

Otero County Health Department

**Child Development Services Annual
Tuberculosis Screening Clinic/Drill
Operation TST**

**AFTER ACTION REPORT (AAR)/IMPROVEMENT PLAN (IP) MATRIX
August 26, 2014**

**Otero County Health Department, Arkansas Valley Regional Medical Center,
Southeast Medical Reserve Corps., Child Development Services**

The format of this template has been approved for use by the Colorado Governor's Office of Homeland Security and is consistent with HSEEP guidelines for AAR/IP documentation. The Homeland Security Exercise and Evaluation Program (HSEEP) is a capabilities and performance-based exercise program which provides a standardized policy, methodology, and terminology for exercise design, development, conduct, evaluation, and improvement planning. This AAR/IP was produced with the understanding that adherence to the policy and guidance presented in the HSEEP Volumes I-IV ensures that exercise programs conform to established best practices and helps provide unity and consistency of effort for exercises at all levels of government.

Contents

Exercise Summary	2
Exercise Scope and Objectives	2
<Core Capability/Activity>	2
Major Strengths	3
Primary Areas for Improvement	3
Analysis of Capabilities:	3
Exercise Details	7
Conclusion	7
Appendix A: Improvement Plan (IP) Matrix	8

Exercise Summary

Exercise Scope and Objectives

This exercise After Action Report is the result of a clinic conducted by the Otero County Health Department to provide annual Tuberculosis screening to Child Development Services employees. The following Capabilities were tested:

Capability #13: Epidemiological Surveillance and Investigation

Activity 1: Direct Epidemiological Surveillance and Investigation Operations

Capability #3: On-site Incident Management

Activity 1: Establish Incident Command

Capability #8: Medical Countermeasure Dispensing

Activity 1: Identify and initiate medical countermeasure dispensing strategies

Activity 3: Activate dispensing modalities

Activity 4: Dispense medical countermeasures to identified population

Based on the exercise planning team's deliberations, the following objectives were developed for the Operation TST 2014 Exercise:

Objective 1: To protect the public from Tuberculosis through targeted public health interventions, (i.e., TB screening, education and dispensing treatment).

Objective 2: To safely administer PPD's to 88 employees of CDS, in 2-4 hours on August 22, 2014 and follow-up on August 25, 2014 by reading the individual PPD results and provide education and treatment to those individuals who test positive.

Objective 3: To establish Incident Command System (ICS) and National Incident Management System (NIMS) compliant concepts for public health and partner agencies.

Scenario Summary

Staff from the Otero County Health Department along with volunteers from the Southeast Medical Reserve Corps., coordinated and executed a full scale mass clinic to provide annual TB screening to the staff at Child Development Services (CDS), a population at high risk for TB exposure. On August 22, 2014 Tuberculin skin tests were administered to a total of 76 CDS employees during their staff orientation at Otero Junior College. Ten additional screenings were performed. The results of the Tuberculin skin tests were then read August 25, 2014 at Otero County Health Department. Patient education, counseling and treatment guidance was provided to those individuals who tested positive.

Major Strengths

The major strengths identified during the Operation TST 2014 Exercise are as follows:

- An Incident Action Plan was provided to all participants that covered response objectives, safety considerations, communications, guidance regarding clinic operations, volunteer roles and responsibilities.
- The Incident Command System was utilized according to National Incident Management System standards and functioned smoothly.
- Cooperation between all agencies was excellent.
- Clinic was well organized and staff was well trained. Just-In-Time training was provided.

Primary Areas for Improvement

Throughout the exercise, several opportunities for improvement in Otero County Health Department's ability to respond to the incident were identified. The primary areas for improvement, including recommendations, are as follows:

- The set up for the 2014 Operation TST was not as conducive to clinic flow as was the 2013 Operation TST which occurred in a different building. The selection of the new location was beyond control of the exercise planners but was welcomed as an opportunity test capabilities in an alternate facility.
- One of the clinic rooms had poor lighting which will need to be addressed should this location be selected for next year's clinic.
- One clinic room had need for better privacy barriers and patient flow. Patient flow was modified in one clinic room but not the other. Exercise staff and volunteers are encouraged to speak up during the exercise so necessary changes and adjustments can be made.
- There is a need to change the forms used for better efficiency.

Analysis of Capabilities:

The capabilities linked to the exercise objectives of the Operation TST 2014 Exercise are listed below, followed by corresponding activities. Each activity is followed by related observations, which include references, analysis, and recommendations.

Capability # 13: Epidemiological Surveillance and Investigation

Function/Activity 1: Direct Epidemiological Surveillance and Investigation Operations

Critical Task/Observation Keys

1.1 Coordinate resources needed to respond to public health concern

- Public health personnel needed for response to public health concern identified
- Timeline for public health response communicated
- Sufficient equipment and material to conduct investigation made available

1.2 Make public health recommendations for prophylaxis and other interventions

- Emergency prevention and control measures implemented

Function/Activity 2: Surveillance and Detection

Critical Task/ Observation Keys

2.1 Detect suspected outbreak through pattern recognition

- Patterns recognized at an early stage indicating outbreak
- Epidemiological investigation initiated

Observation 1: *Strength/Needs Improvement;*

When the Tuberculin Skin tests were read on August 25, 2014, privacy was provided to all patients and follow-up was provided to those whose tests ended up with a positive result.

Analysis/Recommendations:

Employees from Child Development Service, a population at high risk for exposure to Tuberculosis, were successfully screened. Public health recommendations for prophylaxis and other interventions were implemented for those individuals who tested positive. That number was very low. Had there been a pattern in the number of positive test results an epidemiological investigation would have been initiated.

Capability # 3: On-Site Incident Command

Function/Activity 1: Establish Incident Command System

Observation 1: *Strength/Needs Improvement;*

An Incident Command Post was established complete with an Incident Action Plan and organizational chart. Clinic workers signed in and out, vests were issued, staff assignments and Job Action Sheets were handed out. Just-In-Time training was provided and incident briefings occurred. Safety Officer did an excellent job circulating, and answering questions. Cold chain storage was well maintained in the new portable vaccine cooler that was purchased as a result of the 2013 Operation TST.

Analysis/Recommendations:

The incident was managed safely, effectively and efficiently. There were ample resources including personnel, equipment, supplies and communication.

Capability # 8: Medical Countermeasure Dispensing**Function/Activity 1: Identify and initiate medical countermeasure dispensing strategies****Critical Task/ Observation Keys**

- 1.1 Engage subject matter experts to determine what medical countermeasures are best suited and available for the incident based on the risk assessment.
- 1.2 Engage private sector, local, state, regional, and federal partners, as appropriate to the incident, to identify and fill required response roles.

Function/ Activity 3: Activate Dispensing Modalities**Critical Task/ Observation Keys**

- 3.1 Activate dispensing strategies, dispensing sites, dispensing modalities, and other approaches, as necessary, to achieve dispensing goals commensurate with the target population.
- 3.2 Activate staff that will support the dispensing modality in numbers necessary to achieve dispensing goals commensurate with the targeted population.
- 3.3 Initiate site-specific security measures for dispensing locations.

Function/ Activity 4: Dispense medical countermeasures to identified population.**Critical Task/ Observation Keys**

- 4.1 Maintain dispensing site inventory management system to track quantity and type of medical countermeasures present at the dispensing site.
- 4.2 Screen and triage individuals to determine which medical countermeasure is appropriate to dispense to individuals if more than one type or subset of medical countermeasures is being provided at the site.
- 4.3 Distribute pre-printed drug/vaccine information sheets that include instructions on how to report adverse events

- 4.4 Document doses of medical countermeasures dispensed, including but not limited to: product name and lot number, date of dispensing, location of dispensing.
- 4.5 Monitor dispensing site throughout and adjust staffing and supplies as needed in order to achieve dispensing goals commensurate with the targeted population.

Observation 1: *Strength/Needs Improvement;*

With regard to Capability #8: Medical Countermeasure Dispensing, the Evaluator deemed each task/observation key fully in place, fully evaluated and fully demonstrated on the Exercise Evaluation Guide. Otero County Health Department's ability to provide medical countermeasures in support of treatment or prophylaxis to the identified population in accordance with public health guidelines and/or recommendations was well demonstrated. In a period of 30 minutes, 86 screenings were performed and 76 PPDs were administered. This constitutes a throughput of 2.86 patients per minute which is exceptional. On August 25, 2014, 100% of those who had received a PPD returned for a reading. Pre-clinic planning meetings determined traffic patterns and entry points at the clinic sites. Traffic and controlled access was easily established and maintained throughout the exercise and there was no breach of security at any time.

Analysis and Recommendations:

Exercise Objective 1: To protect the public from Tuberculosis through targeted public health interventions, (i.e., TB screening, education and dispensing treatment), was fully met. In addition, Exercise Objective 2: To safely administer PPD's to 88 employees of CDS, in 2-4 hours on August 22, 2014 and follow-up on August 25, 2014 by reading the individual PPD results and provide education and treatment to those individuals who test positive was also successfully achieved.

Exercise Details

Exercise Name/Type: Operation TST 2014/ Drill

Exercise Time/Duration: 1100-1400 August 22, 2014 and 0800-1200 August 25, 2014

Sponsor: Otero County Health Department and Child Development Services

Program: PHEP Grant CDC

Mission: Response and Protect

Planning Team: Susan Workman, DON Otero County Health Department and Michael Miller, Southeast Regional Epidemiologist, Otero County Health Department

Participating Organizations: Otero County Health Department, Child Development Services, Arkansas Valley Regional Medical Center, Southeast Medical Reserve Corps., Prowers County Public Health and Environment, and Bent County Public Health.

Southeast Medical Reserve Corps (SE MRC) Involvement: Two members of the SE MRC were activated by e-mail communication, and participated in the exercise. The plan for the unit was to have SE MRC members participate in the exercise in both medical and non-medical capacities, and this was achieved. Christy Smith served in a medical capacity administering tuberculin skin tests, Meredith Bradfield served as Planning Section Chief (non-medical). MRC members performed their duties flawlessly, so no plans for improvement specific to the SE MRC were noted or given.

Conclusion

Operation TST 2014 was a targeted exercise to provide annual tuberculin screening to the employees of Child Development Services. The exercise allowed Otero County Health Department Emergency Preparedness and Response staff, the Southeast Medical Reserve Corps., along with local and regional partners to test their ability to work and respond together in a public health response by setting up and operating a Point of Dispensing. This exercise successfully achieved the objectives:

1. To protect the public from Tuberculosis through targeted public health interventions, (i.e., TB screening, education and dispensing treatment).
2. To safely administer PPD's to 88 employees of CDS, in 2-4 hours on August 22, 2014 and follow-up on August 25, 2014 by reading the individual PPD results and provide education and treatment to those individuals who test positive.
3. To establish Incident Command System (ICS) and National Incident Management System (NIMS) compliant concepts for public health and partner agencies.

An area of improvement included the need for better lighting in one of the clinic rooms. Overall, Operation TST was a huge success. Employees from Child Development Service, a population at high risk for exposure to Tuberculosis, were successfully screened with minimal interruption to their orientation process. Public health recommendations for prophylaxis and other interventions were implemented for those individuals who tested positive. Otero County Emergency Preparedness and Response staff successfully worked alongside the Southeast Medical Reserve Corps., and regional partners to set up, operate and demobilize a Point of Dispensing operation. Objectives were met, shortfalls were identified and opportunities for improvement will be developed.

Appendix A: Improvement Plan (IP) Matrix

This IP Matrix has been developed specifically for the Otero County Health Department as a result of the Operation TST 2014 Exercise conducted on August 22 and August 25, 2014. These recommendations draw on the After Action Report and the After Action Conference.

IMPROVEMENT PLAN		County/Organization: Otero County Health Dept.		Incident: CDS TB Screening Clinic 2014	
Area of Improvement	Analysis/Recommendation/Corrective Action Description	Responsible Agency/Person	Start Date	End Date	
The set up for the 2014 Operation TST was not as conducive to clinic flow as was the 2013 Operation TST which occurred in a different building.	Otero County Health Department had no control over the choice of the clinic location at Otero Junior College. Even though patient through-put was exceptional at the exercise, Otero County Health Department DON should be consulted by CDS prior to site selection in future exercises.	Otero County Health Dept./ Susan Workman, Child Development Services	Sept. 2014	Sept. 2015	
One of the clinic rooms had poor lighting, better privacy barriers.	Recommend choosing different location or providing supplemental lighting. Modify patient flow and utilize privacy barriers.	Otero County Health Dept./ Logistics Section Chief Kaysie Walter	Sept. 2014	Sept. 2015	
Forms need modification to improve efficiency.	Modify forms to include signature line for nurses, include location (town/office/county) where PPD will be read.	Otero County Health Dept./ Susan Workman	Sept. 2014	Sept. 2015	