



WISCONSIN DEPARTMENT  
*of* HEALTH SERVICES

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# Wisconsin Public Health and Health Care Preparedness 2018 Annual Report



ANNUAL REPORT | FISCAL YEAR 2018

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P-02408 (04/2019)

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# WHO WE ARE

## PURPOSE

The public relies on Wisconsin's public health system to be ready for all public health hazards, to make the best decisions during crisis situations, and to establish and cultivate critical response capabilities. The Office of Preparedness and Emergency Health Care (OPEHC) and the preparedness programs facilitate the development of response capabilities and strategic partnerships across the Wisconsin Department of Health Services (DHS) and with a variety of external organizations. OPEHC supports health partners working together, and to be ready for emergencies, so that everyone lives their best life.

## MISSION STATEMENT

OPEHC works to provide information, resources, and expertise to our partners to ready Wisconsin for health threats, emergencies, and disasters.



### CREDIBILITY

Be trustworthy and knowledgeable.



### CAPABILITY

Be competent and agile leaders in health emergency preparedness.



### INCLUSIVITY

Expand our group of collaborating health partners.



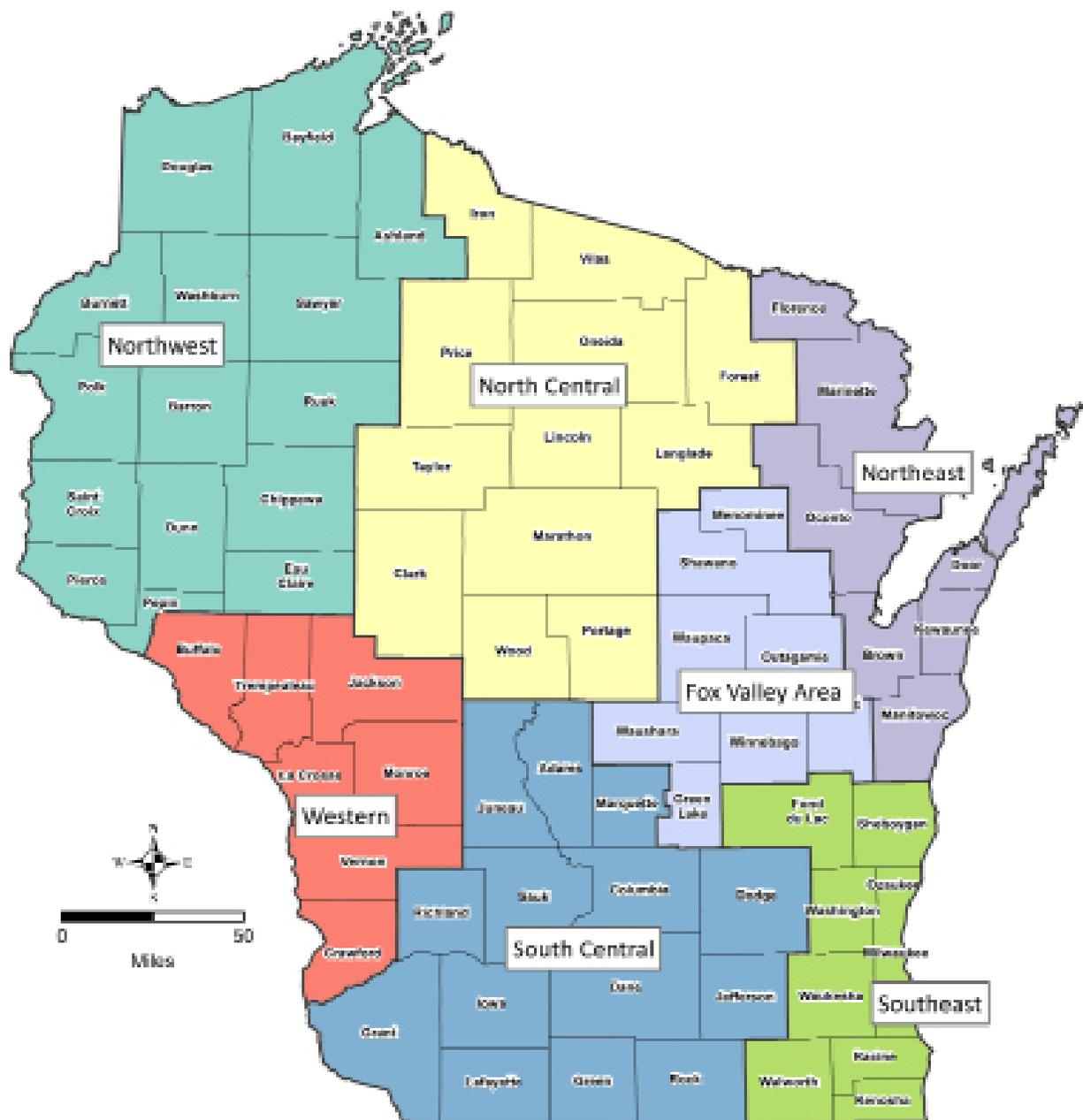
### EXPERTISE

Provide our partners timely, accurate, and clear communications and information.

The Health Emergency Preparedness Section (HEP) within OPEHC is composed of two different units: Health Emergency Response and Planning Unit (HERP) and the Preparedness Administration and Logistics Unit (PAL). There are several vacant positions within the entire section. It is a priority in 2019 to become fully staffed.

Public health and health care preparedness staff work with local health departments, tribal health centers, and the seven healthcare emergency readiness coalitions (HERC)—see below.

## Wisconsin Healthcare Emergency Readiness Coalitions (HERC)



# WISCONSIN DIVISION OF PUBLIC HEALTH PRIORITIES

## PUBLIC HEALTH ACCREDITATION

The Division of Public Health (DPH) leadership team within the DHS made the executive decision to pursue national accreditation status through the Public Health Accreditation Board (PHAB) in order to protect and promote the health and safety of the people of Wisconsin.

The preparedness staff contributed to PHAB accreditation in multiple domains including:

- **Domain 2:** Investigate health problems and environmental public health hazards to protect the community.
- **Domain 5:** Develop public health policies and plans.
- **Domain 6:** Enforce public health laws.
- **Domain 10:** Contribute to and apply the evidence base of public health.

DPH was awarded national accreditation status on August 2018. National accreditation status remains in effect until August 2023.

### Division of Public Health Emergency Operations Plan

Throughout the process of attaining accreditation, leadership emphasized the importance of having an operational emergency operations plan (EOP) for public health emergencies. The accreditation process increased collaboration throughout the division and allowed the health emergency preparedness section to become leaders in coordinating public health emergency response planning and activities.

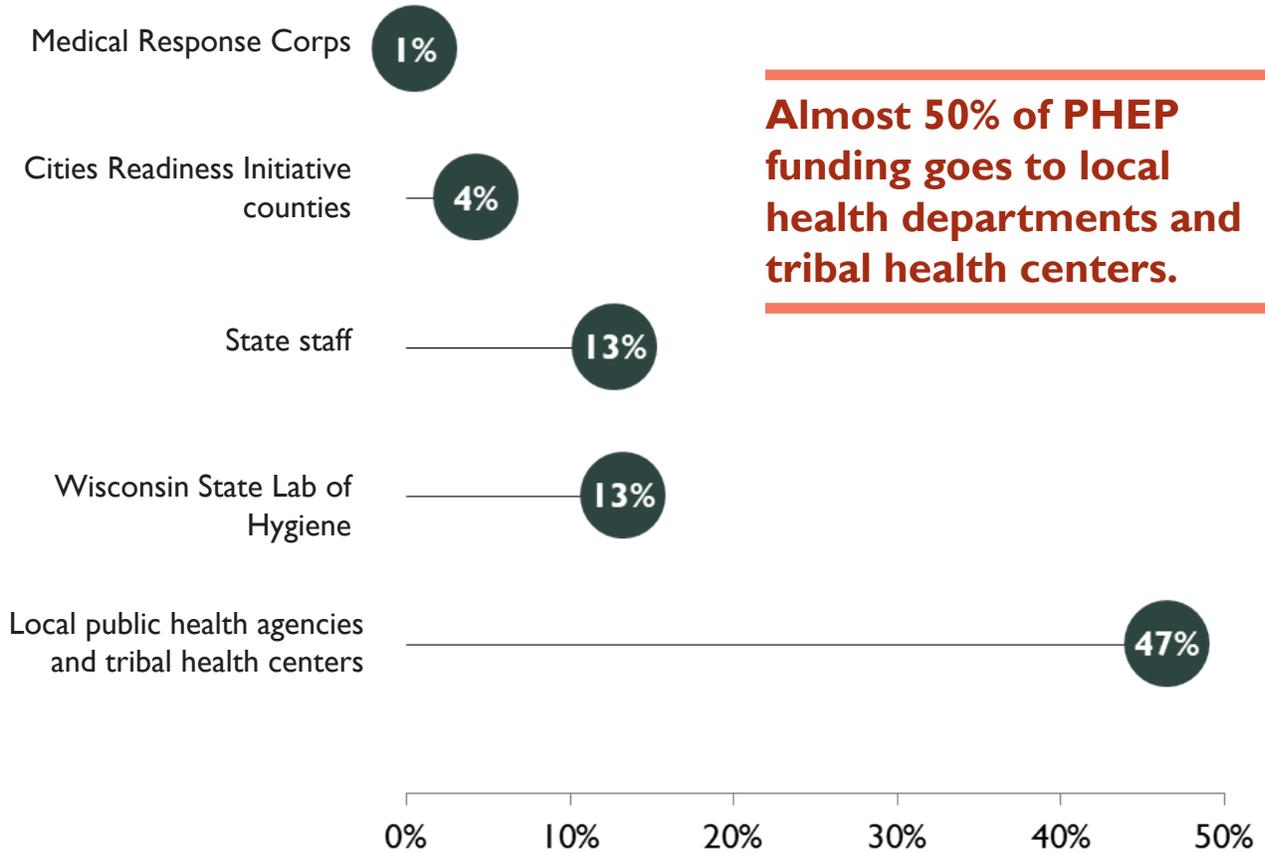
The plan establishes the organizational framework for how the division will respond to significant incidents with public health or health care implications for the people of Wisconsin.

# PREPAREDNESS FUNDING

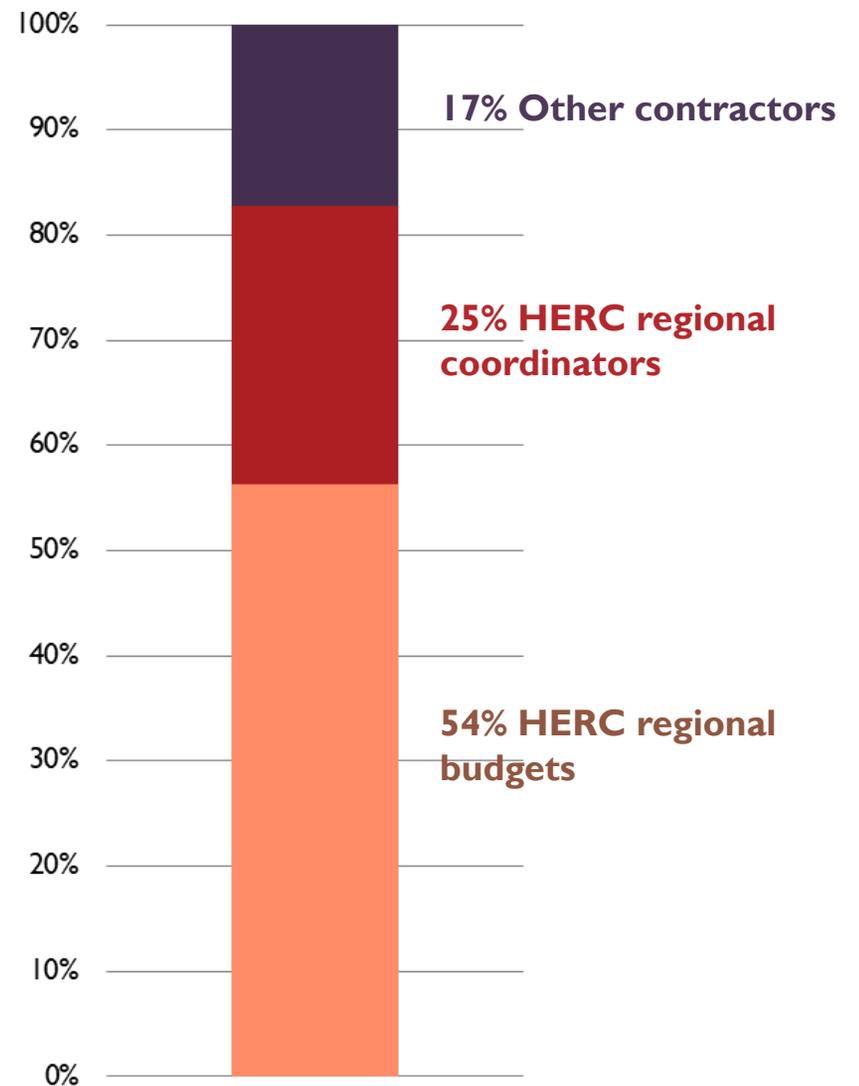
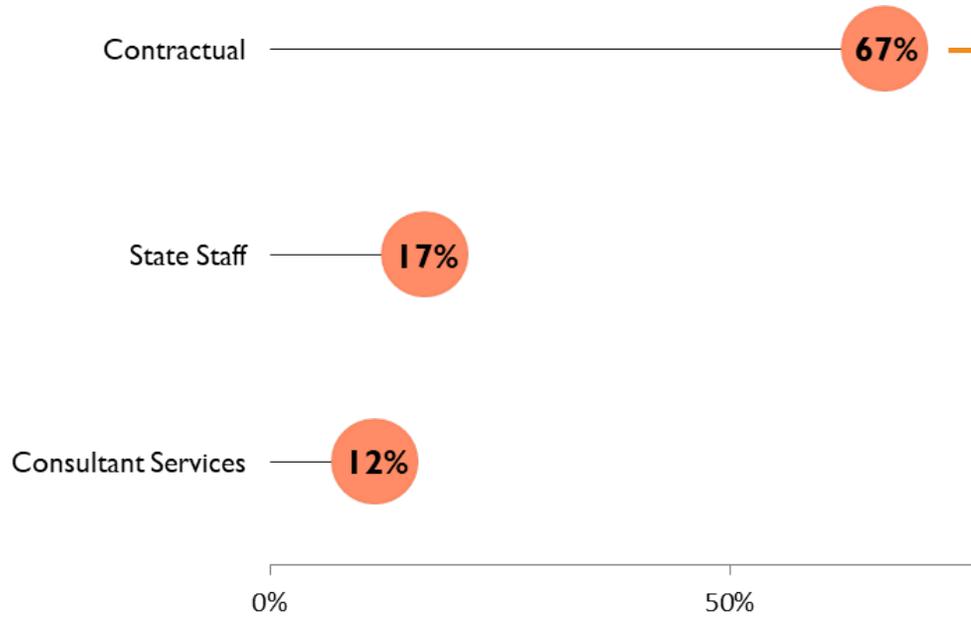
The Health Emergency Preparedness section is solely funded by federal funds through the Hospital Preparedness Program – Public Health Emergency Preparedness Cooperative Agreement. The Health Emergency Preparedness section must submit an application, budget narrative and other documentation every year to receive funding for the upcoming fiscal year. Once that documentation has been reviewed and approved, the federal government distributes a Notice of Award that allocates the amount of funding the state receives for the fiscal year.

For the 2018 fiscal year, the HEP section was awarded **\$14,900,167** between two programs: Public Health Preparedness Program (PHEP) and the Hospital Preparedness Program (HPP).

## PUBLIC HEALTH EMERGENCY PREPAREDNESS PROGRAM BUDGET BREAKDOWN



# HEALTH CARE PREPAREDNESS PROGRAM BUDGET BREAKDOWN



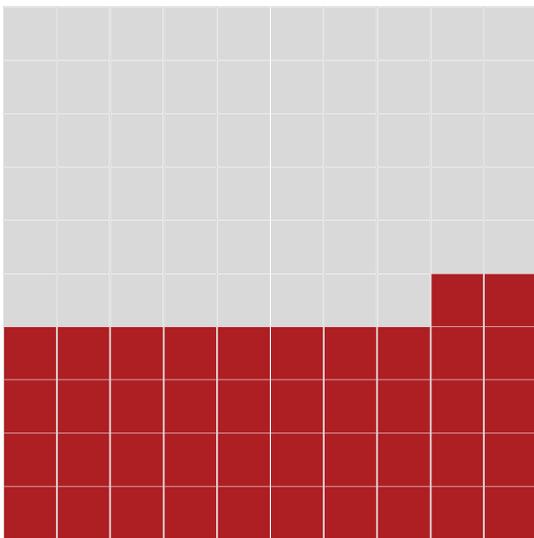
**~67% of HPP funding goes directly to contractors and the seven healthcare coalition regions.**

# HEALTH CARE PREPAREDNESS HIGHLIGHTS

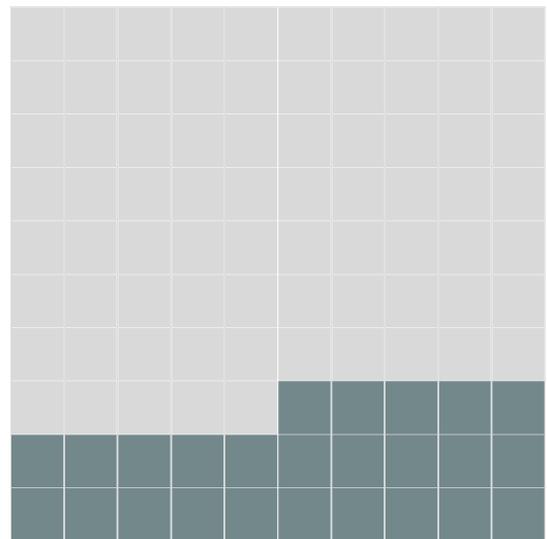
Wisconsin has seven healthcare emergency readiness coalitions (HERC). The primary mission of these healthcare coalitions is to support health care organizations—hospitals, local public health agencies and tribal health centers, emergency medical services (EMS), and emergency management—during emergency response and recovery.

Wisconsin HERCs are made up of **565** health care organizations:

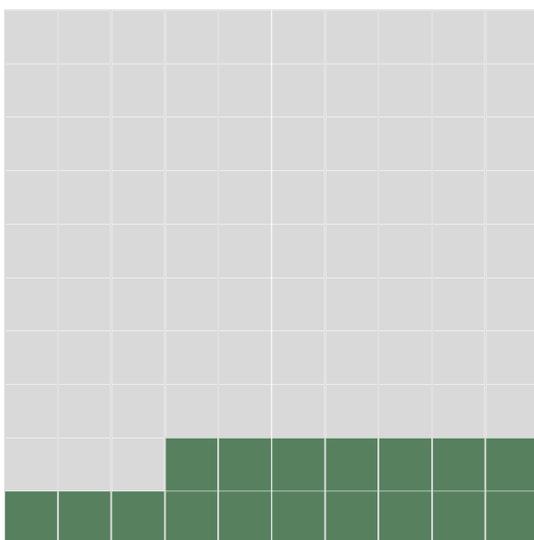
**42% Emergency Medical Services**



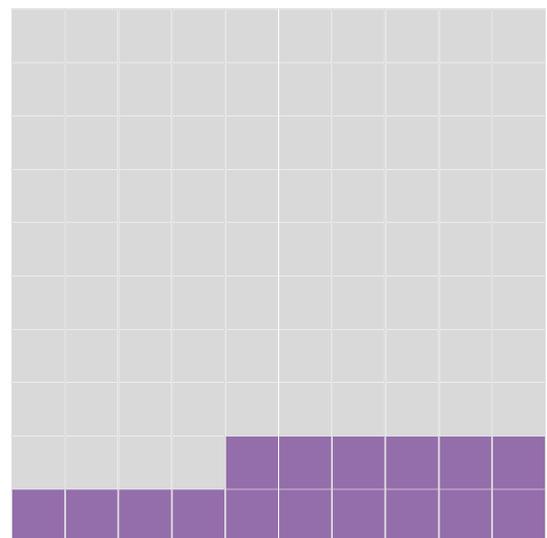
**25% Hospitals**



**17% Public Health Agencies or Tribal Health Centers**



**16% Emergency Management**



# CENTERS FOR MEDICARE & MEDICAID SERVICES EMERGENCY PREPAREDNESS RULE TOOLKITS

In September 2016, the Centers for Medicare & Medicaid Services (CMS) released a new emergency preparedness rule for 17 sectors in the U.S. health system. The new rule asks the affected provider types to demonstrate that they are doing risk assessments; writing appropriate plans, policies, and procedures; and training and testing their plans with staff and partners in the community. To assist those provider types located in Wisconsin, staff conducted an environmental scan of existing CMS preparedness resources. They discussed key issues with the healthcare emergency readiness coalition coordinators, and worked with the DHS's Division of Quality Assurance (DQA) to develop CMS Emergency Preparedness Rule toolkits, specific to nine of the provider types. DQA serves as the state entity that oversees Wisconsin's certification process on behalf of CMS and were vital to the toolkit creation.

The toolkits give provider-specific guidance, an overview of the regulation, and tools and templates that providers can use to guide them based on the four main content sections:

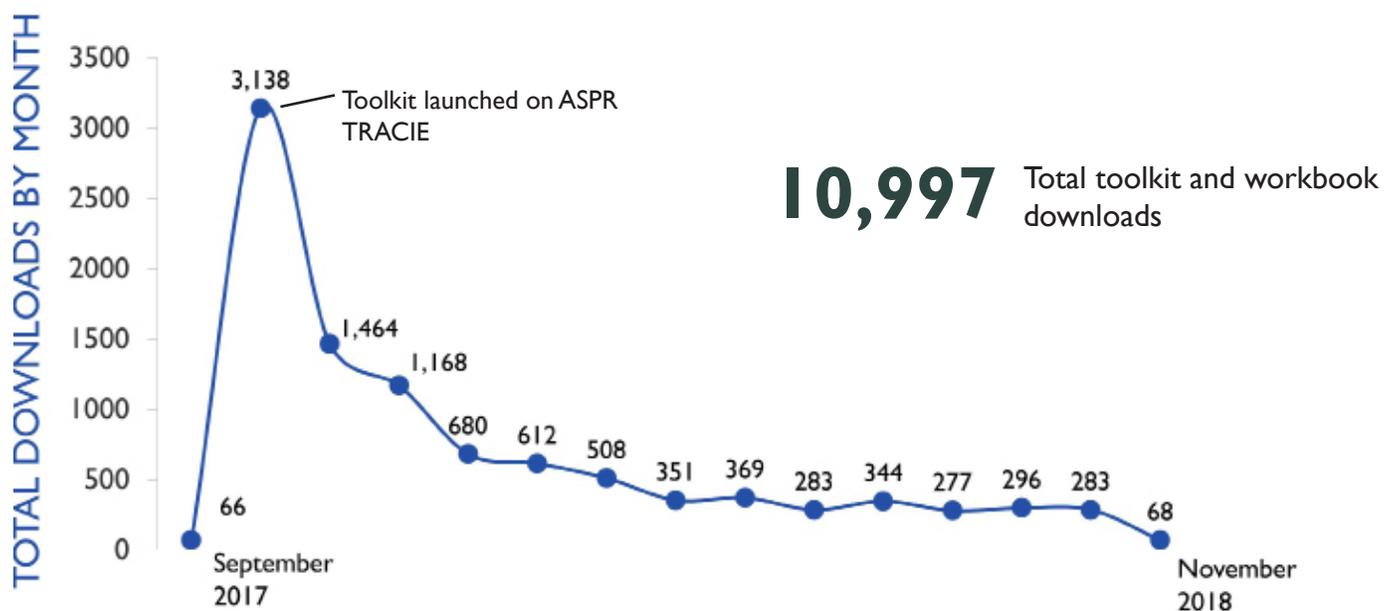
- Risk Assessment and Planning
- Policies and Procedures
- Communications Plan
- Training and Testing

WI DHS distributed the toolkits, along with a one-page fact sheet, through the seven healthcare emergency readiness coalitions and placed them on the WI DHS website in September 2017. They were further marketed on the Assistant Secretary for Preparedness and Response (ASPR) Technical Resources, Assistance Center, and Information Exchange (TRACIE) resource-sharing website. Users all over the United States downloaded the toolkits. DHS has also attended several state conferences to supply information directly to our intended audience.

**9** Provider-specific toolkits and workbooks

**16,161** Total pageviews to the CMS rule and toolkits web pages

**42** Different states that accessed the toolkits and workbooks



# DARK SKY EXERCISE

Dark Sky was a Wisconsin Department of Military Affairs full-scale exercise based on the Wisconsin Threat and Hazard Identification & State Preparedness Report. The purpose of the exercise was to increase the understanding of the coordination, policies, and procedures required to conduct a joint inter-agency response to cyber and physical threats and subsequent attacks on infrastructure. Staff from DHS provided public health and health care technical assistance during the planning phase of the exercise development.

The exercise was conducted May 15–17, 2018, at various locations in Wisconsin. The exercise included over 1,600 participants from over 240 agencies and departments spanning the local, county, state, federal, and private sector. OPEHC preparedness staff were engaged in a significant planning and role-play, along with multiple state agencies.

Throughout the three-day exercise, preparedness staff played in the simulation cell and as leads for emergency support functions six (mass care) and eight (public health and medical) in the State Emergency Operations Center (SEOC). In addition, the Fox Valley Area HERC supported the conduct of three individual events including a mass casualty incident with a bus roll over, local medical centers being affected by utility disruptions that caused the Aurora Medical Center Oshkosh to activate their facility evacuation plan and transfer patients intra- and inter-regionally.



(Above) Members of the Fox Valley HERC participate in a triage exercise on day one of the exercise.

*Photo: Tracey Froiland*



(Left) American Red Cross volunteers hear a briefing on the shelter set up.

*Photo: Tracey Froiland*

## REGIONAL COALITION SURGE TESTS

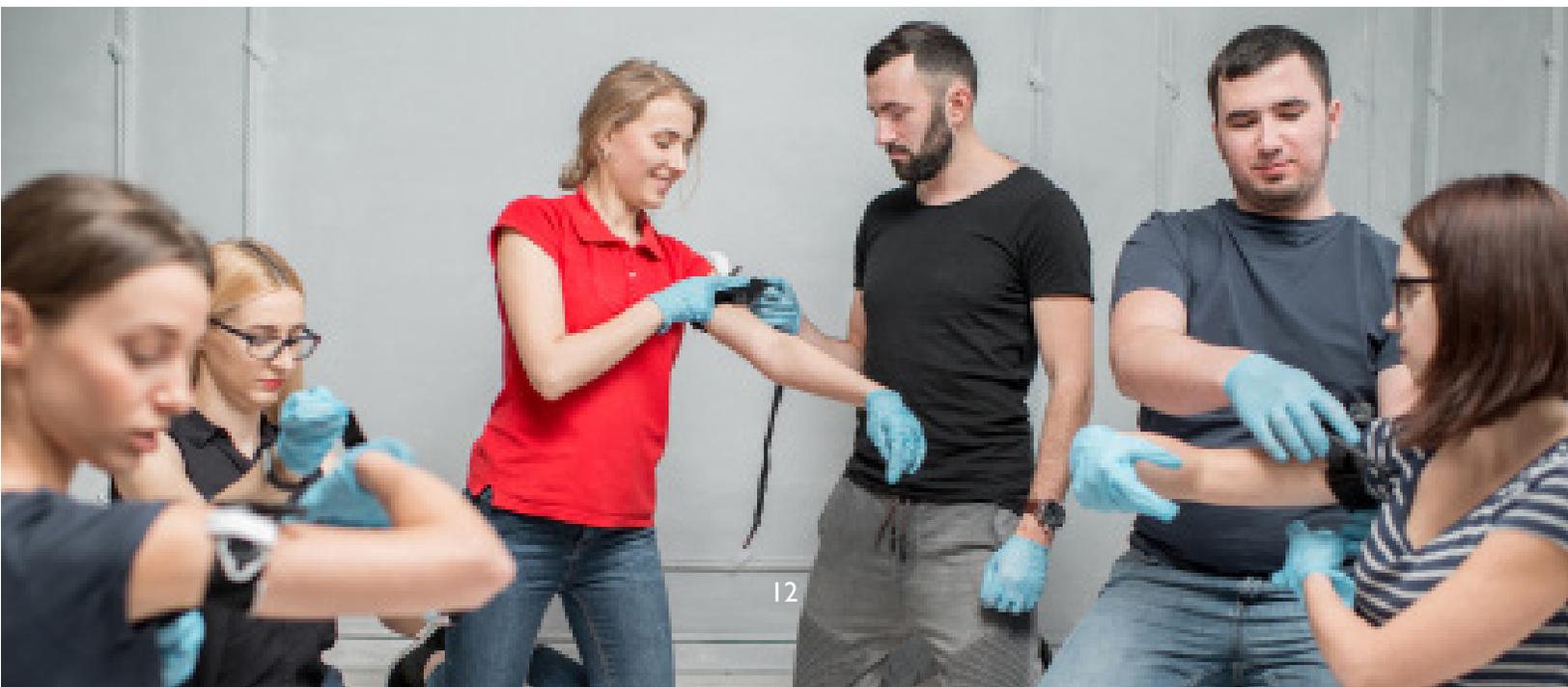
The Coalition Surge Test (CST) is designed to help Wisconsin's HERCs identify gaps in their surge planning through a low- to no-notice exercise. The CST is a federally designed exercise that simulates the evacuation of 20% of a region's acute care beds, and is a requirement of all coalitions across the country. OPEHC supported the delivery of a CST in each of the seven HERC regions. Over the course of these seven exercises, OPEHC staff helped with coordination and also attended in person to provide guidance, technical assistance, and facilitate further discussion.

Hospitals and additional coalition partners engaged in strategic, forward-thinking discussions throughout the exercises, and found the exercise to be worthwhile. All seven coalitions and their partners identified different areas of improvement for their regions. Common themes include: HERC awareness and how the coalitions interact with health care systems, communication through EMResource, guidance on crisis standards of care, and how public health interacts with HERCs and their partners.

OPEHC has hired an external contractor for 2019 to standardize the CST exercises across the state.

## STOP THE BLEED COLLABORATION WITH STATE TRAUMA PROGRAM

One of our major initiatives this year was the Stop the Bleed campaign. The Stop the Bleed campaign is a national initiative that supports former President Obama's policy directive for national preparedness and is intended to encourage bystanders to become trained, equipped, and empowered to help in a bleeding emergency before professional help arrives. This initiative has been led by our Regional Trauma Advisory Councils (RTACs) in collaboration with our HERCs. In each region, our coalitions have conducted numerous Bleeding Control Basics and Instructor Training courses and have also outfitted their regions with equipment for these trainings. Several of our regions have also supplied schools, state patrol, and other partners with bleeding control kits. Along with providing valuable training and equipment, this initiative has enhanced the collaboration between our RTACs and HERCs and has increased partner capacity by engaging with new sectors such as schools and private businesses. This work will be continued in 2019 and if you would like more information on this initiative, please visit your RTAC website or [www.bleedingcontrol.org](http://www.bleedingcontrol.org).



# PUBLIC HEALTH PREPAREDNESS HIGHLIGHTS

## PUBLIC HEALTH EMERGENCY PREPAREDNESS CONFERENCE SCHOLARSHIPS

When OPEHC and their sub-recipients cannot fully expend their Public Health Emergency Preparedness funds before the end of the fiscal year, either due to position vacancies or unexpected project delays, it has the potential to be returned to the Center for Disease Control and Prevention. Local public health departments and tribal community centers can apply for various conference scholarships and mini-grants.

For the 2018 fiscal year, OPEHC offered local public health departments and tribal community centers the opportunity to apply for the following conference scholarships: Public Health Preparedness Summit; Wisconsin Public Health Association-Wisconsin Association of Local Health Departments and Boards; and the Governor's Conference on Emergency Management and Homeland Security. OPEHC awarded \$284,650 in conference scholarships to 244 applicants.

### WHAT LOCALS ARE SAYING:

*"...without a scholarship, our agency would not have been able to send three of our staff to the preparedness conference. Having the opportunity to send more staff broadens our agencies preparedness interest and knowledge."*

*"I still consider myself fairly new to the emergency preparedness world, so being able to hear the stories and experiences of other cities/counties/states really brought a lot of value to me. Some of the sessions that I attended provided me with knowledge that was used within days of arriving back at home."*

## FAMILY ASSISTANCE CENTER TRAINING

Historically, the American Red Cross, Salvation Army, and other non-governmental organizations have provided care following a mass casualty or fatality event. However, in light of the recent mass casualty events in the United States, state and local governments need to take on the responsibility of planning to provide family assistance to communities affected by these events.

Wisconsin Preparedness staff were able to hold three Family Assistance Center (FAC) trainings across the state during 2018. One hundred and fifty individuals from 92 different organizations across the state—public health, emergency management, law enforcement, human services, and health care—were trained. The training focused on: understanding disaster family assistance, defining the staffing needs for a FAC, demobilizing, and resources and guides for organizations to establish their family assistance center plans. Further, a tabletop exercise was conducted to work through their local FAC plans and make improvements based on the training and sharing best practices among the participants.

## DISASTER RESPONSE INTERPRETER TRAINING

In coordination with the Office of Deaf and Hard of Hearing (ODDH), preparedness staff were able to bring in subject matter experts on disaster response interpreters train over 20 certified sign language interpreters. After this training, the participants could be deployed through a process that involves ODDH and OPEHC staff to serve as interpreters during a wide variety of response activities including press conferences, shelters, or reception centers.

In the months that followed the training, DRIs have been deployed to press conferences around the state. DHS is hoping to engage with more partners in the next fiscal year to expand the DRI program in Wisconsin.



*Image above: First class of Wisconsin Disaster Response Interpreters*

## MULTI-AGENCY FEEDING PLAN AND FEEDING PLAN TASK-FORCE

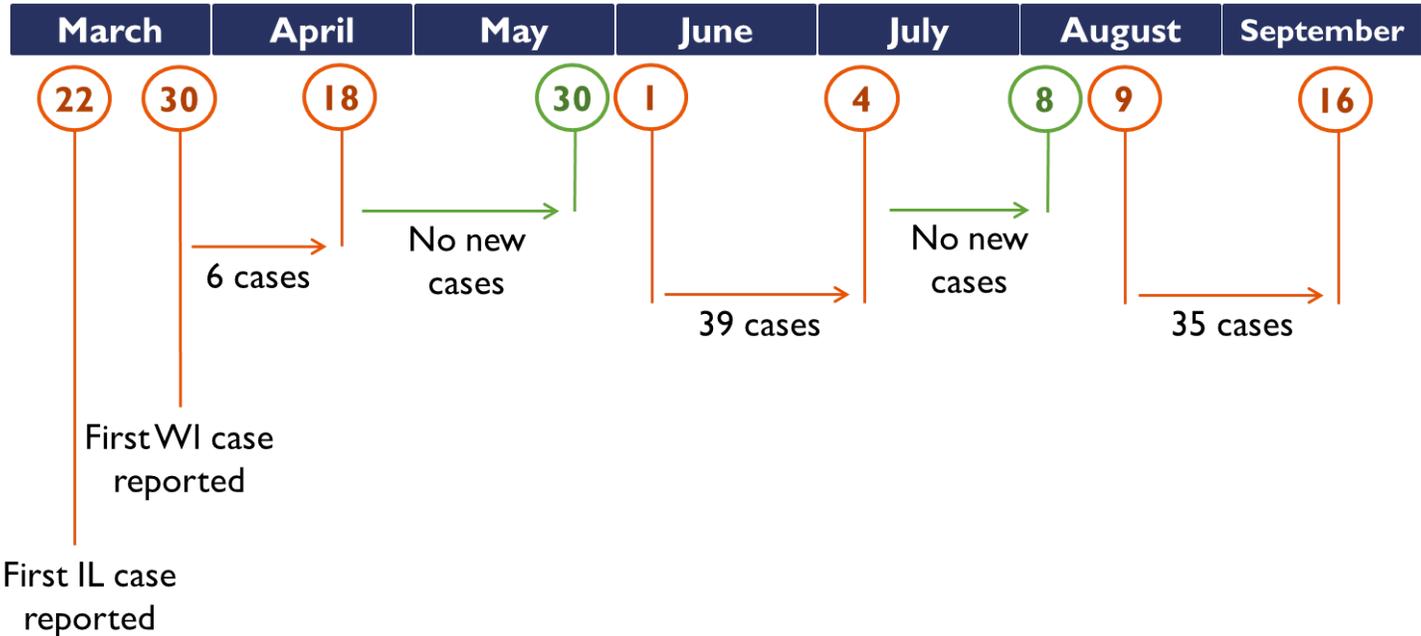
The Dark Sky Exercise also provided the OPEHC with an opportunity to test its role in the Wisconsin Multi-Agency Feeding Plan. This plan was a collaborative effort among DHS, Wisconsin Emergency Management, Wisconsin Department of Children and Families, as well as many critical feeding partners across the state such as the Salvation Army, Red Cross, Feeding Wisconsin, and others.

This plan is meant to support the rare and infrequent instances in which the primary feeding partners, specifically the American Red Cross and Salvation Army, are overwhelmed and cannot adequately support the feeding needs of a community. In order to make this plan operational, the Multi Agency Feeding Task Force was developed, with individuals from each of the respective/necessary agencies. During the Dark Sky Exercise, this Task Force engaged in a coordination call to talk about what the feeding needs would look like in a long-term, large-scale power outage, as well as how these partners would work to fulfill these needs.

# CROSS BUREAU COLLABORATION: SYNTHETIC CANNABINOID RESPONSE

DPH activated an incident management team in response to a sudden increase in hospitalizations for coagulopathy associated with use of synthetic cannabinoids. Investigation by the Wisconsin State Laboratory of Hygiene and others determined that the presence of brodifacoum, an anticoagulant used most commonly as a rodenticide, was the likely cause for these hospitalizations. The team was first activated from early April through late May 2018 before demobilizing, but was reactivated from late June through mid-August due to a second surge in suspected and confirmed cases. By the time the incident management structure demobilized in August, Wisconsin had experienced 39 confirmed cases of brodifacoum poisoning, including one death, and an additional six suspected cases. The time line of the response can be found below.

Wisconsin DPH provided local health departments, clinicians, pharmacies, and the public with information through a variety of channels including email, social media, press releases, web pages, and conference calls. Additionally, DPH identified channels through which local health departments could receive free supplies of vitamin K to support treatment of individuals that could not afford medications and to address spot shortages in affected communities. Perhaps most critically, DPH staff monitored syndromic surveillance for patients meeting the case definition and conducted follow-up to coordinate investigative efforts with local public health agencies.



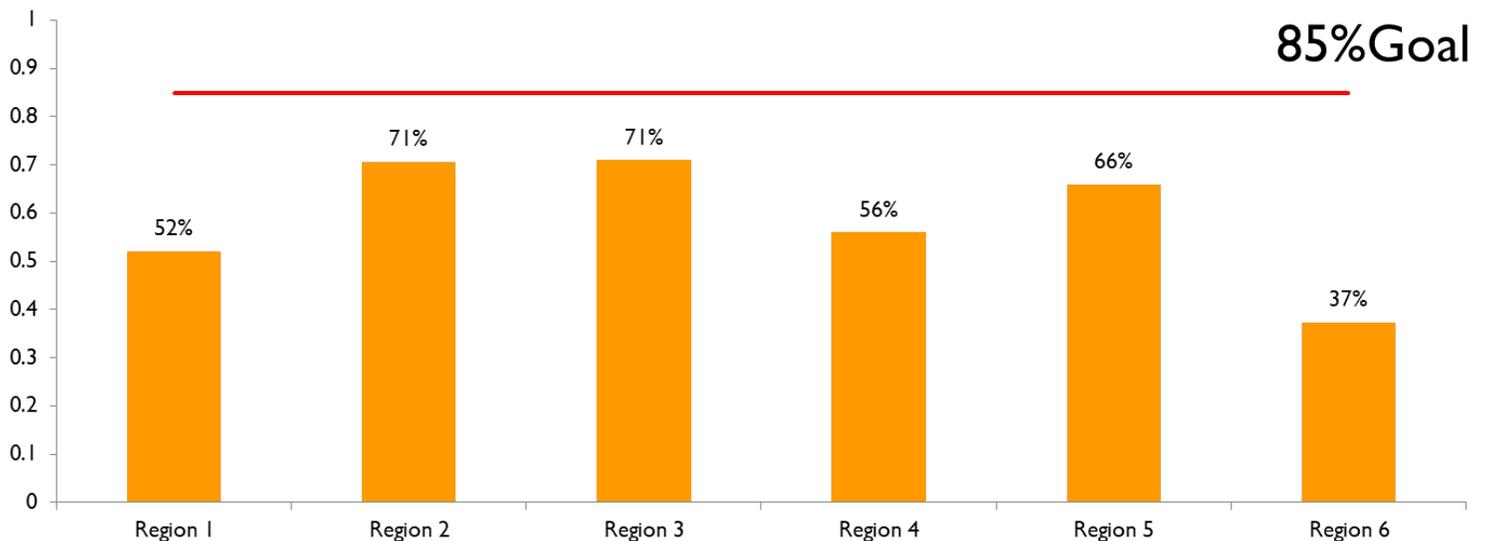
## WISCOM DRILLS

The Wisconsin Interoperable System for Communications (WISCOM) is a statewide shared system. Hospitals can use the system to communicate with other hospitals and partners during major disaster events or large scale incidents. The goal of WISCOM in Wisconsin is to ensure that there are open lines of communication between providers, hospitals, and other emergency responders during disasters or incidents.

WISCOM is able to use existing radio towers and leverage that infrastructure for communication. By supporting multiple conversation paths, WISCOM hospital users are able to have a redundant communication system that can act as a more efficient means of communication. WISCOM radios can alert hospitals of any potential mass event situations when internet access has been interrupted. It also allows for hospitals to connect and communicate inter-facility during events.

DHS and the seven HERCs around the state work together to ensure that the WISCOM hospital radios are properly programmed and being operated by trained partners. Monthly drills are conducted throughout the state, with several regions being very close to an overall 85% response. Many of the individual drills did reach over 85%, but on average, were less.

**Average Response Rate for WISCOM Drills 9/2017-6/2018**



## BURN SURGE PLANNING

A burn mass casualty incident (BMCI) is defined by the American Burn Association as any catastrophic event in which the number of burn victims exceeds the capacity of the local burn center to provide optimal burn care. Capacity includes the availability of burn beds, burn surgeons, burn nurses, other support staff, operating rooms, equipment, supplies, and related resources.

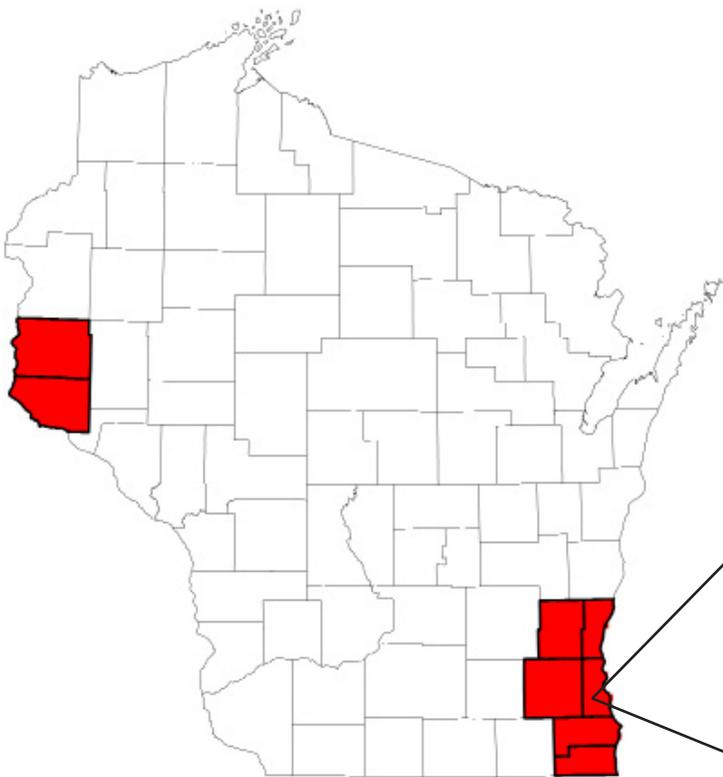
Wisconsin's draft BMCI Plan is in the final stages of approval. Through fiscal year 2018, preparedness staff have worked with local jurisdictions, regional HERCs, first responders, and health care organizations to craft a cohesive plan. The cross-sector collaboration and planning will increase burn surge capacity statewide and safeguard and prioritize the utilization of limited burn care resources. Wisconsin's BMCI Plan contains a clear and concise operational framework that supports each region's ability to coordinate regional care and the movement of burn patients in order to create the maximum state of preparedness and the most effective response should a burn mass casualty incident occur.

Operational outreach, education, training, and exercising of the plan with local, state, and regional response partners will begin in 2019.

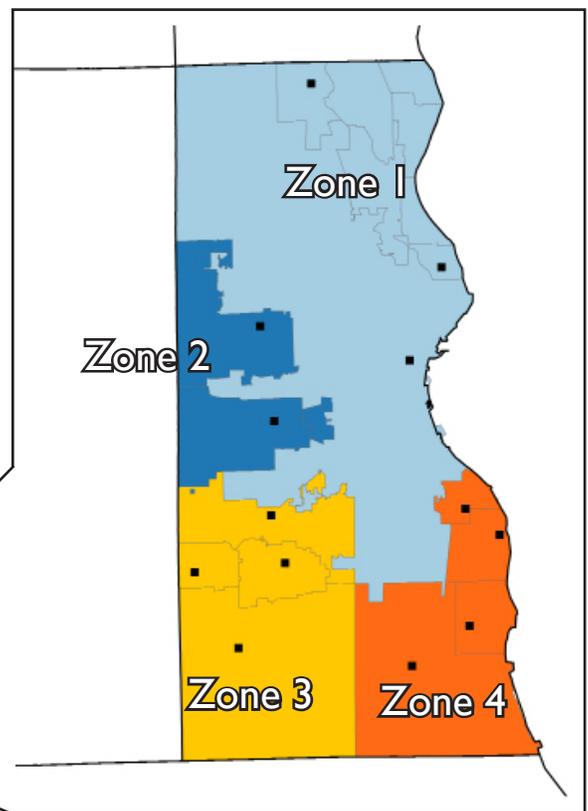
# WISCONSIN CITIES READINESS INITIATIVE ZONES

The position of State Emergency Medical Counter Measures (MCM) Coordinator was vacant for the first quarter of 2018, and all MCM activities were assured continuation by the emergency response coordinator who also serves as the back-up MCM Coordinator. Prior to 2018, there were 19 City Readiness Initiative (CRI) jurisdictions. Beginning in 2018, CRIs in Milwaukee County were consolidated into zones for regional coordination purposes. We currently have 10 CRI's in Wisconsin: four are zones made up of multiple jurisdictions, and six are county entities.

In June of 2018, all CRI's and WI DHS submitted self-assessments via the CDC-based Data Collation and Integration for Public Health Event Responses (DCIPHER) system. The self-assessments included the reporting of jurisdictional data, primary open points of dispensing, planning, etc., based on the Public Health Emergency Preparedness (PHEP) Operational Readiness Review (ORR) Guidance.



**CRI Jurisdictions:** Kenosha County, Pierce County, Racine County, St Croix County, Washington County, Ozaukee County, and Waukesha County



**CRI Zones:** There are four zones in Milwaukee County, each with several health departments working together to meet the requirements.

*Black squares show the health departments that are in the zones.*

# PUBLIC HEALTH PREPAREDNESS PARTNERS

## 86 Local public health agencies

## 7 Healthcare emergency readiness coalitions

### Boards and Organizations

- 2-1-1 Wisconsin
- American Red Cross
- Children's Health Alliance
- Emergency Medical Services Board
- EMS for Children
- Healthcare Emergency Readiness Coalitions Advisory Board
- Pharmacy Society of Wisconsin
- Salvation Army
- Southeast Terrorism Alerting Center
- Statewide Trauma Advisory Council
- Wisconsin Association for the Deaf
- Wisconsin Association of Local Health Departments and Boards
- Wisconsin Council on Physical Disabilities
- Wisconsin Hospital Association
- Wisconsin Medical Society
- Wisconsin Primary Care Association
- Wisconsin Public Health Association
- Wisconsin Voluntary Agencies Active in Disaster

### DHS Divisions and Offices

- Bureau of Communicable Disease
- Bureau of Community Health Promotion
- Bureau of Environmental and Occupational Health
- Division of Care and Treatment Services
- Division of Medicaid Services
- Division of Quality Assurance
- Office of Health Informatics
- Office of Legal Counsel
- Office of the Secretary

## 11 Tribal health agencies

## 7 Regional trauma advisory councils

### State Agencies

- Department of Administration
- Department of Agriculture, Trade and Consumer Protection
- Department of Children and Families
- Department of Justice
- Department of Military Affairs and Wisconsin Emergency Management
- Department of Natural Resources
- Department of Safety and Professional Services
- Department of Transportation
- Wisconsin National Guard
- Wisconsin State Lab of Hygiene
- Wisconsin State Patrol

### Academic Partners

- University of Wisconsin System
- University of Wisconsin Madison School of Nursing and School of Pharmacy

### Federal Partners

- CDC's Division of State and Local Readiness
- Centers for Disease Control and Prevention
- Division of Strategic National Stockpile
- Office of the Assistant Secretary for Preparedness and Response
- United States Marshals Service