Jurisdiction/Tribal Name

PHEP Highly Infectious Disease Virtual Tabletop Exercise (TtX)

After-Action Report/Improvement Plan

[Date]

The After-Action Report/Improvement Plan (AAR/IP) aligns exercise objectives with preparedness doctrine and related frameworks and guidance. Exercise information required for preparedness reporting and trend analysis is included; users are encouraged to add additional sections as needed to support their own organizational needs.

**INSTRUCTIONS: Replace/update any highlighted areas to complete.**

# Exercise Overview

| **Exercise Name** | PHEP Highly Infectious Disease Virtual Tabletop Exercise (TTX) |
| --- | --- |
| **Exercise Date** | Eastern RHCC - 1st Quarter: Wednesday, September 18, 2024. Centra RHCC - 2nd Quarter: Wednesday, December 4, 2024.Southern RHCC - 3rd Quarter: Wednesday, March 19, 2025.Western RHCC - 4th Quarter: Wednesday, June 25, 2025. |
| **Scope** | This exercise is discussion based/virtual tabletop format. Exercise play was limited to invited participants from our response partners. |
| **Focus Area(s)** | Response |
| **PHEP Capabilities** | Capability 3: Emergency Operations CoordinationCapability 4: Emergency Public Information and WarningCapability 6: Information SharingCapability 8: Medical Countermeasure Dispensing and AdministrationCapability 11: Nonpharmaceutical InterventionsCapability 12: Public Health Laboratory TestingCapability 13: Public Health Surveillance and Epidemiological Investigation |
| **Objectives** | Exercise L/THJ and partner response plans to address a highly infectious disease public health emergency.Discuss coordination of Incident Command, Unified Command, and notification for when additional support is needed.Discuss jurisdictional risks including biological mass casualty events (HICD)Engage participants about their potential ESF8 coordination and risk communication roles and functions during a large-scale incident.Discuss strategies to efficiently distribute and dispense or administer MCMs to the public and measure throughput.Discuss/develop pharmaceutical and nonpharmaceutical intervention strategies.Review After Action Review and Improvement Plan (AAR-IP) process. Add any other objectives added locally as part of the TtX here. |
| **Threat/Hazard** | Highly Infectious Disease |
| **Scenario** | A highly infectious disease impacts local education, faith-based, health & childcare locations, requiring local/tribal health jurisdiction coordinated response actions. |
| **Sponsor** | Montana Department of Public Health and Human Services (DPHHS) – Public Health Emergency Preparedness (PHEP) Section. |
| **Point of Contact** | Name Title Contact info |

# Analysis of Capabilities

This table includes the exercise objectives, aligned capabilities, and performance ratings for each capability as observed during the exercise and determined by the evaluation team.

SELECT ONE PERFORMANCE RATING FOR EACH OBJECTIVE BELOW:

| Objective | PHEP Capability | Performed without Challenges (P) | Performed with Some Challenges (S) | Performed with Major Challenges (M) | Unable to be Performed (U) |
| --- | --- | --- | --- | --- | --- |
| Exercise L/THJ and partner response plans to address a highly infectious disease public health emergency. | Capability 3: Emergency Operations CoordinationCapability 12: Public Health Laboratory TestingCapability 13: Public Health Surveillance / EPI. | P | S | M | U |
| Discuss coordination of Incident Command, Unified Command, and notification for when support is needed. | Capability 3: Emergency Operations CoordinationCapability 6: Information Sharing | P | S | M | U |
| Discuss jurisdictional risks including biological mass casualty (HICD) | Capability 4: Public Information and WarningCapability 6: Information Sharing | P | S | M | U |
| Engage participants about their potential ESF8 coordination and risk communication roles and functions during a large-scale incident. | Capability 4: Emergency Public Information and WarningCapability 6: Information Sharing | P | S | M | U |
| Discuss strategies to efficiently distribute and dispense or administer MCMs to the public and measure throughput. | Capability 8: Medical Countermeasure Dispensing and Administration | P | S | M | U |
| Discuss/develop pharmaceutical and nonpharmaceutical intervention strategies. | Capability 11: Nonpharmaceutical Interventions | P | S | M | U |

Ratings Definitions:

Performed without Challenges (P): The targets and critical tasks associated with the capability were completed in a manner that achieved the objective(s) and did not negatively impact the performance of other activities.

Performed with Some Challenges (S): The targets and critical tasks associated with the capability were completed in a manner that achieved the objective(s) and did not negatively impact the performance of other activities.

Performed with Major Challenges (M): The targets and critical tasks associated with the capability were completed in a manner that achieved the objective(s), but some or all of the following were observed: demonstrated performance had a negative impact on the performance of other activities.

Unable to be Performed (U): The targets and critical tasks associated with the capability were not performed in a manner that achieved the objective(s).

# Strengths/Weaknesses & Areas for Improvement Identified

### Strengths

The following strengths were identified:

Strength 1: [Observation statement]

Strength 2: [Observation statement]

Strength 3: [Observation statement]

Add additional Strengths if identified

### Weaknesses/Areas for Improvement

The following areas require improvement to achieve the full capability level:

Area for Improvement 1: [Observation statement] This should clearly state the problem or gap; it should not include a recommendation or corrective action, as those will be documented in the Improvement Plan.

Area for Improvement 2: [Observation statement]

Area for Improvement 3: [Observation statement]

Add additional Weaknesses/Areas for Improvement if identified

| Issue/Area for Improvement | Corrective Action | Responsible Person/Organization | Target Completion Date |
| --- | --- | --- | --- |
| {Area for Improvement] | [Corrective Action 1]  | [Person/Organization] | [Future Date] |
| [Area for Improvement] | [Corrective Action 2] | [Person/Organization] | [Future Date] |
| [Area for Improvement] | [Corrective Action 1] | [Person/Organization] | [Future Date] |

# Improvement Plan

Add additional Improvement Actions if identified

# Appendix: Exercise Participants

| **Participating Organizations** |
| --- |
| **Local/Tribal Participating Agencies** |
| [Jurisdiction]  |
| [Jurisdiction] |
| [Jurisdiction] |
| **Health Department Employees** |
| [Participant] |
| [Participant] |
| [Participant] |

Add additional jurisdictions/participants if needed.