



EXERCISE 4 – MANAGING OPERATIONAL INFORMATION

I. CONCEPT NOTE

1. Title

MANAGING OPERATIONAL INFORMATION

2. Type of exercise

Tabletop exercise

3. Phase of the disaster response

Operational

4. Purpose

The purpose of this exercise is to increase awareness about the importance of information management and data collection during EMT deployments. As part of their daily work, team members need to manage many different sources of information in order to plan and prioritise their activities in the field. Data collection, analysis and reporting are also normal duties for an EMT, in which all team members should be involved. Information sharing with supporting entities, such as the EMT HQ office or the EMTCC, is important for the monitoring and coordination of field activities, and for the improvement in patients' care.

5. Scope

In this exercise team members will receive different sources of information related to EMT activities that they will read and consider to plan for their activities in the upcoming days. This planning will be shared with the EMT HQ office in a situation report. The team will also have to report their activities to the EMTCC using the Minimum Data Set (MDS) forms. Finally, the team will develop a protocol plan for specific clinical cases and share it with the EMT HQ office.

6. General objectives

- To recognise the main tools for EMT data collection and reporting
- To correctly analyse and interpret data related to EMT activities
- To report EMT data following the established channels
- To deal with emerging situations while performing other routine tasks
- To work collaboratively during data collection and reporting tasks

See the complete table with learning objectives in the [document 'Exercise 4 - Learning Objectives'](#).

7. Exercise description

EXERCISE 4 - SCRIPT		
Approximate time required	Task	Instructions for delivery
5 min	Exercise briefing	<p>Delivered out of role. The training manager will explain the scope of the exercise to participants, disclosing only the information needed for them to understand the scenario and get immersed in the role.</p> <p><i>Simulated setting:</i> 8 pm, 5 days after deployment. The team is meeting at the EMT staff area</p>
5 min	Split in groups	<p>The training manager will ask the team to divide in groups of 5-7 people (each group should include different EMT profiles). It must be clarified that each group will perform the same exercise, so the groups are not supposed to interact with each other.</p>
20 min	Draft a situation report	<p>Once every group is located in a different space:</p> <p><i>Add inject 1:</i> Each group will receive a message from the EMT HQ asking for a situation report summarising EMT activities.</p> <p>Each group will have to read the information provided and draft a situation report to send to the EMT HQ officer</p>
20 min	Preparing a MSD report	<p>While all groups are working on the report:</p> <p><i>Add inject 2:</i> Each group will receive a message from the EMTCC officer asking for the MDS report detailing activities yesterday and today. They will also receive the appropriate material for the task and work to produce the report.</p>
30 - 60 min	Dealing with a case of sexual violence	<p>While all groups are working on previous tasks:</p> <p><i>Add inject 3:</i> Each group will receive a message from HQ asking to prepare a protocol of action for cases of sexual violence that reach the EMT facility in Montyland.</p> <p>The groups should continue working in parallel in injects 1, 2 and 3 during another 30 min (or until the MDS report is filled)</p>
40 min	Exercise Debriefing	<p>Delivered out of role. Refer to the annex 'Exercise debriefing'.</p>
Total (approx.): 2 - 3 h depending on how long it takes the team to fill in the MDS form		



8. Injects

Exercise 4 – INJECT MATRIX			
Inject number	When?	To whom?	Inject summary
1	Once the team has splitted in groups	To each group	Draft a situation report
2	20 min after inject 1	To each group	Preparing the MDS report
3	20 min after inject 2	To one member in each group, via phone	Management of cases of sexual violence

See the detailed description of the injects in the [annex 'Exercise 4 - Injects'](#).

9. Resources

Human resources

- 3 trainers (one of them will be the training manager)
- 2 facilitators (one or two of them will take the role of the *EMTCC officer*)

Materials

- Blank paper and pens
- Print out of 'Information from the field' document
- Print out of 'Tally sheet Today'
- For inject 2, option 1: Print out of 2 MDS forms, Print out 'Tally sheet yesterday'
- For inject 2, option 2: Computers, excel files MDS package, print out patient files

Optional

- Copy of WHO MDS report with instructions (hard or soft copy)

10. General considerations

Before starting the exercise make sure:

- *Trainers and facilitators have carefully read the exercise objectives and description*
- *There is an appropriate space for the groups to separate and work independently*
- *All the needed materials (see Resources section) are available*
- *Trainers are updated and confident with the use of the MDS tools*



11. Key references/ Supporting documents

- Minimum Data Set for reporting by Emergency Medical Teams. Working Group Report. WHO 2016.
<https://extranet.who.int/emt/sites/default/files/Minimum%20Data%20Set.pdf>
- Guidelines for Gender-based Violence Interventions in Humanitarian Settings Focusing on Prevention of and Response to Sexual Violence in Emergencies. IASC 2005. <http://www.unhcr.org/453492294.pdf>
- Clinical Management of Rape Survivors. Developing protocols for use with refugees and internally displaced persons. <http://www.unhcr.org/403a0b7f4.pdf>
- Inter-Agency Reproductive Health Kits for Crisis Situations. UNFPA
https://www.unfpa.org/sites/default/files/resource-pdf/RH%20kits%20manual_EN_0.pdf

12. Annexes

- Exercise 4** - Learning objectives
- Exercise 4** - Injects
- Exercise 4** - Tally sheet TODAY
- Exercise 4** - Tally sheet YESTERDAY
- Exercise 4** - Information from the field
- Exercise 4** - MDS Excel file
- Exercise 4** - MDS Report instructions
- Exercise 4** - Patients Files
- Exercise 4** - Exercise debriefing

II. LEARNING OBJECTIVES

General Learning objectives	Specific learning objectives	Performance learning objectives
1. To recognise the main tools for EMT data collection and reporting	1.1. To be familiar with the format and information included in the Minimum Data Set (MDS) form 1.2. To correctly interpret the information from patients files and tally sheets 1.3. To correctly fill in the MDS form	<ul style="list-style-type: none"> - All team members recognise the tally sheet and the MDS form as data collection and reporting tools - Each group includes in the situation report the EMT activities compiled in the tally sheet - Each group transfers the information from the patients files and tally sheet to the MDS form correctly
2. To correctly analyse and interpret data related to EMT activities	2.1. To identify the relevant information among the data available 2.2. To use the conclusions extracted from the data to plan for EMT activities	<ul style="list-style-type: none"> - Each group recognises the issues to tackle among the information provided (e.g. no stock of tetanus vaccine) - Each group prioritises their activities according to the urgency of the needs detected (e.g. first ensure availability of medical equipment, later deal with staff training)
3. To report EMT data following the established pathways	3.1. To understand the importance of reporting EMT activities to the EMTCC, MoH and EMT Headquarters regularly 3.2. To detect specific situations that need to be reported 3.2. To appropriately write a situation report	<ul style="list-style-type: none"> - The team leader reminds the team members of the need for reporting to the HQ and the EMTCC - Each group considers to report the case of sexual violence on the MDS form - Each group writes the situation report in a clear and organised format including all relevant information

4. To deal with emerging situations while performing other routine tasks	<p>4.1. To dedicate part of the team efforts to deal with the protocol for cases of sexual violence</p> <p>4.2. To follow established EMT SOPs</p>	<ul style="list-style-type: none"> - Some team members within each group concentrate on dealing with the preparation of the protocol - The medical team members provide appropriate actions to deal with the cases of sexual violence, that are adapted to Montyland context and in line with pre-established EMT SOPs or protocols for the management of these cases
5. To work collaboratively during data collection and reporting tasks	<p>5.1. To organise as a team in an effective way to achieve the proposed tasks</p> <p>5.2. To understand that all team members are responsible for data management and reporting</p>	<ul style="list-style-type: none"> - Team members divide the workload to achieve the tasks in the given timeframe - All team members agree to collaborate in the data collection and reporting activities and recognise it as part of their tasks



III. INJECTS

Inject 1: Draft a situation report

Each group will receive a message from the EMT HQ office. The message should contain the following details:



Dear colleagues in the field,

We are expecting to receive from you a situation report from the field covering the following information:

- *Summary of medical activities today*
- *EMT activities planned for the next two days in medical, logistics, WASH and coordination areas (take into account operational priorities)*
- *Any other valuable information from the field that you think is relevant to our operations*

We need to have the report by tomorrow morning.

Thanks!

EMT HQ officer

The trainers must provide each team with the following documents:

- Different pieces of information from the field that will help to understand the current EMT situation. Refer to annex [document Information form the field](#)
- The document of the tally sheet compiling activities today. Refer to annex [Tally sheet Today](#).

Inject 2: Preparing the MDS report

Each group will receive a message from the EMTCC. The message should include the following information:



Dear EMT,

*We didn't received your reporting MDS report yesterday. Remember you have to report your activities to the EMTCC daily. Reporting is of great importance to us to monitor all EMT activities, understand what are the evolving needs in the field, and keep surveillance and monitoring of key diseases in order to detect any possible outbreaks. Make sure all you EMT staff is aware of the need and importance of reporting. **Please submit as soon as possible the MDS reports for yesterday and today.***

Thank you.

EMTCC officer

NOTE for trainers: This inject can be delivered in 2 different ways:

1. Without a computer

The trainers will provide **each group** with the following documents:

- Annex **Tally sheet Yesterday** (they already have Tally sheet Today from inject 1)
- 2 printed copies of the **MDS Daily Report form**. The MDS form can be obtained by printing the DAILY REPORT SHEET on the MDS excel file

In this inject, each group will have to fill in manually the printed MDS forms, using the data on the tally sheets for today and yesterday.

OR

2. With a computer using the Excel MDS file

The trainers will provide **each group** with the following documents:

- Computer
- Annex **Patients files**
- MDS Excel file

In this inject, each group will have to open the MDS Excel file on the computer and fill in the tally sheets using patient files data. Then they will generate the MDS Daily report.

Considerations:

- Ensure the trainers are familiarise with the MDS file and the data collection procedure to guide team members if necessary.
- Trainers must adapt the time allocated for this inject according to the option chosen. Option 1 should last about 20-30 min, but Option 2 may take up to 1h.

Inject 3: Management of cases of sexual violence

One of the medical team members in each group will receive a call from the EMT HQ officer.

In the call, the person on the role of EMT HQ officer will include the following message:



'Looking at the reports you have sent us in the last days, we have seen there is a considerable number of cases of sexual violence occurring, and also involving girls under 18. We want to make sure you have a protocol in place to deal with these cases, considering the clinical, ethical, cultural and legal aspects of it. Please send us a draft protocol of action that we can revise and send you feedback on.'



IV. DEBRIEFING TOOL

Debriefing steps	Actions	Proposed steering questions
1. Recognise and express the emotions generated by the exercise	<ul style="list-style-type: none"> - Encourage participants to share the feelings and emotions experienced during the exercise (e.g. stress, concern, reward, excitement, challenge) 	<ul style="list-style-type: none"> - How did you feel during the exercise? - Did you feel stressed by having to resolved several tasks?
2. Analyse team performance during the exercise	<ul style="list-style-type: none"> - Encourage participants to reflect about their performance during the exercise - Encourage participants to reflect on the factors that lead to positive outcomes (e.g. good leadership, collaborative work, experience team members) or negative outcomes (e.g. lack of information, lack of previous training or experience, bad communication) - Encourage participants to think about ways to improve their performance in the future 	<ul style="list-style-type: none"> - How did you functioned as a team? - Do you think the team communicated effectively to organise the work to achieve all tasks? - Did you feel every team member was involved equally, and could contribute in different ways to the tasks? - What would you do differently in the future? - What do you think would help the team to collect, analyse and report data from the field?
3. Acknowledge views and impressions from observers outside the team	<ul style="list-style-type: none"> - Trainers share their observations about team performance during the exercise (the performance objectives should be considered) - Facilitators and role players share their impressions and feelings while interacting with the team during the exercise 	

4. Summarise main lessons learnt	<ul style="list-style-type: none"> - Encourage participants to briefly highlight the main lesson(s) learnt during the exercise - Trainers can summarize the main take-home messages, if needed 	<ul style="list-style-type: none"> - What did you learn from this exercise? - Do you think data collection and reporting are important aspects during deployments?
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The **trainer/facilitator leading the debriefing session** should:

Before the session

- Prepare notes about the team performance in relation to the established performance objectives
- Explain the aim of the debriefing session (E.g. Debriefing is a crucial part of the learning process. It provides a safe space for trainees to share the feelings arose during the exercise, reflect about their performance and use this reflection to learn and improve performance in the future)
- Place participants in a comfortable position so they can share their feelings and ideas freely – organise it in a casual way, avoid a formal setting

During the session

- Ensure discussions stay within the focus of the debriefing exercise
- Avoid confrontation between participants - this is not a blaming exercise
- Share information about best performance when needed

After the session

- Provide participants with available tools and resources that could contribute to their learning and development in the topic - supporting material recommended in the TEAMS package, specific EMT protocols and SOPs and training opportunities



V. INFORMATION FROM THE FIELD

Print this document and cut each piece of information (1-5). Then include all pieces inside the file you will give to participants in INJECT 1.

1

The nurse supervisor at the health clinic cannot attend the EMT staff meeting this evening. She left some notes about daily activities, to share with the team.

- Continuing programmed activities at the clinic
- A new doctor and nurse started working yesterday, after a day of induction training. They seemed well adapted to the work today
- The autoclave broke down this afternoon. Only 3 sets for minor surgery available for tomorrow
- Last tetanus vaccine in stock used today
- Patients complaining about the heat in the waiting area today, only a small part is covered from the sun
- People queing at the toilet (we have only one functioning!). Also, patients seem not to be using the handwashing point
- The nurses are asking for certificates of the training we provided, it seems important for motivation and retention
- We are receiving lots of patients with psychological care needs but identifying gaps in some of the staff capacities to deal with it
- As you know I am returning home next week, any information about my replacement?

2

Email from Hiking Hospital:

Dear colleagues,

Please be aware our hospital is currently working over its capacities and we envision it will be difficult to take referrals from your hospital in the following days. Also, consider some of our patients requiring follow up consultations in the following days may reach your clinic, since we don't have capacity for such load of outpatients. We advise you to communicate with the EMTCC and MoH for indications about future referrals and any other issues.

Best regards,

Hiking Hospital director

3

Some notes on the board at the EMT resting area:



- Need to keep this area cleaner and tidier. Everyone needs to cooperate!
- Complaints about the size of the meals – not enough food while working so hard
- LOGISTICS: Be aware one of the 2 cars available for the team broke down today. Reparation is planned for tomorrow
- Welcome to Martin, our new admin colleague

4

Last week, as requested by the EMTCC, we sent a group of 3 EMT staff (1 doctor, 1 nurse, 1 logistician) as a mobile team to cover a hard-to-reach area towards the west (Chakra region). They have had problems with communication means in the last 2 days and we have now receive a text message from them:

Concerned about the access to water in this area. Estimated water available: 10 litres per person/day.

Also worried about returning to the EMT base tomorrow due to the state of the road. We reached the area by car but the state of the roads have deteriorated since we arrived and we are not sure we can pass through now. Logistic support required.

5

Message from the security focal point in the team:

We are missing the contact numbers for some of the team members, please update the list with your name and phone number! Ensure you are reachable all the time.

CONTACT LIST

<u>Name</u>	<u>Phone number</u>
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