

Radiation Injury Treatment Network (RITN) Houston Regional Response Full Scale Exercise 2019

Exercise Plan

April 29, 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	Radiation Injury Treatment Network (RITN) Houston Regional Response Full Scale Exercise 2019
Exercise Dates	April 29, 2019
Scope	This exercise is a full scale exercise, planned for four hours at Ellington Field and four hours at Texas Children’s Hospital (TCH). Exercise play is limited to movement of simulated patients through a patient reception center at Ellington Field and a patient reception center process at Texas Children’s Hospital Main Campus.
Mission Area(s)	Response
Core Capabilities	Healthcare Preparedness Emergency Operations Coordination Information Sharing Medical Surge
Objectives	<ol style="list-style-type: none">1. Assess Texas Children's Hospital and Patient Reception Center Incident command staff’s ability to monitor situational awareness and deliver appropriate staff briefings to prepare for the receipt of radiation-injury casualties.2. Assess operational coordination with external organizations to include the Federal Coordinating Center (FCC), Houston Office of Emergency Management, Southeast Texas Regional Advisory Council, and others regarding the transfer and receipt of patients received at the Patient Reception Center.3. Examine the ability of assigned organizations to coordinate and support the consistent triage and treatment of patients arriving at the Patient Reception Area by utilizing local resources in conjunction with RITN SOPs.4. Test triage of patients received from the FCC and make treatment determinations for inpatients and outpatients.5. Assess ability to coordinate housing, transportation, and other assistance needs for families of radiation-injury casualties who have arrived from distant locations.

Threat or Hazard	Radiological release
Scenario	Radiological event occurs in Chicago, IL with the detonation of a 10 kiloton improvised radiological device
Sponsor	This exercise was made possible by funding awarded through the FY2019 Radiation Injury Treatment Network (RITN) Functional Exercise Grant, with support from the National Marrow Donor Program (NMDP) and the Department of the Navy, Office of Naval Research for the NMDP (ONR)
Participating Organizations	Texas Children’s Hospital MD Anderson Cancer Center Houston Fire Department Michael E. DeBakey VA Medical Center Southeast Texas Regional Advisory Council AMR Ambulance
Point of Contact	Aaron S Freedkin, MS, CEM, CHEP Manager, Emergency Management Texas Children’s Hospital asfreedk@texaschildrens.org

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
Assess Texas Children's Hospital and Patient Reception Center Incident command staff's ability to monitor situational awareness and deliver appropriate staff briefings to prepare for the receipt of radiation-injury casualties.	Healthcare Preparedness
Assess operational coordination with external organizations to include the Federal Coordinating Center (FCC), Houston Office of Emergency Management, Southeast Texas Regional Advisory Council, and others regarding the transfer and receipt of patients received at the Patient Reception Center.	Emergency Operations Coordination
Examine the ability of assigned organizations to coordinate and support the consistent triage and treatment of patients arriving at the Patient Reception Area by utilizing local resources in conjunction with RITN SOPs.	Emergency Operations Coordination
Test triage of patients received from the FCC and make treatment determinations for inpatients and outpatients.	Medical Surge
Assess ability to coordinate housing, transportation, and other assistance needs for families of radiation-injury casualties who have arrived from distant locations.	Information Sharing Emergency Operations Coordination

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.
- **Media Personnel.** Some media personnel may be present as observers, pending approval by the sponsor organization and the Exercise Planning Team.
- **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 sufficient detail to allow players to react to information and situations as they are presented as if the simulated incident were real.

- Participating agencies 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 exercise organizations, venues, and the SimCell.
- Only communication methods listed in the Communications Directory are available for players to use 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 Service Response Center as soon as possible if a real emergency occurs.

Fire Safety

Standard fire and safety regulations relevant to the Texas Children’s Hospital will be followed during the exercise.

Emergency Medical Services

The sponsor organization will coordinate with local emergency medical services in the event of a real-world emergency and the Texas Children’s Hospital Emergency Center.

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
Controllers	Red
Evaluators	Blue
Support Staff	White
Observers/VIPs	Green
Safety	Orange

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.

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 an exercise.**” 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. A SimCell will simulate the roles and interactions of nonparticipating organizations or individuals.

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 ExPlan.]

Time	Personnel	Activity	Location
4/29/2019 Part 1			
0800	Controllers, evaluators, exercise staff	Controller and Evaluator Briefing	<ul style="list-style-type: none"> Ellington Field
0800	Participants	Players briefing	<ul style="list-style-type: none"> Ellington Field
0815	Participants	Patient Reception Center Set up begins	<ul style="list-style-type: none"> Ellington Field
0845	Patient Actors	Patient actor briefing	<ul style="list-style-type: none"> Ellington Field
0910	All	Exercise play starts: First aircraft arrives with adult patients 1-25 and pediatric patients 1-25	<ul style="list-style-type: none"> Ellington Field
1000	All	Second aircraft arrives with adult patients 26-50 and pediatric patients 26-50	<ul style="list-style-type: none"> Ellington Field
1115	Participants	All patients triaged and set for transport to receiving hospitals Exercise play ends	<ul style="list-style-type: none"> Ellington field
1130	Participants	Exercise Debriefing	<ul style="list-style-type: none"> Ellington Field
4/29/2019 Part 2			
1200	Participants	Sign in and briefing	<ul style="list-style-type: none"> PFW 4th floor Conference room (Texas Children's Hospital Main Campus)
1210	Actors	Sign in and Briefing	<ul style="list-style-type: none"> FPW 4th floor education room
1215	Controllers, evaluators, and exercise support	Sign in and Briefing	<ul style="list-style-type: none"> PFW 4th floor Foyers outside of exercise locations
1225	All	Patient Reception Center set up begins	<ul style="list-style-type: none"> PFW 4th floor
1300	All	Exercise play begins	<ul style="list-style-type: none"> PFW 4th floor
1530	All	Exercise play ends	<ul style="list-style-type: none"> PFW 4th floor

Time	Personnel	Activity	Location
Immediately following end of exercise play	All	Venue Hot Washes/turn in all Participant Feedback Forms	<ul style="list-style-type: none">• PFW 4th floor
1600	All	Exercise Ends	<ul style="list-style-type: none">• PFW 4th floor

APPENDIX B: EXERCISE PARTICIPANTS

Participating Organizations
Federal
DeBakey VA Medical Center
Federal Coordination Center (FCC)
State
Department of State Health Services (DSHS)
Jurisdictions
Houston Fire Department
Hospitals (RITN)
MD Anderson Cancer Center
Hospitals (NDMS)
St. Joseph's Medical Center (Downtown)
St. Joseph's The Heights Hospital
Memorial Hermann – Texas Medical Center
St. Luke's Medical Center
Ben Taub Hospital

APPENDIX C: COMMUNICATIONS PLAN

COMMUNICATIONS PLAN

All spoken and written communications will start and end with the statement ["THIS IS AN EXERCISE."]

Player Communications

Exercise communications do not interfere with real-world emergency communications. Players use routine organization communications systems. Additional communication assets may be made available as the exercise progresses. Each venue or organization coordinates its internal communication networks and channels.

Controller Communications

Part 1: The principal methods of information transfer for controllers during the exercise will be cell phone. The controller communications network allows the Exercise Director or Senior Controller to make and announce universal changes in exercise documentation, such as changes to the Master Scenario Events List (MSEL).

The primary means of communication among the SimCell, Controllers, and Players is cell phones as needed. A list of key telephone numbers will be available before the exercise starts.

If participating agencies are able to use their departmental radios, a list of call signs will be provided.

Part 2: The principal methods of information transfer for controllers during the exercise is 2-way radio. The controller communications network allows the Exercise Director or Senior Controller to make and announce universal changes in exercise documentation, such as changes to the Master Scenario Events List (MSEL).

The primary means of communication among the SimCell, Controllers, and Players is radio; channel nine (controllers) and channel ten (players), telephone Voalte phones as needed. A list of key telephone and radio call signs will be available before the exercise starts.

Communications Check

Before the exercise, the Simulation Cell conducts a communications check with all interfacing communications nodes to ensure redundancy and uninterrupted flow of control information.

Player Briefing

Controllers may be required to provide scenario details to participants to begin exercise play. Technical handouts or other materials also may be provided to orient players with the exercise.

Public Affairs

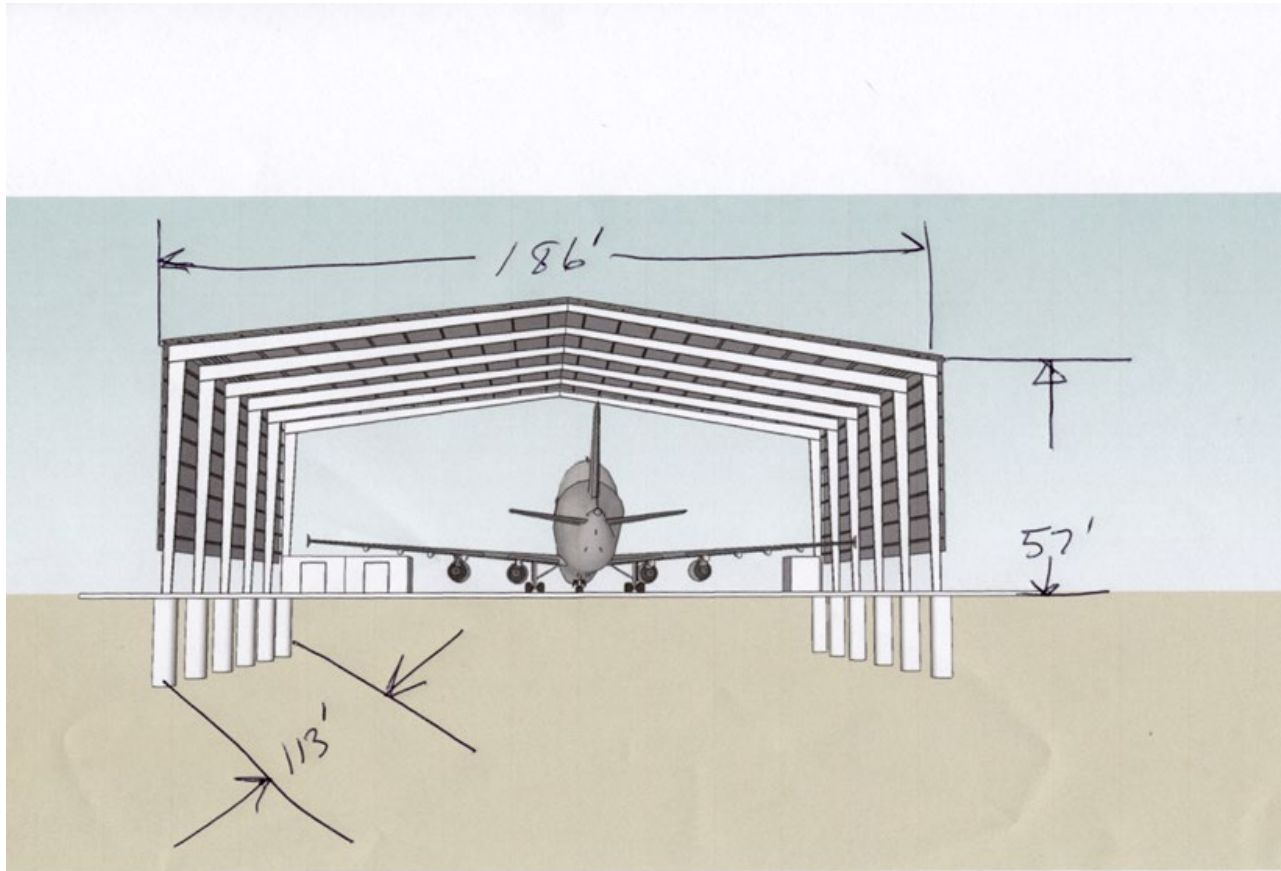
The Texas Children's Hospital Public Relations is responsible for coordinating and disseminating public information before the exercise. Each participating agency should follow internal procedures.

APPENDIX D: EXERCISE SITE MAPS

Figure D.2: Main Campus, Pavilion for Women, 6651 Main Street, Houston, TX 77030



Figure D.3: "Guppy Hanger" at Ellington Field, Houston, TX





APPENDIX E: ACRONYMS

Acronym	Term
AAM	After-Action Meeting
AAR	After-Action Report
ASPR	Assistant Secretary for Preparedness and Response
BMT	Bone Marrow Transplant
DHS	U.S. Department of Homeland Security
EEG	Exercise Evaluation Guide
ExPlan	Exercise Plan
HSEEP	Homeland Security Exercise and Evaluation Program
IP	Improvement Plan
MSEL	Master Scenario Events List
NDMS	National Disaster Medical System
NMDP	National Marrow Donor Program
ONR	Department of the Navy, Office of Naval Research for the NMDP
RITN	Radiation Injury Treatment Network
TCH	Texas Children's Hospital
VIPs	Very Important Persons