After Action Report/Improvement Plan

Workplace Violence Prevention Tabletop

YOUR Health Center Name

Utilizing Tabletop Toolkit Prepared by Insurica

for

Montana Primary Care Association

Insert Date

# Executive Summary

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| **Enter a brief overview of the exercise** |
| This exercise was completed using an exercise toolkit prepared by Insurica. This tabletop guide utilized was designed to help Community Health Centers approachworkplace violence prevention in a practical, proactive way. It was structured tofoster cross-functional dialogue, identify improvement opportunities, and buildshared ownership of safety across the organization. |
| **Enter the capabilities tested by the exercise – Choose from examples listed or add your own from the CMS Target Capabilities List:** [**Templates & Checklists | CMS**](https://www.cms.gov/medicare/health-safety-standards/quality-safety-oversight-emergency-preparedness/templates-checklists) |
| * *Planning*
* *Communications*
* *Risk Management*
* *Information Gathering & Recognition of Indicators & Warnings*
* *Onsite Incident Management*
* *Citizen Evacuation & Shelter-In-Place*
 |
| **Enter the major strengths identified during the exercise (Choose your top 3 strengths, at a minimum – may add your own)** |
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| **Enter areas for improvement identified during the exercise, including recommendations Choose your top 3 strengths, at a minimum – may add your own)** |
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| **Describe the overall exercise as successful or unsuccessful, and briefly state the areas in which subsequent exercises should focus** |
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# Section 1: Exercise/Event Overview

**Exercise/Event Name**: Workplace Violence Prevention Tabletop

Exercise/Event Start Date: *Enter Date*

**Exercise/Event End Date:** Enter Date

**Duration (insert the total length of the exercise or event in terms of days or hours, as appropriate):** *Enter Time*

**Type of Exercise/Event Completed:**

Check the type of exercise completed, as listed below (see key terms included on pages 4-5).

*Discussion-Based Exercise*

[ ]  Seminar [ ]  Workshop [x]  Tabletop [ ]  Games

*Operations-Based Exercise*

[ ]  Drill [ ]  Full-Scale Exercise [ ]  Functional Exercise

*Emergency Event*

[ ]  Event

**Capabilities:****List the appropriate targeted capabilities of the exercise/event**

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| **Common Capabilities**1. Add Selected Capabilities Here
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**Scenario:****Describe the exercise scenario type (e.g., flood, hurricane, etc.)**

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**Location:**

**Partners: List all partners, contractors, supporting/co-sponsoring organizations:**

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**Participants: List all individual participating organizations or agencies**

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# Section 2: Exercise Design Summary

**Exercise Purpose and Design:** *Briefly summarize why the exercise was conducted and what the participants hoped to learn. Include a brief history of how the exercise was organized, designed, funded, etc.*

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**Exercise Objectives and Capabilities:** *List the exercise objectives followed by the capabilities for each objective. The number of objectives and capabilities will vary based on the scope of the exercise and the number of participating agencies.*

*Potential Capabilities are listed below. Choose those that you will test or add your own.*

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| 1. *Planning*
2. *Communications*
3. *Risk Management*
4. *Information Gathering & Recognition of Indicators & Warnings*
5. *Onsite Incident Management*
6. *Citizen Evacuation & Shelter-In-Place*
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**Scenario Summary:** *This section should summarize the scenario or situation initially presented to players, subsequent key events introduced, and the time in which these events occurred. For a table-top exercise, this section should outline the scenario used and/or modules presented to the participants.*

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**Analysis of Critical Objectives Performance: Under the objective list the capability you are analyzing. The number of objectives may vary depending on the length of exercise and needs of your entity.**

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| **Capability - Identify the capability from the Targeted Capabilities List:**       | **Summary of Observation:** |
| **Objective:**  |       |
| * **Activity/Task:**
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| * **Analysis:** Insert analysis
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| * **Recommendation:** Insert recommendations to address identified areas for improvement, based on the judgment and experience of the evaluation team. If the observation was identified as strength, without corresponding recommendations, insert “None.”
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| **Objective:**  |       |
| * **Activity/Task:**
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| * **Analysis**
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| * **Recommendation:** Insert recommendations to address identified areas for improvement. If the observation was identified as strength, without corresponding recommendations, insert “None.”
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| **Objective:**  |       |
| * **ActivityTask:**
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| * **Analysis**
 |       |
| * **Recommendation:** Insert recommendations to address identified areas for improvement. If the observation was identified as strength, without recommendations, insert “None.”
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| **Objective:**. |       |
| * **Activity/Task:**
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| * **Analysis**
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| * **Recommendation:** Insert recommendations to address identified areas for improvement. If the observation was identified as strength, without recommendations, insert “None.”
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| **Objective:**  |       |
| * **Activity/Task:**
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| * **Analysis**
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| * **Recommendation:** Insert recommendations to address identified areas for improvement. If the observation was identified as strength, without recommendations, insert “None.”
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# SECTION 3: IMPROVEMENT PLAN

This Improvement Plan (IP) should include the top three key recommendations and corrective actions (at a minimum) identified in the Critical Objectives Performance section. Insert additional rows to the table if more than three recommendations and corrective actions have been identified.

| Capability | Top 3 Observations | Top 3Recommendations | Corrective Action Description | Responsible Facility | Facility POC | Start Date | Completion Date |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Observation 1 | Recommendation 1 |  |  |  |  |  |
| Observation 2 | Recommendation 2 |  |  |  |  |  |
| Observation 3 | Recommendation 3 |  |  |  |  |  |

| Capability | Top 3 Observations | Top 3Recommendations | Corrective Action Description | Responsible Facility | Facility POC | Start Date | Completion Date |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Observation 1 | Recommendation 1 |  |  |  |  |  |
| Observation 2 | Recommendation 2 |  |  |  |  |  |
| Observation 3 | Recommendation 3 |  |  |  |  |  |

| Capability | Top 3 Observations | Top 3Recommendations | Corrective Action Description | Responsible Facility | Facility POC | Start Date | Completion Date |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Observation 1 | Recommendation 1 |  |  |  |  |  |
| Observation 2 | Recommendation 2 |  |  |  |  |  |
| Observation 3 | Recommendation 3 |  |  |  |  |  |

# Section 4: Conclusion

This section is a conclusion for the entire document, and should be used as a summary of all the sections of the AAR/IP. The Conclusion should include the following:

* Participants demonstrated capabilities
* Lessons learned
* Top 3 recommendations (at a minimum)
* Summary of what steps should be taken to ensure that the concluding results will help to further refine plans, procedures and training for this type of incident.

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