

I. INTRODUCTION

This guidance provides key information for the Department of State Health Services' (DSHS) evolving Health and Medical Exercise and Evaluation Program (HMEEP) regarding the notification and reporting processes, forms, documents and formats, use of contractors and critical timeframes related to exercises and or the documentation of actual responses conducted by or participated in by the agency and its stakeholders to include hospitals, healthcare facilities, local health departments (LHDs), and Trauma Service Area (TSA) Regional Advisory Councils (RACs).

The overall HMEEP is based on the federal Homeland Security Exercise and Evaluation Program (HSEEP) developed by the U.S. Department of Homeland Security (DHS) and managed by the Federal Emergency Management Agency (FEMA). HSEEP-compliance, the use of the methodologies, concepts and formats of HSEEP, is required for exercises and exercise programs conducted and implemented that are, or may be required by all grants from DHS (Homeland Security Grant Program (HSGP) as well as the preparedness grants funded by the Centers for Disease Control & Prevention (CDC) such as the Public Health Emergency Preparedness (PHEP) and Strategic National Stockpile (SNS) and the U.S. Department of Health and Human Services (HHS), Office of the Assistant Secretary for Preparedness's (ASPR) Hospital Preparedness Program (HPP).

In the ongoing development of a long range, comprehensive and inclusive health and medical exercise program for the DSHS and its stakeholders, the agency will coordinate all grant, agency and other requirements related to exercise scheduling, design and development, conduct, after action reporting and documentation by incorporating the identified needs of the agency and its stakeholders into the program. This will be accomplished through the compilation of local, regional and state-level multi-year training and exercise plans. The information will provide guidance in the direction of the exercise program and enable it to address locally identified exercise needs, hospital and healthcare facility accreditation and certification requirements, including those needs in a program and individual exercises that also address the grant funding mandates for the conduct of exercises. In addition to the CDC and ASPPR, other federally funded grant programs that may impact the public health and healthcare sectors within the state include, but may not be limited to:

- Metropolitan Medical Response System (MMRS)
- National Disaster Medical System (NDMS)
- Urban Area Security Initiative (UASI)

Public health, hospitals and healthcare facilities, and local emergency management officials should verify individual exercise requirements annually for each program from which they

receive funding as well as assess their individual organization/jurisdictions preparedness and response goals and existing capabilities. Once these areas have been taken into account they can develop an overall exercise schedule and approach to ensure the external and internal needs are fulfilled by the scheduling and conduct of exercise types that can effectively consolidate and address these requirements while also addressing locally identified exercise priorities.

The DSHS Exercise Team (E-Team), within the Community Preparedness Section of the agency will serve as the lead in providing direction and assistance to the various programs within the agency as well as the agency’s stakeholders to include the HSRs, LHDs, RACs and hospitals charged with the conduct of exercises. The E-Team consists of three Exercise Specialists, each serving as primary exercise contact for specifically assigned HSRs, LHDs and RACs based on the DSHS Health Service Regions within the state. These are:

Annette VandeWerken: HSRs 1, 7 & 9/10, and RACs A, B, I, J, K, L, M, N and O
512/458-7111, ext. 2051

Annette.VandeWerken@dshs.state.tx.us

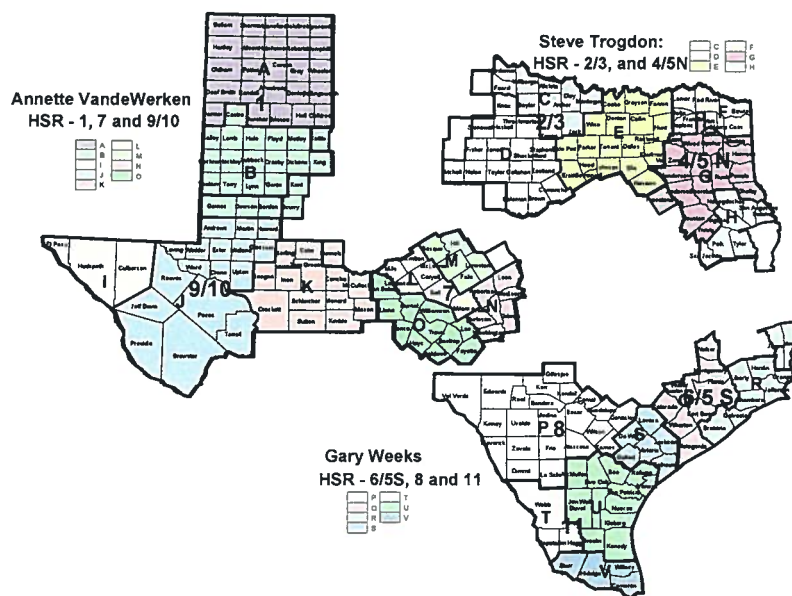
Steve Trogdon: HSRs 2/3 & 4/5N, and RACs C/D, E, F, G and H
512/458-7111, ext. 2987

Steve.Trogdon@dshs.state.tx.us

Gary Weeks: HSRs 6/5S, 8, & 11, and RACs P, Q, R, S, T, U and V
512/458-7111, ext. 2135

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Figure 1: Exercise Specialists Assigned Regional Areas



II. EXERCISE PROGRAM DOCUMENTATION

To effectively address grant-based exercise conduct and reporting requirements, HSEEP-compliance, build effective exercise processes and sustain an effective exercise program within the DSHS and its stakeholders, the E-Team, in coordination with the various grant programs from which funding support is provided, requires the following documentation and document use.

- Notification of Exercise (NoE) form: This is *required* to be used by all agency programs and offices to provide notification of a planned exercise to allow for scheduling (see Section III). This includes those exercises conducted with grant monies, or to fulfill grant-related exercise requirements of the PHEP, SNS and HPP programs as well as any other exercises involving the agency or its stakeholders. This is to be submitted as described in Section III of this document.
- DSHS After Action Report and Improvement Plan (AAR/IP): This document is *required* for any exercise conducted by the agency and/or its stakeholders with the exception of drills conducted to fulfill specific SNS grant requirements (see below). Additionally, the AAR/IP is to be used, and may be required, to document any actual responses. The AAR/IP is to be submitted as described in Section III of this document.
- DSHS SNS Drill After Action Report and Improvement Plan (SNS-AAR/IP): All drills conducted related to the SNS grant funding are to be documented through use of the CDC's DSNS RAND Data Collection Forms *and* an AAR/IP. This version of the AAR/IP has been shortened to minimize the redundant information already contained in the RAND forms while still meeting the HSEEP-compliance requirements. This is to be submitted as described in Section III of this document.
- Corrective Action Plan (CAP): This document is used to lay out the process required to carry out the implementation of the corrective actions identified in the Improvement Plan portion of the AAR/IP. It is intended as a tool to allow for the facilitation and tracking of the improvements required as stated in the IP. While all agency offices and stakeholders are currently not mandated to complete and use the CAP, all are encouraged to use this tool. If used, please submit to the DSHS E-Team along with the AAR/IP.
- Multi-Year Training & Exercise Plan (MYTEP):

This 3-year plan format is required for HPP. PHEP and SNS grant program participants are encouraged to complete the 3-year plan as a long-term planning tool.

This document lists the training and exercises to be conducted by a single entity, region or statewide. Each individual organization should complete this to reflect both their training and exercise needs based on grant requirements and locally identified preparedness goals. The completed product should reflect the implementation of a multi-year (3-year) strategy to achieve the organization's, region's and/or state's desired preparedness and capability goals.

- Exercise Plan (ExPlan):

Use of the Exercise Plan is strongly encouraged for functional and full-scale exercises conducted using grant funds or to fulfill grant-based exercise requirements.

The exercise plan is, as the title implies, a tool used to plan and develop a given exercise. Exercise plans are general information documents that address most, if not all aspects of an operations-based exercise. This includes the exercise objectives and scope, assumptions staffing, schedule, exercise communications and concept of operations among other topics. An ExPlan enables participants to understand their roles and responsibilities in exercise planning, conduct and evaluation. The ExPlan is intended for use by exercise planners, players and observers; therefore, it does NOT contain detailed scenario information that may reduce the realism of the tasks to be performed.

While not required for discussion-based exercises, use of the ExPlan for operations-based exercises (functional and full-scale) is strongly encouraged as a tool to assist in exercise design, development, conduct and evaluation.

III. EXERCISE NOTIFICATION, SCHEDULING AND REPORTING

Notification of Exercise

Notification of planned exercise activities is critical to the tracking and coordination of health and medical exercises conducted statewide. This information is included in the Statewide Exercise Schedule as well as the National Exercise Schedule (NEXS). These widely available and circulated calendars are used for deconflicting schedules and to allow those entities conducting exercises to simplify the process by consolidating exercise activities wherever possible.

Notifications of tabletop (TTX) and functional (FE) exercises are to be submitted to the DSHS Exercise Unit as soon as possible, but no later than 60 days prior to the planned activity. This is accomplished through the use of the DSHS Notification of Exercise (NoE)

form (published separately and available from the DSHS website or one of the DSHS Exercise Unit). No notification of drills or actual incidents is required.

Notifications for full-scale exercises are to be submitted as follows:

- Initial notification is to be submitted to the DSHS Exercise Unit no later than 120 days prior to the start of the planned exercise (just prior to the initial planning conference) using the DSHS Notification of Exercise form. This will include:
 - Exercise date(s)
 - Exercise name/ID
 - Exercise lead/sponsoring organization
 - Exercise location
 - Person submitting the notification
 - Organization (of the person submitting the form/host organization)
 - Email (of the person submitting the form/host organization)
 - Fax Number (of the person submitting the form/host organization)
 - Type of Exercise (Full-scale - FSE)
 - Exercise scope
 - Funding source(s)
 - Grant information
 - Contractor and waiver information as appropriate

- Final/updated notification is to be submitted not later than 60 days prior to the start of the exercise (this should correspond to the mid-planning conference). At this time all remaining or modified information is to be provided to the DSHS Exercise Unit. This will include the remaining information not provided in the initial notification. This may include:

All public health, medical and emergency response organizations and agencies participating in the exercise

* Local:

- health districts,
- hospitals,
- emergency management,
- law enforcement,
- fire,
- public works,
- others

* Regional:

- Health Service Regions
- Regional Advisory Councils
- Councils of Government
- Others

* State:

- Disaster Districts
- TDEM Regional Liaison Officers

- State agencies
- * Federal:
 - DoD facilities/organizations
 - FEMA
 - FBI
 - CDC
 - Others
- * Other organizations:
 - Any private or public sector participants not already listed
- Listing of grant-funded systems and capabilities to be tested, and
- Exercise scenario

For exercises using either the state identified TEEX/NERRTC or alternate contractor, notification is to be provided to the Exercise Team six months prior to the proposed to the exercise date or as soon as the contractor for the exercise is confirmed. For exercises **NOT** using the state-identified contractor, the “Request for Waiver” and TDEM approval should be attached to the Notification or Exercise form (See Section IV).

Figure 2: Exercise Notification / Reporting Timeline

-120 days		-60 days		Exercise/ Incident	
Initial FSE				Drill TTX FE FSE – final	
Notification:				Reporting	
				Drill TTX FE FSE	
				+60 days	+120 days
				Exercise/ Incident	
				Actual Incident	

Exercise Scheduling

There are three exercise schedules to which the DSHS Exercise Unit will provide input related to health and medical exercise activities occurring within the state. These are:

1. The Statewide Significant Events List – Exercise Schedule, and
2. The National Exercise Schedule (NEXS)
3. Lessons Learned Information Sharing (Site to which the DSHS Multi-Year Training and Exercise plan is submitted.)

The purpose of both these schedules is to provide visibility to all public health and health care provider organizations and entities as well as those federal, state and local homeland security and emergency management organizations that have a critical interface with health and medical operations during emergency preparedness and response operations. This allows for de-conflicting and consolidation of, where possible, exercise activities to reduce the potential for exercise fatigue resulting from multiple mandates to conduct exercise activities.

Statewide Significant Events List – Exercise Schedule

The Texas Division of Emergency Management (TDEM), State Operations Center (SOC) compiles, and distributes a weekly *Statewide Significant Events List* that includes an exercise schedule listing all identified exercises that are to be conducted within the state, to include those exercises sponsored by federal, state, local, tribal organizations or jurisdictions as well as many private industry partners. All exercise activities *sponsored by* or *involving* the DSHS Central Campus Multi-Agency Coordination Center (MACC), Health Service Regions (HSR), Regional Advisory Councils (RACs), Local Health Departments (LHDs), and/or individual healthcare provider facilities or organizational partners should be included in this exercises schedule

Each week, the DSHS Exercise Unit will submit an update of any newly reported, eligible, exercise activities to the TDEM-SOC for inclusion in the exercise schedule. This will include all grant required exercise activities involving multiple agencies within a community and/or multiple departments within a public health or health care facility or organization. The weekly consolidated updates produced by the DSHS Exercise Team will contain *only those exercise activities for which the Exercise Unit has received notification.*

Procedures for inclusion in the Statewide Significant Events List – Exercise Schedule

1. HSRs, RACs, LHDs and other DSHS partner/stakeholders are to report their exercise activities as has been described previously in this section.
2. The DSHS Exercise Team will compile and provide all updates received by 4:00pm each Tuesday to the TDEM-SOC to be included in the exercise schedule no later than 10:00am each Wednesday.
3. The TDEM-SOC will incorporate newly identified exercise activities into the Exercise Schedule of the Statewide Significant Events List. The TDEM-SOC will then disseminate this information via their email distribution list by close of business each Thursday.
4. Upon receipt of the updated Exercise Schedule from the TDEM-SOC, the DSHS Exercise Unit will distribute this information to those on its DSHS Central Campus internal email list no later than close of business each Friday.

All exercises listed in the *Statewide Significant Events List – Exercise Schedule* will remain listed until such time as the date for a specific activity has passed or the DSHS Exercise Team has been provided notification that the scheduled activity has been cancelled.

The National Exercise Schedule (NEXS)

The National Exercise Schedule (NEXS) is a compilation of all national, federal, state, tribal, territorial and local level exercises. The NEXS serves as a management tool and reference document for exercise planning. It provides information on exercise dates, location, scenario, scope and participants. The purpose of the NEXS is to provide visibility of upcoming exercises to leadership, exercise planners and exercise schedulers.

The NEXS System is a centralized national online comprehensive tool that facilitates scheduling, de-confliction, and synchronization of all exercises. The NEXS System allows users to schedule exercises online, with awareness of exercises that are similar in date, location, scope, scenario or participants. It allows for the coordination and possible linking or combining of exercises, facilitation of shared resource allocations and limits potential exercise fatigue.

Users can access the NEXS System through the Homeland Security Exercise and Evaluation Program (HSEEP) Website at <http://hseep.dhs.gov>. To obtain NEXS viewing access, contact support@hseep.net.

NEXS scheduling access is limited to federal, state, tribal and territorial Exercise Administrative Authorities (EAAs) or their designated exercise schedulers. If you feel you should have access to the NEXS for purposes of scheduling exercises, please send a request to NEXS@dhs.gov.

The designated Exercise Schedulers for DSHS are:

Community Preparedness Coordination Branch, Exercise Unit:
Annette VandeWerken
Steve Trogdon

The designated EAA for the Texas Department of State Health Services is:

Community Preparedness Coordination Branch, Exercise Unit:
Gary Weeks

Lessons Learned and Information Sharing (LLIS) Website

The LLIS site is where the DSHS Multi-Year Training & Exercise Schedule is posted to comply with CDC requirements for the PHEP/SNS grant programs. Once this is compiled from the agency headquarters and those partners and contractors throughout the state, the E-Team posts, or provides the documentation to the Public Health Emergency Preparedness Branch to post to this site.

Exercise Reporting

After Action Reports for all drills, games, tabletop, functional or full-scale exercise activities sponsored by, or involving, public health and/or health care entities and organizations and are being accomplished using federal grant monies or to fulfill grant requirements, are to be reported to the DSHS Exercise Unit no later than 60 days following the conclusion of the exercise. Drills are to be reported as described as follows.

Drills

CDC – SNS requires reporting all required drills using the Division of Strategic National Stockpile (DSNS) RAND data collection forms *and* an *After Action Report/Improvement Plan*. These reports are to be completed using the *DSHS SNS Drill After Action Report* and the appropriate RAND data collection forms. These are to be submitted to the DSHS Exercise Team at PreparednessExercise@dshs.state.tx.us for review prior to posting to the DSHS SharePoint website.

The Exercise Team will review the submission and notify the submitting organization's point of contact (POC) listed on the "Handling Instructions" page of the SNS Drill ARR/IP of any corrections to be made or indicate that the submission should be posted to the DSHS SharePoint website. Submitting organizations should not post to the SharePoint site until cleared to do so by the Exercise Team.

Where the DSHS HSR directs, the LHDs are to submit the required documentation to the HSR. The HSR will then complete the process described above for posting to the SharePoint site.

Tabletop, Functional and Full-Scale Exercises

All tabletop, functional and full-scale exercises are to be reported to the DSHS Exercise Unit using the full DSHS AAR/IP and *must* include the completed Improvement Plan.

These activities are to be reported no later than 60 days following the conclusion of the exercise activity.

Actual Responses/Incidents

When authorized by the agencies providing grant funding and/or organization providing accreditation, actual responses and incidents are to be documented to allow for fulfilling grant required exercise activities. This is to be accomplished using the DSHS AAR/IP. These submissions should reflect the name/designation of the incident or event and are to be submitted to the DSHS Exercise Team via email as described in this document and, for PHEP/SNS funding recipients to the SharePoint system, no later than 120 days following the conclusion of the primary response. For purposes of the reporting process, this is defined as when the emergency operations center (EOC, MOC and/or MACC or designated coordination and control facility) is closed for the incident.

Note: All exercise notifications and AAR/IPs, unless otherwise specified in this document, are to be submitted to the Exercise Team via email at:

PreparednessExercise@dshs.state.tx.us

IV. EXERCISE CONTRACTORS AND CONTRACTOR WAIVER REQUIREMENTS



In May of 2007, the Texas Division of Emergency Management (TDEM), as the state authority having the oversight of the State Administrative Agency (SAA) managing all DHS homeland security grants, directed that any state or local government agency, organization or private entity electing to use state or federal grant funds to secure a contractor to plan and conduct an exercise, *must* either contract with the Texas A&M - Texas Engineering Extension Services (TEEX), National Response and Rescue Training Center (NERRTC) *or* request a waiver from TDEM. All DSHS programs and partners utilizing CDC PHEP, APSR HPP or other state or federal grant monies to conduct exercise activities must comply with this requirement. As TEEX/NERRTC contracts nationally to conduct exercises, they may be unable to accept a contract for a given exercise. They must however, be provided the “first right of refusal” prior to another contractor being provided an opportunity to bid on a contract for an exercise.

The intent of this coordination is to ensure training and exercises conducted within the State of Texas using state or federal funding address the goals, objective and priority actions outlined in the governor’s Homeland Security Strategic Plan. The following table is