

# NE Disaster Behavioral Health Exercise 2022

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Situation Manual  
July 28, 2022

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.

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## EXERCISE OVERVIEW

<b>Exercise Name</b>	Nebraska Disaster Behavioral Health Exercise 2022	
<b>Exercise Date</b>	July 28, 2022	
<b>Scope</b>	<p>This exercise is a Seminar, planned for 4 hours at the Embassy Suites Downtown, Omaha, NE 68102</p> <p>Exercise play will include educational presentations and participant discussion.</p>	
<b>Mission Area(s)</b>	Planning	
<b>Core Capabilities</b>	Planning	
<b>Objectives</b>	<ul style="list-style-type: none"> <li>• Orient participants to the revised Nebraska Behavioral Health All-Hazards Response and Recovery Plan.</li> <li>• Ensure and reinforce comprehension of the revised Behavioral Health All-Hazards Disaster Response and Recovery Plan through group discussion.</li> <li>• Review current local and state capabilities. Identify gaps within current capabilities for correction.</li> <li>• Record and collect feedback from the discussion based on state, regional, and community needs in order to develop local emergency response plan templates.</li> </ul>	
<b>Threat or Hazard</b>	Not Applicable	
<b>Scenario</b>	Not Applicable	
<b>Sponsor</b>	Nebraska Department of Health and Human Services; University of Nebraska Public Policy Center	
<b>Participating Organizations</b>	Nebraska Department of Health and Human Services, Nebraska Emergency Management Agency, Nebraska Behavioral Health Regions, Nebraska Voluntary Agencies Active in Disaster, local Nebraska health departments, local Nebraska emergency management agencies, University of Nebraska Public Policy Center	
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## GENERAL INFORMATION

### Exercise Objectives and Core Capabilities

The following exercise objectives in Table 1 describe the expected outcomes for the exercise. The objectives are linked to core capabilities, which are distinct critical elements necessary to achieve the specific mission area(s). The objectives and aligned core capabilities are guided by elected and appointed officials and selected by the Exercise Planning Team.

Exercise Objective	Core Capability
Orient participants to the revised Nebraska Behavioral Health All-Hazards Disaster Response and Recovery Plan.	Planning
Ensure and reinforce comprehension of the new Behavioral Health All-Hazards Disaster Response and Recovery Plan through group discussion.	Planning
Review current local and state capabilities. Identify gaps within current capabilities for correction.	Planning
Record and collect feedback from the discussion based on state, regional and community needs in order to develop local emergency response plan templates.	Planning

**Table 1. Exercise Objectives and Associated Core Capabilities**

### 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.** Players are 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.

**Facilitators.** 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.** 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, policies, and procedures.

## Exercise Structure

This exercise will be a Seminar with discussion. Players will participate in the following two discussion modules:

Module 1: Orientation to Revised Nebraska Disaster Behavioral Health Response and Recovery Plan

Module 2: Local Response Capacity

Module 3: Operational Coordination for a Public Health Emergency

Module 1 will present information and orient participants to updates and changes to the Nebraska Disaster Behavioral Health Response and Recovery Plan. Modules 2 and 3 will each involve small group discussion about how the Plan and local response capacity will inform updates of local plans. For discussion, participants will break into functional groups as follows:

State agency representatives and Behavioral Health Emergency Response Team  
Behavioral Health Regional Teams – up to six teams

After these functional group discussions, participants will engage in a moderated plenary discussion in which a spokesperson from each group will present a synopsis of the group's points.

## Exercise Guidelines

This exercise will be held in an open, low-stress, no-fault environment. Varying viewpoints, even disagreements, are expected.

Respond to the information 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 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 response and recovery efforts. Problem-solving efforts should be the focus.

## Exercise Assumptions and Artificialities

In any exercise, assumptions and artificialities may be necessary to complete play in the time allotted and/or account for logistical limitations. Exercise participants should accept that assumptions and artificialities are inherent in any exercise and should not allow these considerations to negatively impact their participation. During this exercise, the following apply:

The exercise is conducted in a no-fault learning environment wherein capabilities, plans, systems, and processes will be evaluated.

The exercise scenario is plausible, and events occur as they are presented.

All players 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. Evaluators will evaluate the exercise based on participant discussions 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).

# **MODULE 1: ORIENTATION TO REVISED NEBRASKA DISASTER BEHAVIORAL HEALTH RESPONSE AND RECOVERY PLAN**

An overview of updates and changes to the Nebraska Disaster Behavioral Health Response and Recovery Plan will be presented. Participants will have the opportunity to ask questions. Small groups will discuss the application of the Plan in Modules 2 and 3.

## MODULE 2: LOCAL RESPONSE CAPACITY

Group discussion will involve a review of local response capacity and how that informs use of the Plan for revision of local response plans.

### Questions

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.

### Group Questions

1. What are the disaster behavioral health planning and response capabilities in your area?
2. How does the Concept of Operations work in your area? (i.e., how is the behavioral health workforce activated? Who do you coordinate with? What Memoranda of Understanding (MOUs) are in place or are needed for behavioral health response?)
3. How does your Concept of Operations identify where, how, and when you need additional resources or expertise?
4. Does your Concept of Operations provide for persons housed in congregate care locations or sheltered-in-place?
5. What gaps need to be filled in your Concept of Operations for the different ranges and scope of incidents?
6. What can you do in the next year to fill these gaps?

## MODULE 3: OPERATIONAL COORDINATION FOR A PUBLIC HEALTH EMERGENCY

In a declared Public Health Emergency, state or local public health agencies are the lead agency for a response. Consider how operational coordination across agencies occurred during the COVID-19 pandemic while discussing the following questions.

### Questions

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.

### Group Questions

1. How did behavioral health agencies coordinate with public health?
2. How did behavioral health agencies coordinate with other agencies (not public health)?
3. What are some lessons learned with regard to operational coordination and the pandemic? What went well? What could be improved?
4. How would your organization respond differently if Nebraska were impacted by another public health emergency such as COVID-19?

## APPENDIX A: EXERCISE SCHEDULE

Time	Activity
<b>July 28, 2022</b>	
1300	Opening Remarks
1310	Exercise Briefing and Introductions
1315	Module 1: Orientation to Plan
1345	Module 2: Local Response Capacity
1430	Module 2 Small Group Report Out
1450	Break
1500	Module 3: Operational Coordination in a Public Health Emergency
1540	Module 3 Small Group Report Out
1600	Hotwash and Evaluation Form
1615	Closing Comments
1620	Adjourn

## APPENDIX B: ACRONYMS

Acronym	Term
AAR	After Action Report
AAR/IP	After Action Report/Improvement Plan
ARC	American Red Cross
BHERT	Behavioral Health Emergency Response Team
CCP	Crisis Counseling Program
CISM	Critical Incident Stress Management
DHHS	Department of Health and Human Services
DHS	U.S. Department of Homeland Security
EMS	Emergency Medical Services
EOC	Emergency Operations Center
ESF	Emergency Support Function
FOUO	For Official Use Only
ICS	Incident Command Structure
HCC	Health Care Coalition
HSEEP	Homeland Security Exercise and Evaluation Program
JIC	Joint Information Center
JOC	Joint Operations Center
MAA	Mutual aid agreement
MCIP	Mass Casualty Incident Plan
MOU	Memorandum of understanding
MRC	Medical Reserve Corps
NE DHHS	Nebraska Department of Health and Human Services
NEMA	Nebraska Emergency Management Agency
NIMS	National Incident Management System
NSP	Nebraska State Patrol
NWS	National Weather Service
PET	Planning, Exercise and Training Region
PFA	Psychological First Aid
SitMan	Situation Manual
SME	Subject Matter Expert
SOP	Standard Operating Procedure
TTX	Tabletop Exercise
VOAD	Voluntary Organizations Active in Disaster
VRC	Volunteer Reception Center