



Capturing Lessons Learned: COVID-19 After-Action Report and Improvement Plan – Never too late to start

Many Healthcare and Public Health (HPH) sector organizations had been planning and preparing for a pandemic or health threat for many years by developing and exercising plans on a regular basis. Exercises are recommended from a preparedness and resiliency standpoint to validate and improve in preparation for real-world events. Though an unfortunate event, the COVID-19 response presents an opportunity to capture strengths and areas for improvement of an organization's preparedness and resiliency plans. To promote likely success, the after-action process should have begun at the start of the pandemic. If not started...No worries! It is never too late. However, the after-action process should begin as soon as possible.

In either real-world events or exercises, an After-Action Report (AAR)/Improvement Plan (IP) is often developed. (see the [Homeland Security Exercise and Evaluation Program](#) (HSEEP) for references on exercise development and AAR/IP).

Real-world events create excellent opportunities to create an AAR. The AAR should capture what happened, how the organization responded, and an analysis of the response. The documented actions will help ensure proper procedures are understood and followed. The AAR should include both strengths (what worked well) and areas for improvement (actions that can be corrected and improved upon).

The risk and widespread existence of infectious diseases has always been a concern throughout the world. Many of these have occurred throughout history and have killed millions of people. Some of these pandemics include smallpox, influenza, bubonic plague, cholera, and HIV/AIDS. COVID-19 (coronavirus disease of 2019) began appearing in human beings in China in the 4th quarter of 2019. The World Health Organization (WHO) declared COVID-19 a pandemic in March 2020. The pandemic has now affected people across the world. Many countries have instituted travel restrictions, declared stay-at-home measures, closed businesses and schools, and implemented social distancing. These pandemics have provided us with opportunities to learn from the past and prepare for the future.

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Improving HPH pandemic resiliency and Continuity of Operations (COOP) for future events can apply to other events as well, such as, hurricanes, earthquakes, terrorist attacks, and major cyber- attacks. To prepare for the inevitable future, capture of the immediate past is advantageous.

HPH organizations can take the following actions to start the COVID-19 after-action process:

- Consider designating a senior leader in your organization who can “own” the effort and ensure it is well supported and executed from start to finish.
- Assign available resources that can support the after-action process. Staff that develop plans and exercises, along with staff that may be less engaged than usual, can be assigned to develop the AAR.
- Develop an incident timeline and capture actions taken. Ideally, this information was started at the beginning, but can be created as accurately as possible if it wasn't.
- Continue collecting data as the COVID-19 response continues. Many of the techniques used to collect data during exercises can be used for the COVID-19 response as well.
- Start conducting analysis as the response continues.

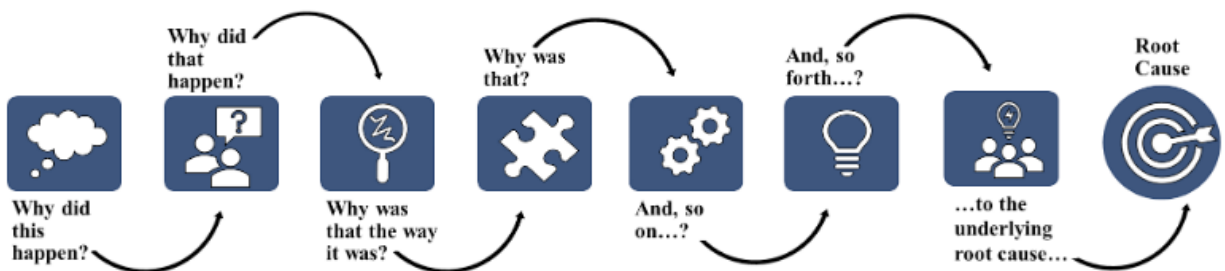


Figure 5.4: Example of a Root Cause Analysis

From Homeland Security Exercise and Evaluation Program

- Develop the After-Action Report and Improvement Plan (AAR/IP). The momentum can be maintained and taken advantage of if a draft AAR/IP is developed and shared as soon as the transition to normal operations begins. A senior level “champion” can be useful to ensure the AAR/IP is completed by maintaining the importance of the efforts, especially as staff move on to other tasks and projects.
- Schedule and execute After-Action Meetings (AAM). The purpose of the AAM is to serve as a forum to review the revised draft AAR/IP. Some large organizations may choose to conduct multiple AAMs. The goal is to reach final consensus on strengths, areas for improvement, corrective actions, assignment for implementation ownership of corrective actions while setting deadlines on those actions.

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Table 5.5: After-Action Meeting

Element	Considerations and Activities
Meeting Focus	<ul style="list-style-type: none">▪ The AAM is an interactive session providing attendees the opportunity to discuss and validate the analytical findings and corrective actions in the draft AAR/IP
Discussion Points	<ul style="list-style-type: none">▪ Review and revise the draft AAR/IP▪ Discuss exercise results▪ Identify areas for improvement▪ Identify corrective actions
Tools	<ul style="list-style-type: none">▪ Draft AAR▪ Draft IP
Outcomes	<ul style="list-style-type: none">▪ Final consensus on AAR/IP▪ Consensus on draft corrective actions▪ Proposed concrete deadlines for the implementation of corrective actions▪ Consensus on the assigned corrective actions to preparedness stakeholders
Follow-up	<ul style="list-style-type: none">▪ Distribute the finalized AAR/IP▪ Track and report corrective actions

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- Track and report corrective actions. As healthcare organizations transition back to normal operations, people will want to move on from the COVID-19 response. Don't let the AAR/IP be forgotten! Follow the Improvement Plan through to completion. Again, having the senior leader support the continued tracking and implementation of corrective actions is imperative.

The unfolding COVID-19 pandemic crisis though catastrophic to many - provides unique organizational opportunities for continuous improvement. Please take advantage to better prepare and increase your overall resilience.

As George Santayana the great philosopher stated: "Those who cannot remember the past are condemned to repeat it". Capturing COVID-19 lessons learned might greatly help avoid undo conflict as history has proven we will continue to witness more pandemics.