**Building Relationships to address the needs of Persons with Disabilities and others with Access and Functional Needs in Emergency Preparedness and Response**

**Situation Manual**

6/26/2024

This Situation Manual (SitMan) provides exercise participants with all the necessary tools for their roles in the exercise. Some exercise material is intended for the exclusive use of exercise planners, facilitators, and evaluators, but players may view other materials that are necessary to their performance. All exercise participants may view   
the SitMan.

# Exercise Overview

**Exercise Name:** Building Relationships to address the needs persons with disabilities and others with access and functional needs in Emergency Preparedness and Response

**Exercise Date:** June 26, 2024

**Scope:** This exercise is a tabletop exercise planned for four hours at Bank of Springfield, 1 Convention Plaza Springfield, IL., 62701. Exercise play is limited to scenario-based discussion.

**Focus Area(s):** Planning, Response, and Recovery

**Capabilities:** Community Preparedness; Information sharing; Mass Care; Emergency Public Information Warning; Public Health and Medical Response/Recovery Coordination

**Objectives:**

* To evaluate the jurisdictional plans for inclusion of knowledge of the access and functional needs including those with disabilities within their community that must be addressed in their preparedness and response activities.
* To review communication processes to ensure that all organizations are communicating effectively with all community members.
* To assess response plans to confirm that processes to maintain health and independence exist in the plans for all community members.
* To confirm that all organizations are prepared to address the safety, support, and self-determination of all the members of their community.
* To examine whole community transportation considerations in preparedness and response.

**Threat or Hazard:** Extreme heat and power outage.

**Scenario:**

A heat dome in Illinois is forecasted to last 7-10 days or more. 104 degrees Fahrenheit during the day nighttime lows of 85 degrees Fahrenheit.

Jurisdictions have senior living apartment buildings, skilled nursing facilities, Centers for Independent Living (CIL), people with disabilities and others with access and functional needs throughout the community, disabled people and others with access and functional needs living in the community who are dependent on electrically-powered medical equipment, 29 correctional facilities in the state, multiple behavioral health inpatient and day programs in the state. The utility companies are planning rolling power shutdowns to decrease stress on the power grid. Impacts on all of the populations listed above will be extensive, requiring possible evacuations of facilities and the establishment of cooling centers with mass care services.

**Sponsor:** Illinois Department of Public Health (IDPH)

**Participating Jurisdictions/ Organizations:**

* 167 people have registered.
* 2 Federal (1 Gov / 1 NGO)
* Illinois Department of Public Health (IDPH)
* Illinois Department of Human Services (IDHS)
* Illinois Emergency Management Agency and Office of Homeland Security (IEMA-OHS)
* 23 County Health Departments
* 5 County Emergency Management Agencies
* 4 School Districts
* 1 Fire Department
* 30 Health Systems (hospitals, assisted living, and other congregate care facilities)
* 11 Non-governmental Organizations (humanitarian, disability-related, aging-related, family and juvenile-related)
* 2 Universities

**Point of Contact:**

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# General Information

## Exercise Objectives and Capabilities

The following exercise objectives in Table 1 describe the expected outcomes for the exercise. The objectives are linked to capabilities, which are the means to accomplish a mission, function, or objective based on the performance of related tasks, under specified conditions, to target levels of performance. The objectives and aligned capabilities are guided by senior leaders and selected by the Exercise Planning Team.

**Exercise Objective 1:** To evaluate the jurisdictional plans for inclusion of knowledge of the access and functional needs including those with disabilities within their community that must be addressed in their preparedness and response activities.

*Capability:*

1. Public Health Emergency Preparedness Program (PHEP Program): Community Preparedness

**Exercise Objective 2:** To review communication processes to ensure that all organizations are communicating effectively with all community members.

*Capability:*

1. PHEP:
   * Community Preparedness
   * Emergency Public Information Warning
   * Information Sharing
2. FEMA: Public Information and Warning

**Exercise Objective 3:** To assess response plans to confirm that processes to maintain health and independence exist in the plans for all community members.

*Capability:*

1. PHEP:
   * Mass Care
   * Nonpharmaceutical Interventions
2. Hospital Preparedness Program (HPP):
   * Health Care and Medical Response Coordination
   * Continuity of Health Care Service Delivery

**Exercise Objective 4:** To confirm that all organizations are prepared to address the safety, support, and self-determination of all the members of their community members.

*Capability:*

1. PHEP: Community Preparedness
2. HPP: Continuity of Health Care Service Delivery
3. FEMA:
   * Operational Coordination
   * Intelligence and Information Sharing

**Exercise Objective 5:** To examine whole community transportation considerations in preparedness and response.

*Capability:*

1. PHEP: Information Sharing
2. HPP: Continuity of Health Care Service Delivery
3. FEMA:
   * Operational Coordination
   * Public Health, Health Care, and Emergency Management Services

## Participant Roles and Responsibilities

The term *participant* encompasses many groups of people, not just those playing in the exercise. Groups of participants involved in the exercise, and their respective roles and responsibilities, are as follows:

* **Players:** Personnel who have an active role in discussing or performing their regular roles and responsibilities during the exercise. Players discuss or initiate actions in response to the simulated emergency.
* **Observers:** Do not directly participate in the exercise. However, they may support the development of player responses to the situation during the discussion by asking relevant questions or providing subject matter expertise.
* **Facilitators:** Provide situation updates and moderate discussions. They also provide additional information or resolve questions as required. Key Exercise Planning Team members also may assist with facilitation as subject matter experts (SMEs) during the exercise.
* **Evaluators:** Are assigned to observe and document certain objectives during the exercise. Their primary role is to document player discussions, including how and if those discussions conform to plans, polices, and procedures.

## Exercise Structure

This exercise will be a facilitated exercise. Players will participate in the following three modules:

* Module 1: Preparedness
* Module 2: Response
* Module 3: Recovery

Each module begins with a multimedia update that summarizes key events occurring within that time period. After the updates, participants review the situation and engage in functional group discussions of appropriate actions for each agency or non-government organization in each phase of the scenario. For this exercise, the functional groups are regional groupings based on Emergency Medical Services Regions in Illinois, including the following:

* Public Health
* Non-Governmental Organizations, including Disability-Led Organizations
* Emergency Medical Services
* Hospital Coalitions
* Emergency Management

After these functional group discussions, participants will engage in a moderated discussion in which a spokesperson from groups will present a synopsis of the group’s actions, based on the scenario.

## Exercise Guidelines

* This exercise will be held in an open, no-fault environment wherein capabilities, plans, systems, and processes will be evaluated. Varying viewpoints, even disagreements, are expected.
* Respond to the scenario using your knowledge of current plans and capabilities (i.e., you may use only existing assets) and insights derived from your training.
* Decisions are not precedent-setting and may not reflect your jurisdiction’s/ organization’s final position on a given issue. This exercise is an opportunity to discuss and present multiple options and possible solutions.
* Issue identification is not as valuable as suggestions and recommended actions that could improve regional efforts. Problem-solving efforts should be the focus.
* The assumption is that the exercise scenario is plausible and events occur as they are presented. All players will receive information at the same time.

## Exercise Evaluation

Evaluation of the exercise is based on the exercise objectives and aligned capabilities, capability targets, and critical tasks, which are documented in Exercise Evaluation Guides (EEGs). Evaluators have EEGs for each of their assigned areas. Additionally, players will be asked to complete participant feedback forms. These documents, coupled with facilitator observations and notes, will be used to evaluate the exercise and compile the After-Action Report (AAR)/Improvement Plan (IP).

# Module 1: Prepare (45 min. total)

## Scenario

**Spring 2024: Part One (25 min.)**

* FEMA held a two-day conference on Excessive Heat three months ago. Your agency has decided to make it a priority to plan for an excessive heat event.

**June 2024: Part Two (20 min.)**

* Your region has received notification that in five days a heat dome will be present over the entire state of Illinois. The governor has declared a state of emergency preemptively.
* All jurisdictions in the State of Illinois have been notified from the National Weather Service and Illinois Emergency Management Agency (IEMA) that in five days a heat dome will cover the entire state for 7-10 days. Daytime temperatures will be 104 degrees Fahrenheit with nighttime temperatures not lower than 80 degrees Fahrenheit.
* Discuss and write down lines of effort for this phase of the event that your agency or organization would be doing during this timeframe.
* Report out by two or three tables and by exception.

## Key Issues

* Planning for excessive heat for your region with both government agencies and nongovernmental organizations.
* Planning for response with notification of an excessive heat even within the next 4-5 days.
* Initiating regional response structure.

## Questions

Based on the information provided, participate in the discussion concerning the issues raised in Module 1. Identify any critical issues, decisions, requirements, or questions that should be addressed at this time.

The following questions are provided as suggested subjects that you may wish to address as the discussion progresses. These questions are not meant to constitute a definitive list of concerns to be addressed, nor is it required to address every question.

### Regional Groups: Part One

* Who is your agency planning with?
* What tools are you using to assess the threat to your region/jurisdiction?
* Does your agency or organization have an excessive heat plan? What does this plan include?

### Regional Groups: Part Two

* Discuss and write down lines of effort for this phase of the event that your agency or organization would be doing during this timeframe.
* How will your agency or non-governmental organization communicate the upcoming heat event and actions the public can take?
* How will your agency or non-governmental organization communicate the locations of cooling center facilities?
* How will your agency or non-governmental organization communicate transportation plans for cooling centers to the whole community?
* What organizations in your region are you working with to communicate the above plans?

# Module 2: Response (40 min. total)

## Scenario

**June 2024: Part One (20 min.)**

* Your region is now under the heat dome as predicted. 911 call centers are inundated with requests for help due to no air conditioning and need for power for medical devicesincluding calls from 20 households with individuals on in-home respirators with only 4 hours of backup battery. In addition, 25 calls to 911 from individuals who cannot regulate their body temperature due to spinal cord injuries or other medical conditions.
* Cooling centers need to be opened and remain open on a 24-hour basis.

**June 2024: Part Two (20 min.)**

* Each region is notified that a senior living setting in their region has no power and no air conditioning. This facility needs to be evacuated as the heat in the facility is reaching 90 degrees or above. Approximately 90 individuals live in the facility with varying disabilities and other access and functional needs.
* The unhoused population and the Deaf Community in your region needs to be alerted and possible transportation to cooling centers.

## Key Issues

* Regional response structure
* Lead agency communication
* Communication with at-risk populations
* Pre-set response actions of agencies and non-governmental agencies
* Transportation plans
* 911 centers preset responses for excessive heat event.

## Questions

Based on the information provided, participate in the discussion concerning the issues raised in Module 1. Identify any critical issues, decisions, requirements, or questions that should be addressed at this time.

The following questions are provided as suggested subjects that you may wish to address as the discussion progresses. These questions are not meant to constitute a definitive list of concerns to be addressed, nor is there a requirement to address every question.

### Regional Groups

* List the lines of efforts that agencies or non-governmental organizations would follow for part one and part two of this module. Who provides Mass Care services in cooling centers?
* What groups of non-governmental organizations would be included in this response? Would they have a seat in the Emergency Operations Center (EOC)?
* What transportation assets would be utilized for evacuation and other transportation needs? How are transportation gathering sites communicated to unhoused individuals and the Deaf community?
* Are there client tracking plans for facilities that need evacuation? What agency or non-governmental organization is charged with this task? Who is responsible for notify family members of the location of their evacuated family member?
* What impact does elected official input have on response plans?
* Will businesses such as restaurants and grocery stores be shut down due to rolling power outages? If so, what impact does this have on the community?

# Module 3: Recovery (25 min. Total)

## Scenario

**June 2024: Part One (15 min.)**

* The heat dome has passed after 10 days. A boil water notice is in effect.
* Evacuated individuals from nursing homes and assisted living centers will need to be transported back to their facilities after inspection if regulated by the Illinois Department of Public Health.
* Unhoused individuals will need a menu of alternatives for housing after this event.
* Individuals that were evacuated from their homes due to needing power for their medical device or bodily heat control will need to return home.
* Restaurant, well water, and wastewater facilities will need to be inspected before reinitiating use.

**June 2024: Part Two (10 min.)**

* Media requesting plans of how the state and regions will recover from the heat dome event.

## Key Issues

* Recovery issues result in considerable amount of tasks
* Staffing for recovery
* Media question impact on recovery issues

## Questions

Based on the information provided, participate in the discussion concerning the issues raised in Module 1. Identify any critical issues, decisions, requirements, or questions that should be addressed at this time.

The following questions are provided as suggested subjects that you may wish to address as the discussion progresses. These questions are not meant to constitute a definitive list of concerns to be addressed, nor is there a requirement to address every question.

### Regional Group: Part One

* What priorities are identified for the region? How is the community involved in setting those priorities?
* How is recovery staffed for both agencies and non-governmental organizations?
* What are the plans for water distribution during the boil water notice? How will disabled people living in the community receive their water?
* How are non-governmental organizations involved in recovery?
* How are plans communicated to the whole community?

### Regional Group: Part Two

* What plans do agencies and non-governmental organizations have to address media requests?
* Are non-governmental organizations involved in Joint Information Centers (JIC)? Should this plan to include these partners be put into place?

# Appendix A: Exercise Schedule For June 26, 2024

**8:10 am:** Registration

**8:30 am:** Welcome and Introductions

**8:45-9:45 am:** Module 1: Prepare

**9:45-9:55 am:** Break

**9:55-10:50 am:** Module 2: Respond

**10:50-11:00 am:** Break

**11:00-11:40 am:** Module 3: Recovery

**11:40-11:50 am:** Break

**11:50 am - 12:25 pm:** Hotwash

**12:25 pm - 12:30 pm:** Closing Comments

# Appendix B: Exercise Participants

**Federal**

* Federal Emergency Management Agency Region 5
* The Partnership for Inclusive Disaster Strategies

**State**

* Illinois Department of Human Services (IDHS)
* Illinois Department of Public Health (IDPH)
* Illinois Department of Veterans Affairs
* Illinois Emergency Management Agency and Office of Homeland Security IEMA)
* IEMA's Access and Functional Needs Advisory Committee
* UIC Instituted on Disability & Human Development
* Illinois State University
* The Statewide Independent Living Council of Illinois
* American Red Cross

**Region 1**

* Alpine Fireside Health Center
* Milestone, Inc.
* Prairie View Assisted Living
* Red Cross Region RA1 Northwest Region
* Whiteside County Health Department
* Winnebago County Health Department

**Region 2**

* Advocates for Access
* Carle BroMenn Medical Center
* Carle Health Peoria
* LaSalle County Health Department
* McDonough County Health Department
* Rock Island County Health DepartmentU
* Snyder Village
* Tazewell County Emergency Management Agency
* Tazewell County Health Department

**Region 3**

* AgeLinc
* Brown County Health Department
* Carle Health
* Heritage Operations Group
* Hillsboro Health
* Illinois Presbyterian Home Communities
* Mason County Emergency Management Agency
* Morgan County Health Department
* Packard Mental Health
* Patterson House, Inc.
* Sangamon County Department of Public Health
* Sherman Emergency Management Agency

**Region 4**

* Alton Mental Health Center
* Crescent Home Health Agency
* Granite Nursing and Rehab
* IMPACT CIL
* Maxim Healthcare Services
* Randolph County Health Department
* St. Clair County Health Department
* Wolf Branch District 113

**Region 5**

* The Voyage Senior Living

**Region 6**

* Bridle Brook Assisted Living & Memory Care
* Caritas Family Solutions
* Champaign-Urbana Public Health District
* Citadel Healthcare
* Clark County Health Department
* Clay County Rehabilitation Center, Inc.
* DeWitt Piatt Bi-County Health Department
* Edgar County Public Health Department
* Effingham Fire Department
* Horizon Health
* Jasper County Health Department
* Lawrence County Health Department
* Macon County Emergency Management Agency
* Macon County Health Department
* Moultrie County Health Department
* PACE, Inc.
* Vermilion County Health Department

**Region 7**

* Friends Over Fifty Senior Care, Inc.
* Grundy County Emergency Management Agency
* Medxcel / Ascension Health
* Oswego School District 308

**Region 8**

* Berkeley School District 87
* DuPage County Health Department

**Region 9**

* River View Rehab Center

**Region 10**

* Lake County Health Department

**Region 11**

* Cook County Southland Juvenile Justice Council
* Illinois Council on Developmental Disabilities
* Illinois Veterans Home Chicago
* Progress Center for Independent Living
* South Point Nursing and Rehab

# Appendix C: Relevant Plans

* [Illinois Department of Public Health ESF-8 Plan](https://dph.illinois.gov/content/dam/soi/en/web/idph/files/publications/idph-esf-8-plan-2018-final-public-version-032718.pdf)
* [PEDIATRIC AND NEONATAL SURGE ANNEX](https://dph.illinois.gov/content/dam/soi/en/web/idph/publications/idph/topics-and-services/emergency-preparedness-response/public-health-care-system-preparedness/Peds-Neo-Surge-Annex_Jan2022.pdf)
* [Functional and Access Needs/ At-Risk Populations](https://dph.illinois.gov/content/dam/soi/en/web/idph/files/publications/080519-fan-resource-document-final-combined.pdf)

# Appendix D: Acronyms

**AAA:** Area Agency on Aging

**AAR/IP:** After-Action Report/Improvement Plan

**CIL:** Center for Independent Living

**EMS:** Emergency Management Agency

**EOC:** Emergency Operations Center

**ESF:** Emergency Support Function

**EEGs:** Exercise Evaluation Guides

**FEMA:** Federal Emergency Management Agency

**HSEEP:** Homeland Security Exercise and Evaluation Program

**HPP:** Hospital Preparedness Program

**IDHS:** Illinois Department of Human Services

**IDPH:** Illinois Department of Public Health

**IEMA-OHS:** Illinois Emergency Management Agency and Office of Homeland Security

**JIC:** Joint Information Center

**NGO:** Non-governmental Organization

**PHEP:** Public Health Emergency Preparedness Program

**SitMan:** Situation Manual

**SME:** Subject Matter Experts

**TTX:** Tabletop Exercise