



# CriticalVAX

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## After-Action Report/Improvement Plan

### Local Health Departments – Medical Countermeasure Dispensing and Administration

[Date]

The After-Action Report/Improvement Plan (AAR/IP) aligns exercise objectives with preparedness doctrine to include the National Preparedness Goal 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.

**EXERCISE OVERVIEW**

<b>Exercise Name</b>	<b>CriticalVAX</b>
<b>Exercise Dates</b>	[Indicate the start and end dates of the exercise]
<b>Scope</b>	This exercise is a full-scale exercise, planned for three (3) hours at <b>exercise location</b> . Exercise play is limited to this timeframe and this site, and is a response to a biological event. <b>Additional partners may be added at the discretion of the playing organization.</b>
<b>Mission Area(s)</b>	Prevention, Mitigation, Response
<b>Core Capabilities</b>	<b>Medical Countermeasure Dispensing and Administration</b>
<b>Objectives</b>	<p><b>Objective 1:</b> Notify and confirm availability of the pre-identified Point of Dispensing /Point of Administration (POD/POA) site within one hour of the decision to activate the site.</p> <p><b>Objective 2:</b> Develop a schedule to cover the first two (2) operational periods at least 24 hours prior to the start of POD/POA operations.</p> <p><b>Objective 3:</b> Notify and confirm availability of personnel identified to fill roles for the first operational period at least 24 hours prior to the start of POD/POA operations.</p> <p><b>Objective 4:</b> Ensure that all identified POD/POA staff for first operational period report to the POD/POA within 30 minutes of identified reporting time.</p> <p><b>Objective 5:</b> Manage delivery and recovery of the MCM and ancillary supplies to the POD/POA site using the Medical Emergency Response Inventory Tracking System (MERITS) or another inventory system used by the county.</p> <p><b>Objective 6:</b> Set up POD/POA (materiel, layout, supplies, stations for staff) within six (6) hours prior to POD/POA operations.</p>



**Objective 7:** Inform public of dispensing/administration operations, including locations, time period of availability, and method of delivery at least 48 hours prior to start of POD/POA operations.

**Objective 8:** Activate the Countermeasure Data Management System (CDMS) or other online electronic pre-registration (e.g., eHealth Scheduling) at least 48 hours before POD/POA operations start to allow recipients to register per planned operational periods to support social distancing within the POD/POA.

**Objective 9:** Ensure that individuals with access and functional needs are provided additional support as requested.

**Objective 10:** Provide Just-in-Time Training (JITT) to POD/POA staff and volunteers within 24 hours before the start of POD/POA Operations.

**Objective 11:** Sustain MCM administration operations for three (3) hours and determine hourly throughput based on the throughput for the specific POD/POA plan for that site.

**Objective 12:** Demonstrate maintaining Cold Chain storage of the MCM in accordance with package instructions and the “Vaccine Storage and Handling Toolkit” (January 2020) throughout entire POD operations.

**Objective 13:** Simulate/administer MCM to affected population for a three (3) hour dispensing period, and ensure outcomes are recorded in CDMS. (Target: #5 in Health Electronic Response Data System (HERDS) Security Survey for the POD/POA site being exercised).

**Objective 14:** Provide 100% of recipients with instructions on the procedure for reporting adverse events and medical follow-up immediately after vaccine is administered.

**Threat or Hazard**

Global Pandemic – COVID-19

**Scenario**

As of this date there is not yet a vaccine for Coronavirus-SARS-2, the virus which causes COVID-19. The Centers for Disease Control and Prevention (CDC) is strongly recommending annual flu vaccine for everyone six (6) months of age and older, because it is an effective way to decrease flu illnesses, hospitalizations, and deaths. During the COVID-19 pandemic, reducing the overall burden of respiratory illnesses is important to protect vulnerable populations at risk for severe illness, the healthcare system, and other critical infrastructure. Thus, local health departments and

	healthcare providers should use every opportunity during the influenza vaccination season to administer influenza vaccines to all eligible persons.
<b>Sponsor</b>	<b>Public Health Emergency Preparedness Cooperative Agreement</b> <b>New York State Department of Health</b>
<b>Participating Organizations</b>	Insert a brief summary of the total number of participants and participation level (i.e., Federal, State, local, Tribal, non-governmental organizations (NGOs), and/or international agencies). Consider including the full list of participating agencies in Appendix B. Delete Appendix B if not required.
<b>Point of Contact</b>	Local Health Department to complete

## ANALYSIS OF CORE CAPABILITIES

Aligning exercise objectives and core capabilities provides a consistent taxonomy for evaluation that transcends individual exercises to support preparedness reporting and trend analysis. Table 1 includes the exercise objectives, aligned core capabilities, and performance ratings for each core capability as observed during the exercise and determined by the evaluation team.

Objective	Core Capability	Performed without Challenges (P)	Performed with Some Challenges (S)	Performed with Major Challenges (M)	Unable to be Performed (U)
1. Notify and confirm availability of the pre-identified Point of Dispensing /Point of Administration (POD/POA) site within one hour of the decision to activate the site.	Medical Countermeasure Dispensing and Administration				
2. Develop a schedule to cover the first two (2) operational periods at least 24 hours prior to the start of POD/POA operations.	Medical Countermeasure Dispensing and Administration				
3. Notify and confirm availability of personnel identified to fill roles for the first operational period at least 24 hours prior to the start of POD/POA operations.	Medical Countermeasure Dispensing and Administration				
4. Ensure that all identified POD/POA staff for first operational period report to the POD/POA within 30 minutes of identified reporting time.	Medical Countermeasure Dispensing and Administration				
5. Manage delivery and recovery of the MCM and ancillary supplies to the POD/POA site using the Medical Emergency Response Inventory Tracking System (MERITS) or another inventory system used by the county.	Medical Countermeasure Dispensing and Administration				

Objective	Core Capability	Performed without Challenges (P)	Performed with Some Challenges (S)	Performed with Major Challenges (M)	Unable to be Performed (U)
6. Set up POD/POA (materiel, layout, supplies, stations for staff) within six (6) hours prior to POD/POA operations.	Medical Countermeasure Dispensing and Administration				
7. Inform public of dispensing/administration operations, including locations, time period of availability, and method of delivery at least 48 hours prior to start of POD/POA operations.	Medical Countermeasure Dispensing and Administration				
8. Activate the Countermeasure Data Management System (CDMS) or other online electronic pre-registration (e.g., eHealth Scheduling) at least 48 hours before POD/POA operations start to allow recipients to register per planned operational periods to support social distancing within the POD/POA.	Medical Countermeasure Dispensing and Administration				
9. Ensure that individuals with access and functional needs are provided additional support as requested.	Medical Countermeasure Dispensing and Administration				
10. Provide Just-in-Time Training (JITT) to POD/POA staff and volunteers within 24 hours before the start of POD/POA Operations.	Medical Countermeasure Dispensing and Administration				
11. Sustain MCM administration operations for three (3) hours and determine hourly throughput based on the throughput for the specific POD/POA plan for that site.	Medical Countermeasure Dispensing and Administration				

Core Capabilities Analysis

Objective	Core Capability	Performed without Challenges (P)	Performed with Some Challenges (S)	Performed with Major Challenges (M)	Unable to be Performed (U)
12. Demonstrate maintaining Cold Chain storage of the MCM in accordance with package instructions and the "Vaccine Storage and Handling Toolkit" (January 2020) throughout entire POD operations.	Medical Countermeasure Dispensing and Administration				
13. Simulate/administer MCM to affected population for a three (3) hour dispensing period, and ensure outcomes are recorded in CDMS. (Target: #5 in Health Electronic Response Data System (HERDS) Security Survey for the POD/POA site being exercised).	Medical Countermeasure Dispensing and Administration				
14. Provide 100% of recipients with instructions on the procedure for reporting adverse events and medical follow-up immediately after vaccine is administered.	Medical Countermeasure Dispensing and Administration				

**Ratings Definitions:**

- Performed without Challenges (P): The targets and critical tasks associated with the core capability were completed in a manner that achieved the objective(s) and did not negatively impact the performance of other activities. Performance of this activity did not contribute to additional health and/or safety risks for the public or for emergency workers, and it was conducted in accordance with applicable plans, policies, procedures, regulations, and laws.
- Performed with Some Challenges (S): The targets and critical tasks associated with the core capability were completed in a manner that achieved the objective(s) and did not negatively impact the performance of other activities. Performance of this activity did not contribute to additional health and/or safety risks for the public or for emergency workers, and it was conducted in accordance with applicable plans, policies, procedures, regulations, and laws. However, opportunities to enhance effectiveness and/or efficiency were identified.
- Performed with Major Challenges (M): The targets and critical tasks associated with the core 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; contributed to additional health and/or safety risks for the public or for emergency workers; and/or was not conducted in accordance with applicable plans, policies, procedures, regulations, and laws.
- Unable to be Performed (U): The targets and critical tasks associated with the core capability were not performed in a manner that achieved the objective(s).

Table 1. Summary of Core Capability Performance

The following sections provide an overview of the performance related to each exercise objective and associated core capability, highlighting strengths and areas for improvement.

### Core Capability 1: Medical Countermeasure Dispensing and Administration

Medical countermeasure dispensing is the ability to provide medical countermeasures (including vaccines, antiviral drugs, antibiotics, antitoxin, etc.) in support of treatment or prophylaxis (oral or vaccination) to the identified population in accordance with public health guidelines and/or recommendations.

**Objective 1:** Notify and confirm availability of the pre-identified Point of Dispensing /Point of Administration (POD/POA) site within one hour of the decision to activate the site.

#### Strengths

The [full or partial] capability level can be attributed to the following strengths:

**Strength 1:** [Observation statement]

**Strength 2:** [Observation statement]

**Strength 3:** [Observation statement]

Add additional, if appropriate

#### 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.]

**Reference:** [List any relevant plans, policies, procedures, regulations, or laws.]

**Analysis:** [Provide a root cause analysis or summary of why the full capability level was not achieved.]

**Area for Improvement 2:** [Observation statement]

**Reference:** [List any relevant plans, policies, procedures, regulations, or laws.]

**Analysis:** [Provide a root cause analysis or summary of why the full capability level was not achieved.]



Add additional, if necessary

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**Objective 2:** Develop a schedule to cover the first two (2) operational periods at least 24 hours prior to the start of POD/POA operations.

### Strengths

The [full or partial] capability level can be attributed to the following strengths:

**Strength 1:** [Observation statement]

**Strength 2:** [Observation statement]

**Strength 3:** [Observation statement]

Add additional, if appropriate

### 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.]

**Reference:** [List any relevant plans, policies, procedures, regulations, or laws.]

**Analysis:** [Provide a root cause analysis or summary of why the full capability level was not achieved.]

**Area for Improvement 2:** [Observation statement]

**Reference:** [List any relevant plans, policies, procedures, regulations, or laws.]

**Analysis:** [Provide a root cause analysis or summary of why the full capability level was not achieved.]

Add additional, if necessary

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**Objective 3:** Notify and confirm availability of personnel identified to fill roles for the first operational period at least 24 hours prior to the start of POD/POA operations.

**Strengths**

The [full or partial] capability level can be attributed to the following strengths:

**Strength 1:** [Observation statement]

**Strength 2:** [Observation statement]

**Strength 3:** [Observation statement]

Add additional, if appropriate

**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.]

**Reference:** [List any relevant plans, policies, procedures, regulations, or laws.]

**Analysis:** [Provide a root cause analysis or summary of why the full capability level was not achieved.]

**Area for Improvement 2:** [Observation statement]

**Reference:** [List any relevant plans, policies, procedures, regulations, or laws.]

**Analysis:** [Provide a root cause analysis or summary of why the full capability level was not achieved.]

Add additional, if necessary

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**Objective 4:** Ensure that all identified POD/POA staff for first operational period report to the POD/POA within 30 minutes of identified reporting time.

**Strengths**

The [full or partial] capability level can be attributed to the following strengths:

**Strength 1:** [Observation statement]

**Strength 2:** [Observation statement]

**Strength 3:** [Observation statement]

Add additional, if appropriate

### 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.]

**Reference:** [List any relevant plans, policies, procedures, regulations, or laws.]

**Analysis:** [Provide a root cause analysis or summary of why the full capability level was not achieved.]

**Area for Improvement 2:** [Observation statement]

**Reference:** [List any relevant plans, policies, procedures, regulations, or laws.]

**Analysis:** [Provide a root cause analysis or summary of why the full capability level was not achieved.]

Add additional, if necessary

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**Objective 5:** Manage delivery and recovery of the MCM and ancillary supplies to the POD/POA site using the Medical Emergency Response Inventory Tracking System (MERITS) or another inventory system used by the county.

### Strengths

The [full or partial] capability level can be attributed to the following strengths:

**Strength 1:** [Observation statement]

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**Strength 3:** [Observation statement]

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**Analysis:** [Provide a root cause analysis or summary of why the full capability level was not achieved.]

**Area for Improvement 2:** [Observation statement]

**Reference:** [List any relevant plans, policies, procedures, regulations, or laws.]

**Analysis:** [Provide a root cause analysis or summary of why the full capability level was not achieved.]

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**Objective 6:** Set up POD/POA (materiel, layout, supplies, stations for staff) within six (6) hours prior to POD/POA operations.

### Strengths

The [full or partial] capability level can be attributed to the following strengths:

**Strength 1:** [Observation statement]

**Strength 2:** [Observation statement]

**Strength 3:** [Observation statement]

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**Area for Improvement 2:** [Observation statement]

**Reference:** [List any relevant plans, policies, procedures, regulations, or laws.]

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Add additional, if necessary

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**Objective 7:** Inform public of dispensing/administration operations, including locations, time period of availability, and method of delivery at least 48 hours prior to start of POD/POA operations.

### Strengths

The [full or partial] capability level can be attributed to the following strengths:

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**Objective 8:** Activate the Countermeasure Data Management System (CDMS) or other online electronic pre-registration (e.g., eHealth Scheduling) at least 48 hours before POD/POA operations start to allow recipients to register per planned operational periods to support social distancing within the POD/POA.

### Strengths

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**Strength 1:** [Observation statement]

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**Analysis:** [Provide a root cause analysis or summary of why the full capability level was not achieved.]

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**Analysis:** [Provide a root cause analysis or summary of why the full capability level was not achieved.]

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**Objective 9:** Ensure that individuals with access and functional needs are provided additional support as requested.

### Strengths

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**Analysis:** [Provide a root cause analysis or summary of why the full capability level was not achieved.]

Add additional, if necessary

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**Objective 10:** Provide Just-in-Time Training (JITT) to POD/POA staff and volunteers within 24 hours before the start of POD/POA Operations.

### Strengths

The [full or partial] capability level can be attributed to the following strengths:

**Strength 1:** [Observation statement]

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**Objective 11:** Sustain MCM administration operations for three (3) hours and determine hourly throughput based on the throughput for the specific POD/POA plan for that site.

## Strengths

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**Area for Improvement 2:** [Observation statement]

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Add additional, if necessary

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**Objective 12:** Demonstrate maintaining Cold Chain storage of the MCM in accordance with package instructions and the “Vaccine Storage and Handling Toolkit” (January 2020) throughout entire POD operations.

### Strengths

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**Strength 1:** [Observation statement]

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**Analysis:** [Provide a root cause analysis or summary of why the full capability level was not achieved.]

Add additional, if necessary

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**Objective 13:** Simulate/administer MCM to affected population for a three (3) hour dispensing period, and ensure outcomes are recorded in CDMS. (Target: #5 in Health Electronic Response Data System (HERDS) Security Survey for the POD/POA site being exercised).

**Strengths**

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Add additional, if necessary

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**Objective 14:** Provide 100% of recipients with instructions on the procedure for reporting adverse events and medical follow-up immediately after vaccine is administered.

**Strengths**

The [full or partial] capability level can be attributed to the following strengths:

**Strength 1:** [Observation statement]

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**Strength 3:** [Observation statement]

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**Area for Improvement 2:** [Observation statement]

**Reference:** [List any relevant plans, policies, procedures, regulations, or laws.]

**Analysis:** [Provide a root cause analysis or summary of why the full capability level was not achieved.]

Add additional, if necessary

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## APPENDIX A: IMPROVEMENT PLAN

This IP has been developed specifically for [Organization or Jurisdiction] as a result of CriticalVAX conducted on [date of exercise].

Core Capability	Issue/Area for Improvement	Corrective Action	Capability Element <sup>1</sup>	Primary Responsible Organization	Organization POC	Start Date	Completion Date
Capability							
Capability							
	Etc.						

<sup>1</sup> Capability Elements are: Planning, Organization, Equipment, Training, Exercises and Corrective Actions, Policy, Personnel, or Resources.

## APPENDIX B: EXERCISE PARTICIPANTS

Participating Organizations	
<b>State</b>	
<b>Local Emergency Manager(s)</b>	
<b>Emergency Medical Services</b>	
<b>At-Risk Populations (please note the specific groups used)</b>	