

Children in Exercises: Testing Planning Assumptions

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In the United States, children represent about one-fourth of the population and, in some communities, represent as much as one third of the population. To plan response and recovery for their whole community, emergency managers must plan for the support of the children within the area of their responsibility.

What is normal? A key to developing the best planning assumptions is a sound understanding of the requirements for providing normal and routine care for children. Emergency planners need to determine how children are cared for and then make plans and preparations to augment or replace that care when a crisis disrupts the ability to provide the routine care. The local school system, day care center, and parents can provide input for routine daily care of children. To validate the planning for the care of children in a disaster, include children as exercise actors as you test your planning assumptions.

Children as Exercise Actors

Emergency managers should include exercising the planned support for children into preparedness exercises and, perhaps more important, use children as exercise actors. Involving children and teenagers in exercises will validate your planning assumptions or demonstrate changes needed to your plan.

Recruit children for exercise actors from childcare providers, schools, families, local scouting programs, and programs such as Teen Community Emergency Response Teams (CERT). Licensed childcare providers can be a source

of exercise actors for exercises that support their licensing requirements. Many schools have classes that have curriculum that corresponds with the requirements for exercise actor role-play. The children of emergency planners and responders can be sources of exercise actors. Boy Scouts and Girl Scouts actually have a requirement to participate in either a tabletop or functional exercise to complete the emergency preparedness merit badge. If your school system has a Teen CERT, they can both serve as a source for exercise actors or responders.

Using children as exercise actors necessitates recruiting or providing guardians. When available use parents, child care attendants, teachers, or scout leaders to serve as the exercise monitor for children. Always use a volunteer release form signed by the parents or legal guardian.

Exercise Examples

A few years ago, I was on a small team that wrote and led exercises of the emergency management planning within the El Paso (Texas) region. Since my expertise was in medical operations, most of my support was to test medical readiness and processes.

One caution is to limit the realistic moulage for child actors. My four-year-old son thought he looked "cool" with fake blood and simulated critical wounds before the exercise of a car bombing. Everyone in charge, including me, thought otherwise. We wanted to exercise moving a child through the mass casualty process, not create stress for the first responders, so we had

most of the moulage removed from my son.

A local preparedness committee, of which I was a member, purchased a patient decontamination set for each of the trauma receiving hospitals in the city. During a review of the inventory of supplies for the sets, we realized that all of the disposable paper clothing within the sets was for adults. Disposable paper clothing is needed, because the clothing of a contaminated patient is cut off and disposed of prior to decontaminating the person.

The planning assumption was to roll up or cut down adult-size disposable paper clothing for children. To exercise this planning assumption, I included my five-year-old son as one of the exercise actors. Cutting off contaminated clothing was only simulated, so exercise actors simply undressed and were showered wearing swimming suits for modesty. After the showering, they put on disposable paper clothing. When my son walked out of the decontamination tent wearing rolled-up adult-sized clothing everyone agreed we needed to purchase smaller size clothing appropriate for children. The disposable paper clothing was so large that he had a hard time walking.

Emergency managers need to plan and coordinate providing custodial care for any child when parents or legal guardians are not available. Several years ago, I used my family to test the child custodial tracking system for one of the hospitals in El Paso, Texas. At the time, this hospital had a

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state-of-the-art patient tracking system. In this scenario, there was one parent as a guardian and two children with different medical issues that forced each child to be placed in rooms on different floors of the hospital. During a mass casualty incident, the normal slower and methodical registration process was bypassed, and all patients were triaged and moved into rooms much quicker with the registration process completed in the hospital rooms.

My wife stayed with our son, while our daughter was moved to a room alone (an exercise monitor as guardian was with her). Because my daughter was alone, she was registered in the hospital tracking

system as “without a parent.” Since her mother was in the same hospital only one floor below, the hospital administration changed the registration process for mass casualty incidents to include a pre-registration as patients enter the building.

The last exercise that I wrote simulated El Paso receiving four plane loads of patients through the National Disaster Medical System. For this exercise, we had 184 exercise actors. Most of these actors were college students, and many were still considered children. These exercise actors came from a nursing class at a local university and from medical technician classes at a local community college. The instructors actually wrote the exercise into each class syllabus as a course assignment for that quarter. For the exercise, each student researched

their assigned medical conditions, wrote about their symptoms, and acted the role of an evacuated patient. The medical triage teams and staff from the hospitals complimented students’ realistic portrayals of the illnesses and medical conditions assigned.

Conclusion

Involving children and teenagers in exercises can validate planning assumptions or demonstrate changes needed for providing normal and routine care for children. Disaster exercises should include exercising the planned support for children and use children as exercise actors. Children who are trained in preparedness become more resilient and are an asset instead of a burden. ▲

Robust Planning for Active Threat and Active Shooter Incidents

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assistance center. At this facility, victims and their families will have access to trained and credentialed mental health providers, as well as learn about new developments in the incident and resulting investigation. Victims and families should be made aware of new developments before that information is released to the general public, so they do not initially learn of anything particularly painful through the mass media.

Long-term Community Recovery

The impacts of an active shooter event may last for months or years after the emergency incident has ended. The long-term recovery

process will need to address long-term mental health services for victims, their families, and others. Remediation and re-occupancy (or demolition) of the incident site will need to be planned out.

Donations management may be a problem for the jurisdiction, such as when thousands of teddy bears arrive at the scene of a school shooting or when people across the country want to send money to help the recovery effort. Memorial services or candlelight vigils will need to be coordinated. All of this is to help the community move forward after the incident.

Conclusion

Response to an active threat or active shooter incident involves more than just law enforcement operations. It takes a coordinated, multi-disciplinary effort by the entire response community to address all of the challenges that these incidents present. Likewise, these events will have a profound impact on the entire community. Moving on after the incident is over is not easy, and community recovery efforts also will require a coordinated effort. Our preparations for these incidents must look at the long-term effects to be truly effective. ▲

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