

[INSERT YEAR] STATEWIDE MEDICAL AND HEALTH EXERCISE

EXERCISE EVALUATION GUIDES[[1]](#footnote-1)

Exercise Evaluation Guides (EEG) provide a consistent tool to direct exercise observation and data collection[[2]](#footnote-2). Each EEG is organized by objective, applicable capability, and applicable tasks. The EEGs are structured to capture information specifically related to the evaluation requirements developed by the Exercise Planning Team.**Evaluators should complete all assigned EEGs and submit them to the Lead Evaluator at the conclusion of the exercise.**

**How to Use This Document*:*** *This document serves as a template, with local planners customizing the specific objectives, capabilities and associated tasks. Highlighted sections, including the gray boxes, contain instructions, examples, or placeholders to facilitate the completion of this document. These sections should be removed or modified as appropriate prior to finalizing this document. This document is entirely dependent on the capabilities, objectives, and tasks chosen by your facility/agency/jurisdiction. As such, it will require customization to meet the needs of your exercise.*

| **Evaluator Name:** [Name]**Evaluator Title: [**Title] | **Evaluator Agency: [**Agency]**Evaluator Phone/Email:** [Phone/Email] |
| --- | --- |

## **Exercise Host:** [Name and address of jurisdiction/agency/organization hosting the exercise]

## **Type of Exercise:** ❑ Tabletop [Date of Exercise]

## ❑ Functional [Time of Exercise]

## ❑ Full Scale

❑ Other:

# EXERCISE EVALUATION GUIDES - EXAMPLE

The following is provided as an example of how the following criteria and evaluation sections in the Exercise Evaluation Guides (EEG) may be completed:

| 1. EXERCISE OBJECTIVE: Activate a Joint Information Center (JIC) in order to combine information sharing abilities and coordinate messages.
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| --- |
| A. Capability: *Public Health Emergency Preparedness (PHEP) Capability 4: Emergency Public Information and Warning* Definition: Emergency public information and warning is the ability to develop, coordinate, and disseminate information, alerts, warnings, and notifications to the public and incident management responders.  |
| Task: Establish a JIC within 60 minutes of the start of an incident per local policies and proceduresTask: Utilize the JIC to combine information and coordinate internal and external messages within 90 minutes of the start of an incident per local policies and procedures**Source(s):** [Emergency Operations Plan 2017] |

]

| **CAPABILITY** | **ASSOCIATED TASKS** | **OBSERVATION NOTES AND EXPLANATION OF RATING** | **RATING[[3]](#footnote-3)** |
| --- | --- | --- | --- |
| *Emergency Public Information and Warning* | * Establish a JIC within 60 minutes of the start of an incident per local policies and procedures.
 | Agency Staff met this objective swiftly and efficiently by activating the JIC and gathering the necessary agency representatives within 45 minutes of initial incident notification. | P |

# EXERCISE CRITERIA

**This section to be completed by all Evaluators:**

Use this section to record identified exercise criteria such as objectives, applicable capabilities, and applicable tasks.

| 1. **EXERCISE OBJECTIVE: [INSERT EXERCISE OBJECTIVE]**
 |
| --- |
| 1. Capability: [Insert applicable capability from Public Health Emergency Preparedness (PHEP), Health Care Preparedness and Response Capabilities, or National Core Capabilities]

[Insert applicable capability definition] |
| *Task:* [Insert task from frameworks, plans, or Standard Operating Procedures (SOPs)] *Task:* [Insert task from frameworks, plans, or SOPs]*Task:* [Insert task from frameworks, plans, or SOPs]*Task:* [Insert task from frameworks, plans, or SOPs]**Source(s):** [Insert name of plan, policy, procedure, or reference] |
| 1. Capability: [Insert applicable capability from PHEP, Health Care Preparedness and Response Capabilities, or National Core Capabilities]

[Insert applicable capability definition] |
| *Task:* [Insert task from frameworks, plans, or SOPs] *Task:* [Insert task from frameworks, plans, or SOPs]*Task:* [Insert task from frameworks, plans, or SOPs]*Task:* [Insert task from frameworks, plans, or SOPs]**Source(s):** [Insert name of plan, policy, procedure, or reference] |
| 1. Capability: [Insert applicable capability from PHEP, Health Care Preparedness and Response Capabilities, or National Core Capabilities]

[Insert applicable capability definition] |
| *Task:* [Insert task from frameworks, plans, or SOPs] *Task:* [Insert task from frameworks, plans, or SOPs]*Task:* [Insert task from frameworks, plans, or SOPs]*Task:* [Insert task from frameworks, plans, or SOPs]**Source(s):** [Insert name of plan, policy, procedure, or reference] |

# EXERCISE EVALUATION

**This section to be completed by all Evaluators:**

Use this section to observe and record exercise activity. This data is critical to fill in gaps identified during exercise evaluation.

| **CAPABILITY** | **ASSOCIATED TASKS** | **OBSERVATION NOTES AND EXPLANATION OF RATING** | **RATING[[4]](#footnote-4)** |
| --- | --- | --- | --- |
| [Insert A Capability]  | * [Insert Task]
 |  |  |
| [Insert B Capability] | * [Insert Task]
 |  |  |
| [Insert C Capability] | * [Insert Task]
 |  |  |

# EXERCISE IMPROVEMENT PLANNING

**This section to be completed by all Evaluators:**

Use notes, observations, and expertise to document demonstrated strengths, areas of improvement, and corrective actions to remedy documented issues.

**List the top three strengths:**

|  |
| --- |
| 1. |
| 2. |
| 3. |

**List the top three areas for improvement:**

|  |
| --- |
| 1. |
| 2. |
| 3. |

**List recommendations and corrective actions (based on the listed areas of improvement):**

|  |
| --- |
| 1. |
| 2. |
| 3. |

# NOTES AND FEEDBACK

**This section to be completed by all Evaluators:**

Record participant feedback summaries and key points (based on observations noted during the hot wash, debrief and discussions).

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# FEEDBACK FORM ANALYSIS

**This section to be completed by the Lead Evaluator:**

Compile all Participant Feedback Forms received to complete the table below. [Update the questions to reflect the questions provided on the Participant Feedback Form for your jurisdiction/organization/facility].

Number of Controllers: Number of Evaluators: Number of Participants: Number of Observers:

| RATING SATISFACTION OF EXERCISE[[5]](#footnote-5) |
| --- |
| **Assessment Factor** | Strongly**Disagree****(1)** | **Disagree****(2)** | **Neutral****(3)** | **Agree****(4)** | **Strongly Agree****(5)** |
| # | % | **#** | **%** | **#** | **%** | **#** | **%** | **#** | **%** |
| [Pre-exercise briefings were informative and provided the necessary information for my role in the exercise] |  |  |  |  |  |  |  |  |  |  |
| [The exercise scenario was plausible and realistic] |  |  |  |  |  |  |  |  |  |  |
| [Exercise participants included the right people in terms of level and mix of disciplines] |  |  |  |  |  |  |  |  |  |  |
| [Participants were actively involved in the exercise] |  |  |  |  |  |  |  |  |  |  |
| [Exercise participation was appropriate for someone in my field with my level of experience/training] |  |  |  |  |  |  |  |  |  |  |
| [The exercise increased my understanding about and familiarity with the capabilities and resources of other participating organizations] |  |  |  |  |  |  |  |  |  |  |
| [The exercise provided the opportunity to address significant decisions in support of critical mission areas] |  |  |  |  |  |  |  |  |  |  |
| [After this exercise, I am better prepared to deal with the capabilities and hazards addressed] |  |  |  |  |  |  |  |  |  |  |
| [I would participate in future exercises of this type] |  |  |  |  |  |  |  |  |  |  |

1. . The EEG is adapted from those provided by the Los Angeles County EMS Agency and further tailored for the SWMHE. [↑](#footnote-ref-1)
2. . Additional information and supporting exercise documents are available at www.californiamedicalhealthexercise.com. [↑](#footnote-ref-2)
3. . P – Performed without Challenges - The 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.

 S – Performed with Some Challenges - The 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. However, opportunities to enhance effectiveness and/or efficiency were identified.

 M – Performed with Major Challenges - The tasks associated with the capability were completed in a manner that achieved the objective(s), but the demonstrated performance had a negative impact on the performance of other activities and/or was not conducted in accordance with applicable plans, policies, procedures, regulations, and laws.

 U – Unable to be Performed - The tasks associated with the capability were not performed in a manner that achieved the objective(s). [↑](#footnote-ref-3)
4. . P – Performed without Challenges - The 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.

 S – Performed with Some Challenges - The 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. However, opportunities to enhance effectiveness and/or efficiency were identified.

 M – Performed with Major Challenges - The tasks associated with the capability were completed in a manner that achieved the objective(s), but the demonstrated performance had a negative impact on the performance of other activities and/or was not conducted in accordance with applicable plans, policies, procedures, regulations, and laws.

 U – Unable to be Performed - The tasks associated with the capability were not performed in a manner that achieved the objective(s). [↑](#footnote-ref-4)
5. . [To create rating satisfaction percentages, you will need to count the number of times each rating was chosen (per assessment factor) and divide that number by the total number
of forms received. For example, if 20 participants circled 5 (Strongly agree) for the first assessment factor and there were 40 total feedback forms received then the equation is 20/40= .5 or a rating satisfaction of 50%.] [↑](#footnote-ref-5)