Planning

Resource	S/W	Comments
Resource People	S/W S	 We have qualified, experienced subject matter experts. (2) Health and hospitals have great plans and collaboration processes. (3) All jurisdictions have planners. Have ETOP exercise training oversight panel Need more planners to address regional issues. (10) Need to have discipline (law/fire/public health) integration. (5) Need subject matter experts to be funded to participate in various planning processes such as exercises and drills. (4) Need to incorporate experts into planning process. (3) Need to integrate traffic management systems with operating procedures. (2) ESF8/Public Health is continually confronted with
		 new threats. To combat this, there needs to be augmentation planning, training, and management personnel from public health in the NCR. Need to develop an NCR plan coordination committee. Need to designate planning staff to support operational functions. Cannot write plans by committee. Need an organizational structure to apply specialists. Need better agreement between Feds, states, and local governments to operate together. Do not have designated regional planners for fire. Need a process to decide what plan is needed during an emergency. Lack of health personnel on planning panel.
Equipment	S	 Need to integrate non-profits and private sectors. Inventory of assists deployment methods These meetings helps organize and gather ideas to use equipment for multiple projects
	W	 Need inventory management system in the region that reflects what critical assets exist (5) Need dedicated planning equipment for NCR; need computer databases scenario driven programs connected to critical infrastructure (4) Need to validate effectiveness of first responders PPE (4) Need to improve communications (2) Need video conferences and other tools to bring people together

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		 There need to be tools available to aid in the response that all agencies can share Need continued funding for ESSENCE to enable downloading of exercises Debris equipment usually not considered essential in planning/UASI process; first responders dominate all discussions of equipment Standardization of specifications of detection equipment Need online infrastructure that can support training and credentialing/tracking of all ESF 8 responders (hospital, public health, MRC, EMS, private physicians)
Training	S	Training can be funded by DHS
		Training in RICCS and virtual J/C (VJIC)
		NCR does an excellent job of training
	W	 Cross ESF training opportunities Coordination of training to respond to after action items from events, exercises ESF 8 does not have a training curriculum, academy, nor can make use of overtime or backfill. ESF 8 is forming a steering committee and work group to set regionally standard curriculum and leverage online trainings, but need personnel (planning, training, technology) and technology equipment to support this. Not all needed courses currently available No coordinated NCR training for planning exists that is consistent across the region Training on plans, continuous effort to include follow up on daily basis to include other disciplines Capacity of disciplines to train and keep people abreast on changes. Need to better define the goals to establish training that will facilitate exercises. (need connection between training and exercises). Evaluation should lead to new planning exercises. No methods for "work place" training exercises Lack of "feedback" methods to change Need training on planning Need to conduct trainings on regional energy emergency plan for emergency liaison officers New training modalities to enable health participation Development of resources and materials for implementing emergency transportation —
		plans/procedures

		 When coordinated – complete plans are developed, the regional partners will need training If/when training – what plans are you training to? Have not developed a plan to train field-level personnel Development of resources and materials for implementing emergency transportation plans and procedures Training of fire/police related to hazard detection devises. Need integration of health into training of other ESFs Need higher level training on health, medical and behavioral health
Exercises/Evaluation	S	 UASI '05 funds being used to develop a debrisspecific tabletop exercise Continued funding for ESSENCE that will enable system evolution and exercises Training can be funded by DHS Individual agencies have their plans and discipline; specific planning seems to be in-place Standardization of template for exercises to include all disciplines Plans are well integrated within individual jurisdictions Development of health subject matter Coordinated regional medical prophylaxis exercises and real-life experiences New delivery methods of exercise for using own "workplace" exercises
	W	 "workplace" exercises Greater integration of health and medical agencies into exercises (including participation of health matter experts) (3) Health and hospitals need membership on ETOP Participation of health matter experts Lack effective incorporation and implementation of lessons learned from exercises (3) System to track action items from After Action Reports, including tracking solutions and resolutions Accountability for making certain gaps and weaknesses are fixed Corrective action program needs to be managed more effectively at regional level Exercises and plans do not comprise the entire NCR and all functional disciplines (3)

		 Testing of jurisdictional assumptions to identify gaps (i.e., signal timing strategies) (2) Integrate RESF-15 into all exercises (2) Incorporate all ESFs (including 6, 14, and 15) and nonprofit and business sectors (2) More training with media (2) No capacity of people or support adequately to integrate plans across jurisdictions (2) Debris removal not included in most exercises Sharing of best practices Funding needed Real-life events as case studies Need regional exercise to test the regional energy emergency plan Federal involvement in all exercises Joint exercises on planning and response, similar to events like the inaugural Objectives need to be thoroughly defined and matched to training
Plans, Policies and Procedures	S	 Good health care plans in place- ESSENCE will help with continued function of this plan. (3) The NCR has a strategic plan. (2) Individual agencies have their plans in place. (2) Have local mutual aid agreements for fire.
	W	 Need to integrate plans cross-jurisdictionally and cross-disciplinarily. (8) Need to establish a plan/ procedure for regional NCR. (8) Lack of overall integration plan architecture. (3) Need new ESF15 planning. (3) Need new ESF14 planning. (3) Need ESF6-wide planning. (2) Need an integration of all regional transportation plans and the incident management plan and procedure. (2) Need to integrate ESF15 into pandemic flu plan. (2) Unclear how NCR strategic plan will be integrated. (2) Need decreased disconnect between federal, state and local needs. (2) Need more plans to communicate with SNPs. (2) Need help developing mutual aid agreements for public works department. (2) Need cross ESF planning. Need to develop strategic plan for emergency

preparedness training.

- Identify what plans are needed.
- Assign ownership to plans so someone/ some organization is responsible for development and maintenance.
- Need development of "clearinghouse for tools."
- Need to update the regional emergency energy plan on a regular basis.
- Need to better consider recovery plans (and debris function) in other plans.
- Need more local-to-local sharing of exercises, trainings, and best practices.
- Need to refine COOP plan.
- Need adequate plan for first responders' families whose family is on extended work hours.
- Need regional logistics maintenance plan.
- Need plan to go beyond ESF to include NIMS.
- Need new planning for community engagement working group.
- Health needs to be included in multi-disciplinary exercises.