



**NORTH CENTRAL TEXAS  
TRAUMA REGIONAL ADVISORY COUNCIL**

# **Multi-Year Training and Exercise Plan**

**Submitting Organization/Jurisdiction:** North Central Texas Trauma Regional  
Advisory Council, TSA-E

**Period Covered:** 2014-2017

**Person Completing:** Craig Brein

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## **Preface**

The North Central Texas Trauma Regional Advisory Council's (NCTTRAC's) Multi-Year Training and Exercise Plan (MYTEP) is the roadmap to accomplish Texas Department of State Health Services' Trauma Service Area – E (TSA-E) priorities in accomplishing the development and maintenance of the overall preparedness capabilities required to facilitate effective response to all hazards faced by NCTTRAC within its TSA-E. NCTTRAC is pursuing a coordinated preparedness strategy that combines enhanced planning, resource acquisition, innovative training, and realistic exercises to strengthen its emergency preparedness and response capabilities. The training and exercises play a crucial role in providing the organization with a means of attaining, practicing, validating and improving its high-priority capabilities.

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## **PURPOSE**

The purpose of the North Central Texas Trauma Regional Advisory Council's (NCTTRAC) Multi-Year Training and Exercise Plan (MYTEP) is to identify the top priorities for improving the preparedness and response capabilities for Texas Department of State Health Service's Trauma Service Area – E (TSA-E), and define the cycle of training and exercise activities that will provide the most benefit in the development, refinement and maintenance of those capabilities.

Included in this document are training and exercise schedules providing a graphic illustration of the proposed activities for the years 2014 through 2017. This is a living document that will be updated and refined as needed.

## **PARTICIPATING ORGANIZATIONS**

NCTTRAC has developed and continues to refine a Healthcare Coalition (HCC) that provides integration, coordination, and organization for unified regional healthcare preparedness activities and response. A collaborative network of public and private sector response partners, NCTTRAC's HCC focuses healthcare delivery by hospitals and EMS agencies, and their interaction with other pre-hospital, hospital, jurisdiction emergency management, and public health authorities. NCTTRAC also serves as the lead Regional Advisory Council (RAC) for the Texas Emergency Medical Task Force Region 2 (EMTF-2). Partner RACs include North Texas RAC (TSA-C) and Big County RAC (TSA-D). The HCC reinforces National Response Framework concepts and provides multiagency coordination during disasters that interfaces and integrates healthcare delivery and other regional healthcare coalitions into disaster response.

The TSA-E HCC directly supports the region's 167 hospitals and 279 EMS agencies in their preparation for, and response to emergencies that require a health and medical care delivery response. More than 120 hospitals are active participants in NCTTRAC's Hospital Preparedness Program, including all of the region's 33 trauma centers. The HCC includes 5 full service county health departments and the Department of State Health Services regional offices, enabling HPP collaboration with the region's Public Health Emergency Response Program and the Cities Readiness Initiative. Integrated into the HCC are county emergency management officials from all 19 counties, major cities, and Texas Department of Public Safety regional offices. NCTTRAC staff support other regional initiatives, including preparedness and patient distribution activities with the Dallas-Fort Worth Hospital Council and area medical societies. NCTTRAC provides advisory support to the North Central Texas Council of Government's (NCTCOG) Emergency Preparedness Planning Council, and its Regional Emergency Preparedness Advisory Committee (REPAC). NCTTRAC similarly participates with the smaller Texoma Council of Governments, which supports three TSA-E counties that border Oklahoma.

In developing the HCC, NCTTRAC established over 330 support and participation agreements with pre-hospital and hospital healthcare providers, public health, and jurisdiction authorities. These agreements include memoranda of understanding, mutual aid agreements, sharing agreements, and interlocal cooperation contracts, which enhance emergency and/or disaster healthcare delivery capacity.

Other partners are routinely integrated into the TSA-E HCC by peer representation during response by their physical or virtual presence in the TSA-E Medical Operations Center (EMOC). For example, DSHS Health Service Region 2/3 (HSR 2/3) in Arlington operates a public health regional medical operations center that encompasses the Texas Health and Human Services Commission and sister agencies (Department of Aging and Disability, Department of Family Protective Services, and the Department of Assistive Rehabilitative Services). Focusing primarily on infectious disease control, the HSR 2/3 command center is linked to the TSA-E MOC by a seated liaison and/or virtually by phone, video teleconferencing, E\*TRACS, WebEOC, and EMResource. The TSA-E MOC acts as the backup site for DSHS's regional command center if the ROC has to relocate.



## PROGRAM PRIORITIES

The North Central Texas Trauma Regional Advisory Council's MYTEP planning group focused its program priorities on the top priority capabilities that need to be in place to meet the top threats facing the organization. Identified through the TSA- E Regional Hazard Vulnerability Analysis (HVA) and the Threat & Hazard Identification and Risk Assessment (THIRA), these priorities comply with any related grant-based requirements and improve the overall preparedness and response capabilities of the organization. The following assessment process was used to determine the MYTEP program needs.

NCTTRAC facilitated the HPP Year 12 End of Year (EOY) Assessment to determine the status of the Healthcare Coalition's progress and any outstanding needs. As part of the survey, respondents were asked what training opportunities were needed. The top five responses are listed below:

- Patient Tracking 55%
- Resource Requesting 49%
- Radio Interoperable Communications 43%
- National Incident Management System 42%
- Crisis Applications 41%

Corresponding capabilities are listed and prioritized below:

1. Capability 10: Medical Surge
2. Capability 3: Emergency Operations Coordination
3. Capability 6: Information Sharing

Each priority addressed in the ASPR Healthcare Preparedness Capabilities/ North Central Texas Trauma Regional Advisory Council's training and exercise program will be focused on supporting and achieving these capabilities.

The following is a further description of the identified capabilities, including a brief description of the importance of each capability to the North Central Texas Trauma Regional Advisory Council. Each outlines improvement ideas relative to that capability, associated priority capabilities, and ideas for cycles of specific planning, training and exercise activities that would strengthen this capability for the organization.

## **I. Capability 10: Medical Surge**

Medical Surge is the ability to provide adequate medical evaluation and care during events that exceed the limits of the normal medical infrastructure of an affected community. It encompasses the ability of the healthcare service delivery system to survive a hazard impact and maintain or rapidly recover operations that were compromised. The goal is to rapidly and appropriately care for the injured from the event and the maintenance of continuity of care for non-incident related illness or injury.

### **Corresponding Capabilities:**

Emergency Operations Coordination  
Information Sharing

The identified regional priorities: Patient Tracking, Resource Requesting, Radio Interoperable Communications, National Incident Management System, and Crisis Applications are used to strengthen Medical Surge. The goal of the Healthcare Coalition is to provide a common operating picture and overall situational awareness for the region.

### Healthcare System Preparedness

Function 1: Develop, refine, or sustain Healthcare Coalitions

Function 2: Coordinate healthcare planning to prepare the healthcare system for a disaster  
Healthcare Recovery

Function 1: Develop recovery processes for the health care delivery system

### Emergency Operations Center Coordination

Function 2: Assess and notify stakeholders of healthcare delivery status

Function 3: Support healthcare response efforts through coordination of resources

### Fatality Management

Function 1: Coordinate surges of deaths and human remains at healthcare organizations with community fatality management operations.

Function 2: Coordinate surges of concerned citizens with community agencies responsible for family assistance

### Information Sharing

Function 1: Provide healthcare situational awareness that contributes to the incident common operation picture

### **Rationale:**

Information gathered via NCTTRAC's regional HPP End of Year (EOY) Assessment identified Patient Tracking to be a regional training priority. The tracking of patients corresponds with Function 2 of the Medical Surge HPP Capability (Capability 10). The HPP Capability Planning Guide (CPG) assessment completed by NCTTRAC identified Function 2 (Patient Tracking) as a high priority. The CPG also identifies Function 3 (Building Surge Capacity) and Function 5 (Evacuation and Shelter in Place Operations) as high priorities, and

Function 4 (Development of Crisis Standers of Care) as a very high priority. Over the past year, Patient Tracking has developed as a greater regional priority with the development and implementation of NCTTRAC's new Patient Tracking Module within E\*TRACS.

### **Supporting Training Courses and Exercises**

- NCTTRAC Crisis Applications Training
- E\*TRACS: Overview Training – Introduction
- E\*TRACS: Task Training – Bed Reporting
- E\*TRACS: Task Training – Alerting
- E\*TRACS: Overview Training – Regional Status
- E\*TRACS: Task Training – Patient Tracking
- E\*TRACS: Task Training – Inventory & Procurement
- E\*TRACS: Overview Training – Reporting
- E\*TRACS: Task Training – NEDOCS
- EMResource: Overview Training – Introduction
- EMResource: Task Training – Event Management (Alerting)
- EMResource: Task Training – Status Updates
- WebEOC: Overview Training – Introduction
- WebEOC: Overview Training – Situational Awareness
- WebEOC: Task Training – Medical Dashboard
- EMTF-2 Mobile Medical Unit Strike Team – Initial Training
- EMTF-2 Mobile Medical Unit Strike Team – Advanced Logistics Training
- EMTF-2 Mobile Medical Unit Strike Team – Advanced Clinical Training
- EMTF-2 Communications Orientation Training
- EMTF-2 Medical Incident Support Team – Orientation Training
- EMTF-2 Crisis Applications Component Specific Training
  - AMBUS Operations
  - Ambulance Strike Teams, Leaders, and Staging Managers
  - Registered Nurse Strike Teams
  - Mobile Medical Units
  - Medical Incident Support Teams
- ICS – 100 Training
- ICS – 200 Training
- ICS – 300 Training
- ICS – 400 Training
- ICS – 700 Training
- ICS – 800 Training

## **II. Capability 3: Emergency Operations Coordination**

Emergency operations coordination regarding healthcare is the ability for healthcare organizations to engage with incident management at the Emergency Operations Center or with on-scene incident management during an incident to coordinate information and resource allocation for affected healthcare organizations. This is done through multi-agency coordination representing healthcare organizations or by integrating this coordination into plans and protocols that guide incident management to make the appropriate decisions. Coordination ensures that the healthcare organization, incident management, and the public have relevant and timely information about the status and needs of the healthcare service delivery system in the community. This enables healthcare organizations to coordinate their response with that of the community's response and according to the framework of the National Incident Management System (NIMS).

### **Corresponding Capabilities:**

Medical Surge

Information Sharing

The identified regional priorities: Patient Tracking, Resource Requesting, Radio Interoperable Communications, National Incident Management System, and Crisis Applications are used to strengthen Emergency Operations Coordination. The goal of the Healthcare Coalition is to provide a common operating picture and overall situational awareness for the region.

### Healthcare System Preparedness

Function 2: Coordinate healthcare planning to prepare the healthcare system for a disaster

### Healthcare Recovery

Function 1: Develop recovery processes for the health care delivery system

### Information Sharing

Function 1: Provide healthcare situational awareness that contributes to the incident common operation picture

### Medical Surge

Function 1: The Healthcare Coalition assists with the coordination of the healthcare organization response during incidents that require medical surge

### Volunteer Management

Function 1: Participate with volunteer planning process to determine the need for volunteers in healthcare organizations

Function 3: Organization and assignment of volunteers

Function 4: Coordinate the demobilization of volunteers

**Rationale:**

Information gathered via NCTTRAC's regional HPP End of Year (EOY) Assessment identified Resource Requesting and National Incident Management System (NIMS) training as regional training priorities. Both of these training priorities correspond with the Emergency Operations Coordination HPP Capability (Capability 3). The HPP Capability Planning Guide (CPG) assessment completed by NCTTRAC identified NIMS training (Function 1) as a very high priority and Resource Requesting (Function 3) as a medium priority. NCTTRAC's Regional Emergency Preparedness Committee (REPC) has identified Resource Requesting as a regional priority this year. In NCTTRAC's most recent exercise, both Resource Requesting and command staff (NIMS/ HICS) training were noted as areas of improvement on both NCTTRAC's regional AAR and multiple hospital AARs. With so much regional emphasis placed on Emergency Operations Coordination functions, this is NCTTRAC's second priority for Budget Year 13.

**Supporting Training Courses and Exercises**

- NCTTRAC Crisis Applications Training
- Flash Point for Healthcare: Workplace Violence Training
- Shots Fired for Healthcare: Active Shooter Training
- Silent Storm: Domestic Violence in the Workplace Training
- E\*TRACS: Overview Training – Introduction
- E\*TRACS: Task Training – Bed Reporting
- E\*TRACS: Task Training – Alerting
- E\*TRACS: Overview Training – Regional Status
- E\*TRACS: Task Training – Patient Tracking
- E\*TRACS: Task Training – Inventory & Procurement
- E\*TRACS: Overview Training – Reporting
- E\*TRACS: Task Training – NEDOCS
- E\*TRACS: Overview Training – Agency Setup
- E\*TRACS: Overview Training – Knowledge Base and Help Functions
- EMResource: Overview Training – Introduction
- EMResource: Task Training – Event Management (Alerting)
- EMResource: Task Training – Status Updates
- WebEOC: Overview Training – Introduction
- WebEOC: Overview Training – Situational Awareness
- WebEOC: Task Training – Medical Dashboard
- EMTF-2 Mobile Medical Unit Strike Team – Initial Training
- EMTF-2 Mobile Medical Unit Strike Team – Advanced Logistics Training
- EMTF-2 Mobile Medical Unit Strike Team – Advanced Clinical Training
- EMTF-2 Communications Orientation Training

- EMTF-2 Medical Incident Support Team – Orientation Training
- EMTF-2 Crisis Applications Component Specific Training
  - AMBUS Operations
  - Ambulance Strike Teams, Leaders, and Staging Managers
  - Registered Nurse Strike Teams
  - Mobile Medical Units
  - Medical Incident Support Teams
- ICS – 100 Training
- ICS – 200 Training
- ICS – 300 Training
- ICS – 400 Training
- ICS – 700 Training
- ICS – 800 Training

### **III. Capability 6: Information Sharing**

This capability addresses the ability to conduct multijurisdictional and multidisciplinary exchange of information and situational awareness data among Federal, State, regional, and local levels of government and the private sector. This capability includes the routine sharing of information as well as issuing of public health alerts to all levels of government and the private sector in preparation for, and in response to, events or incident of public health significance. To integrate this capability, public health and healthcare emergency planners should coordinate what information is shared, who needs it, how it is delivered, and when it should be provided. An effective information sharing system will provide durable, reliable, and effective information exchanges (both horizontally and vertically) between those responsible for gathering information and the analysts and consumers of threat or hazard-related information. It will also allow for feedback and other necessary communication in addition to the regular flow of information and intelligence.

#### **Corresponding Capabilities:**

Medical Surge

Emergency Operations Coordination

The identified regional priorities: Patient Tracking, Resource Requesting, Radio Interoperable Communications, National Incident Management System, and Crisis Applications are used to strengthen Information Sharing. The goal of the Healthcare Coalition is to provide a common operating picture and overall situational awareness for the region.

#### Healthcare System Preparedness

Function 1: Develop, refine, or sustain Healthcare Coalitions

Function 2: Coordinate training to assist healthcare responders to develop the necessary skills in order to respond.

#### Emergency Operations Center Coordination

Function 2: Assess and notify stakeholders of healthcare delivery status

Function 3: Support healthcare response efforts through coordination of resources

#### Fatality Management

Function 1: Coordinate surges of deaths and human remains at healthcare organizations with community fatality management operations.

Function 2: Coordinate surges of concerned citizens with community agencies responsible for family assistance

#### Medical Surge

Function 1: The Healthcare Coalition assist with the coordination of the healthcare organization response during incidents that require medical surge

Function 2: Coordinate integrated healthcare surge operations with pre-hospital Emergency Medical Services (EMS) operations

## Volunteer Management

Function 2: Volunteer notification for healthcare response needs

Function 3: Organization and assignment of volunteers

### **Rationale:**

The information received through NCTTRAC's regional HPP End of Year (EOY) Assessment identified Radio Interoperable Communications as a regional training priority. This priority corresponds with the Information Sharing HPP Capability (Capability 6). The HPP Capability Planning Guide (CPG) assessment completed by NCTTRAC identified Functions 1 & 2 of the Information Sharing Capability as medium priorities. Numerous exercises and events have identified inter- and intra- hospital primary and redundant communications as areas of improvement in their After Action Reports (AAR). Additional areas of improvement noted in regional exercise and event AARs include initial and continued training on NCTTRAC's Crisis Applications, which also correspond to the Information Sharing Capability.

### **Supporting Training Courses and Exercises**

- NCTTRAC Crisis Applications Training
- Flash Point for Healthcare: Workplace Violence Training
- Shots Fired for Healthcare: Active Shooter Training
- Silent Storm: Domestic Violence in the Workplace Training
- E\*TRACS: Overview Training – Introduction
- E\*TRACS: Task Training – Bed Reporting
- E\*TRACS: Task Training – Alerting
- E\*TRACS: Overview Training – Regional Status
- E\*TRACS: Task Training – Patient Tracking
- E\*TRACS: Task Training – Inventory & Procurement
- E\*TRACS: Overview Training – Reporting
- E\*TRACS: Task Training – NEDOCS
- E\*TRACS: Overview Training – Agency Setup
- E\*TRACS: Overview Training – Knowledge Base and Help Functions
- EMResource: Overview Training – Introduction
- EMResource: Task Training – Event Management (Alerting)
- EMResource: Task Training – Status Updates
- WebEOC: Overview Training – Introduction
- WebEOC: Overview Training – Situational Awareness
- WebEOC: Task Training – Medical Dashboard
- EMTF-2 Mobile Medical Unit Strike Team – Initial Training
- EMTF-2 Mobile Medical Unit Strike Team – Advanced Logistics Training
- EMTF-2 Mobile Medical Unit Strike Team – Advanced Clinical Training



- EMTF-2 Communications Orientation Training
- EMTF-2 Medical Incident Support Team – Orientation Training
- EMTF-2 Crisis Applications Component Specific Training
  - AMBUS Operations
  - Ambulance Strike Teams, Leaders, and Staging Managers
  - Registered Nurse Strike Teams
  - Mobile Medical Units
  - Medical Incident Support Teams
- ICS – 100 Training
- ICS – 200 Training
- ICS – 300 Training
- ICS – 400 Training
- ICS – 700 Training
- ICS – 800 Training

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## **Methodology and Event Tracking**

The previous section of the MYTEP for North Central Texas Trauma Regional Advisory Council discussed the program priorities and capabilities along with the training and exercise needs for the organization based on the review of the THIRA results for the applicable jurisdiction and applicable healthcare capabilities. All efforts were made to build on or eliminate duplicate training and exercises and to coordinate these training and exercise activities with all stakeholders and response partners. The North Central Texas Trauma Regional Advisory Council is the agency that will provide direction and oversight for the organization's MYTEP.

The training courses and exercises chosen were deemed most appropriate to assist in strengthening the program priority capabilities for NCTTRAC. For each key area addressed, the planning group decided upon a cycle, mix, and range of training courses/activities and exercises that will allow the organization to increase its preparedness through different and progressively difficult training courses and exercise activities. The results of the training activities and implementation of the corrective action recommendations resulting from exercises will be monitored to ensure a consistent approach to continually improve planning, training, and exercising to ensure full development of each healthcare capability.

In its training history, NCTTRAC has established a strong base of HCC partners that have received initialized training and have a basic working knowledge of our systems. NCTTRAC will continue to provide introductory training to maintain the region's baseline as turnover occurs, and increase the base of introductory trained HCC partners. For the upcoming training cycle, NCTTRAC's training program will focus on providing intermediate and advanced level training to build upon the already provided baselines training in order to build specific capabilities throughout the region.

Training topics are determined through regional needs assessments and specific feedback received from our partners. In addition, NCTTRAC will solicit constant feedback from partners within TSA-E through task specific workgroups, regional workgroups, ongoing assessments and evaluations, and participant training evaluations. All gathered feedback will be interpreted and used to continuously adapt and target NCTTRAC's training program to meet the region's expressed needs.

Training will lead to yearly regional functional exercises for HCC partners' participation. Using the Homeland Security Exercise Evaluation Program (HSEEP) toolkit, exercises will be designed to focus on regional training initiatives and serve as a culmination of training and a test for participants. Strengths and weaknesses will be identified in the submitted After Actions Report and noted in NCTTRAC's corrective action plan and be used to further steer the training program.

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## **Training and Multi-Year Exercise Schedules**

The following pages contain the North Central Texas Trauma Regional Advisory Council training schedule for the current year and the exercise schedule for the years 2014 through 2017. This schedule will be updated annually to reflect the accomplishments and progress of the program as well as current planning for priority capability related training and exercise activities.

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### BP-3 Training Schedule

Please provide the following information for each training course to be conducted in Budget Period 3 (BP-3).

1. Name of Training Course	2. Applicable Capability	3. Frequency / Date(s)	4. Locations	5. Number & Type of Personnel Trained	6. Identified Gaps to be Addressed	7. Funding
NCTTRAC Crisis Applications Training	1,3,6,10	Quarterly	NCTTRAC Offices	Up to 36 per class; Open to all Healthcare Coalition Partners	Provide introductory training for TSA-E's three web based crisis applications (WebEOC, E*TRACS, and EMResource) to allow for a common operating platform, situational awareness, alerting, and reporting	HPP
Flash Point for Healthcare: Workplace Violence Training	1,6,14	Ongoing; As Requested	Online; Site specific as requested	Variable; Web-based training available 24/7 to all Healthcare Coalition Partners	Provide awareness level training on how to recognize and deal with violence in the workplace for the healthcare field.	HPP
Shots Fired for Healthcare: Active Shooter Training	1,6,14	Ongoing; As Requested	Online; Site specific as requested	Variable; Web-based training available 24/7 to all Healthcare Coalition Partners	Provide awareness level training on how to react to an active shooter in the healthcare environment.	HPP
Silent Storm: Domestic Violence in the Workplace Training	1,6,14	Ongoing; As Requested	Online; Site specific as requested	Variable; Web-based training available 24/7 to all Healthcare Coalition Partners	Provide awareness level training on how to recognize and deal with domestic violence, its effects on the workplace, and how you can help.	HPP

E*TRACS Overview Training: Introduction	1,3,6,10	Ongoing; As Requested	Online; Site specific as requested	Variable; Web-based training available 24/7 to all Healthcare Coalition Partners	Provide an overview of the TSA-E Tracking Resources, Alerting, and Capabilities System (E*TRACS) and provide information for account set-up.	HPP
E*TRACS Task Training: Bed Reporting	1,3,6,10	Ongoing; As Requested	Online; Site specific as requested	Variable; Web-based training available 24/7 to all Healthcare Coalition Partners	Provide instructional training on how to report current available beds and ventilators within the TSA-E Tracking Resources, Alerting, and Capabilities System (E*TRACS).	HPP
E*TRACS Task Training: Alerting	1,3,6,10	Ongoing; As Requested	Online; Site specific as requested	Variable; Web-based training available 24/7 to all Healthcare Coalition Partners	Provide instructional training on how to create and send alerts within the TSA-E Tracking Resources, Alerting, and Capabilities System (E*TRACS).	HPP
E*TRACS Overview Training: Regional Status	1,2,3,6,10	Ongoing; As Requested	Online; Site specific as requested	Variable; Web-based training available 24/7 to all Healthcare Coalition Partners	Provide an overview on the functionality of the Regional Status display in the TSA-E Tracking Resources, Alerting, and Capabilities System (E*TRACS).	HPP
E*TRACS Task Training: Patient Tracking	1,2,5,6,10	Ongoing; As Requested	Online; Site specific as requested	Variable; Web-based training available 24/7 to all Healthcare Coalition Partners	Provide instructional training on how to use the patient tracking module in the TSA-E Tracking Resources, Alerting, and Capabilities System (E*TRACS).	HPP



E*TRACS Task Training: Inventory & Procurement	1,3,6,10,14	Ongoing; As Requested	Online; Site specific as requested	Variable; Web-based training available 24/7 to all Healthcare Coalition Partners	Provide instructional training on how to use the inventory and procurement modules in the TSA-E Tracking Resources, Alerting, and Capabilities System (E*TRACS).	HPP
E*TRACS Overview Training: Reporting	1,3,6,10	Ongoing; As Requested	Online; Site specific as requested	Variable; Web-based training available 24/7 to all Healthcare Coalition Partners	Provide an overview to the reporting functionality and basic instruction on how to pull reports in the TSA-E Tracking Resources, Alerting, and Capabilities System (E*TRACS).	HPP
E*TRACS Task Training: NEDOCS	1,3,6,10	Ongoing; As Requested	Online; Site specific as requested	Variable; Web-based training available 24/7 to all Healthcare Coalition Partners	Provide instructional training on how to use the National Emergency Department Overcrowding Score tool in the TSA-E Tracking Resources, Alerting, and Capabilities System (E*TRACS).	HPP
E*TRACS Overview Training: Agency Setup	1,3,6,14,15	Ongoing; As Requested	Online; Site specific as requested	Variable; Web-based training available 24/7 to all Healthcare Coalition Partners	Provide an overview on how to set up and/or edit an agency profile in the TSA-E Tracking Resources, Alerting, and Capabilities System (E*TRACS).	HPP
E*TRACS Overview Training: Hospital Hub	1,3,6,15	Ongoing; As Requested	Online; Site specific as requested	Variable; Web-based training available 24/7 to all Healthcare Coalition Partners	Provide an overview of the Hospital Hub module of the TSA-E Tracking Resources, Alerting, and Capabilities System (E*TRACS).	HPP

E*TRACS: Overview Training - Knowledge Base and Help Functions	1,3,6,15	Ongoing; As Requested	Online; Site specific as requested	Variable; Web-based training available 24/7 to all Healthcare Coalition Partners	Provide an overview of the Knowledge Base and Help modules of the TSA-E Tracking Resources, Alerting, and Capabilities System (E*TRACS).	HPP
EMResource: Overview Training - Introduction	1,3,6,10	Ongoing; As Requested	Online; Site specific as requested	Variable; Web-based training available 24/7 to all Healthcare Coalition Partners	Provide an overview of EMResource and provide information for account set- up.	HPP
EMResource: Overview Training - Event Management (Alerting)	1,3,6,10	Ongoing; As Requested	Online; Site specific as requested	Variable; Web-based training available 24/7 to all Healthcare Coalition Partners	Provide instructional training on how to create and send alerts within EMResource.	HPP
EMResource: Task Training - Status Updates	1,3,6,10	Ongoing; As Requested	Online; Site specific as requested	Variable; Web-based training available 24/7 to all Healthcare Coalition Partners	Provide instructional training on how to update resource statuses within EMResource.	HPP
WebEOC: Overview Training - Introduction	1,3,6,10	Ongoing; As Requested	Online; Site specific as requested	Variable; Web-based training available 24/7 to all Healthcare Coalition Partners	Provide an overview of NCTTRAC's WebEOC server and provide information for account set- up.	HPP

WebEOC: Overview Training – Situational Awareness	1,3,6,10,14	Ongoing; As Requested	Online; Site specific as requested	Variable; Web-based training available 24/7 to all Healthcare Coalition Partners	Provide an overview of NCTTRAC’s WebEOC situational awareness boards and how they are used.	HPP
WebEOC: Task Training – Medical Dashboard	1,3,6,10,14	Ongoing; As Requested	Online; Site specific as requested	Variable; Web-based training available 24/7 to all Healthcare Coalition Partners	Provide detailed training on NCTTRAC’s WebEOC Medical Dashboard and its uses.	HPP
EMTF-2 Mobile Medical Unit Strike Team Initial Training	1,3,6,10,14	As needed to address turnover in team and gap in staffing.	NCTTRAC Warehouse	Up to 24 per class; Open to all EMTF-2 MMU partners	Train new EMTF-2 MMU personnel to fill unfilled MMU positions and replace team attrition; orientation to EMTF & MMU operations and equipment	HPP
EMTF-2 Mobile Medical Unit Strike Team Advanced Logistics Training	1,3,6,10,14	Semi-annually	NCTTRAC Warehouse; Other	Up to 35; Pre-trained EMTF MMU members	Train and drill all EMTF-2 MMU logistics staff in familiarization of generators, HVACs, communications, site considerations, and resupply operations	HPP
EMTF-2 Mobile Medical Unit Strike Team Advanced Clinical Training	1,3,6,10,14	Semi-annually	NCTTRAC Warehouse; Other	Up to 35; Pre-trained EMTF MMU members	Train and drill all EMTF-2 MMU clinical leaders in medical cache and equipment familiarization, MMU clinical operations in the field, and deployment leadership planning expectations	HPP

EMTF-2 Communications Orientation Training	1,3,6,10	Annually; As Needed	NCTTRAC Offices and Warehouse; Other	Up to 20; Pre-trained EMTF-2 members	Provide technical training on communications equipment in the EMTF program and specific to EMTF-2.	HPP
EMTF-2 Medical Incident Support Team Orientation Training	1,3,6,10,15	Annually; As Needed	NCTTRAC Offices and Warehouse; Other	Up to 20; Pre-trained EMTF-2 MIST members	Provide EMTF-2 specific training to pre-trained MIST members to include EMTF overview, equipment overview and technical training, and EMTF-2 alerting and activation procedures.	HPP
EMTF-2 Crisis Applications Component Specific Training	1,3,6,10	Annually; As Needed	NCTTRAC Offices and Warehouse; Other	Up to 35; Pre-trained EMTF-2 members	Provide training on NCTTRAC's web-based crisis applications (E*TRACS, EMResource, and WebEOC) specific to the need of each of the EMTF-2 components: <ul style="list-style-type: none"> <li>- AMBUS Operations</li> <li>- Ambulance Strike Teams, Leaders, and Staging Managers</li> <li>- Mobile Medical Units</li> <li>- Medical Incident Support Teams</li> </ul>	HPP

ICS-100 Training	1,3,6,10,15	Ongoing; As Requested	Online	Variable; Web-based training available 24/7 on FEMA's Website	Provide introductory training to Healthcare Coalition Partners to the Incident Command System	
ICS-200 Training	1,3,6,10,15	Ongoing; As Requested	Online	Variable; Web-based training available 24/7 on FEMA's Website	Provide training to Healthcare Coalition Partners in ICS for Single Resources and Initial Action Incidents	
ICS-300 Training	1,3,6,10,15	Annually; As Needed	NCTTRAC Offices	Up to 50 per class; Open to all Healthcare Coalition Partners	Provide training to Healthcare Coalition Partners in Intermediate ICS for Expanding Incidents	HPP
ICS-400 Training	1,3,6,10,15	Annually; As Needed	NCTTRAC Offices	Up to 50 per class; Open to all Healthcare Coalition Partners	Provide training to Healthcare Coalition Partners in Advanced ICS, Command and General Staff in complex incidents.	HPP
ICS-700 Training	1,3,6,10,15	Ongoing; As Requested	Online	Variable; Web-based training available 24/7 on FEMA's Website	Provide introductory training to Healthcare Coalition Partners to the National Incident Management System (NIMS)	
ICS-800 Training	1,3,6,10,15	Ongoing; As Requested	Online	Variable; Web-based training available 24/7 on FEMA's Website	Provide introductory training to Healthcare Coalition Partners to the National Response Framework	

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### Budget Period 3 Training Gaps

1. Topic of training course	2. Target audience	3. Applicable capability	4. Gaps to be addressed	5. Funding type	6. Primary challenges to offering this training?
Mass Fatality	EMS, Hospital Representatives	Capability 5: Fatality Management	Function 1: P2. Healthcare organization human remain surge plans  E1. Mortuary storage equipment and supplies	HPP	<input checked="" type="checkbox"/> <b>Lower priority</b> <input type="checkbox"/> Lack of trained personnel to provide the training <input type="checkbox"/> Lack of subject matter experts to inform development of the training <input type="checkbox"/> Lack of personnel due to funding to develop or deliver the training <input type="checkbox"/> Other _____
Decontamination/ Personal Protective Equipment	Emergency Responders	Capability 14: Responder Safety and Health	Function 2: P2. Personal protective equipment caches  P3. Personal protective equipment supply and dispensing	HPP	<input checked="" type="checkbox"/> <b>Lower priority</b> <input type="checkbox"/> Lack of trained personnel to provide the training <input type="checkbox"/> Lack of subject matter experts to inform development of the training <input type="checkbox"/> Lack of personnel due to funding to develop or deliver the training <input type="checkbox"/> Other _____
Healthcare System Recovery	Hospital Representatives	Capability 2 Healthcare System Recovery	Function1: P1. Healthcare recovery planning  P3. Healthcare organization recovery assistance and participation	HPP	<input checked="" type="checkbox"/> <b>Lower priority</b> <input type="checkbox"/> Lack of trained personnel to provide the training <input type="checkbox"/> Lack of subject matter experts to inform development of the training <input type="checkbox"/> Lack of personnel due to funding to develop or deliver the training <input type="checkbox"/> Other _____

<p>Volunteer Management</p>	<p>Hospital Representatives</p>	<p>Capability 15: Volunteer Management</p>	<p>Function 1: P2. Collect, assemble, maintain, and utilize volunteer information  Function 2: P1. Process to contact registered volunteers  P2. Process to confirm credentials of responding volunteers  P3. Volunteer request process  Function 3: P1. Volunteer deployment protocols  P2. Briefing template for healthcare volunteers  P3. Volunteer support services</p>	<p>HPP</p>	<p><input checked="" type="checkbox"/> <b>Lower priority</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Lack of trained personnel to provide the training</li> <li><input type="checkbox"/> Lack of subject matter experts to inform development of the training</li> <li><input type="checkbox"/> Lack of personnel due to funding to develop or deliver the training</li> <li><input type="checkbox"/> Other _____</li> </ul>
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### Exercise Schedule Quarters 1 & 2 BP3

North Central Texas Trauma Regional Advisory Council		Multi-Year Exercise Schedule			2014-2015 BP3	
	Quarter 1			Quarter 2		
Organization	Jul	Aug	Sep	Oct	Nov	Dec
TSA-E	Redundant Communications Drill; 25 Jul 2014 C:1,3,6 P: 2,3	Redundant Communications Drill; 29 Aug 2014 C:1,3,6 P: 2,3	Redundant Communications Drill; 26 Sep 2014 C:1,3,6 P: 2,3	Redundant Communications Drill; 31 Oct 2014 C:1,3,6 P: 2,3	Redundant Communications Drill; 21 Nov 2014 C:1,3,6 P: 2,3	
TSA-E		Crisis Applications Training; 22 Aug 2014 C:1,3,6 P:2,3		Crisis Applications Training; TBD C:1,3,6 P:2,3		
Emergency Medical Task Force Region 2			Activation Drill; TBD C:1,3,6,10,15 P:1,2,3		Activation Drill; TBD C:1,3,6,10,15 P:1,2,3	
Texas Department of State Health Services (DSHS)	DSHS No-Notice Available Bed & Ventilator Reporting Drill; TBA C:1,3,6,10 P:1,2,3			DSHS No-Notice Available Bed & Ventilator Reporting Drill; TBA C:1,3,6,10 P:1,2,3		

### Exercise Schedule Quarters 3 & 4 BP3

North Central Texas Trauma Regional Advisory Council		Multi-Year Exercise Schedule			2014-2015 BP3	
Organization	Quarter 3			Quarter 4		
	Jan	Feb	Mar	Apr	May	Jun
TSA-E	Redundant Communications Drill; 30 Jan 2015 C:1,3,6 P: 2,3	Redundant Communication s Drill; 27 Jan 2015 C:1,3,6 P: 2,3	Redundant Communications Drill; 27 Mar 2015 C:1,3,6 P: 2,3	Redundant Communications Drill; 24 Mar 2015 C:1,3,6 P: 2,3	Redundant Communications Drill; 29 Mar 2015 C:1,3,6 P: 2,3	
TSA-E	Crisis Applications Training; TBD C:1,3,6 P: 2,3			Crisis Applications Training; TBD C:1,3,6 P: 2,3	Regional Functional Exercise: TBD P:1,3,6,10,2 P:1,2,3	
Emergency Medical Task Force Region 2	Activation Drill; TBD C:1,3,6,10,15 P: 1,2,3	Operational Readiness Exercise - Full Scale; TBD C:1,2,3,5,6,10,14,15 P: 1,2,3		Activation Drill; TBD C:1,3,6,10,15 P: 1,2,3		
Texas Department of State Health Services (DSHS)	DSHS No-Notice Available Bed & Ventilator Reporting Drill; TBA C:1,3,6,10 P: 1,2,3			DSHS No-Notice Available Bed & Ventilator Reporting Drill; TBA C:1,3,6,10 P: 1,2,3		

#### Priority Capabilities Addressed:

Priority Capability 1 #10: Medical Surge	Priority Capability 2 #3: Emergency Operations Coordination	Priority Capability 3 #6: Information Sharing
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### Exercise Schedule Quarters 1 & 2 BP4

North Central Texas Trauma Regional Advisory Council		Multi-Year Exercise Schedule			2015-2016 BP4	
	Quarter 1			Quarter 2		
Organization	Jul	Aug	Sep	Oct	Nov	Dec
TSA-E	Redundant Communications Drill; 31 Jul 2015 C:1,3,6 P: 2,3	Redundant Communications Drill; 28 Aug 2015 C:1,3,6 P: 2,3	Redundant Communications Drill; 25 Sep 2015 C:1,3,6 P: 2,3	Redundant Communications Drill; 30 Oct 2015 C:1,3,6 P: 2,3	Redundant Communications Drill; 20 Nov 2015 C:1,3,6 P: 2,3	
TSA-E		Crisis Applications Training; TBD C:1,3,6 P: 2,3			Crisis Applications Training; TBD C:1,3,6 P: 2,3	
Emergency Medical Task Force Region 2	Activation Drill; TBD C:1,3,6,10 P: 1,2,3			Activation Drill; TBD C:1,3,6,10 P: 1,2,3		
Texas Department of State Health Services (DSHS)	DSHS No-Notice Available Bed & Ventilator Reporting Drill; TBA C:1,3,6,10 P: 1,2,3			DSHS No-Notice Available Bed & Ventilator Reporting Drill; TBA C:1,3,6,10 P: 1,2,3		

### Exercise Schedule Quarters 3 & 4 BP4

North Central Texas Trauma Regional Advisory Council		Multi-Year Exercise Schedule			2015–2016 BP 4	
Organization	Quarter 3			Quarter 4		
	Jan	Feb	Mar	Apr	May	Jun
TSA-E	Redundant Communications Drill; 29 Jan 2016 C:1,3,6 P: 2,3	Redundant Communications Drill; 26 Feb 2016 C:1,3,6 P: 2,3	Redundant Communications Drill; 25 Mar 2016 C:1,3,6 P: 2,3	Redundant Communications Drill; 29 Apr 2016 C:1,3,6 P: 2,3	Redundant Communications Drill; 27 May 2016 C:1,3,6 P: 2,3	
TSA-E	Crisis Applications Training; TBD C:1,3,6 P: 2,3			Crisis Applications Training; TBD C:1,3,6 P: 2,3		
Emergency Medical Task Force Region 2	Activation Drill; TBD C:1,3,6,10,15 P:1,2,3			Activation Drill; TBD C:1,3,6,10,15 P:1,2,3		
Texas Emergency Medical Task Force			Operational Readiness Exercise - Full Scale; TBD C:1,2,3,5,6,10,14,15 P: 1,2,3			
Texas Department of State Health Services (DSHS)	DSHS No-Notice Available Bed & Ventilator Reporting Drill; TBA C:1,3,6,10 P: 1,2,3			DSHS No-Notice Available Bed & Ventilator Reporting Drill; TBA C:1,3,6,10 P: 1,2,3		

#### Priority Capabilities Addressed:

Priority Capability 1 #10: Medical Surge	Priority Capability 2 #3: Emergency Operations Coordination	Priority Capability 3 #6: Information Sharing
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### Exercise Schedule Quarters 1 & 2 BP5

North Central Texas Trauma Regional Advisory Council		Multi-Year Exercise Schedule			2016-2017 BP5	
Organization	Quarter 1			Quarter 2		
	Jul	Aug	Sep	Oct	Nov	Dec
TSA-E	Redundant Communications Drill; 29 Jul 2016 C:1,3,6 P: 2,3	Redundant Communications Drill; 26 Aug 2016 C:1,3,6 P: 2,3	Redundant Communications Drill; 30 Sep 2016 C:1,3,6 P: 2,3	Redundant Communications Drill; 28 Oct 2016 C:1,3,6 P: 2,3	Redundant Communications Drill; 18 Nov 2016 C:1,3,6 P: 2,3	
TSA-E		Crisis Applications Training; TBD C:1,3,6 P: 1,2,3			Crisis Applications Training ; TBD C:1,3,6 P: 1,2,3	
Emergency Medical Task Force Region 2	Activation Drill; TBD C:1,3,6,10,15 P: 1,2,3			Activation Drill; TBD C:1,3,6,10,15 P: 1,2,3		
Texas Department of State Health Services (DSHS)	DSHS No-Notice Available Bed & Ventilator Reporting Drill; TBA C:1,3,6,10 P: 1,2,3			DSHS No-Notice Available Bed & Ventilator Reporting Drill; TBA C:1,3,6,10 P: 1,2,3		
DFW International Airport				Triennial Full Scale Exercise; TBD C:1,3,5,6,10,14 P: 1,2,3		

### Exercise Schedule Quarters 3 & 4 BP5

North Central Texas Trauma Regional Advisory Council		Multi-Year Exercise Schedule			2016-2017 BP5	
Organization	Quarter 3			Quarter 4		
	Jan	Feb	Mar	Apr	May	Jun
TSA-E	Redundant Communications Drill; 27 Jan 2017 C:1,3,6 P: 2,3	Redundant Communications Drill; 24 Feb 2017 C:1,3,6 P: 2,3	Redundant Communications Drill; 31 Mar 2017 C:1,3,6 P: 2,3	Redundant Communications Drill; 28 Apr 2017 C:1,3,6 P: 2,3	Redundant Communications Drill; 26 May 2017 C:1,3,6 P: 2,3	
TSA-E	Crisis Applications Training; TBD C:1,3,6 P:2,3			Regional Functional Exercise: TBD P:1,3,6,10,2 P:1,2,3		Crisis Applications Training; TBD C:1,3,6 P: 2,3
Emergency Medical Task Force Region 2	Activation Drill; TBD C:1,3,6,10,15 P: 1,2,3			Activation Drill; TBD C:1,3,6,10,15 P: 1,2,3		
Texas Emergency Medical Task Force			Operational Readiness Exercise - Full Scale; TBD C:1,2,3,5,6,10,14,15 P: 1,2,3			
Texas Department of State Health Services (DSHS)	DSHS No-Notice Available Bed & Ventilator Reporting Drill; TBA C:1,3,6,10 P: 1,2,3			DSHS No-Notice Available Bed & Ventilator Reporting Drill; TBA C:1,3,6,10 P: 1,2,3		

#### Priority Capabilities Addressed:

Priority Capability 1 #10: Medical Surge	Priority Capability 2 #3: Emergency Operations Coordination	Priority Capability 3 #6: Information Sharing
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