Mass Care Pediatric Feeding Concerns - 'After' – Table-Top Exercise

Situation Manual

<mark>Month Day, Year</mark>

This Situation Manual (SitMan) provides exercise participants with all the necessary tools for their roles in the exercise. Some exercise material is intended for the exclusive use of exercise planners, facilitators, and evaluators, but players may view other materials that are necessary to their performance. All exercise participants may view the SitMan.

EXERCISE OVERVIEW

Exercise Name	Mass Care Pediatric Feeding Concerns TTX
Exercise Dates	[Indicate the start and end dates of the exercise]
Scope	This exercise is a Table Top Exercise, planned for one hour at [exercise location]. Exercise play is limited to [exercise parameters].
Mission Area(s)	Recover, Mitigation
Core Capabilities	Operational Coordination, Intelligence and Information Sharing, Supply Chain Integrity and Security, Long-Term Vulnerability Reduction, Threat and Hazard Identification, **Logistics and Supply Chain Management**, **Mass Care Services**, Public Health, Healthcare, and Emergency Medical Services, Health and Social Services
Objectives	- Financial considerations for donating items to clients, post-sheltering/Emergency use in shelters. Considerations for continuing no-cost lactation counseling for those without insurance coverage. - Consideration of incorporating Milk Banks into a jurisdiction's emergency planning, if not already included in your jurisdiction. - Identifying other Subject Matter Expert (SME) jurisdictions, who can assist with the POETE process for future exercises and responses of scale. - Supporting the *National Mass Care Strategy* with best practices, further examples of TTXs, etc. – so that others may benefit from your jurisdiction's success, on a continuous improvement basis. - Performing a network analysis on who needs to be 'at the table', including supply-chain management elements (Logistics) and funding (Finance/Admin) for this 'after' phase. - Provide content – along with the other Pediatric Feeding Exercises – for an After-Action Review/Improvement Plan
Threat or Hazard	[List any threat or hazard (e.g. natural/hurricane, technological/radiological release, etc.) which generates a need for mass care feeding. *Anything CBRNE-related will add complexities beyond this basic template.*]
Scenario	[list possible scenario here – if needed – it should include the post-response elements associated with the notice/no-notice Response phase missions of fixed feeding capabilities and/or disaster sheltering.]

Sponsor	[Sponsor or sponsors go here]
Participating Organizations	[Participating Organizations go here]
Point of Contact	[Insert the name, title, agency, address, phone number, and email address of the primary exercise POC (e.g., exercise director or exercise sponsor)]

GENERAL INFORMATION

Exercise Objectives and Core Capabilities

The following exercise objectives in Table 1 describe the expected outcomes for the exercise. The objectives are linked to core capabilities, which are distinct critical elements necessary to achieve the specific mission area(s). The objectives and aligned core capabilities are guided by elected and appointed officials and selected by the Exercise Planning Team.

Exercise Objective	Core Capabilities (select different or less if needed)
Financial Considerations for post-Response Support	Health and Social Services, Operational Coordination, , Long-Term Vulnerability Reduction
Milk Bank Question	Supply Chain Integrity and Security, Long-Term Vulnerability Reduction, Threat and Hazard Identification, Logistics and Supply Chain Management, Mass Care Services, Public Health, Healthcare, and Emergency Medical Services, Health and Social Services
External Partners and Assistance, including EMAC	Operational Coordination
Network Analysis and AAR/IP Work	All

Table 1. Exercise Objectives and Associated Core Capabilities

Participant Roles and Responsibilities

The term *participant* encompasses many groups of people, not just those playing in the exercise. Groups of participants involved in the exercise, and their respective roles and responsibilities, are as follows:

- **Players.** Players are personnel who have an active role in discussing or performing their regular roles and responsibilities during the exercise. Players discuss or initiate actions in response to the simulated emergency.

- **Observers.** Observers do not directly participate in the exercise. However, they may support the development of player responses to the situation during the discussion by asking relevant questions or providing subject matter expertise.

- **Facilitators.** Facilitators provide situation updates and moderate discussions. They also provide additional information or resolve questions as required. Key Exercise Planning Team members also may assist with facilitation as subject matter experts (SMEs) during the exercise.

- **Evaluators.** Evaluators are assigned to observe and document certain objectives during the exercise. Their primary role is to document player discussions, including how and if those discussions conform to plans, polices, and procedures.

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Exercise Structure

This exercise will be a multimedia, facilitated exercise. Players will participate in the following two modules, plus a hotwash:

- Module 1: Answering the Financial and Logistical Questions Regarding Distribution, Post-Response
- Module 2: The Milk Bank Question And EMAC Support
- Module 3:

- Exercise Hotwash

Each module begins with a multimedia update that summarizes key events occurring within that time period. After the updates, participants review the situation and engage in functional group discussions of appropriate preparedness/prevention/protection issues. For this exercise, the functional groups are as follows:

- Command & Control (Leadership offsite from the Shelter/Feeding Site)
- Shelter Mass Care Staff
- Casework and Recovery Staff
- Disaster Health Services Staff
- Logistics Staff

- Other Command and General Staff, such as Planners. Finance and Administration, Compliance/Oversight, PIOs, Safety Officers, and any other non-Sheltering Operational groups, such as Search & Rescue (SAR).

After these functional group discussions, participants will engage in a moderated plenary discussion in which a spokesperson from each group will present a synopsis of the group's actions, based on the scenario.

Exercise Guidelines

- This exercise will be held in an open, low-stress, no-fault environment. Varying viewpoints, even disagreements, are expected.

- Respond to the scenario using your knowledge of current plans and capabilities (i.e., you may use only existing assets) and insights derived from your training.

- Decisions are not precedent setting and may not reflect your organization's final position on a given issue. This exercise is an opportunity to discuss and present multiple options and possible solutions.

- Issue identification is not as valuable as suggestions and recommended actions that could improve Preparedness/Prevention/Protection efforts. Problem-solving efforts should be the focus.

Exercise Assumptions and Artificialities

In any exercise, assumptions and artificialities may be necessary to complete play in the time allotted and/or account for logistical limitations. Exercise participants should accept that

assumptions and artificialities are inherent in any exercise and should not allow these considerations to negatively impact their participation. During this exercise, the following apply:

- The exercise is conducted in a no-fault learning environment wherein capabilities, plans, systems, and processes will be evaluated.

- The exercise scenario is plausible, and events occur as they are presented.

- All players receive information at the same time.

Exercise Evaluation

Evaluation of the exercise is based on the exercise objectives and aligned capabilities, capability targets, and critical tasks, which are documented in Exercise Evaluation Guides (EEGs). Evaluators have EEGs for each of their assigned areas. Additionally, players will be asked to complete participant feedback forms. These documents, coupled with facilitator observations and notes, will be used to evaluate the exercise and compile the After-Action Report (AAR).

MODULE 1: ANSWERING THE FINANCIAL AND LOGISTICAL QUESTIONS REGARDING DISTRIBUTION, POST-RESPONSE

Briefing

While not necessarily organized as a typical Response-oriented TTX, this module is designed to invoke a collaborative discussion on the financial considerations for donating items to clients, for their own post-sheltering use, after they leave the shelter. This module should also include the considerations and processes needed for continuing no-cost lactation counseling for those without insurance coverage.

Caucus Discussion

Based on the prior two TTXs and your existing Mass Care Feeding Plan (which should now have elements in it for Pediatric Feeding, including breastfeeding support), how will your jurisdiction answer the questions related to continued use/need for durable medical equipment (DME), consumable medical supplies (CMS), and Personal Assistance Services – including lactation counseling (PAS), for clients after they demobilize from the shelter?

Key Issues

- DME and CMS may have been on loan to the shelter, and must be returned.

- Obtaining DME and CMS from the impacted community may not be possible (shortages, lack of personal funding, etc.)

- PAS may only be available, via Operational mission, during the Response Phase. For example, the Governor may invoke emergency powers to allow lactation counseling nurses from the state's WIC program, to support shelters for any clients – but that support ends at the shelter's door.

Questions

Based on the information provided, participate in the discussion concerning the issues raised in Module 1. Identify any critical issues, decisions, requirements, or questions that should be addressed at this time.

The following questions are provided as suggested subjects that you may wish to address as the discussion progresses. These questions are not meant to constitute a definitive list of concerns to be addressed, nor is there a requirement to address every question.

All Functional Groups

1. Will the jurisdiction purchase DME and CMS – in advance – so it is available for distribution to clients post-Response? This has to be available for everyone who needs it, not just citizens (who could potentially qualify for Federal Recovery Disaster Assistance, but there are both too many 'if's" and the timing does not work.) **Children cannot wait for these bureucratic steps, in order to be fed.**

2. How will the PAS work in your Jurisdiction? Can you get live staff pre-staged at the shelters and/or telephone support - and can you continue it onward post-Response?

3. Who is responsible for these? What do they need, in order to do this? No-Bid process, purchase orders, Purchase Credit Card? Do they need approvals?

4. Is there any capability to get items, same day?

5. Who else needs to be 'at the table', including supply-chain security elements (Planning and/or Operations), Intelligence, and funding (Finance/Admin) for this 'after' phase?

Targeted Functional Group Questions

1. For example, to Finance/Admin players – what if the disaster/emergency is or is not presidentially declared (PRESDEC)? Does that make a difference in how these items and services are procured?

MODULE 2: THE MILK BANK QUESTION AND EMAC SUPPORT

Briefing

Both of these items are probably Mitigation efforts for your jurisdiction. Working through these – as well as any results from the Hotwashes from the two prior 'before' and 'after' TTXs, will help develop a robust and comprehensive AAR/IP (which this exercise will be starting in Module 3).

Caucus Discussion

[Provide scenario event details, including any relevant locations and persons/groups involved in the scenario.]

Brief-Back

[Provide scenario event details, including any relevant locations and persons/groups involved in the scenario.]

Key Issues

- How can you incorporate Milk Banks into your Emergency Response Plans, for your jurisdiction? Think about the ways in which your jurisdiction utilizes Food Banks and even USDA supplies on PRESDECs.

- Who is responsible for this? Is there any capability to get donor milk to a client, post-Response sheltering?

- Should any of this capability be built into EMAC? DMAT? ESAR-VHP?

- Who else needs to be 'at the table', including crisis communications (PIO) and Hospital Coalitions, for this 'after' phase?

Questions

Based on the information provided, participate in the discussion concerning the issues raised in Module 2. Identify any critical issues, decisions, requirements, or questions that should be addressed at this time.

The following questions are provided as suggested subjects that you may wish to address as the discussion progresses. These questions are not meant to constitute a definitive list of concerns to be addressed, nor is there a requirement to address every question.

All Functional Groups

- How to build a working 'network map' for this concern, across all the disaster phases.

- Is Just-In-Time training an option?

- How can Milk Banks fit into the picture if they are part of this jurisdiction?

- How can local hospitals support these feeding missions?

MODULE 3: DEVELOPING A FULL EXERCISE SERIES AAR/IP

Briefing

[Provide scenario event details, including any relevant locations and persons/groups involved in the scenario.]

Caucus Discussion

 [Provide scenario event details, including any relevant locations and persons/groups involved in the scenario.]

Brief-Back

[Provide scenario event details, including any relevant locations and persons/groups involved in the scenario.]

Key Issues

- Text

Questions

Based on the information provided, participate in the discussion concerning the issues raised in Module 2. Identify any critical issues, decisions, requirements, or questions that should be addressed at this time.

The following questions are provided as suggested subjects that you may wish to address as the discussion progresses. These questions are not meant to constitute a definitive list of concerns to be addressed, nor is there a requirement to address every question.

All Functional Groups

- text

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HOTWASH

Questions

Please provide three quick 'ups' and 'downs' both about this topic, and this exercise itself.

3 Positives

1.

2.

3.

3 Areas for Improvement

1.

2.

3.

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APPENDIX A: EXERCISE SCHEDULE

Note: Because this information is updated throughout the exercise planning process, appendices may be developed as stand-alone documents rather than part of the SitMan.

Time	Activity
[Month Day, Year]	
0000	Registration
0000	Welcome and Opening Remarks
0000	Module 1: Briefing, Caucus Discussion, and Brief-Back
0000	Break
0000	Module 2: Briefing, Caucus Discussion, and Brief-Back
0000	Lunch
0000	Module 3: Hotwash
0000	Closing Comments

APPENDIX B: EXERCISE PARTICIPANTS

Participating Organizations
Federal
State
[Jurisdiction A]
[Jurisdiction B]

APPENDIX C: RELEVANT PLANS

[Insert excerpts from relevant plans, policies, or procedures to be tested during the exercise.]

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APPENDIX D: ACRONYMS

Acronym	Term
AAR/IP	After-Action Review/Improvement Plan
CMS	Consumable Medical Supplies
DHS	U.S. Department of Homeland Security
DMAT	Disaster Medical Assistance Teams, from the National Disaster Medical System
DME	Durable Medical Equipment
EMAC	Emergency Management Assistance Compact
ESAR-VHP	Emergency System for Advance Registration of Volunteer Health Professionals
HSEEP	Homeland Security Exercise and Evaluation Program
PAS	Personal Assistance Services
PRESDEC	Presidentially Declared Disaster or Emergency (i.e. Federal Assistance)
SAR	Search and Rescue
SitMan	Situation Manual
SME	Subject Matter Expert
TTX	Tabletop Exercise

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