# Family Reunification Center (FRC) Functional Exercise: After-Action Report / Improvement Plan

Date of Exercise: Tuesday, July 27, 2023
Date of Report: Thursday, December 14, 2023

The After-Action Report/Improvement Plan (AAR/IP) aligns exercise objectives and preparedness doctrine and related frameworks and guidance. Exercise information required for preparedness reporting and trend analysis is included; users are encouraged to add additional sections as needed to support their own organizational needs.
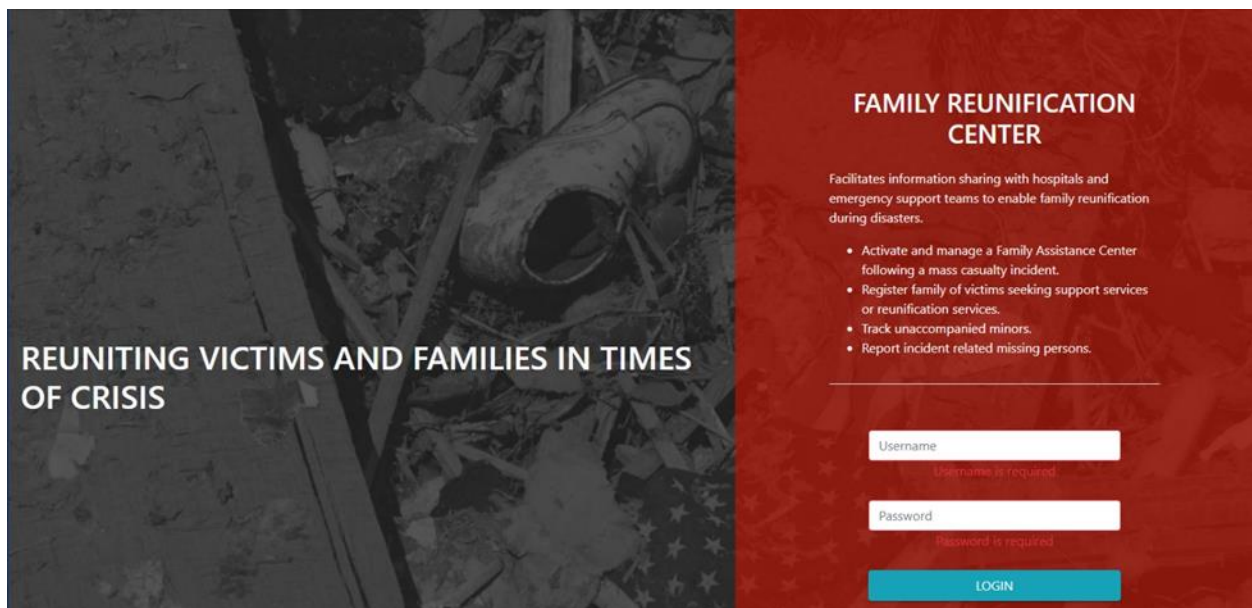
TABLE OF CONTENTS

EXECUTIVE SUMMARY

ReddiNet is a service of the Hospital Association of Southern California who developed the internet-based Family Reunification Center application to support family reunification efforts following a disaster.

To facilitate Health Care Coalition (HCC) reunification preparedness and response following an emergency or disaster, a Hospital Preparedness Program (HPP) deliverable was introduced for CY 2022 – "Conduct Family Reunification Center (FRC) training and tabletop exercise".

This deliverable is intended to build upon the previously developed Family Information Center (FIC) guide and the previously implemented HPP deliverable of, "maintain participation with the Family Reunification Center system."

The 2022 FRC exercise conducted on July 26, 2022 was significantly hampered due to FRC application failure resulting in an inability to fully test and assess exercise objectives. As recommended in the subsequent After-Action Report, ReddiNet updated and implemented solutions to increase bandwidth to the FRC platform. The system was extensively tested to ensure all failure points were corrected.

On Tuesday, July 27, 2023 the Los Angeles County Emergency Medical Services (EMS) Agency, ReddiNet, and all Hospitals within Los Angeles County that are HPP fund recipients participated with the 2023 FRC exercise.

All exercise components remained the same as the 2022 FRC exercise except for the use of full names rather than 3-letter codes to identify Patients and Seekers. There was no additional complexity added. The goals included end-users (players) test accessing the FRC application, data gathering, data entry, and information sharing to support family reunification efforts in a controlled setting.

The Los Angeles County EMS Agency followed the U.S. Department of Homeland Security Exercise and Evaluation Program (HSEEP) guidelines for planning, conducting, evaluating, and reporting this exercise.

SUMMARY OF FINDINGS

This report was produced with AAR / IP documents from the exercise participants. The data was aggregated and filtered to identify factors that impacted the outcome of the exercise and recommended actions.

This section provides a summary of the strengths and areas of improvement observed and noted during the exercise.

Key Strengths

Key *strengths* identified during the exercise include the following:

- Staff was able to log into the ReddiNet-FRC application without any issues
- Seeker and Missing Person registration processes was smooth
- Communication between different teams within a hospital was good
- Staff demonstrated good teamwork and collaboration
- ReddiNet and the FRC Application performed well without any slowdowns or glitches
- Pre-exercise training with ReddiNet was the primary factor that contributed to those who successfully demonstrated use of the system
- The exercise provided valuable training and real-life experience, and participants were able to reunify families

Key Areas for Improvement and Future Exercise Considerations

Key *areas of improvement* identified during the exercise include the following:

- The need for a more user-friendly interface and intuitive system
- The need for additional training and exercises on the FRC application
- Clearer communication and clarification of roles and responsibilities during an emergency requiring family reunification
- More participation from relevant departments and leadership
- The exercise also highlighted some specific issues such as difficulty in locating patients due to misspelled names, a lack of descriptive information, and duplication of information
- Add confirmation of successful reunification to FRC application
- Develop or update FRC plans (e.g., location of reunification center, staffing of that area, clearly defined roles for those assigned to that area)

EXERCISE OVERVIEW

Exercise Name	Family Reunification Center (FRC) Functional Exercise
Exercise Date	Tuesday, July 27, 2023
Scope	The FRC exercise is a functional exercise for Hospital Preparedness Program (HPP) fund recipients. There will be no actual movement of patients. The exercise will last two hours or until all task are achieved followed by an internal debrief. The exercise will allow end-users (players) to test accessing the FRC system, data entry, data gathering, and information sharing to support family reunification efforts.
Focus Area(s)	Mitigation, Response
Capabilities	Capability 1. Foundation for Health Care and Medical Readiness Capability 2. Health Care and Medical Response Coordination Capability 3. Continuity of Health Care Service Delivery Capability 4. Medical Surge
Goals	• The FRC Exercise is intended to facilitate the development of processes needed to operationalize the use of the FRC system during an activation of the Family Information Center. • Promote end-user familiarity. • Assess information sharing capabilities. • Describe correlation and limits of integration between ReddiNet MCI module and the FRC system
Threat/Hazard	Reunification following a disaster
Scenario	A large-scale multi-casualty incident (MCI) has occurred, and multiple patients have been transported to hospital emergency departments throughout the county. Your facility has received one (1) patient via ambulance. Five (5) additional patients have self-dispatched to your facility by private auto and walked-into the emergency department. You have a total of six (6) patients from the incident in your emergency department. The patient that arrived by ambulance is initially amnestic to the incident and is only able to provide first name, age, and DOB. The patient is otherwise stable in the delayed category. The patient has no identification or cell phone and cannot recall family contact information. The other patients who self-dispatched are stable and require observation only.
Sponsor	Los Angeles County Emergency Medical Services (EMS) Agency, Hospital Preparedness Program

Participating Organizations	Los Angeles County EMS Agency, Hospital Association of Southern California / ReddiNet, recipient Hospitals of HPP funds, and others tasked with FRC end-user responsibilities
Point of Contact	Darren Verrette Disaster Program Manager Los Angeles County EMS Agency 10430 Slusher Drive Santa Fe Springs, CA 90670

ANALYSIS OF CAPABILITIES

Aligning exercise objectives and capabilities provides a consistent taxonomy for evaluation that transcends individual exercises to support preparedness reporting and trend analysis. Table 1 includes the exercise objectives, aligned capabilities, and performance ratings for each capability as observed during the exercise and determined by the evaluation team.

Ratings Definitions:

Performed without Challenges (P): The targets and critical tasks associated with the capability were completed in a manner that achieved the objective(s) and did not negatively impact the performance of other activities. Performance of this activity did not contribute to additional health and/or safety risks for the public or for emergency workers, and it was conducted in accordance with applicable plans, policies, procedures, regulations, and laws.

Performed with Some Challenges (S): The targets and critical tasks associated with the capability were completed in a manner that achieved the objective(s) and did not negatively impact the performance of other activities. Performance of this activity did not contribute to additional health and/or safety risks for the public or for emergency workers, and it was conducted in accordance with applicable plans, policies, procedures, regulations, and laws. However, opportunities to enhance effectiveness and/or efficiency were identified.

Performed with Major Challenges (M): The targets and critical tasks associated with the capability were completed in a manner that achieved the objective(s), but some or all of the following were observed: demonstrated performance had a negative impact on the performance of other activities; contributed to additional health and/or safety risks for the public or for emergency workers; and/or was not conducted in accordance with applicable plans, policies, procedures, regulations, and laws.

Unable to be Performed (U): The targets and critical tasks associated with the capability were not performed in a manner that achieved the objective(s).

The following sections provide an overview of the performance related to each exercise objective and associated capability, highlighting strengths and areas for improvement.

Tables 1 and 2 includes the exercise objectives, aligned capabilities, and performance ratings for each capability as observed during the exercise and determined by the evaluation team.
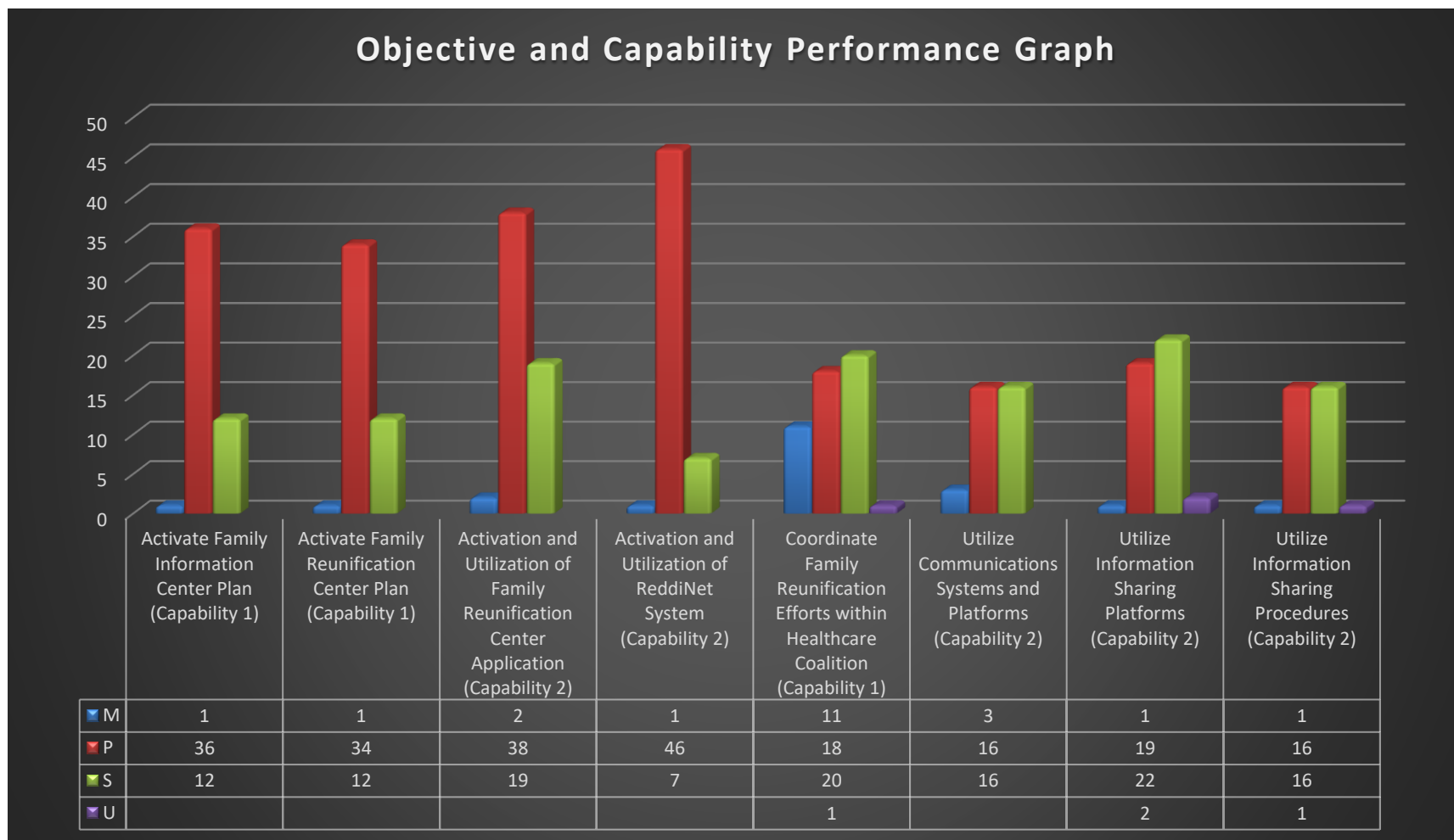
Objective and Capability Performance Graph

	Activate Family Information Center Plan (Capability 1)	Activate Family Reunification Center Plan (Capability 1)	Activation and Utilization of Family Reunification Center Application (Capability 2)	Activation and Utilization of ReddiNet System (Capability 2)	Coordinate Family Reunification Efforts within Healthcare Coalition (Capability 1)	Utilize Communications Systems and Platforms (Capability 2)	Utilize Information Sharing Platforms (Capability 2)	Utilize Information Sharing Procedures (Capability 2)
M	1	1	2	1	11	3	1	1
P	36	34	38	46	18	16	19	16
S	12	12	19	7	20	16	22	16
U					1		2	1

Table 1. Objective and Capability Performance Graph (Data source: Hospital responses to the "2023 Family Reunification Center" survey)

Objective	Capability	Performed without Challenges (P)	Performed with Some Challenges (S)	Performed with Major Challenges (M)	Unable to be Performed (U)
Activate Family Information Center	Capability 1	P			
Activate Family Reunification Center Plan	Capability 1	P			
Activation and Utilization of Family Reunification Center Application	Capability 2	P			
Activation and Utilization of ReddiNet System	Capability 2	P			
Coordinate Family Reunification Efforts within Healthcare Coalition	Capability 1		S		
Utilize Communications Systems and Platforms	Capability 2		S		
Utilize Information Sharing Platforms	Capability 2		S		
Utilize Information Sharing Procedures	Capability 2		S		

Table 2. Summary of Objective and Capability Performance

The following sections provide an overview of the performance related to each exercise objective and associated capability, highlighting strengths and areas for improvement.

Activate Family Information Center

Strengths

The rating of *performed without challenges* can be attributed to the following:

Strength 1: Family Information Center plans were activated and executed effectively in some hospitals to manage flow and support reunification efforts.

Strength 2: Staff at some facilities were trained in cross-functional roles and became familiar with other positions.

Strength 3: The lobby area for seeker reception worked well in facilitating the process.

Areas for Improvement

The following areas require improvement:

Area for Improvement 1: Some facilities identified need to develop policy to open Family Information Center.

Area for Improvement 2: Some facilities identified need to develop a more robust Family Information Center Plan.

Analysis: The overall rating of, "performed without challenges", is contributed to facilities having effective plans and training in place. It seems that the root cause of the identified areas for improvement may be a lack of clear policies and plans for the Family Information Center. Specifically, some facilities recognized the need to develop a policy to open the center and a more robust plan. This suggests that there may have been some confusion or lack of clarity around the purpose and function of a Family Information Center, as well as how it should be utilized and managed. Addressing these root causes by developing clear and comprehensive policies and plans for the Family Information Center may help to improve its effectiveness and support reunification efforts.

Activate Family Reunification Center Plan

Strengths

The rating of *performed without challenges* can be attributed to the following:

Strength 1: Family Reunification Center plans were activated and executed in an organized and effective manner.

Strength 2: Preplanning and availability of resources, along with pre-training with the case management team, helped in creating a good understanding of Family Reunification Center plan.

Strength 3: At hospitals with Family Reunification Center (FRC) plans, staff demonstrated good registration skills and a good understanding of the FRC plan. They worked together as a team and provided help to others when needed.

Areas for Improvement

The following areas require improvement:

Area for Improvement 1: Need to develop or update Family Reunification Center plans (e.g., location of reunification center [aka Family Information Center], staffing of that area, clearly defined roles for those assigned to that area).

Area for Improvement 2: Have a Family Resource Center plan in place and expand the team to include case management and social workers.

Analysis: The area of improvements suggests that the Family Reunification Center plans need to be developed or updated to include specific details such as the location of the reunification center, staffing of that area, and clearly defined roles for those assigned to that area. It is important to have a well-defined plan in place to ensure that the reunification process is organized and effective. It also suggests the team should include case management and social workers. This will help in providing the necessary support to families during the reunification process, such as access to resources and counseling services.

Activation and Utilization of Family Reunification Center Application

Strengths

The rating of *performed without challenges* can be attributed to the following:

Strength 1: The Family Reunification Center application worked smoothly without any glitches or slowdowns, and the ability to access and navigate the system was user-friendly.

Strength 2: The pre-exercise training by ReddiNet was instrumental in helping participants demonstrate successful use of the system and reunify families.

Strength 3: End-users were able to register seekers and victims accurately and efficiently using the FRC application, which was intuitive and easy to use.

Strength 4: The FRC application performed well, and all information was entered smoothly and accurately, with no crash of software.

Areas for Improvement

The following areas require improvement:

Area for Improvement 1: Some hospitals reported the FRC application needs to be more user-friendly and intuitive, with additional training and exercises for staff.

Area for Improvement 2: Staff unfamiliarity with the FRC module and the need for more end-user training on family reunification utilizing the FRC application.

Analysis: To identify the root cause of the areas for improvement, we need to investigate the reasons behind the reported issues. We need to analyze why some hospitals found the FRC application less user-friendly and intuitive. It may be due to a lack of understanding of the system's functionality, or the interface may not be designed as per the hospital staff's requirements. Additionally, the staff might need more training and exercises to be proficient with the FRC application. We also need to evaluate why the staff is unfamiliar with the FRC module. It could be due to a lack of training, or the training provided may not have been effective enough to ensure proper understanding and usage of the system. Therefore, providing additional end-user training on family reunification utilizing the FRC application may be required to improve staff proficiency with the application.

Activation and Utilization of ReddiNet System

Strengths

The rating of *performed without challenges* can be attributed to the following:

Strength 1: ReddiNet functioned properly without any issues and the staff was able to log in and use it without any problems.

Strength 2: Familiarization with the ReddiNet MCI module was a crucial factor in successfully utilizing the system, and the MCI module performed well without any glitches.

Strength 3: The Emergency Department staff responded well to initial ReddiNet alerts, and good coordination was observed with staff using ReddiNet.

Areas for Improvement

The following areas require improvement:

Area for Improvement 1: Searching for patients in the MCI module of ReddiNet needs to be made more user-friendly by allowing a single search to apply to all pages.

Analysis: The full capability level was achieved.

Coordinate Family Reunification Efforts within Healthcare Coalition

Strengths

The rating of *performed with some challenges* can be attributed to the following:

Strength 1: The exercise provided valuable training and real-life experience, and participants were able to reunify families.

Strength 2: The hands-on exercise provided staff with insight on communication between hospitals in Los Angeles County during a real event, including the ability to track patients across the county and see statistical data live.

Areas for Improvement

The following areas require improvement:

Area for Improvement 1: End-users had specific issues such as difficulty in locating patients, duplication of information, and slow performance.

Area for Improvement 2: The system did not allow for the addition of personal patient data such as eye color, hair color, height, etc., and there is a request need for a single, integrated platform.

Area for Improvement 3: The reunification process at the end of the exercise needs improvement, with confirmation of successful reunification added to the FRC application.

Analysis: The performance measure rating could be due to issues with locating patients, duplication of information, and slow performance caused by a lack of well-defined processes for data entry and retrieval. It could also be due to technical issues with the system or inadequate training of end-users. The inability to add personal patient data could be due to limitations in the current system's design.

Utilize Communications Systems and Platforms, Information Sharing Platforms, and Information Sharing Procedures

Strengths

The rating of *performed with some challenges* can be attributed to the following:

Strength 1: Communication between different teams was good, including communication between external partners and hospitals via Zoom and communication with sister hospitals

Strength 2: Multidisciplinary staff had good communication, and the exercise Master Scenario Event List (MSEL) were on time.

Strength 3: Collaborative response from hospital departments such as emergency department (ED), Registration, and private branch exchange (PBX) was effective.

Strength 4: Disaster Resource Center support was excellent, and good coordination was achieved with staff using ReddiNet and the Family Reunification Center application.

Areas for Improvement

The following areas require improvement:

Area for Improvement 1: Not all hospitals participated making reunification of some impossible.

Area for Improvement 2: Inadequate participation from relevant departments and staff resulted in incomplete participation and missing information.

Analysis: Based on the strengths and areas for improvement mentioned, the root cause of the issues seems to be related to incomplete participation and missing information from some hospitals and relevant departments. It is possible that there may have been a lack of clear and consistent communication channels established, resulting in some hospitals and departments not receiving important information and left out of the process. It could also be a matter of improving engagement and buy-in from all stakeholders to ensure that everyone is on board with the process and understands their role in disaster response and reunification efforts.

APPENDIX A: IMPROVEMENT PLAN

This IP is developed specifically for the Los Angeles County Healthcare Coalition because of the **Family Reunification Center Exercise** conducted on **July 27, 2023.**

Objective and Capability	Issue/Area for Improvement	Corrective Action	Primary Responsible Organization	Organization POC	Start Date	Completion Date
Activate Family Information Center (Capability 1)	Improving the effectiveness of the Family Information Center can be achieved by developing clear policies and plans and addressing any confusion or lack of clarity around its purpose and function.	Promote awareness and education of the Family Information Center (FIC) guide as tool to assist in the development of a FIC Plan.	Los Angeles County EMS Agency	HPP Hospital Program Manager	December 14, 2023	July 25, 2024
Activate Family Information Center (Capability 1)	Improving the effectiveness of the Family Information Center can be achieved by developing clear policies and plans and addressing any confusion or lack of clarity around its	Recommend hospitals to develop or update Family Information Center (FIC) plan. (Can be embedded or added as annex to FIC plan or vice versa FIC plan can be embedded or added as annex to FRC plan.)	Hospitals	HPP Hospital Program Manager	December 14, 2023	July 25, 2024

	purpose and function.					
Activate Family Reunification Center Plan (Capability 1)	Family Reunification Center plans need to be developed or updated to include specific details such as the location of the reunification center, staffing of that area, and clearly defined roles for those assigned to that area.	Recommend hospitals to develop or update Family Reunification Center (FRC) plan. (Can be embedded or added as annex to FIC plan or vice versa FIC plan can be embedded or added as annex to FRC plan.)	Hospitals	HPP Hospital Program Manager	December 14, 2023	July 25, 2024
Activation and Utilization of Family Reunification Center Application (Capability 2)	Identify root cause of the areas of improvement. Analyze why some hospitals found the FRC application less user-friendly. Is it a lack of understanding of the system's functionality, training, or other?	Investigate the reasons behind the reported issues, we need to analyze why some hospitals found the FRC application less user-friendly.	Hospitals	Hospital Emergency Management Officer	December 14, 2023	July 25, 2024
Activation and Utilization of ReddiNet System	Searching for patients in the MCI module of	Allow a single search to apply to all pages in	ReddiNet	ReddiNet	December 14, 2023	July 25, 2024

(Capability 2)	ReddiNet needs to be made more user-friendly by allowing a single search to apply to all pages.	the MCI module of ReddiNet.				
Coordinate Family Reunification Efforts within Healthcare Coalition (Capability 1)	End-users had specific issues such as difficulty in locating patients, duplication of information, and slow performance.	Issues with locating patients, duplication of information, and slow performance caused by a lack of well-defined processes for data entry and retrieval. It could also be due to technical issues with the system or inadequate training of end-users.	Hospitals	Hospital Emergency Management Officer	December 14, 2023	July 25, 2024
Coordinate Family Reunification Efforts within Healthcare Coalition (Capability 1)	System did not allow for the addition of personal patient data such as eye color, hair color, height, etc., and there is a request need for a single, integrated platform.	Investigate and implement solutions to add personal patient data could be due to limitations in the current system's design	ReddiNet	ReddiNet	December 14, 2023	July 25, 2024
Utilize Communications Systems and Platforms,	Incomplete participation, missing information,	Improve engagement and buy-in from all stakeholders to ensure that everyone	Hospitals	Hospital Emergency Management Officer	December 14, 2023	July 25, 2024

Information Sharing Platforms, and Information Sharing Procedures (Capability 2)	and lack of clear communication channels and stakeholder engagement.	is on board with the process and understands their role in disaster response and reunification efforts.				

APPENDIX B: EXERCISE PARTICIPANTS

Participating Organizations
County
Los Angeles County Emergency Medical Services (EMS) Agency
Jurisdictions
Hospital Preparedness Program Participating Facilities
Hospital Association of Southern California / ReddiNet
Orange County EMS Agency
Ventura County Health Care Coalition