

Mass Casualty Incident Response

“15 Minutes `til 50 Patients”

SCENARIO: Active Shooter

**Exercise Plan**

**November 6, 2019**

The Exercise Plan (ExPlan) gives elected and appointed officials, observers, media personnel, and players from participating organizations information they need to observe or participate in the exercise. Some exercise material is intended for the exclusive use of exercise planners, controllers, and evaluators, but players may view other materials that are necessary to their performance. All exercise participants may view the ExPlan.

# Exercise Overview

| **Exercise Name** | Active Shooter-Mass Casualty Incident Response (using 15-50 protocol) |
| --- | --- |
| **Exercise Dates** | November 6, 2019 |
| **Scope** | This exercise is a Full-Scale exercise planned for 4 hours at CHOC Children’s Orange Campus. Exercise play is limited to Mass Casualty Triage and Treatment areas, Hospital Command Center and Labor Pool |
| **Mission Area(s)** | Protection and Response |
| **Core Capabilities** | Access Control (Identity Verification), Mass Care Services, On Scene Security & Protection. |
| **Objectives** | Notification/Activation, Mass Casualty Triage established ≤15 minutes, HCC established ≤ 15 minutes, Labor Pool established ≤ 15 minutes, mass casualty triage/care/treatment and patient throughput |
| **Threat or Hazard** | Active Shooter/Mass Casualty Incident Response |
| **Scenario** | Active Shooter event at the CHOC Children’s Off-Site Specialty Facility resulting in approximately 100 traumatic injuries to pediatric patients, adult patients and access and functional needs patients. |
| **Sponsor** | CHOC Children’s Hospital |
| **Participating Organizations** | Included in this event will be CHOC Children’s, West Coast University Nursing students, University of San Francisco Nursing students, Biola University Nursing students, Orange County Health Care Agency, Saint Joseph’s Medical Center, City of Orange Police and Fire Departments. |
| **Point of Contact** | Christopher Riccardi, Business Continuity Program Manager, CHOC Children’s hospital, 1201 West La Veta Avenue, Orange, CA 92868 (714) 509-3351 |

# 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 Capability |
| --- | --- |
| Code Triage Activation | RESPONSE: Operational Coordination |
| MCI response (15 til 50) established ≤15 minutes | RESPONSE: Mass Care Services |
| Facility lock down (Simulated) | PROTECTION: Access Control |
| HCC established ≤15 minutes | RESPONSE: Operational Coordination |
| Labor Pool established ≤15 minutes | RESPONSE: Operational Coordination |
| Patient Throughput | RESPONSE: Mass Care Services |
| Patient Tracking | RESPONSE: Mass Care Services |

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.
* **Controllers.** Controllers plan and manage exercise play, set up and operate the exercise site, and act in the roles of organizations or individuals that are not playing in the exercise. Controllers direct the pace of the exercise, provide key data to players, and may prompt or initiate certain player actions to ensure exercise continuity. In addition, they issue exercise material to players as required, monitor the exercise timeline, and supervise the safety of all exercise participants.
* **Simulators.** Simulators are control staff personnel who role play nonparticipating organizations or individuals. They most often operate out of the Simulation Cell (SimCell), but they may occasionally have face-to-face contact with players. Simulators function semi-independently under the supervision of SimCell controllers, enacting roles (e.g., media reporters or next of kin) in accordance with instructions provided in the Master Scenario Events List (MSEL). All simulators are ultimately accountable to the Exercise Director and Senior Controller.
* **Evaluators.** Evaluators evaluate and provide feedback on a designated functional area of the exercise. Evaluators observe and document performance against established capability targets and critical tasks, in accordance with the Exercise Evaluation Guides (EEGs).
* **Actors.** Actors simulate specific roles during exercise play, typically victims or other bystanders.
* **Observers.** Observers visit or view selected segments of the exercise. Observers do not play in the exercise, nor do they perform any control or evaluation functions. Observers view the exercise from a designated observation area and must remain within the observation area during the exercise. Very Important Persons (VIPs) are also observers, but they frequently are grouped separately.
* **Support Staff.** The exercise support staff includes individuals who perform administrative and logistical support tasks during the exercise (e.g., registration, catering).

## 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.

### Assumptions

Assumptions constitute the implied factual foundation for the exercise and, as such, are assumed to be present before the exercise starts. The following assumptions apply to the exercise:

* 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.

* Exercise simulation contains adequate detail to allow players to react to information and situations as they are presented as if the simulated incident were real.
* Participating agencies/departments may need to balance exercise play with real-world emergencies. **Real-world emergencies take priority**.

### Artificialities

During this exercise, the following artificialities apply:

* Exercise communication and coordination is limited to participating departments and predetermined areas
* Only communication methods discussed in the pre exercise briefings are to be used during the exercise.

# Exercise Logistics

## Safety

Exercise participant safety takes priority over exercise events. The following general requirements apply to the exercise:

* A Safety Controller is responsible for participant safety; any safety concerns must be immediately reported to the Safety Controller. The Safety Controller and Exercise Director will determine if a real-world emergency warrants a pause in exercise play and when exercise play can be resumed.
* For an emergency that requires assistance, use the phrase **“real-world emergency.”** The following procedures should be used in case of a real emergency during the exercise:
* Anyone who observes a participant who is seriously ill or injured will immediately notify emergency services and the closest controller, and, within reason and training, render aid.
* The controller aware of a real emergency will initiate the **“real-world emergency”** broadcast and provide the Safety Controller, Senior Controller, and Exercise Director with the location of the emergency and resources needed, if any. The Senior Controller will notify the Hospital Command Center as soon as possible if a real emergency occurs.

### Emergency Medical Services

Notify the Safety Officer or an Exercise Controller and advise that this is a “REAL WORLD EMERGENCY”. This will halt all activities to ensure immediate care is provided to the affected individual/

## Site Access

### Security

If entry control is required for the exercise venue(s), the sponsor organization is responsible for arranging appropriate security measures. To prevent interruption of the exercise, access to exercise sites is limited to exercise participants. Players should advise their venue’s controller or evaluator of any unauthorized persons.

### Media/Observer Coordination

Organizations with media personnel and/or observers attending the event should coordinate with the sponsor organization for access to the exercise site. Media/Observers are escorted to designated areas and accompanied by an exercise controller at all times. Sponsor organization representatives and/or the observer controller may be present to explain exercise conduct and answer questions. Exercise participants should be advised of media and/or observer presence.

### Exercise Identification

Exercise staff may be identified by badges, hats, and/or vests to clearly display exercise roles; additionally, uniform clothing may be worn to show agency affiliation. Table 2 describes these identification items.

| Group | Color |
| --- | --- |
| Exercise Director | Black |
| Facilitator | Black |
| Controllers/Evaluators | Black |
| Actors | Plain Clothes |
| Observers/VIPs | Yellow Vests |
| Media Personnel | N/A |
| Players, Uniformed | PD/Fire Uniforms |
| Players, Civilian Clothes | Plain Clothes |

Table 2. Exercise Identification

# Post-exercise and Evaluation Activities

## Debriefings

Post-exercise debriefings aim to collect sufficient relevant data to support effective evaluation and improvement planning.

### Hot Wash

At the conclusion of exercise play, controllers facilitate a Hot Wash to allow players to discuss strengths and areas for improvement, and evaluators to seek clarification regarding player actions and decision-making processes. All participants may attend; however, observers are not encouraged to attend the meeting. The Hot Wash should not exceed 30 minutes.

### Controller and Evaluator Debriefing

Controllers and evaluators attend a facilitated C/E Debriefing immediately following the exercise. During this debriefing, controllers and evaluators provide an overview of their observed functional areas and discuss strengths and areas for improvement.

### Participant Feedback Forms

Participant Feedback Forms provide players with the opportunity to comment candidly on exercise activities and exercise design. Participant Feedback Forms should be collected at the conclusion of the Hot Wash.

## Evaluation

### Exercise Evaluation Guides

EEGs assist evaluators in collecting relevant exercise observations. EEGs document exercise objectives and aligned core capabilities, capability targets, and critical tasks. Each EEG provides evaluators with information on what they should expect to see demonstrated in their functional area. The EEGs, coupled with Participant Feedback Forms and Hot Wash notes, are used to evaluate the exercise and compile the After-Action Report (AAR).

### After-Action Report

The AAR summarizes key information related to evaluation. The AAR primarily focuses on the analysis of core capabilities, including capability performance, strengths, and areas for improvement. AARs also include basic exercise information, including the exercise name, type of exercise, dates, location, participating organizations, mission area(s), specific threat or hazard, a brief scenario description, and the name of the exercise sponsor and POC.

## Improvement Planning

Improvement planning is the process by which the observations recorded in the AAR are resolved through development of concrete corrective actions, which are prioritized and tracked as a part of a continuous corrective action program.

### After-Action Meeting

The After-Action Meeting (AAM) is a meeting held among decision- and policy-makers from the exercising organizations, as well as the Lead Evaluator and members of the Exercise Planning Team, to debrief the exercise and to review and refine the draft AAR and Improvement Plan (IP). The AAM should be an interactive session, providing attendees the opportunity to discuss and validate the observations and corrective actions in the draft AAR/IP.

### Improvement Plan

The IP identifies specific corrective actions, assigns them to responsible parties, and establishes target dates for their completion. It is created by elected and appointed officials from the organizations participating in the exercise, and discussed and validated during the AAM.

# Participant Information and Guidance

## Exercise Rules

The following general rules govern exercise play:

* Real-world emergency actions take priority over exercise actions.
* Exercise players will comply with real-world emergency procedures, unless otherwise directed by the control staff.
* All communications (including written, radio, telephone, and e-mail) during the exercise will begin and end with the statement **“This is an exercise.”**

## Players Instructions

Players should follow certain guidelines before, during, and after the exercise to ensure a safe and effective exercise.

### Before the Exercise

* Review appropriate organizational plans, procedures, and exercise support documents.
* Be at the appropriate site at least 30 minutes before the exercise starts. Wear the appropriate uniform and/or identification item(s).
* Sign in when you arrive.
* If you gain knowledge of the scenario before the exercise, notify a controller so that appropriate actions can be taken to ensure a valid evaluation.
* Read your Player Information Handout, which includes information on exercise safety.
* Safety and exercise briefings will be conducted with all players at the time/location designated in the Master Sequence of Events List (MSEL)

### During the Exercise

* Respond to exercise events and information as if the emergency were real, unless otherwise directed by an exercise controller.
* Controllers will give you only information they are specifically directed to disseminate. You are expected to obtain other necessary information through existing emergency information channels.
* Do not engage in personal conversations with controllers, evaluators, observers, or media personnel. If you are asked an exercise-related question, give a short, concise answer. If you are busy and cannot immediately respond, indicate that, but report back with an answer as soon as possible.
* If you do not understand the scope of the exercise, or if you are uncertain about an organization’s participation in an exercise, ask a controller.
* Parts of the scenario may seem implausible. Recognize that the exercise has objectives to satisfy and may require incorporation of unrealistic aspects. Every effort has been made by the exercise’s trusted agents to balance realism with safety and to create an effective learning and evaluation environment.
* All exercise communications will begin and end with the statement “THIS IS A DRILL” This precaution is taken so that anyone who overhears the conversation will not mistake exercise play for a real-world emergency.
* Speak when you take an action. This procedure will ensure that evaluators are aware of critical actions as they occur.
* Maintain a log of your activities. Many times, this log may include documentation of activities that were missed by a controller or evaluator.

### After the Exercise

* Participate in the Hot Wash at your venue with controllers and evaluators.
* Complete the Participant Feedback Form. This form allows you to comment candidly on emergency response activities and exercise effectiveness. Provide the completed form to a controller or evaluator.
* Provide any notes or materials generated from the exercise to your controller or evaluator for review and inclusion in the AAR.

## Simulation Guidelines

Because the exercise is of limited duration and scope, certain details will be simulated. The physical description of what would fully occur at the incident sites and surrounding areas will be relayed to players by simulators or controllers.

Exercise Schedule

**Master Sequence of Events List (HOSPITAL ONLY)**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Event # | Time | From | To | Method | Location | Message/Task | Expected Action | Remarks |
| P-1 | 6:00 AM |   | Exercise Staff |   | St Joe’s Motherhouse(SJMH) | Set Up Staging Area(s) | * Victim Manager to establish area(s)
 |   |
| P-2 | 6:30 AM |   | Exercise Staff |   | Victim Check- In Area | Staging Area | * Register students
* ID Badges for students
* Moulage victims
 |   |
| P-3 | 6:30 AM | Exercise Staff | Nursing Student Actors |   | SJMH | * USF Actors Check-In
* WCU Students check-in
* Biola Students

Check-in | Volunteers / Actors will begin checking in and will be directed to congregate in the Lecture Hall (?). During registration they will receive survivor cards.  |   |
| P-4 | 6:45 AM | Exercise Staff | USF/WCU Actors |   | SJMH | Begin Moulage | Those directed to receive moulage will begin receiving makeup that mimics their injuries |   |
| P-5 | 7:15 AM | Exercise Director | USF/WCU Actors |   | SJMH | Nursing Student Actor Briefing | A condensed briefing will be held to verify that Actors know their assigned location for the exercise and have been informed about safety and actor etiquette |   |
| P-6 | 7:30AM  | Senior Controller | Controllers/ Evaluators |   | Hospital Command Center | Controller & Evaluator Briefing | A condensed briefing will be held to verify that controllers/evaluators have received their materials, have received necessary communications equipment, and know their assigned location for the exercise |   |
| P-7 | 7:450 AM | Exercise Staff | Players |   | ED Check-In Area | Player Check In | Players will begin checking in ahead of exercise play. They will receive necessary materials and assignments at check-in and be directed to ED Family Room? |   |
| P-8 | 7:45 AM | Exercise Staff | Observers |   | Check InInformation Desk/Cafeteria | Observer Check In | All observers will be briefed on the exercise, and expectations for the exercise  |   |
| P-9 | **8:00 AM** | Senior Controller | Players |   | Staff Staging Area | Player Briefing | All players will be briefed on the exercise, and expectations for the exercise  |   |
| P-10 | **8:15 AM** | Senior Controller | Controllers/ Evaluators |   | CHOC | Controllers & Evaluators (CEs) report to designated Exercise locations | CEs report to their exercise locations, assume roles and perform pre-StartEx duties |   |
| P-11 | **8:15 AM** | Exercise Director | All exercise participants |   | CHOC | All players report to designated Exercise locations | All players, volunteers / actors will be directed to standby in their pre-exercise locations as assigned |   |
| P-12 | **8:15 AM** | Senior Controller | Controllers/ Evaluators |   | CHOC | Communications Check | Exercise Director will check in with each Controller to ensure working communications and that everyone is in place. |   |
| START EXERCISE0830 Wednesday, November 6, 2019 |
| E-1 | **8:30 AM** | Exercise Director | All exercise participants |   | CHOC | STARTEX | All exercise play begins |   |
| E-2 | **8:30 AM** | House Supervisor | PBX | Phone | CHOC | Code Triage Drill  | House Supervisor notifies PBX to initiate CODE TRIAGE |  |
| E-3 | **8:30** | PBX | Facility-Wide | Overhead notification | CHOC | CODE TRIAGE DRILL(x3) | Announcement to begin exercise response |  |
| E-4 | **8:30 AM** | Triage and Treatment Director | Players |   | Triage and Treatment Area | Triage and Treatment Set Up Begins | Upon notification of a Mass Casualty Incident, a Code Triage Drill is announced, and all involved hospital staff begin the 15 'til 50 procedures and set up of locations |   |
| E-5 | **8:45 AM** | Volunteers / Actors | Players |   | Triage and Treatment Area | Survivors begin arriving at the hospital | Hospital staff are fully prepared to triage and treat  |   |
| E-6 | **8:45 AM** | Exercise Director |  |   | HCC | HCC Activated | The HCC should be set up by 8:45 AM. If not, the HCC Evaluator will make note and prompt the HCC appropriately. |   |
| E-7 | **8:45** | Labor Pool |  |  | Labor Pool Established |  | Sign -In ALL reporting staff |  |
| E-8 | **8:55 AM** | HCC Controller as hospital executive | HCC | Controller-delivered note | HCC | The hospital executive wants an update on the status of all hospital departments and hospital facilities. This includes an update on whether any buildings or roads are closed, which departments are operational, and which departments are assisting in supporting surge efforts | If not done so already, the HCC will develop a situation status report that includes the status of all facilities and the CHOC campus, and the status of all hospital departments |   |
|  | **Q 15 Minutes** | ED | HCC | Hand Deliver | HCC | Patient Tracking forms  | Deliver to HCC when page is full **OR** Q 15 MinutesRegistration to enter names into FirstNet for tracking purposes |  |
|  | **8:55 AM** | ED | Labor Pool | Call |  | Request Trauma/OR/Surgery assistance to triage trauma victims (GSW) | Trauma and OR to assist with triage of pts in external treatment area and will establish pre-op OR triage |  |
|  | **8:55 AM** | Registration | Registration |  | Ext Treatment Area | Registration to quick-reg victims post triage | Registration will register patients at bed/cot side  |  |
| E-9 | **8:45-8:55AM** | In-Patient Staff | ED Charge | In-Person | ED | In-Patient Staff (2 RNs from every unit) sign in @ ED Nurse’s Station | RN # 1- Brings unit admits to the respective departments for admissionsRN #2- Establish mini inpatient units in the ED |  |
| E-10 | **9:00 AM** | ED Charge | In-Patient RN #1 | Actual | Units | ED needs to make space available for the surge of victims from the AS event | In-Pt RN #1 delivers patient(s) to respective units using ticket to ride to validate/verify transfer |  |
| E-11 | **9:15 AM** | HCC ControllerOC MAC | HCC | Controller-delivered note | HCC | Orange County EMS requests a copy of CHOC’s IAP when it is completed | If not done so already, the HCC will begin development of an abbreviated IAP |   |
| E-12 | **9:20 AM** | Labor Pool Controller as Triage and Treatment | HCC | Controller-delivered request | Labor Pool | Triage and Treatment informs the Labor Pool that they have a patient who speak only Swahili, and are requesting additional interpreters | The Labor Pool requests from the HCC Swahili translators. HCC begins identifying available resources  |   |
| E-13 | **9:20 AM** | Triage and Treatment | HCC | Status update | HCC | Triage and Treatment informs the HCC several dozen unaccompanied minors have presented at the Triage and Treatment area. Several of them do not have serious injuries and can be released to guardians. | HCC works with Labor Pool to identify personnel to accompany minors and a location for them to wait for a guardian to take them home |   |
| E-14 | **9:25 AM** | OR/Surgery/Trauma | HCC | Hand Delivered | HCC | Blood supplies are being depleted. Need more blood (various types) asap | Notify Blood Bank to obtain blood products from outside agencies |  |
| E-15 | **9:30 AM** | HCC Controller as concerned parent | HCC | Controller-delivered note | HCC | A concerned mother calls the PBX asking for information on whether her child is at the hospital. Her child's name is Katerina Garrison, age 13, and attends XXXXX Middle School. She is desperate for information | The HCC directs them to the Unaccompanied Minors area. |   |
| E-16 | **9:40 AM** | Labor Pool as nursing school | Labor Pool | Controller-delivered note | Labor Pool | The director of a local nursing school calls to let them know that they have 1st and 2nd year nursing students who can help the response and are available | Labor Pool sends information to HCC. HCC informs nursing school director that they can't currently use nursing students |   |
| E-17 | **9:30 AM** | HCC Controller as Triage and Treatment | HCC | Controller-delivered resource request | HCC | Resource requests for gloves, hand sanitizer, and traffic cones from triage and treatment | Operations will process the resource request, and coordinate with Logistics to determine a way to meet these resource needs.  |   |
| E-18 | **9:45 AM** | HCC Controller as hospital executive | HCC | Controller-delivered note | HCC | Hospital executives want to know what the demobilization plans are | Planning Section Chief outlines demobilization priorities and directions for demobilization |   |
| E-19 | **9:55 AM** | Simulation cell as hospital executive | HCC | Controller-delivered note | HCC | Hospital executives are requesting a briefing on the number of patients CHOC has seen and how quickly staff members responded to the incident and were ready to receive survivors  | HCC staff continue to work with Triage and Treatment personnel to track patients and develop situational awareness |   |
| E-20 | **10:00 AM** | Victim Manager | External Triage | Patient Surge | Ext. Triage | Secondary surge of patients (15-20) | External Treatment areas to triage, manage and care for patient surge |  |
| E-21 | **11:00 AM** | Exercise Director | All exercise participants | Announce-ment | CHOC | ENDEX |   |   |
| E-22 | **10:30 AM - 11:00 AM** | Senior Controller | All Players | Announce-ment | CHOC | Clean up of exercise sites and demobilization of resources | All exercise players will follow plans and procedures to return resources, demobilize personnel, and track paperwork and actions |  |
| END EXERCISE |
| A-1 | **10:30 AM - 11:00 AM** | Exercise Director | All Exercise Participants |   | **St. Joseph’s Motherhouse** | Actor Hot Wash | Actors will participate in a Hot Wash to review strengths and gaps from the exercise |   |
| A-1 | **11:00 AM - 11:45 AM** | Exercise Director | All key Players; Controllers/ Evaluators |   | 1st Floor Conference Room (HCC) | Player Hot Wash | All exercise participants will participate in a Hot Wash to review strengths and gaps from the exercise |   |
| A-2 | **11:45 PM to 12:30 PM** | Exercise Director | Controllers/ Evaluators |   | 1st Floor Conference Room (HCC) | Controller/Evaluator Debrief | All Controllers and Evaluators will participate in the CE Debrief |   |

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| --- |
| **Master Sequence of Events-Off Site Specialty Center** ***NOTE: These activities drive the MCI Response*****Background Exercise Scenario Information** Its opening day for a new CHOC location and several guests, associates, community members and patient families are on hand to celebrate. One security staff member is in theparking lot observing traffic when he notices an unknown adult male wearing a heavy trench coat dressed in all black behaving unusually. He radios to the office to inform them of the suspicious behavior and begins to monitor the subject. As the ceremony continues, the subject blends into the crowd and disappears. The center associates open the center begin touring their work areas. Shortly thereafter, you hear load screams and gun fire coming from the office inside the center. Staff, visitors and guests are fleeing the building and some of them are covered in blood with visible injuries. The gunman started at the reception lobby and is walking down the hall away, towards patient rooms, staff lounges and common areas.  |
| **Event #** | **Time** |  **From** | **To** | **Location** | **Message/Task** | **Expected Action** | **Controller Notes** | **Objectives/Tasks** |
| **Wednesday, November 6, 2019** |
| P-1 | 0630 AM |   | Exercise Staff | Autism Center | Exercise staff arrival, prep and quick briefing | Set-up to receive  |   | N/A |
| P-2 | 6:45 AM |   | Exercise Staff | Autism Center | Exercise Check in Site Set Up | Set-up exercise Check In site location. Exercise Check In site will handle observers, and player. After registration, participants will be directed to the appropriate briefing room |   | N/A |
| P-3 | 7:00 AM | Exercise Staff | Exercise Staff | Autism Center | Exercise Volunteers Check-in | Volunteers / Actors will begin checking in and will be directed to congregate in the briefing room. During registration they will receive Active Shooter victim cards.  |   | N/A |
| P-4 | 7:15 AM | Senior Controller | Controllers/ Evaluators | Autism Center | Controller/Evaluator Briefing | A condensed briefing will be held to verify that controllers/evaluators have received their materials, communications equipment, and know their assigned location for the exercise |   | N/A |
| P-5 | 7:30 AM | Exercise Director | Exercise Volunteers | Autism Center | Exercise Volunteers | A condensed briefing will be held to verify that Actors know their assigned location for the exercise and have been informed about safety and actor etiquette |   | N/A |
| P-6 | 7:30 AM | Exercise Staff | Players/OPD & OFD | Autism Center | Player Check In | Players will begin checking in ahead of exercise play.  |   | N/A |
| P-7 | 8:00 AM | Exercise Staff | Observers | Autism Center | Observer Check In | All players will be briefed on the exercise, and expectations for the exercise  |   | N/A |
| P-8 | 8:00 AM | OPD/OFD | Players | Autism Center | Player Briefing | All players will be briefed on the exercise, and expectations for the exercise and conduct a firearms safety check/briefing |   | N/A |
| P-9 | 8:15 AM | Controller | Students/Associate Volunteers | Autism Center | Students/Associate Volunteers Briefing | A condensed briefing held to verify all participants know their assigned locations; provide a safety briefing and review “No Access” areas and deploy to the appropriate work stations and perform pre-start ex duties |   | N/A |
| P-10 | 8:15 AM | Senior Controller | Controllers/ Evaluators | Autism Center | Controllers/Evaluators/Players report to designated Exercise locations | CEs and players report to their exercise locations, assume roles and perform pre-start ex duties |   | N/A |
|   |
| P-14 | 8:15 AM | Exercise Director | All exercise participants | Autism Center | All players report to designated Exercise locations | All players, volunteers /actors will be directed to standby in their designated locations |   | N/A |
| P-15 | 8:20 AM | Senior Controller | Controllers/ Evaluators | Autism Center | Communications Check | Senior Controller will check in with each Controller to ensure working communications and that everyone is in place. |   | N/A |
| **EXERCISE PLAY** |
| E-1 | 8:30 AM | Exercise Director | All exercise participants | Autism Center | STARTEX | All exercise play begins |   | N/A |
| E-2 | 8:35 AM | Exercise  | Volunteer Associates | Autism Center | Active shooter on site. Shots heard. Multiple calls from participants on play phones. (Calls on play phone are monitored by Controllers.) Injects occur with # staged patients and visitors  | Activities and flow monitored by controllers |   | N/A |
|   |
| E-3 | 8:35 AM | Evaluator | Volunteer Associates | Autism Center | Participants take actions to leave (simulated); Run, Hide, Fight | Participants practice actions (8:35-9:00AM) |   | N/A |
| E-4 | 8:40 AM | Controller | Volunteer Associates | Autism Center | Active Shooter code announced | Phone call to 911 simulated, Controller announces using bullhorn. |   | N/A |
| E-5 | 8:45 AM | OPD Evaluator | Players | Autism Center | Police arrive at scene |   |   | N/A |
| E-6 | 8:50AM | OPD Evaluator | Players | Autism Center | Police address the threat |   |   | N/A |
| E-7 | 9:00 AM | OPD Evaluator | Players | Autism Center | Police secure the building |   |   | N/A |
| E-8 | 9:05 | OFD Evaluator | Players 3 engines | Autism Center | OFD Engines Stage and Coordinate RTF Operations |   |   | N/A |
|   |
| E-8 | 9:10 AM | OPD/OFD Evaluator | Players | Autism Center | Police Fire assume Rescue Task Force Operations 10 # victims  |   |   | N/A |
| E-9 | 9:30 AM | All Participants | All Participants | Autism Center |   | Drill #1 Ends |   | N/A |
| E-10 | 9:30 AM |   |   | Autism Center | All players will be briefed on the exercise, and expectations for the exercise and conduct a firearms safety check/briefing |   |   | N/A |
| E-11 | 9:35 AM |   |   | Autism Center | A condensed briefing held to verify all participants know their assigned locations; provide a safety briefing and review “No Access” areas and deploy to the appropriate work stations and perform pre-start ex duties |   |   | N/A |
| E-12 | 9:45 AM |   |   | Autism Center | Controllers/Evaluators and players report to their exercise locations, assume roles and perform pre-start ex duties |   |   | N/A |
| E-13 | 9:50 AM |   |   | Autism Center | Senior Controller will check in with each Controller to ensure working communications and that everyone is in place. |   |   | N/A |
| E-14 | 10:00AM |   |   | Autism Center | STARTEX | All exercise play begins |   | N/A |
| E-15 | 10:05 AM |  |  | Autism Center | E-25 |  |  | N/A |
| E-16 | 10:10 AM |  |  | Autism Center | Participants take actions to leave (simulated); Run, Hide, Fight |  |  | N/A |
| E-17 | 10:15 AM |  |  | Autism Center | Active Shooter code announced, simulated call to 911 |  |  | N/A |
| E-18 | 10:20AM |  |  | Autism Center | Police arrive at scene |  |  | N/A |
| E-19 | 10:30 AM |  |  | Autism Center | Police address the threat |  |  | N/A |
| E-20 | 10:35 AM |  |  | Autism Center | Police secure the building |  |  | N/A |
| E-21 | 10:35 AM |  |  | Autism Center | OFD Engines Stage and Coordinate RTF Operations |  |  | N/A |
| E-22 | 10:40 AM |  |  | Autism Center | Police Fire assume Rescue Task Force Operations 10 # victims  |  |  | N/A |
| E.23 | 11:00 AM |  |  | Autism Center |   | Drill Ends |  | N/A |
|  |
| **POST EXERCISE PLAY** |
| A-1 | 11:00AM | Exercise Director | All Exercise Participants | Autism Center | Participant Hot Wash | Actors will participate in a Hot Wash to review strengths and gaps from the exercise |   | N/A |
| A-2 | 11:00 AM - 11:45 AM | Lead OPD/OFD Controllers | All key Players; Controllers/ Evaluators | Autism Center | Player Hot Wash | All exercise participants will participate in a Hot Wash to review strengths and gaps from the exercise |   | N/A |
|   |
| A-3 | 11:45 PM to 12:30 PM  | Lead Controller | Controllers/ Evaluators | Autism Center | Controller/Evaluator Debrief | All Controllers and Evaluators will participate in the CE Debrief |   | N/A |

Exercise Participants

|  |
| --- |
|  |
| Participating Organizations |
| **Hospitals** |
| CHOC Children’s |
| Fountain Valley Regional Hospital & Medical Center |
| St. Joseph’s Orange |
| Mission Hospital |
| University of California Irvine (UCI) |
| Children’s Hospital Los Angeles |
| Pomona Valley Hospital Medical Center |
| Orange County Global Medical Center |
| Martin Luther King Medical Center |
| Miller’s Children’s Hospital/Memorial Care Long Beach |
| **Orange County** |
| Orange County Emergency Services Agency |
| Orange County Hospital Preparedness Program |
| Orange County Public Health Emergency Preparedness |
| Health Care Coalition of Orange County |
| **City of Orange** |
| Orange Police Department |
| Orange Fire Department |
| St. Joseph’s Motherhouse |
| **Nursing Programs** |
| University of San Francisco (Orange Campus) |
| West Coast University |
| Biola University |
|  |
|  |

Communications Plan

CHOC Specific Information

Exercise Site Maps

Figure D.1: [Map Title]

[Insert map]

Figure D.2: [Map Title]

[Insert map]

Acronyms

| Acronym | Term |
| --- | --- |
| **AAM** | After Action Meeting |
| **AAR** | After Action Report |
| **C&O** | Concepts & Objectives |
| **C/E** | Controller/Evaluator |
| **CHOC** | CHOC Children’s Hospital |
| **DHS** | Department of Homeland Security |
| **EEGs** | Exercise Evaluation Guide |
| **EndEx** | End of Exercise |
| **EOC** | Emergency Operations Center |
| **ExPlan** | Exercise Plan |
| **FEMA** | Federal Emergency Management Agency |
| **FPM** | Final Planning Meeting |
| **FSE** | Full Scale Exercise |
| **HICS** | Hospital Incident Command System |
| **HSEEP** | Homeland Security Exercise Evaluation Program |
| **IP** | Improvement Plan |
| **MSEL** | Master Sequence of Events List |
| **POC** | Point of Contact |
| **SitMan** | Situation Manual |
| **SME** | Subject Matter Expert |
| **SOPs** | Standard Operating Procedures |
| **StartEx** | Start of Exercise |
| **USF** | University of San Francisco Nursing Program Orange Campus |
| **WCU** | West Coast University Nursing Program |