

Shiver Me Timbers!

Long Term Care, Skilled Nursing Facility Earthquake Exercise Series

Exercise Coordinator Training

August 2026

Today's Session

- Welcome
- Exercise Concept and Overview
- Regulatory Review
- Exercise and Segment Concepts
- Documents Created
- Steps for Planning Your Exercise
- Your Questions

Shiver Me Timbers! Earthquake Exercise Series

- Series of smaller exercises with increasing complexity and involvement
- Designed specifically...
 - For Long Term Care, Skilled Nursing, In-patient Hospice care
 - With regulatory language and definitions in mind
- Individual facilities plan and implement exercise segments using provided materials
- Run at the same time as Great Shakeout exercise (3rd Thurs in October)
 - Though may be run at any time during the year
 - Earthquake and/or Tsunamis scenario
- Easy to implement

Regulatory Review

CMS Emergency Preparedness Rule

- Testing knowledge, procedures and plans for emergency preparedness
Includes community engagement component
- Language extracted for different provider types
Long Term Care, Skilled Nursing, In-patient Hospice
- Definitions for types of exercises and terms

ASPR Health Care Preparedness and Response Capabilities for Health Care Coalitions

Capabilities being tested in Shiver Me Timbers! exercise:

- Health Care and Medical Response Coordination
- Continuity of Health Care Service Delivery

Exercise Date and Community Participation

Great Shakeout (3rd Thursday of October; time matching month and day):

- <https://www.shakeout.org/washington>
- NWHRN sends alert to kick off the exercise with the NWHRN Duty Officer ready to interact exercise participants
- Coordinate, ahead of time, with local emergency management partners for participation

All other dates:

- Facility to initiate contact with community partners (NWHRN, community emergency management partners)
- Start and end every community partner communication with “Exercise, exercise”
 - Ensures partners know this is NOT a real event

www.shakeout.org/washington

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 **GET READY TO SHAKEOUT!**

This year's International ShakeOut Day is October 15, when millions of people worldwide will participate in [earthquake](#) drills at work, school, or home!

At 10:15 a.m. (local time) on 10/15, you can join millions of people across Washington practicing [earthquake safety](#). While we encourage you to participate with everyone, you can [register](#) your ShakeOut drill for any day of the year, and drill at a time of your choice. You can also include people in multiple locations through video conferencing.

If you live or work in a coastal area, ShakeOut day is also a great time to practice your [tsunami](#) evacuation routes. Learn more about tsunami preparedness at [TsunamiZone.org](#).



If Possible
DROPI! COVER!

Using Cane
DROPI! COVER!

Using Walker
LOCK! COVER!

Using Wheelchair
LOCK! COVER!

[Start here](#) to be included in the **2026 Great Washington ShakeOut!**

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Get seconds of warning before an earthquake on your mobile phone with USGS [ShakeAlert!](#)



 **GREAT SHAKEOUT EARTHQUAKE DRILLS REGISTRATION OR RE**

Register for the First Time

United States

Washington State ShakeOut

Enter your e-mail address:

Continue

Renew or Update Registration

Exercise Concept

Segment 1: Staff Job Responsibilities, Readiness Discussion

Segment 2: Staff Demonstrate Response to Earthquake Shaking
(generates information to use in Segment 3)

Segment 3: Facility Leadership Response to Earthquake Shaking
(requires information generated during Segment 2)

Segment 1 Scenario

Staff Job Responsibilities and Readiness Discussion

Participants: Individual departments or units across the organization

When: Each department/unit may run independently, within a set time frame

Review and discussion of:

- Staff responsibilities during a disaster
- Disaster supplies (locate and validate)
- Personal preparedness

1-time community engagement activity for the Segment:

- Interaction with NWHRN or other notified community partners for reporting facility status and resource or support needs

Segment 2 Scenario

Staff Demonstrate Response to Earthquake Shaking

Participants: Individual departments or units across the organization

When: Each department/unit may run independently, within a set time frame

Demonstration of:

- Staff response when shaking occurs (patients/residents may participate if they wish)
- Assessing self, others, surroundings for OK/ Not OK, observing structural and injury impacts after shaking stops
- Reporting status to leaders immediately following shaking

1-time community engagement activity for the Segment:

- Interaction with NWHRN or other notified community partners
 - Reporting facility status and resource or support needs

Segment 3 Scenario

Facility Leadership Response to Earthquake Shaking

Participants: Leadership who would respond to a disaster impacting facility

When: May be run in conjunction with Segment 2 or run at a separate time

Demonstration of:

- Gathering status reports from across organization; generating situation report for facility
- Discussion of next steps including:
 - Patient/resident and staff safety
 - Facility impact and stabilization
 - Considerations for medical, environmental, nutritional & sanitation needs and notification to families

1-time community engagement activity for the Segment:

- Interaction with NWHRN or other invited community partners for reporting facility status and resource or support needs

Community Engagement: Status Options for Reporting

Facility Status Reporting

- Accepting Patients/Normal Operations
- Limited Operations/Limited Bed Availability
- Not Accepting Patients/Client Capacity Reached
- Facility Non-Operational/Facility Damage

Resource or Support Reporting

- No resources or support needed
- Resources needed (explanation)
- Support needed (explanation)

Document Review

Exercise Development Steps & Checklist – START HERE!

Shiver Me Timbers! Earthquake Exercise Exercise Development Steps

The Shiver Me Timbers! earthquake exercise is a series of smaller exercises with increasing complexity and involvement as the organization moves through the exercise segments. These have been designed specifically for long term care skilled nursing facilities and in-patient Hospice to help meet the CMS Emergency Preparedness standards and the concerns of surveyors. Regulatory language and definitions have been included in the documentation to help with developing better understanding and compliance.

This exercise has been developed by the Northwest Healthcare Response Network specifically for individual facilities and organizations to plan and run the exercise themselves. The intention is that any segment of this exercise can be run on the Great Shakeout Thursday – the 3rd Thursday in October (for example 10/17 starting at 10:17am) though the exercise may be held at any time of the year. If you want NWHRN to participate, please reach out to the Duty Officer.

Designing and conducting disaster exercises can be overwhelming. The concept for this exercise has been designed to minimize the complexity, so each exercise segment is a small, bite-sized exercise.

Documents created to support this exercise:

Exercise Development Steps: Explains the step-by-step process for implementing any segments of the exercise within a facility.

Exercise Development Options Checklist: Lists all the potential options for selecting specifics of an exercise, including selecting a date and time, a location, choosing a segment of the exercise, identifying what departments, units, locations or shifts will participate in the exercise, what community partners might be included, what specific parts to include in Segment 4 and what documentation and quantity is needed.

Segment Comparison: Crosswalk of the segments to the type of exercise, duration, participants, scenario activities and documents to use.

Sign In Sheet: Document all participants to demonstrate breadth of participation in the After Action Report.

Player Information and Guidance: Developed to inform players (staff, community partners, others) information they need to understand the exercise, what is being tested, how to participate and what to do at the end of the exercise.

Patient / Resident Player Information and Guidance: Developed to inform patients, residents, clients and/or their families who may wish to participate (voluntary, not mandatory) to inform them of what to expect during the exercise and how they can make the most of participating to improve their own preparedness for disaster.

Shiver Me Timbers! Earthquake Exercise Exercise Development Options Checklist

Use this worksheet to help plan your exercise.

Exercise segments to participate in:

- ☐ Segment 1: Staff Job Responsibilities and Readiness Discussion
- ☐ Segment 2: Staff Response to Earthquake Shaking
- ☐ Segment 3: Facility Leadership Response to Earthquake Shaking
(Requires information generated in Segment 2 to support Segment 3)

Date and time for the exercise:

- ☐ Great Shakeout (3rd Thursday in October) (NWHRN initiates communication by sending out an Alert. Only scheduled participation by NWHRN. You may interact with NWHRN at other times by contacting the Duty Officer to 'play' in your exercise.)
- ☐ Alternate date _____, time _____
- ☐ Alternate date _____, time _____
- ☐ Alternate date _____, time _____
(Exercises run on alternate dates, facility initiates communication with NWHRN)

Locations:

- ☐ Units exercising Segments 1
(Units) _____
- ☐ Units exercising Segment 2
(Units) _____
- ☐ Conference or Meeting Room for exercising Segment 3
(location) _____

Segment Comparison and Regulatory Language

Segment Comparison

Shiver Me Timbers! LTC/HH/H Earthquake Exercise

Shiver Me Timbers! LTC/HH/H Earthquake Exercise Exercise Segment Comparison, CMS Requirements and Definitions

The exercise segments are cross walked below to the type of exercise, duration, participants, scenario activities and prepared documents. The CMS Emergency Preparedness language for Long Term Care facilities, Home Health agencies and Hospice agencies is included along with the CMS definitions for different exercise types.

	Type of Exercise	Duration	Participants Community Partners	Scenario Activities	Shiver Me Timbers! Prepared Documents to Use
Segment 1: Staff Job Responsibilities and Readiness Discussion	Mock Disaster Drill	15-20 min	- All staff in all departments or units - Include patients, residents, clients, families if interested - NWHRN	Review and demonstration of: - staff responsibilities during a disaster - disaster supplies (locate and validate) - interaction with NWHRN for reporting facility status and resource or support needs - personal preparedness	- Segment 1 Exercise Plan - Sign in Sheet - Player information and Guidance - Patient/Resident Player Information and Guidance - Segment 1 Evaluator Guide - Participant Feedback Form
Segment 2: Staff Response to Earthquake Shaking	Mock Disaster Drill	20 min	- All staff in all departments or units - Include patients, residents, clients, families if interested - NWHRN	Demonstration of: - response when shaking occurs - Assessing self, others, surroundings for OK/Not OK - Reporting status to leaders immediately following shaking - interaction with NWHRN for reporting facility status and resource or support needs	- Segment 2 Exercise Plan - Sign in Sheet - Player information and Guidance - Patient/Resident Player Information and Guidance - Segment 2 Evaluator Guide - Participant Feedback Form
Segment 3: Facility Leadership Response to Earthquake Shaking	Full Scale Exercise	60-90 min	- Facility leaders that participate on the Healthcare Incident Management Team - NWHRN	Demonstration of: - Gathering status reports from across the organization - Generating a situation report of the overall status of the facility - interaction with NWHRN for reporting facility status and resource or support needs	- Segment 3 Exercise Plan - Sign in Sheet - Player information and Guidance - Patient/Resident Player Information and Guidance - Segment 3 Evaluator Guide - Participant Feedback Form

Segment Comparison
2026

Northwest Healthcare Response Network
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Segment Comparison

Shiver Me Timbers! LTC/HH Earthquake Exercise

CMS REGULATORY LANGUAGE REGARDING TESTING EMERGENCY OPERATIONS PLANS:

The CMS Emergency Preparedness Rule regarding testing of Emergency Operations Plans is as follows:

Long Term Care Facilities – CMS Emergency Preparedness Requirements for Testing (Exercises)

The facility must conduct exercises to test the emergency plan at least twice per year, including unannounced staff drills using emergency procedures. The facility must do the following:

- i. *Participate in an annual full-scale exercise that is community-based; or*
 - A. *When a community-based exercise is not accessible, conduct an annual individual, facility-based functional exercise.*
 - B. *If the facility experiences an actual natural or man-made emergency that requires activation of the emergency plan, the facility is exempt from engaging in its next required full-scale community-based or individual, facility based functional exercise following the onset of the emergency event*
- ii. *Conduct an additional annual exercise that may include, but is not limited to the following:*
 - A. *A second full-scale exercise that is community-based or an individual, facility-based functional exercise; or*
 - B. *A mock disaster drill; or*
 - C. *A tabletop exercise or workshop that is led by a facilitator and includes a group discussion, using a narrated, clinically relevant emergency scenario, and a set of problem statements, directed messages, or prepared questions designed to challenge an emergency plan*
- iii. *Analyze the facility's response to and maintain documentation of all drills, tabletop exercises, and emergency events, and revise the facility's emergency plan as needed.*

Hospice Care (in home and inpatient) – CMS Emergency Preparedness Requirements for Testing (Exercises)

Testing for hospices that provide inpatient care directly. The hospice must conduct exercises to test the emergency plan twice per year. The hospice must do the following:

Participate in an annual full-scale exercise that is community-based; or

Segment Comparison
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Exercise Plan (ExPlan) for Full Exercise Series

Exercise Plan

Shiver Me Timbers! LTC/SNF Earthquake Exercise



Shiver Me Timbers! Long Term Care, Skilled Nursing Facility & In-Patient Hospice Earthquake Exercise

Template Exercise Plan 2026

Annual exercise coinciding with the annual Great Shakeout on the 3rd Thursday of October at a time indicated by the month and date (i.e., 10/16 at 10:16am)

Or

(Date and time of the Organization's choosing)

For Official Use Only (FOUO)

Exercise Plan
2026

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Exercise Plan

Shiver Me Timbers! LTC/SNF Earthquake Exercise

EXERCISE OVERVIEW

Exercise Name	Shiver Me Timbers! LTC & SNF Earthquake Exercise
Exercise Date	Intended to run in conjunction with annual Great Shakeout exercise annually on the 3 rd Thursday in October at the time indicated by the month and day, though may be scheduled for any other time of the year as well (Exercise Date)
Purpose	Long Term Care and Skilled Nursing facilities to test readiness for earthquake response for their facilities, staff and patients
Scope	This is an in-person, flex-time exercise depending on the segment(s) chosen, designed to be implemented by individual facilities or agencies. The Northwest Healthcare Response Network will participate on the Great Shakeout Thursdays; may participate at other times also
Parameters	This exercise is flexible, allowing individual facilities to choose their level of participation and scheduling to test their readiness for exercise response within their own organizations.
Capabilities	*CMS Emergency Preparedness: Community Participation **Capability 2: Health Care and Medical Response Coordination **Capability 3: Continuity of Health Care Service Delivery
Objectives	1. In advance of an earthquake staff understand and describe their job responsibilities and personal preparedness during an earthquake. 2. Staff locate and confirm emergency resources and supplies available to them within the department or facility. 3. Facility interacts with community support partners regarding facility status and resource or support needs as a part of validating preparedness procedures. 4. Staff and residents verbalize and/or demonstrate their response actions during and immediately following an earthquake. 5. Staff report their 'OK' / Not OK' status, their location and impact at the location immediately following an earthquake. 6. Leadership accounts for all staff, residents, others under their care, visitors, and/or vendors who may be onsite or on duty and assess impact to the facility immediately following an earthquake. 7. Leadership shares facility, staffing and resident status and immediate resource needs with NWHRN and/or local emergency response partners within one hour following an earthquake. 8. Staff and Leadership develop a situational assessment of the facility and next steps for addressing patient and staff safety and facility

Exercise Plan
2026

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Exercise Plan

Shiver Me Timbers! LTC/SNF Earthquake Exercise

Exercise Name	Shiver Me Timbers! LTC & SNF Earthquake Exercise	
	impact in the aftermath of an earthquake, with consideration for medical, environmental, nutritional and sanitary needs and notification to families. 9. Facility has an up-to-date emergency operations plan as per their regulatory requirements and Leaders demonstrate use of the plan immediately following an earthquake.	
Threat/Hazard	Earthquake and Aftershocks	
Scenario	Significant Seismic Earthquake Activity has been felt throughout the region with aftershocks highly likely. Facilities and community infrastructure may have damage as a result.	
Exercise Segments	1. Staff Job Responsibilities and Readiness Discussion 2. Staff Response to Earthquake Shaking 3. Facility Leadership Response to Earthquake Shaking (Participants choose to implement individual Segments or combine Segments together for a more extensive exercise.)	
Sponsor	NWHRN Long Term Care Advisory Committee	
Participants	Long Term Care, Skilled Nursing Facilities and In-Patient Hospice NWHRN HECC Support Team	
Functional Groups that may participate	1. Leadership and Management 2. Frontline staff 3. Residents or others under care 4. Facilities or Operations 5. Community Partners	
Points of Contact	Add Name and contact information for facility exercise coordinator	Training and Exercise Manager NWHRN Training@nwhrn.org (For exercise design or template questions)

* CMS Updated Guidance in Emergency Preparedness – Appendix Z of State Operations Manual
<https://www.cms.gov/files/document/gso-21-15-all.pdf>

** ASPR Health Care Preparedness and Response Capabilities for Health Care Coalitions
<https://aspr.hhs.gov/HealthCareReadiness/guidance/Documents/Health-Care-Preparedness-and-Response-Capabilities-for-Health-Care-Coalitions.pdf>

Exercise Plan
2026

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Exercise Plan for Each Segment

Segment 1 Exercise Plan

Shiver Me Timbers! LTC/SNF Earthquake Exercise

Shiver Me Timbers! LTC/SNF Earthquake Exercise Segment 1 Exercise Plan: Staff Job Responsibilities and Readiness Discussion

In this segment Department Leaders will facilitate a discussion ("mock disaster drill") with staff about their job responsibilities and actions to take during a disaster (such as an earthquake) as well as their personal and family preparedness. The discussion includes identifying the chain of command (who to tell) for notification of an emergency. This segment includes two activities beyond the discussion: 1) staff to locate and inventory emergency supplies available to them; and 2) facility designated emergency contact to receive and/or send** a notification to NWHHRN or other community emergency response partner regarding the status of the facility. Activity 2 is only completed once by the person responsible for communicating with outside support organizations. The segment may be run by itself separately from any other exercise segment. It is ideal to have all departments or units complete this segment within a certain amount of time, such as within 2 weeks, to ensure consistent information is being shared with staff.

*See appendix A in the Exercise Plan / CMS EP Testing Definitions for definition

**If this exercise is being run at the same time as the Great Shakeout exercise facilities can expect to receive a request for information from NWHHRN which, when the facility responds, represents interaction with a community partner. If the exercise is being run at any other time of the year the facility will need to reach out and contact the NWHHRN stating 'This is an exercise' and requesting response to the contact.

Assumptions

Assumptions constitute the implied factual foundation for the exercise and, as such, are assumed to be present before the exercise starts. The following assumptions apply to the exercise:

- This exercise is designed for Long Term Care, Skilled Nursing Facilities and/or in-patient Hospice Care patients/residents and staff who reside / work in designated healthcare facility.
- The exercise is not suited for services and staff that provide care to patients residing in private residences or small congregate settings (generally considered 'out-patient' settings).
- 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.
- Exercise simulation contains sufficient detail to allow players to react to information and situations as they are presented as if the simulated incident were real.

Segment 1 Staff Job Responsibilities and Readiness
2026

NWHHRN
1

Segment 2 Exercise Plan

Shiver Me Timbers! LTC/HH/H Earthquake Exercise

Shiver Me Timbers! LTC/HH/H Earthquake Exercise Segment 2 Staff Response to Earthquake Shaking

Segment 2 is like Segment 1 except that instead of only talking about preparedness and response staff will verbalize or demonstrate their response activities, without **prompting** to the "earthquake shaking" through a ***full scale exercise**. Staff will perform a self-assessment and assessment of surrounding area to report disruption impact to leadership. Disaster impact cards, distributed ahead of time, will provide staff with 'structural damage or injury information from the earthquake' that is to be reported to the department or unit lead.

This segment includes an activity for the facility emergency contact to receive and/or send** a notification to NWHHRN or other participating community emergency response partner regarding the status of the facility. This segment may be run by itself or may be run in conjunction with Segment 3. If Segments 2 and 3 are run together, the exercise would be considered a full-scale exercise.

*See appendix A in the Exercise Plan / CMS EP Testing Definitions for definition

**If this exercise is being run in conjunction with the Great Shakeout exercise (3rd Thursday of October at the time matching the month and day) facilities can expect to receive a request for information from NWHHRN which, when the facility responds, represents interaction with a community partner. The facility may also interact with other community partners such as local Fire/EMS or Emergency Management as desired and pre-arranged. If the exercise is being run at any other time of the year the facility will need to reach out and contact the NWHHRN or other partners letting them know this is an exercise and requesting response to the contact.

Assumptions

Assumptions constitute the implied factual foundation for the exercise and, as such, are assumed to be present before the exercise starts. The following assumptions apply to the exercise:

- This exercise is designed for Long Term Care, Skilled Nursing Facilities and/or in-patient Hospice Care patients/residents and staff who reside / work in designated healthcare facility.
- The exercise is not suited for services and staff that provide care to patients residing in private residences or small congregate settings (generally considered 'out-patient' settings).
- 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.

Segment 2 Staff Response to Earthquake Shaking
2026

Northwest Healthcare Response Network
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Segment 3 Exercise Plan

Shiver Me Timbers! LTC/HH/H Earthquake Exercise

Shiver Me Timbers! LTC/HH/H Earthquake Exercise Segment 3: Facility Leadership Response to Earthquake Shaking

In this *full-scale exercise segment facility leaders and staff that would be a part of a Healthcare Incident Command Team (**those that respond to manage an emergency**) will demonstrate their response immediately following earthquake shaking. This segment relies on the data generated from Segment 2 regarding department/unit status immediately following an earthquake.

Segment 3 may be run consecutively with Segment 2 or may be run independently using the information generated from Segment 2 run at an earlier time. This segment may include the NWHHRN and/or local emergency management or public health for community engagement if invited and willing to participate.

The term *Incident Management Team* is used in this exercise to refer to the individuals within the facility that would respond (gather) to an emergency or disaster, to gather situational awareness for the impact of the emergency and make decisions about actions to take or resource needs in response to the emergency. The actual term for this function that is used by an organization, or facility may be different, though the general responsibilities and activities remain the same.

Assumptions

Assumptions constitute the implied factual foundation for the exercise and, as such, are assumed to be present before the exercise starts. The following assumptions apply to the exercise:

- This exercise is designed for Long Term Care, Skilled Nursing Facilities and/or in-patient Hospice Care patients/residents and staff who reside / work in designated healthcare facility.
- The exercise is not suited for services and staff that provide care to patients residing in private residences or small congregate settings (generally considered 'out-patient' settings).
- 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.
- Exercise simulation contains sufficient detail to allow players to react to information and situations as they are presented as if the simulated incident were real.
- Participating agencies may need to balance exercise play with real-world emergencies. Real-world emergencies take priority.

Artificialities

During this exercise, the following artificialities apply:

Segment 3 Exercise Plan
2026

Northwest Healthcare Response Network
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Structural and Injury Impact Cards (Segment 2 only)

STRUCTURAL IMPACT CARD	INJURY IMPACT CARD
STRUCTURAL IMPACT CARD	INJURY IMPACT CARD
STRUCTURAL IMPACT CARD	INJURY IMPACT CARD

STRUCTURAL IMPACT CARD The window glass is broken and pieces are smashed on the floor. There is a big crack in the wall above and below the window.	INJURY IMPACT CARD A heavy piece of equipment fell and hit your head while you were sitting on the floor under some shelving. You have a gash on your scalp and a bad headache
STRUCTURAL IMPACT CARD The patient/resident's bed has shifted around on the floor. There are books and other personal belongings scattered on the floor that fell from counters or tables in the room.	INJURY IMPACT CARD The patient/resident in this room lost their footing while standing and fell onto the floor when the shaking occurred. They have a bleeding gash on their right forearm and palm.
STRUCTURAL IMPACT CARD The items in the stockroom shelves have all fallen to the floor and are soaked from broken bottles of liquid	INJURY IMPACT CARD A co-worker in the room with you dropped to the floor when the shaking started. They are now complaining of bad chest pain.

STRUCTURAL IMPACT CARD There is water spraying out on the floor from under the sink. Everything in the area is soaked and the tiled floor is very slippery.	INJURY IMPACT CARD A visitor walking in the tiled hallway slipped on the water-soaked floor falling backward. They are complaining of severe pain to their right forearm and there is an obvious deformity.
STRUCTURAL IMPACT CARD Light fixtures have broken and are hanging dangerously in the hallway. The lights are flickering and making odd noises.	INJURY IMPACT CARD A patient/resident sitting in their recliner has their ankle caught in the bed wheel when the chair shifted during the shaking. They can't free their ankle. They are complaining of severe pain, though there is no broken skin or bleeding.
STRUCTURAL IMPACT CARD The built in oxygen system, with ports in the patient/ resident rooms has gone down and is not delivering oxygen to patients/ residents.	INJURY IMPACT CARD A patient/resident is crying. They do not appear to have any injuries, though they seem very distraught. They tell you they were in the San Francisco earthquake many years ago and lost family members and are really scared.

Evaluation Guide for Each Segment

Shiver Me Timbers! LTC/SNF Earthquake Exercise Segment 2: Staff Response to Earthquake Shaking

In this segment staff will verbalize or demonstrate their response activities, without **prompting** to the “earthquake shaking” through a ***full scale exercise**. Staff will perform a self-assessment and assessment of surrounding area to report disruption impact to leadership. Disaster impact cards, distributed ahead of time, will provide staff with ‘structural damage or injury information from the earthquake’ that is to be reported to the department or unit lead.

This segment includes an activity for the facility emergency contact to receive and/or send** a notification to NWHRN or other participating community emergency response partner regarding the status of the facility. This segment may be run by itself or may be run in conjunction with Segment 3. If Segments 2 and 3 are run together, the exercise would be considered a full-scale exercise.

*See appendix A in the Exercise Plan / CMS EP Testing Definitions for definition

**If this exercise is being run in conjunction with the Great Shakeout exercise (3rd Thursday of October at the time matching the month and day) facilities can expect to receive a request for information from NWHRN which, when the facility responds, represents interaction with a community partner. The facility may also interact with other community partners such as local Fire/EMS or Emergency Management as desired and pre-arranged. If the exercise is being run at any other time of the year the facility will need to reach out and contact the NWHRN or other partners letting them know this is an exercise and requesting response to the contact.

As an evaluator your job is to observe the exercise and document your assessment and observations based on the criteria in the Assessment of Exercise Objectives section.

Core Capabilities* Being Tested

*CMS Emergency Preparedness: Community Participation and Partners

Community partners are considered any emergency management officials (fire, police, emergency medical services, etc.) for full-scale and community-based exercises, however, can also mean community partners that assist in an emergency, such as surrounding providers and suppliers. The intent behind full-scale and community based exercises is to ensure the facility's emergency program and response capabilities complement the local and state emergency plans and support an integrated response while protecting the health and safety of patients.

* CMS Updated Guidance in Emergency Preparedness – Appendix Z of the State Operations Manual <https://www.cms.gov/files/document/gso-21-15-all.pdf>

**Capability 2: Health Care and Medical Response Coordination

Health care and medical response coordination enables the health care delivery system and other organizations to share information, manage and share resources, and integrate their activities with other jurisdiction partners.

**Capability 3: Continuity of Health Care Service Delivery

Optimal emergency medical care relies on intact infrastructure, functioning communications and information systems, and support services. The ability to deliver health care services is likely to be interrupted when internal or external systems such as utilities, electronic health records (EHRs), and supply chains are compromised. However, health care organizations should take a broader view and address all risks that could compromise continuity of health care service delivery.

** ASPR Health Care Preparedness and Response Capabilities for Health Care Coalitions
<https://aspr.hhs.gov/HealthCareReadiness/guidance/Documents/Health-Care-Preparedness-and-Response-Capabilities-for-Health-Care-Coalitions.pdf>

Associated Exercise Objectives

Exercise Objective	Expected Actions	Satisfactory/ Not Satisfactory
3. Facility interacts with community support partners regarding facility status and resource or support needs as a part of validating preparedness procedures.	Staff demonstrate ability to: - Gather current status of the facility and resource or support needs - Use a variety of communication means to Communicate with NWHRN - Follow established status and needs categories for reporting	(Circle) S NS S NS S NS
4. Staff and residents verbalize and/or demonstrate their response actions during and immediately following an earthquake.	Staff demonstrate ability to: - Recognize that earthquake shaking is occurring - Locate a suitable place to 'Drop, Cover and Hold' - Only leave suitable place after shaking has stopped	(Circle) S NS S NS S NS

Exercise Objective	Expected Actions	Satisfactory/ Not Satisfactory
5. Staff report their status of OK/ Not OK, their location and impact at the location immediately following an earthquake.	Staff demonstrate ability to: - Assess their personal safety - Assess the safety of the surrounding area - Assess the safety of other staff and/or patients - Report the safety of themselves, their surroundings and others to a leader Cap-coord	(Circle) S NS S NS S NS S NS

Notes on Strengths (things to keep doing)

Notes on Areas for Improvement (What could be done better)

Player/Patient Information & Guidance

Anyone discussing
or demonstrating
skills in an exercise
segment is a
“player”

Participant Information and Guidance Shiver Me Timbers! LTC/SNF Earthquake Exercise

Shiver Me Timbers! LTC/SNF Earthquake Exercise Participant Information and Guidance

This exercise will test readiness for and response to an earthquake that may impact your workplace.

Exercise Rules

The following general rules govern exercise play:

- **Real-world emergency actions take priority over exercise actions.**
- Exercise players will comply with real-world emergency procedures, unless otherwise directed by the control staff.
- All communications (including written, radio, telephone, and e-mail) during the exercise will begin and end with the statement “This is an exercise.”

Players Instructions

Players should follow guidelines before, during, and after the exercise to ensure a safe and effective exercise.

Before the Exercise

- Review appropriate organizational plans, procedures, and exercise support documents.
- Sign in when you arrive to acknowledge your participation.

During the Exercise

- If there is a real-world emergency during exercise play, say “Real World Emergency” so that the Leader or Exercise Coordinator is aware. Then respond to the emergency following the procedures for your facility or organization. The Leader or Exercise Coordinator will determine if and when it is safe to resume exercise play. They will also communicate with any external partners that may be participating in the exercise regarding the status of play.
- Respond to exercise events and information as if the emergency were real, unless otherwise directed by an exercise controller.
- Controllers will give you only information they are specifically directed to disseminate. You are expected to obtain other necessary information through existing emergency information channels.
- If participating in Segment 2 you will find “Impact Cards” in your unit or department that you are to read and document following your ‘response’ to shaking. These impact cards provide you with ‘structural damage or injury information from the earthquake’ that is to be reported to the department or unit lead.

Player Information and Guidance
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Patient/Resident/Family Information Shiver Me Timbers! LTC/SNF Earthquake Exercise

Shiver Me Timbers! LTC/SNF Earthquake Exercise Patient/Resident/Family Information

The staff with your healthcare facility are participating in a disaster readiness exercise to test readiness for and response to an earthquake that may impact the facility. They will be discussing or demonstrating their responsibilities during and immediately after an earthquake. This will include checking preparedness supplies and reporting the impact to people and the facility immediately after the shaking stops. You and your family are invited to participate in the exercise, though participation is not required. This should be a fun learning experience helping you and your family be ready to survive an earthquake or other emergency!

Exercise Rules

The following general rules govern exercise play:

- **Real-world emergency actions take priority over exercise actions.** If you have a medical issue or other real-world issue you are concerned about, taking care of those issues is more important than continuing to participate in the exercise.
- Tell staff before the exercise whether you and/or your family wish to or don’t wish to participate in the exercise.
- If there is a real-world emergency during exercise play, say “Real World Emergency” so that the Leader or Exercise Coordinator is aware. The Leader or Exercise Coordinator will determine if and when it is safe to resume exercise play.
- If communicating with people outside the facility during the exercise about exercise activities it is important that they understand you are participating in a disaster exercise. You may want to tell them: “I am participating in a disaster exercise”. This precaution is taken so that anyone who overhears the conversation will not mistake exercise play for a real-world emergency.
- If you do not understand the scope of the exercise, or if you are uncertain about an organization’s participation in an exercise, ask a staff member.
- All exercise communications will begin and end with the statement “This is an exercise.” This precaution is taken so that anyone who overhears the conversation will not mistake exercise play for a real-world emergency.

After the Exercise

- Review how well you did during the exercise – are there actions or supplies to help you be better prepared? Have your family help with getting and organizing your preparedness supplies.
- Talk with the staff about your preparedness for an emergency. Ask what the staff would like you to do if there is an emergency impacting the facility.

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Patient / Resident /
Family Information
Sheet for Segment
only

Sign In Sheet

Sign In Sheet

Shiver Me Timbers! LTC/SNF Earthquake Exercise

Shiver Me Timbers! LTC/SNF Earthquake Exercise

Department: _____ Segment: 1 2 3 (circle)

Name	Signature	Department

Sign In Sheet
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Participant Feedback Form

Participant Feedback Form

Shiver Me Timbers! LTC/SNF Earthquake Exercise

SHIVER ME TIMBERS! LTC/SNF EARTHQUAKE EXERCISE PARTICIPANT FEEDBACK FORM

Thank you for participating in the Shiver Me Timbers! earthquake exercise. Your observations and insights are a vital part of the exercise evaluation process. Please share your thoughts to the questions shown below:

Department or Unit where I work: _____

Three strengths (things we should continue doing when there is a disaster)

Strength 1:
Strength 2:
Strength 3:

Three areas for improvement (things we could do better when there is a disaster)

Improvement 1:
Improvement 2:
Improvement 3:

Participant Feedback Form
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Participant Feedback Form

Shiver Me Timbers! LTC/SNF Earthquake Exercise

Additional comments or observations about the exercise

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If you have questions about this exercise, please contact the Exercise Coordinator or Emergency Preparedness Lead with your facility:

Exercise Coordinator Name: (list coordinator's name here)

Email: (list email here)

Emergency Preparedness Lead Name: (list EP Lead's name here)

Email: (list email here)

Participant Feedback Form
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Which Documents to Use?

Documents Common for all Segments...

- Exercise Development Steps START HERE
- Exercise Development Options Checklist
- Segment Comparison/Regulatory Language
- Exercise Plan (ExPlan)
- Sign In Sheet
- Player Information and Guidance
- Participant Feedback Form
- AAR Template

Separate Documents for...

Segment 1

- Segment 1 Exercise Plan
- Segment 1 Evaluation Guide

Segment 2

- Segment 2 Exercise Plan
- Patient/Resident Player Info
- Structural/Injury Impact Cards
- Segment 2 Evaluation Guide

Segment 3

- Segment 3 Exercise Plan
- Segment 3 Evaluation Guide

Planning Steps

Steps for Planning Your Facility Exercise

From Exercise Development Steps & Checklist Documents

- **Receive request** to develop exercise
- **Choose exercise elements** and present to leadership
- **Receive approval to schedule and conduct** exercises
- **Invite community partners** to participate (if desired)
- **Schedule exercise & book rooms** (as needed)
- **Identify and train Facilitators** (staff to run exercise in their units)

Steps for Planning Your Facility Exercise

- **Identify and train evaluators**
 - Watch participants and document strengths and areas for improvement during exercise
- **Communicate to patients, residents, clients, families**
 - Awareness of staff holding exercise and invitation to participate if desired
- **Run the exercise!**
 - Include all shifts; could be over a week if there are numerous departments or units participating
 - Distribute impact cards around exercise play area ahead of running exercise if running

Steps for Planning Your Facility Exercise

- **Distribute and collect completed Participant Feedback forms**
 - Paper forms, email questionnaire or survey link
- **Combine feedback and evaluator observations**
 - Sort feedback/observations by objectives, combine similar info, identify reasons for improvements
- **Write After Action Report/Improvement Plan (AAR/IP)**
 - (Instruction on how to do an AAR available in a separate training)
- **Review and discuss AAR** with facility leadership
- **Plan implementation of improvements** and timeline

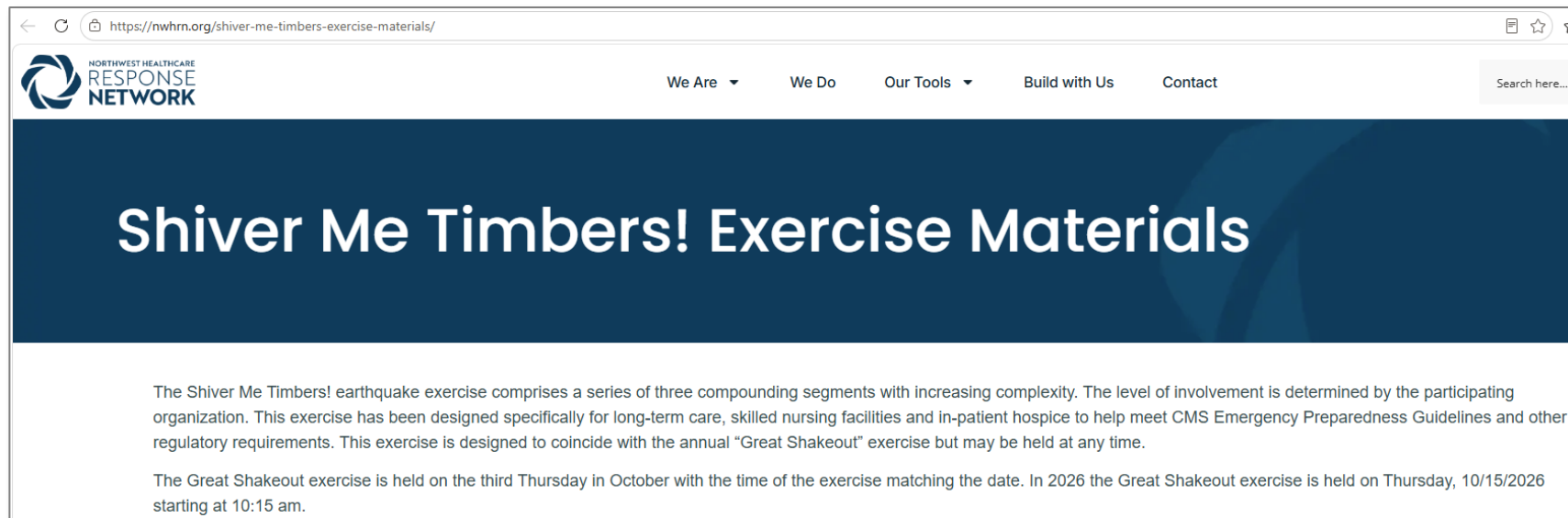
Notify NWHRN of Your Exercise

Email: **Training@nwhrn.org** *or* **info@nwhrn.org** *or* your district contact

- Exercise date and timeline
 - With Great Shakeout (3rd Thursdays in October)
 - NWHRN to signal start of exercise
 - Any other time of the year
 - Facility initiates exercise then connects with NWHRN and other community partners Segment(s) being exercised

Accessing Prepared Template Documents

- Accessing and downloading the template documents
 - Links available on the NWHRN website under Training and Exercise, Fall Exercise section “Shiver Me Timbers!”
 - [Nwhrn.org/shiver-me-timbers-exercise-materials/](https://nwhrn.org/shiver-me-timbers-exercise-materials/)



Questions?

Training@nwhrn.org

@TheNetworkNWHRN

<https://www.facebook.com/NWHRN>

www.nwhrn.org