 5 years)	
Multi-Year Training and Exercise Plan (MYTEP)	Training and Exercise Planning Form	every 12 months	✓	✓	✓	✓
PHEP Exercise	PHEP/Functional/Full Scale Exercise or Incident	every 12 months	✓	✓		
Emergency Operations Center (EOC) Staff Notification/Assembly	MCM: Distribution Full Scale Exercise/Incident Non-MCM: PHEP/Functional/Full Scale Exercise or Incident	every 12 months	✓	✓		

# Activity and Form Overview: Due Every 5 Years

Activity	ORR System Form	Submission Cycle	State	DFL	Territory	CRI
Dispensing Full-Scale Exercise (FSE)	Dispensing Full Scale Exercise/Incident	Within 5 Years		✓	Optional	✓
Distribution FSE	Distribution Full Scale Exercise/Incident	Within 5 Years	✓	✓	Optional	
After-action report (AAR)	After-action report (AAR) and Improvement plan (IP) FORM	Within 5 Years	✓	✓	✓(only incidents )	✓
Joint HPP/PHEP Functional Exercise (FE) or FSE	PHEP/Functional/Full Scale Exercise or Incident	Within 5 Years	✓	✓	only Puerto Rico	
Dispensing Throughput Drill (only if Mass Vaccination vs. Dispensing FSE was conducted)	Dispensing Throughput Drill	Within 5 Years		✓	✓	✓
Tabletop Exercise	Tabletop Exercise (TTX)	Within 5 Years	Option al	Option al	Optional	
Dispensing Full-Scale Exercise (FSE)	Dispensing Full Scale Exercise/Incident	Within 5 Years		✓	Optional	✓



**Jaime Jones-Wormley**

Medical Countermeasures Specialist

**TRAINING AND EXERCISE PLANNING  
WORKGROUP (TEPW) / MULTI-YEAR  
TRAINING AND EXERCISE PLAN  
(MYTEP)**

# Background/Overview on TEPW & MYTEP

## Why is this information collected?

***Training and Exercise Planning Workshop*** (TEPW) provides a collaborative workshop environment for public health stakeholders to engage in the creation of the ***Multi-Year Training and Exercise Plan*** (MYTEP).

MYTEP documents an organization's overall training and exercise program priorities for a specific multi-year time period. A Jurisdiction's MYTEP identifies the training and exercises that will help the organization build and sustain capabilities based on priorities identified in the TEPW.

## Background/Overview on TEPW & MYTEP

### Why is this information collected (continued)?

The form standardizes the collection of areas for improvement identified in the TEPW and allows for monitoring of exercise program priorities used to develop the MYTEP; it can also inform technical assistance activities.

The information collected in this form outlines the plans to address specific threats and hazards, identified areas for improvement, and Public Health Preparedness Capabilities.

The form **does not** replace the submission of the MYTEP document.

## Background/Overview on TEPW & MYTEP

### What impacts achieving “Established” status?

To be eligible for this status (**TEPW requirements**):

- ✓ States and DFLs must conduct a TEPW every 12 months
- ✓ Territories and freely associated states must conduct a TEPW at minimum once every five-years

To be eligible for this status (**MYTEP requirements**):

- ✓ States, DFLS, TFAS, and CRI local planning jurisdictions must submit the updated MYTEP every 12 months
- ✓ MYTEP should include at least one year of additional training and exercise planning (minimum of 2 years must be included to meet the multi-year requirement)

# Who does this form apply to? How often do I submit?

<b>TEPW Completed by:</b>	<b>Submission timeline:</b>
States	Annually
Directly Funded Localities	Annually
Territories and Freely Associated States	Once in 5 yrs (project period)
CRI planning jurisdictions	Not required

<b>MYTEP Completed by:</b>	<b>Submission timeline:</b>
States	Annually
Directly Funded Localities	Annually
Territories and Freely Associated States	Annually
CRI planning jurisdictions	Annually

# What do I need to know about this form?

<b>Area(s) for improvement identified - List in priority (include capability and, if applicable, function for each)</b>	Include a minimum of five (5) descriptions of improvement in order of priority with preparedness capability, function number, and HSEEP ratings definitions as applicable.
<b>Methodology and Tracking section</b>	Provide information about how training and exercises are selected and monitored with respect to progression and improvement (e.g., incidents occur that impact plan) as indicated in HSEEP guidelines. Refer to <a href="https://preptoolkit.fema.gov/web/hseep-resources">https://preptoolkit.fema.gov/web/hseep-resources</a> . Upload timeline or spreadsheet with planned exercises, if available.
<b>Number of trainings planned in current and future budget periods (2 separate questions)</b>	Include all trainings, not just MCM-specific trainings.

# What do I need to know about this form?

## **Changes in priorities from last year's MYTEP include**

Describe any significant changes from planned priorities; these should include shifts because of budgetary constraints, actual incidents, etc. Information should support why improvement plans are altered and how continued improvement is supported.

## **Changes in exercise schedule from previous MYTEP**

Briefly describe the reasons for any changes (both planned and unplanned) to the exercise schedule including changes based on priorities described in previous question. There should be updates to the MYTEP each year whether or not priorities differed.

# **ORR SYSTEM DEMONSTRATION**

**Questions?**



**Mike Staley**

Medical Countermeasure Specialist

# **AFTER ACTION REPORT (AAR)**

# Background/Overview on AAR

## Why is this information collected?

The form standardizes the information collected to evaluate the activity reported.

It is intended to provide critical information needed to determine the areas of strength, areas for improvement, and improvement efforts across the program.

## What impacts achieving “Established” status?

To be eligible for this status the AAR Form must be submitted at least once during the project period (July 1, 2017 – June 30, 2022).

# AAR Form

<b>120 days after incident end date</b>	Following Notice of Funding Opportunity (NOFO) requirements, AAR/IPs should be completed 120 days after the incident/exercise.
<b>Capabilities evaluated</b>	Although all capabilities are included in this form, only check the capabilities utilized/exercised in the incident/exercise.
<b>List any functions addressed. Describe in 1-2 sentences</b>	Briefly clarify the objectives being addressed at the function level as they relate to the incident or exercise. Include four evaluation ratings outlined by HSEEP.
<b>Key strengths identified</b>	Include PHEP capability and function number.
<b>Areas for improvement identified</b>	Include PHEP capability and function number and provide detail about identified areas of improvement. Include four evaluation ratings outlined by HSEEP.

# **ORR SYSTEM DEMONSTRATION**

**Questions?**



**Natalie Sanchez, MPH CHES**

Medical Countermeasures Team Lead

## **TABLE TOP EXERCISE (TTX)**

# Recommended

Completed By	Submission Timeframe
<input type="checkbox"/> States	<input type="checkbox"/> Annual requirement
<input type="checkbox"/> Directly funded localities	<input type="checkbox"/> Five-year requirement
<input type="checkbox"/> Territories or freely associated states (Incidents Only)	
<input type="checkbox"/> CRI local planning jurisdictions	
<p><b>Form Key Terms (refer to Appendix B):</b> CBRNE, event, functional needs, incident, preparedness, public health emergency, Public Health Emergency Preparedness (PHEP) cooperative agreement, rapid dispensing model (or non-medical model)</p>	

## Why Is This Information Collected?

- ❑ A **tabletop exercise (TTX)** is a discussion-based exercise intended to generate discussion of various issues regarding a hypothetical, simulated emergency; the TTX form standardizes the information collected from a TTX.
- ❑ TTXs can increase participants' general awareness while validating plans and procedures. Participants can also assess the type of systems needed to prevent, protect against, mitigate negative effects, and recover from a defined incident. TTXs can also help identify strengths and areas for improvement in preparedness plans.

# What do I need to know about this form?

Form question	Form Hint
<b>Start date/time</b> <b>End date/time</b>	A date picker (calendar pop-up) will appear for date/time fields. When using the date picker, the time will auto-populate as the time data is entered; simply click the time to edit to the relevant start/end time for the exercise or incident/event.
<b>Event Type</b>	If the exercise includes community reception centers for those potentially exposed to radioactive material, select CBRNE and CRC.
<b>Fiscal or other administrative processes and procedures included in exercise (select all that apply)</b>	Completing an administrative and fiscal preparedness TTX are recommended but not required.  Grant allocation and hiring surge questions to inform exercise objectives are available in the Performs Resource Library (see <i>2017-2022 HPP-PHEP Supplemental Guidelines (CDC-RFA-1701-01)</i> ).
<b>List jurisdictions that participated</b>	Provide any regional, district, ward, parish, local or federal partners that participated. There are no requirements for inclusion.
<b>Vulnerable Population Partner(s) that participated</b>	Vulnerable populations are those groups that will potentially be disproportionately impacted by an incident/event. It is recommended (but not required) that vulnerable population stakeholders be engaged during TTX process to ensure appropriate planning considerations are in place.

## **What impacts achieving established status?**

- ❑ **The TTX is optional but recommended. Once “established” is achieved for all modules (demographic, planning, and operations), conducting both**
  - a) community reception and
  - b) fiscal/administrative
  
- ❑ **TTX will begin to meet the criteria for achieving “advanced” status.**

# **ORR SYSTEM DEMONSTRATION**

**Questions?**



# FUNCTIONAL EXERCISE

# Overview

Completed By	Submission Timeframe
<input checked="" type="checkbox"/> States	<input checked="" type="checkbox"/> Annual requirement
<input checked="" type="checkbox"/> Directly funded localities	<input type="checkbox"/> Five-year requirement
<input checked="" type="checkbox"/> Territories or freely associated states	
<input type="checkbox"/> CRI local planning jurisdictions (May use for RDS/LDS sites)	
<b>Form Key Terms (refer to Appendix B):</b> full notification, Healthcare Preparedness Program (HPP), no notification (none), partial notification, public health emergency, Public Health Emergency Preparedness (PHEP) cooperative agreement, rapid dispensing model (or non-medical model), receiving, staging, and storing (RSS) facility, request, responder, site activation, site availability, staff assembly, staff notification	

## Why Is This Information Collected?

- ❑ The PHEP/Functional/Full Scale Exercise or Incident form provides operational information about EOCs, including staff notification and assembly procedures.
  - Detail about staff roster accuracy, notification, and assembly are collected. Further, EOC procedures including site activation and availability are collected.
- ❑ Engagement with vulnerable population stakeholders during an activation are collected to satisfy the PHEP program requirement to engage these partners if relevant to the exercise or incident/event.
  - Information provided might also satisfy the joint planning exercise if HPP and state, regional, or federal emergency management are involved in the incident/event.

# What do I need to know about this form?

Form question	Form Hint
<b>Type</b>	This form can be used to report information about all non-MCM related EOC activations.
<b>Start date/time</b> <b>End date/time</b>	A date picker (calendar pop-up) will appear for date/time fields. Select the appropriate information for the exercise or incident/event. For exercises, it is understood that the start/end date might be the same. When using the date picker, the time will auto-populate as the time data is entered; simply click the time to edit to the relevant start/end time for the exercise or incident/event.
<b>Event Type</b>	If the exercise includes community reception centers for those potentially exposed to radioactive material, select CBRNE and CRC.
<b>Fiscal or other administrative processes and procedures included in exercise (select all that apply)</b>	Grant allocation and hiring surge questions to inform exercise objectives are available in the Performs Resource Library (see 2017-2022 HPP-PHEP Supplemental Guidelines (CDC-RFA-1701-01)).

# What do I need to know about this form?

Form question	Form Hint
<b>Vulnerable population stakeholders included in planning for the exercise</b>	Vulnerable populations are those groups that will potentially be disproportionately impacted by an incident/event. It is recommended (but not required) that vulnerable population stakeholders be engaged while planning for or during an exercise or incident/event.
<b>EOC Site Activation Drill Information Communication platform/s used for notification</b>	Select relevant communication platforms used or tested; this should align with planning documentation.
<b>EOC Site Activation Drill Information Call notification process</b>	Select type of notification (automated, manual, hybrid); this should align with planning documentation.
<b>Emergency Operations Center (EOC) General Total Number of EOCs</b>	Provide total number of EOCs in your jurisdiction (regardless of type of EOC). Examples include, Department Operations Center (DOC), State Operation Center (SOC), EMA EOC, etc.

# What do I need to know about this form?

Form question	Form Hint
<b>Emergency Operations Center (EOC) General Number of EOC sites included in site activation</b>	Provide total number of EOC activated for this exercise or incident/event; this includes virtual EOC activations. All EOC activations that public health supports (regardless of type of EOC) should be reported.
<b>Emergency Operations Center (EOC) General Total number of sites that acknowledged notification</b>	If site responded outside of the specified event day/time, do not include them in the total number.
<b>Emergency Operations Center (EOC) General Acknowledgement completion time</b>	Auto-calculated value, based on the following formula:  (Date/time last site acknowledged) – (Date/time first site notified)
<b>Emergency Operations Center (EOC) General Acknowledgement percentage</b>	Auto-calculated value, based on the following formula:  $\frac{\text{Total \# sites who acknowledged}}{\text{Total \# sites notified}} \times 100$

# What do I need to know about this form?

Form question	Form Hint
Emergency Operations Center (EOC) General Availability percentage	Auto-calculated value, based on the following formula: $\frac{\text{Total \# sites made available} \times 100}{\text{Total \# sites notified}}$
Site Activation Emergency Operations Center (EOC), per site Availability completion time	Auto-calculated value, based on the following formula: (Date/time site made available) – (Date/time site notified)
Incident Management Lead Staff Current EOC Incident management lead staff	Provide the total number of EOC incident management staff notified for this exercise or incident/event.
Incident Management Lead Staff Incident management roles (or equivalent lead roles) activated (select all that apply)	Incident Commander, Finance/Administration Section Chief, Logistics Section Chief, Operations Section Chief, Planning Section Chief, and Public Information Officer all should be activated to satisfy PHEP Performance Measure 3.1 requirements (one person may fill multiple roles).

# What do I need to know about this form?

Form question	Form Hint
Incident Management Lead Staff Target time for assembly (in minutes)	Target time for assembly during an incident should be <60 minutes to satisfy PHEP Performance Measure 3.1 requirements.
Incident Management Lead Staff Acknowledgement completion time	Auto-calculated value, based on the following formula:  (Date/time last person acknowledged) – (Date/time first person notified)
Incident Management Lead Staff Acknowledgement percentage	Auto-calculated value, based on the following formula:  $\frac{\text{Total \# staff who acknowledged}}{\text{Total \# staff contacted}} \times 100$
Incident Management Lead Staff Assembly completion time	Auto-calculated value, based on the following formula:  (Date/time last staff member arrived at facility) – (Date/time first staff member notified)
Incident Management Lead Staff Assembly percentage	Auto-calculated value, based on the following formula:  $\frac{\text{Total \# staff assembled}}{\text{Total \# staff notified}} \times 100$

## **What impacts achieving established status?**

- ❑ To be eligible for this status, you must update and submit the Incident/Functional Exercise (FE)/Full-scale Exercise (FSE) form at minimum once every five years.**

# **ORR SYSTEM DEMONSTRATION**

**Questions?**



# DISPENSING THROUGHPUT FORM

# Dispensing Throughput in the ORR Schematic

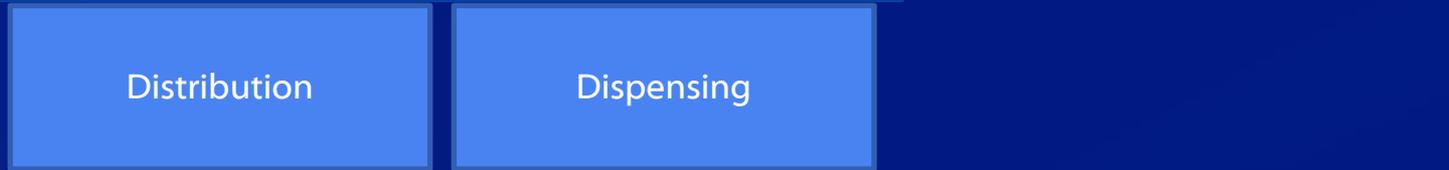
## Descriptive/Demographic Elements

Module 1



## Planning Elements

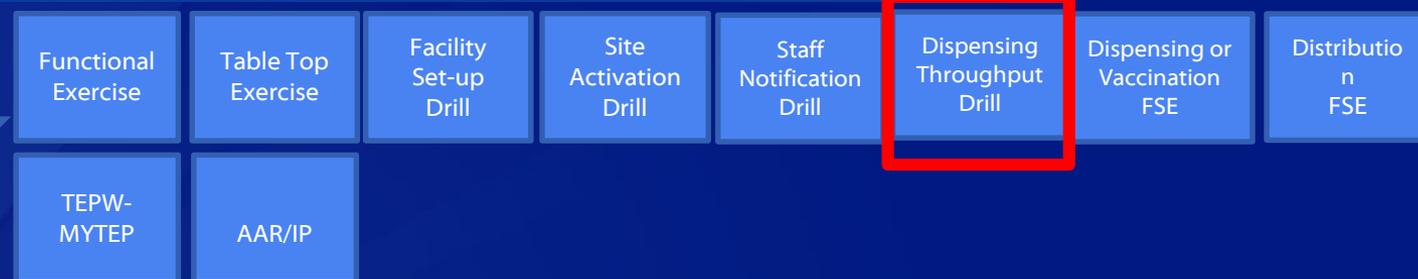
Module 2



Forms may be completed in any order. Interoperability between forms is built into the system.

## Operational Elements

Module 3



Forms may be completed in any order. Interoperability between forms is built into the system.

# **ORR SYSTEM DEMONSTRATION**

# Questions?



**For more information please contact Centers for Disease Control and Prevention**

1600 Clifton Road NE, Atlanta, GA 30333

Telephone, 1-800-CDC-INFO (232-4636)/TTY: 1-888-232-6348

E-mail: [cdcinfo@cdc.gov](mailto:cdcinfo@cdc.gov) Web: [www.cdc.gov](http://www.cdc.gov)

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.



Office of Public Health Preparedness and Response

Division of State and Local Readiness