

# PREFACE

The Burn Surge Annex Tabletop Exercise (TTX) Toolkit Template has been developed by the U.S. Department of Health and Human Services (HHS), Office of the Assistant Secretary for Preparedness and Response (ASPR) Technical Resources, Assistance Center, and Information Exchange (TRACIE). It can be used by healthcare coalitions (HCCs) to enhance operational area awareness and capability in order to effectively address the needs of burn victims as part of a whole community emergency response framework. It can also be utilized to satisfy Funding Opportunity Announcement (FOA) requirements for the Hospital Preparedness Program (HPP) Cooperative Agreement.

The HCCs are not required to use this template and may conduct a burn surge annex exercise using any acceptable Homeland Security Exercise and Evaluation Program (HSEPP) compliant format.

This toolkit template is intended to be edited and modified by the HCC Exercise Planning Team to satisfy the concepts and objectives each HCC intends to test based on gaps identified during the development of the burn surge annex. Blue text boxes and bracketed sections are included throughout the document and serve as notes to planners and prompts to enter your own text. Please delete those boxes and bracketed areas once final decisions and text has been crafted.

The complete toolkit template includes the following supporting materials for conducting a Burn Surge Annex TTX:

1. Step-by-Step Guide to Implementing the Burn Surge Annex Tabletop Exercise Template (this document) ([compliant PDF](#), [DOC](#))
2. Situation Manual (this document) ([compliant PDF](#), [DOC](#))
3. Burn Surge Annex Tabletop Exercise Presentation ([compliant PDF](#), [PowerPoint](#))
4. Participant Feedback Form ([compliant PDF](#), [DOC](#))
5. Sign-in Form ([compliant PDF](#), [DOC](#))

ASPR TRACIE developed a [HCC Burn Surge Annex Template](#) and has many [additional resources for HCCs](#) and [burn planners](#). For more information, visit <https://asprtracie.hhs.gov> or contact our Assistance Center at 1-844-5-TRACIE or [askasprtracie@hhs.gov](mailto:askasprtracie@hhs.gov).

## STEPS TO PREPARING AND CONDUCTING A SUCCESSFUL EXERCISE

### Step 1: Determine the need to exercise and receive approval from leadership to proceed, if needed

- Identify the Exercise Director.
- Review the HCC's Burn Surge Annex to ensure it is up to date and ready to test.

### Step 2: Exercise Director convenes an Exercise Planning Team (EPT)

- Planning team members should not participate as players in the exercise. However, they can serve as a facilitator, controller, or evaluator on the day of the exercise.
- One planning team member should be included for each major entity playing in the exercise (e.g., hospitals, referral / community burn center, HCC leadership, Emergency Medical Services [EMS], and emergency management).
- Planning team members must attend each planning meeting.

### Step 3: Convene a combined Concept and Objectives / Initial Planning Meeting with the EPT

- Establish an exercise date, time, and location (the exercise could be convened in person, held virtually, or be a combination).
- Establish an initial list of exercise objectives, considering any gaps or areas of difficulty identified during the development of the burn surge annex. Use the accompanying Situation Manual and PowerPoint presentation as a guide, but modify and adjust the recommended objectives as appropriate for your coalition's needs.
- Select the exercise scenario, number of modules, and discussion questions. Use the accompanying Situation Manual and PowerPoint presentation as a guide, but modify and adjust the scenario, questions, and modular format as appropriate for your Coalition's exercise goals.
- Identify the Exercise Facilitator. This person should have experience in disaster response, emergency management or clinical expertise, and prior exercise facilitation. It is also helpful if the individual is well known and respected in the community.
- Establish a list of exercise participants, preferably by name, but at least by title and organization. The attendees should include at a minimum, representatives from hospitals (including the [closest burn center](#) and any Level 1 or 2 trauma centers in the coalition), EMS agencies/other first response authorities (public safety and private sector), emergency management and public health agencies, burn care subject matter experts (SME), and others (e.g., burn specialists, behavioral health, public information officers, and staff from the medical examiner's office).
  - Note that this scenario focuses on the response and referral process within the healthcare system to drive examination of the burn surge annex components. Hospitals

should identify both a clinical and an emergency management/administration representative to participate in the exercise. EMS agencies should send a supervisor and/or medical director to attend and participate.

- Confirm exercise controllers and evaluators and select evaluation criteria.
- Determine who will send invitations to potential exercise participants and manage RSVPs.
- Determine who will develop and finalize the required exercise materials.

### Step 4: Confirm exercise logistics and send invitations

- Visit the facility to determine if it meets the exercise needs and confirm virtual connectivity (including whether participants need “practice sessions” to ensure the virtual platform works in their location and that they are familiar with how it works).
- Determine what additional supplies are needed to conduct the exercise (pens, paper, name tags or table tents, computer and projector, other audio visual (AV) equipment, markers, easels, etc.).
- Invite HCC members and ensure representation from all four core members (hospitals, emergency management, EMS and public health).
- Invite any regularly engaged burn referral partners to participate (in-person or virtual) and ensure participation, ideally including a burn surgeon, burn unit medical director, and/or designated burn disaster coordinator.

### Step 5: Develop exercise materials

- Using the materials in this toolkit and based on the outcomes from the Initial Planning Meeting, review and modify the Situation Manual (SitMan), agenda, presentation materials, and the exercise participant evaluation form, according to HCC needs.
- Send draft versions of the materials to the exercise planning team to seek input, review comments and finalize the materials.
- Send final draft materials to exercise planning team members prior to the Final Planning Meeting.
- Determine whether participants need a “Read Ahead” packet and develop the packet for review at the Final Planning Meeting.

### Step 6. Conduct a Final Planning Meeting with the exercise planning team

- Approve all documents as final.
- Confirm and finalize all logistics and attendees.
- Determine who will coordinate “day of” logistics such as on-site registration/sign in, table tents, printed materials, AV equipment, and room set up.
- Send a final reminder email to all participants with any last-minute logistical information. This email should include read ahead material, specifically the HCC Burn Surge Annex. The email should remind participants to review additional attached read ahead material and relevant

agency or entity response plans. Participants should be encouraged to bring appropriate plans, policies, and procedures to assist them in exercise play.

### Step 7. Conduct a pre-exercise controller/evaluator training

- This meeting can be conducted virtually or in-person and should be used to review exercise logistics, facilitation support needs, and evaluation expectations.

### Step 8. Conduct the exercise

- Provide the Participant Feedback Form at the beginning of the exercise so participants can note their answers throughout the exercise.

### Step 9. Conduct an exercise hotwash/debriefing

- A hotwash should be conducted by the Exercise Facilitator immediately following the conclusion of the exercise. Hotwash slides are provided in the Exercise PowerPoint Template.
- Debriefing occurs following the conclusion of the hotwash, once all participants have departed. The debriefing includes the Exercise Facilitator, the EPT, and Exercise Evaluators and focuses on their immediate thoughts and reactions to the exercise. Controllers and Evaluators should follow up with their written notes.

### Step 10. Conduct the After Action process

- Gather comments from participants during the hotwash and from the participant feedback forms.
- Develop the draft After Action Report (AAR) and Improvement Plan (IP). ASPR TRACIE's [Exercise Program Topic Collection](#) includes guidance documents and sample AARs.
- The exercise planning team and exercise evaluator review, comment and validate the draft AAR/IP.
- Prepare a follow-up list of actions, assignments, and a mechanism to update the disaster plan, burn surge annex, and related procedures.
- Disseminate the final AAR and IP, along with the proposed plan and timeline for implementing the IP.
- Update and finalize the HCC Burn Surge Annex to address lessons learned and mitigate gaps identified during the TTX.
- Provide training on the updated plan and the lessons learned from the exercise to HCC members and participants beyond those who participated in the exercise.

### Notes:

HCCs vary dramatically in their preparedness and response roles and capabilities. In some cases, the coalition itself will have a direct role through an operations center or utilization of coalition personnel. In other areas, the coalition is more a sum of the response roles of its partners and ensures that information is being shared between partners and that all response functions are accounted for (with agency and facility members of the coalition serving in the leadership role). Coalitions take many forms, but they all must ensure that the *functions* of the response occur, regardless of who or where that may be. This scenario focuses on the healthcare aspects of the response as a driver for other agency supportive actions and is meant to test the HCC Burn Surge Annex.

The focus of this effort is to discuss a burn mass casualty scenario in a no-fault learning environment to understand what plans are in place and what gaps continue to exist for the members of the coalition and at the coalition / coordination level. Many coalitions do not have burn centers or specialty facilities nearby and therefore should ensure participation (in-person or virtual) from their usual referral partners that will play a critical role in assisting with prioritization of transfers and providing clinical advice and support.

Hospital personnel should answer the questions according to their facility plans and may compare notes with other facilities during discussion. Seating options vary depending on the number of attendees but hospital personnel from the same facility should sit together and ideally be paired at tables with others from their health system (or other hospitals in the area). EMS personnel and other relevant HCC partners / stakeholders should sit at a table. Public health, emergency management, and other partners may be assigned their own table or participate in hospital or EMS discussions.

The following ASPR TRACIE Subject Matter Experts contributed to the development of this resource:

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## RESOURCES

The following resources may assist in developing a burn exercise:

- ASPR TRACIE [Burn Topic Collection](#)
- ASPR TRACIE [HCC Burn Surge Annex Template](#)
- American Burn Association: [Mass Casualty](#)
- Western Region Burn Disaster Consortium: [Burn Mass Casualty Operations Plan](#)