

[County] Tabletop Exercise

Exercise Evaluation Guide

Instructions

- Please arrive 30 minutes before the exercise for a short Evaluator huddle.
- Please familiarize yourself with the Situation Manual (SitMan) for the exercise which contains the timeline for the exercise, the scenario, and the questions that will be posed to participants. Also, familiarize yourself with this Exercise Evaluation Guide.
- The exercise is comprised of five modules. The Facilitator will introduce each module and ask the questions associated with them.
- Do not prompt players regarding what a specific response should be. The goal of the exercise is to validate the content of existing plans, policies, procedures, training, etc.
- Indicate whether participants were able to answer questions fully (yes) partially, or not at all (no), and make any notes (in complete sentences!) in the blank spaces provided.
- Please be prepared to stay approximately 15 minutes after the exercise for a debrief.
- Please submit copies of your completed EEGs and notes to [facilitator]. It is preferred that these notes be submitted electronically, but legible, hand-written notes are also acceptable.
- Here are some good examples of how you should document observations you make during the exercise:
 - *Because there were multiple public safety answering points involved, it wasn't clear which jurisdiction was ultimately responsible for requesting/dispatching resources.*
 - *There are only two people with IPAWS administrator rights in the county and the process of issuing an emergency message seems cumbersome. An elected official must approve the message before it is sent. This can take 15 minutes, an hour, or longer, depending on the availability of the elected official.*
 - *Healthcare organizations were not notified of the potential mass casualty event until 35 minutes after it occurred.*
 - *The Medical Examiner was not notified.*
 - *Public Health was not aware they needed to inspect the Red Cross shelter before it could be opened.*

Module 1 Facility Notifications

1. What notifications will be made by the plant, and who will make these notifications?				
Expected response: **check in the off-site ERP** 1. 9-1-1 2. The NJDEP hotline at or <u>1-877-WARNDEP (1-877-927-6337)</u> 3. The [County] Community Emergency Coordinator at (xxx) xxx-xxxx , and 4. The NJ State Emergency Response Commission (njserc@njsp.org). They should also notify their employees.	Yes	Partially	No	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				
2. Will employees be instructed to evacuate or shelter-in-place (SIP)? Who makes this determination, and how?				
Expected response: Unknown	Yes	Partially	No	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				
3. How will employees be notified whether to evacuate or SIP?				
Expected response: Unknown	Yes	Partially	No	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				

4. If it is determined that evacuation is necessary, what instructions will be provided to employees? If the decision is made to SIP, what instructions will be provided?				
Expected Response:	Yes	Partially	No	N/A
Unknown	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				
5. How will employees, contractors, and visitors be accounted for?				
Expected Response:	Yes	Partially	No	N/A
Unknown	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				
6. Who will assume the role of [facility] Incident Commander (IC)?				
Expected Response:	Yes	Partially	No	N/A
Unknown	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				

Module 2 Exercise Evaluation Guide

1. What information should the [County Communications] Dispatcher obtain from the caller?				
Expected Response: 1. The chemical name or identity of any substance involved in the release. 2. An indication of whether the substance is on the list of extremely hazardous substances. 3. An estimate of the quantity of any such substance that was released into the environment. 4. The time and duration of the release. 5. The medium or media into which the release occurred. 6. Any known or anticipated acute or chronic health risks associated with the emergency and, where appropriate, advice regarding medical attention necessary for exposed individuals. 7. Proper precautions to take as a result of the release, including evacuation unless such information is readily available to the Local Emergency Planning Committee (LEPC) Community Emergency Coordinator (EC) pursuant to the emergency plan. 8. The name and telephone number of the person or persons to be contacted for further information.	Yes	Partially	No	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				
2. What notifications will the 9-1-1 communications center make?				
Expected Response: [**check in the off-site ERP**] The [County Communications] will dispatch the appropriate response agencies as dictated by the reported incident. In conjunction with this, it is the [County Communications]'s standard operating procedure on hazardous materials incidents to notify the [fill in from Off-site ERP, V. Concept of Operations, D. Notification Procedures].	Yes	Partially	No	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				
3. If the [chemical] release was reported to Dispatch by someone other than a [facility] representative (i.e., a member of the public), what notifications would the 911 communications				

center make?

Expected Response: **check in the off-site ERP**	Yes	Partially	No	N/A
[County] LEPC Community Emergency Coordinator, as well as the local response agency pursuant to standing procedures.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

4. How will the LEPC Community Emergency Coordinator be notified?

Expected Response:	Yes	Partially	No	N/A
Municipal and County Offices of Emergency Management for the area in which the release occurred	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

5. What notifications will the LEPC Emergency Coordinator make?

Expected Response: **check in the off-site ERP**	Yes	Partially	No	N/A
<ul style="list-style-type: none"> • [Facility] Emergency Coordinator • The municipal and county Emergency Management Coordinators for the area in which the release occurred • State Office of Emergency Management 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

6. Once notified, who will the [County] OEM notify?

Expected Response:	Yes	Partially	No	N/A
State Office of Emergency Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

7. What agency is responsible for notifying adjoining jurisdictions, counties, or states of the release?

Expected Response:	Yes	Partially	No	N/A
NJ SERC, through the State Office of Emergency Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

8. Who will contact local hospitals to advise them to prepare to receive potentially contaminated victims?

Expected Response:	Yes	Partially	No	N/A
Not specified in the ERP.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

9. What are the capabilities of the area hospitals to handle the incident?

Expected Response:

Yes	Partially	No	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Not specified in the ERP.

Comments:

Module 3 Exercise Evaluation Guide

1. What entity will lead the response?									
Expected Response: [**check in the off-site ERP**] [Fill in from Off-site ERP, V. Concept of Operations, D. Notification Procedures]. Example: [Agency] will lead and coordinate a hazmat response within the LEPC. HazMat operations will be led by the [HazMat Chief or his/her designee].	Yes	Partially	No	N/A					
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
Comments:									
2. What initial isolation distance will be established? Who will make this determination and what resource(s) would be used to make this determination?									
Expected Response: See table below. Should mention the Emergency Response Guidebook (ERG). Extra points if they know to also refer to the Tier II report! Incident Commander should make this decision.	Yes	Partially	No	N/A					
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
[Insert screenshot of ERG Guidebook]	SMALL SPILLS (From a small package or small leak from a large package)		LARGE SPILLS (From a large package or from many small packages)						
Guide NAME OF MATERIAL	First ISOLATE in all Directions Meters (Feet)	Then PROTECT persons Downwind during <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">DAY Kilometers (Miles)</td> <td style="text-align: center;">NIGHT Kilometers (Miles)</td> </tr> </table>		DAY Kilometers (Miles)	NIGHT Kilometers (Miles)	First ISOLATE in all Directions Meters (Feet)	Then PROTECT persons Downwind during <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">DAY Kilometers (Miles)</td> <td style="text-align: center;">NIGHT Kilometers (Miles)</td> </tr> </table>	DAY Kilometers (Miles)	NIGHT Kilometers (Miles)
DAY Kilometers (Miles)	NIGHT Kilometers (Miles)								
DAY Kilometers (Miles)	NIGHT Kilometers (Miles)								
117 Hydrogen sulfide 117 Hydrogen sulphide	30 m (100 ft)	0.1 km (0.1 mi)	0.5 km (0.3 mi)	400 m (1250 ft)	2.2 km (1.4 mi) 6.3 km (3.9 mi)				
Comments:									
3. Who will conduct plume/spill modeling and what resource(s) will be used?									
Expected Response: Unknown	Yes	Partially	No	N/A					
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
Comments:									

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4. Who will decide whether members of the impacted community should evacuate or SIP? How is this decision made?

Expected Response:	Yes	Partially	No	N/A
Not specified in ERP but should be the IC.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

5. What role does the LEPC have in determining or supporting whether residents evacuate or SIP?

Expected Response:	Yes	Partially	No	N/A
None, but the LEPC Community Emergency Coordinator is responsible for notification about protective measures for employees, the public and first responders.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

Module 4 Exercise Evaluation Guide

1. Who is responsible for notifying affected residents they should SIP?				
Expected Response: **check in the off-site ERP** “The Public Information Officer (PIO) will disseminate information about the release, including suggested protective measures and actions to be taken by the public.” The ERP also says the <u>Emergency Coordinator (EC)</u> is responsible for notification about protective measures for employees, the public and first responders.	Yes	Partially	No	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				
2. What method(s) will be used to provide the public with SIP instructions? What specific instructions will be provided?				
Expected Response: **check in the off-site ERP** ERP states “The public will be notified of a hazardous materials release and protective measures through the standard channels for emergency communications, pursuant local emergency operations plans for communications and public information. These include EAS and State and County Reverse 911.”	Yes	Partially	No	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				
3. How will individuals with disabilities, access and/or functional needs, language restrictions, and other vulnerabilities receive SIP instructions?				
Expected Response: **check in the off-site ERP** Communications shall be in alternate forms to be able to be received by individuals with disabilities and others with access and functional needs (DAFN), language restrictions and other vulnerabilities from the register ready list at www.registerready.nj.gov on file with local Emergency Management Coordinators.	Yes	Partially	No	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

4. Besides the public, what additional stakeholders need to be notified and who will notify them?

Expected Response:	Yes	Partially	No	N/A
No description in ERP.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

5. How will social media be monitored to address rumors and false/inaccurate information?

Expected Response:	Yes	Partially	No	N/A
No description in ERP.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

6. How would 9-1-1 deal with the surge of calls coming in?

Expected Response:	Yes	Partially	No	N/A
No description in ERP.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

Module 5 Exercise Evaluation Guide

1. What follow-up reporting is the [facility] required to make and to what agency(ies)?				
Expected Response: No later than 30 days following the occurrence of a release, the facility shall provide the LEPC with a follow-up report, which updates previously submitted information and provides additional information regarding: a. Actions taken to respond to and contain the release; b. Any known or anticipated acute or chronic health risks associated with the release; and c. When appropriate, if not already completed, advise all first responders of medical attention as required.	Yes	Partially	No	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				
2. How will the LEPC document and evaluate the [chemical] release incident?				
Expected Response: No description in ERP.	Yes	Partially	No	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				
3. Who will be responsible for sharing information about the incident to the public and other stakeholders?				
Expected Response: ERP states, "[County] LEPC will provide public access to the follow-up report" and "An evaluation of the incident response will be conducted following each incident following normal processes for emergency response incidents."	Yes	Partially	No	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				

