



State of Wisconsin
Department of Health Services

Tony Evers, Governor
Andrea Palm, Secretary

September 19, 2019

Mr. Jeff Renk, Chief Clerk
Wisconsin State Senate
P.O. Box 7882
Madison, WI 53702

Patrick E. Fuller
Assembly Chief Clerk
17 West Main Street, Suite 401
Madison, WI 53703

Dear Mr. Renk and Fuller:

The Department of Health Services is pleased to submit to you the report on Wisconsin's Public Health Emergency Preparedness. This report was prepared by the Division of Public Health, as required by Wis. Stat. § 250.03(3)(b), and can be found on our [website](#).

Wisconsin's Public Health Emergency Preparedness Program continues to strengthen the foundation of preparedness through planning, workforce competency development training, and regional exercises. These efforts among state and local partners ensure both individual agency response capability and strong coordination for regional and statewide response. Highlights from the report, "A Biennial Report on the Status of Readiness for Health Emergencies in Wisconsin (2017-2019)," include:

- Aligning of the Public Health Emergency Preparedness Program with the Wisconsin Hospital Emergency Preparedness Program to create seven regional Healthcare Emergency Readiness Coalitions (HERCs).
- Funding opportunities to support planning for functional and access needs for persons with unique emergency response needs.
- Obtaining an Opioid Crisis Grant through CDC, and use of that funding to award mini-grants to local, tribal, and regional partners to combat opioid addiction in their communities.

These successes reflect sustained progress in, as well as exciting enhancements to, Wisconsin's readiness to prevent, detect, investigate, control, and recover from public health emergencies.

Sincerely,



Andrea Palm
Secretary-designee

A Biennial Report on the Status of Readiness for Health Emergencies in Wisconsin (2017-2019)



WISCONSIN DEPARTMENT
of HEALTH SERVICES

P-02456 (07/2019)

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Introduction

Each year, unexpected events threaten the health and safety of the people of Wisconsin. Recently, in August and September 2018, severe flooding affected homeowners in more than 20 counties and led to a presidential disaster declaration. Under the Wisconsin Emergency Response Plan and with support from federal funding sources, the [Wisconsin Department of Health Services](#) (DHS) is responsible for continuing its ongoing work to enhance the state's ability to address the health-related aspects of disasters and emergencies. [State statute](#) requires a report every two years to update the Governor's Office and the state legislature on these efforts.



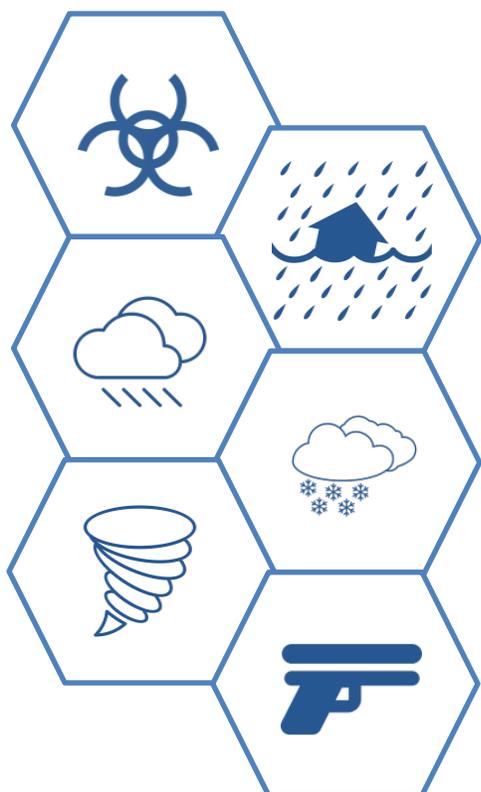
Figure 1: Highway 131 Flooding, 2018

Federal funding for preparedness efforts became available in 2002, following the terrorist attacks of 2001. During the almost two decades since the initial distribution of funds, Wisconsin has used this

support to advance its state of readiness for health emergencies at the local, regional, and state levels.

Cooperative agreements between the U.S. Department of Health and Human Services and DHS provide funding for preparedness and readiness efforts. Within DHS, [the Office of Preparedness and Emergency Health Care \(OPEHC\)](#) leads the implementation of the two primary areas of focus supported by the funds, works with local health departments and tribal health centers on public health preparedness, and works with the state's seven multidisciplinary regional healthcare emergency readiness coalitions (HERCs) that focus on medical surge and coordination planning.

Being prepared is not an end state, but rather an ongoing, dynamic process that is constantly evolving and adapting to new ideas, threats, and changing circumstances. At the heart of this process is a cycle of planning, training, exercising, evaluation, and improvement. This report will describe the relationships and resources that support that process.



Relationships

The largest challenge to disaster readiness is the size and scope of the mission. No one agency or entity can tackle that challenge alone. At the heart of preparedness activities is the web of relationships

amongst the key partners, each of which plays a critical role. These partners run the gamut from other offices and divisions within DHS; to public, nonprofit, and private sectors; to local, regional, state, and national entities. The table below provides a list of just some of the key organizations that OPEHC staff members have collaborated with on preparedness activities in the past two years.

Boards and Organizations

- 2-1-1 Wisconsin
- American Red Cross
- Children’s Health Alliance of Wisconsin
- Emergency Medical Services Board
- EMS for Children
- Healthcare Emergency Readiness Coalitions Advisory Board
- 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 Primary Care Association
- Wisconsin Public Health Association
- Wisconsin Voluntary Agencies Active in Disasters

DHS Divisions and Offices

- Bureau of Communicable Diseases, Division of Public Health (DPH)
- Bureau of Community Health Promotion (DPH)
- Bureau of Environmental and Occupational Health (DPH)
- Division of Care and Treatment Services
- Division of Medicaid Services
- Division of Quality Assurance
- Office of Health Informatics (DPH)
- Office of Legal Counsel
- Office of the Secretary

State Agencies

- Department of Administration
- Department of Agriculture, Trade and Consumer Protection
- Department of Military Affairs , Wisconsin Emergency Management
- Department of Natural Resources
- Wisconsin National Guard
- Wisconsin State Lab of Hygiene
- Wisconsin State Patrol

Federal Partners

- Centers for Disease Control and Prevention (CDC)
- CDC’s Division of State and Local Readiness
- Office of the Assistant Secretary for Preparedness and Response, US Department of Health and Human Services
- Division of Strategic National Stockpile
- U.S. Marshals Service

(Note: The list in Table 1 is intended to be illustrative, not exhaustive.)

Department's Enhanced Preparedness and Emergency Response Initiative

Over the last two years, OPEHC has continued to advance the Department's Enhanced Preparedness and Emergency Response (DEPER) Initiative, an effort to build emergency readiness and response capacity throughout DHS. This has included raising awareness of the varied responsibilities of DHS during and after events; training staff throughout the building about the Division of Public Health's (DPH) Emergency Operations Plan and the incident management system; supporting information sharing amongst the department's after-hours on-call teams;¹ and building resources to support crisis communications efforts during emergencies. Depending on the nature of a given emergency event, DHS can call upon appropriate staff to bring their skills to the response and fill in roles when primary personnel are overwhelmed.

State-Level Coordination

Personnel involved with emergency preparedness and response at DHS work with other state-level entities to ensure coordination in disaster preparedness, response, and recovery. For example, the Bureau of Environmental and Occupational Health (BEOH) coordinates closely with the Department of Natural Resources (DNR) and the Wisconsin State Laboratory of Hygiene (WSLH) to address health concerns during flooding. OPEHC works especially closely with colleagues at Wisconsin Emergency Management (WEM) in the Department of Military Affairs on activities ranging from maintaining awareness of plan development efforts, to participating in exercise design teams, to training about and serving in the State Emergency Operations Center (SEOC).

Public Health Emergency Preparedness

Under the Public Health Emergency Preparedness (PHEP) cooperative agreement with the Centers for Disease Control and Prevention (CDC), OPEHC administers the distribution and management of dollars to support health readiness activities at the local and tribal levels. OPEHC provides local and tribal agencies with cooperative agreement expectations. However, within the agreements, the local and tribal agencies largely determine the specific priorities that best meet their individual jurisdictions' needs to create, build, or maintain the various capabilities used to address the health-related aspects of emergencies in their communities. (Our [Resources](#) section has more information about funding for local jurisdictions.)

¹ The Department of Health Services supports four teams that take calls after hours and on weekends: 1) Communicable Disease; 2) Chemical Spills and Natural Disasters; 3) Emergency Human Services; and 4) Radiological Events.

Healthcare Preparedness Program

The Office of the Assistant Secretary for Preparedness and Response (ASPR) in the U.S. Department of Health and Human Services funds Wisconsin's Healthcare Preparedness Program (HPP). The HPP supports seven regional healthcare emergency readiness coalitions (HERCs), shown in figure 2 below. One of the purposes of these HERCs is to encourage coordination around emergency readiness among typical day-to-day competitors in the private health care sector, as well as other key community

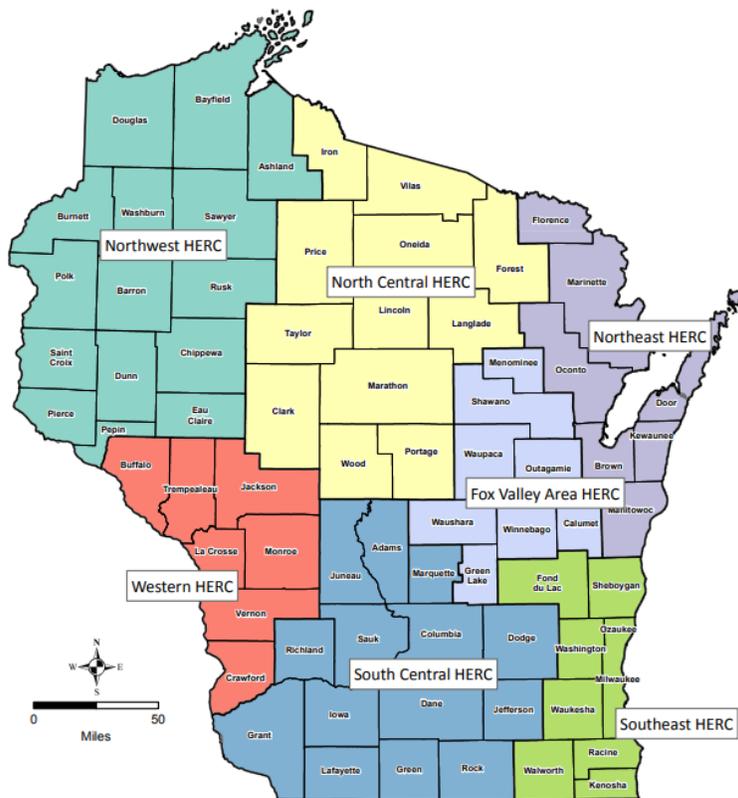


Figure 2: Map of Wisconsin's HERCs

partners. The federal program requires participation in each region from four sectors: 1) acute care hospitals; 2) emergency management; 3) emergency medical services; and 4) local public health agencies. In addition to these members, HERCs across Wisconsin have also engaged other valuable entities during a health emergency, such as law enforcement and fire departments, skilled nursing facilities, home health agencies, and medical equipment distributors. Each HERC has developed preparedness and response plans, offers training and exercises to its membership, and engages in a range of other capacity-development activities on an annual basis.

Nongovernmental Partner Organizations

Preparedness staff members at DHS also work with independent organizations to advance efforts to anticipate and address the needs of all of the people of Wisconsin during emergencies. Organizations like the American Red Cross, 211 Wisconsin, the Children's Health Alliance of Wisconsin, and the Council on Physical Disabilities have all played roles in contributing to health-related disaster planning with DHS. During the response to and recovery from the floods of 2018, Wisconsin Volunteer Organizations Active in Disasters (VOAD) served as a critical resource meeting the needs of people affected by the event. During emergencies, staff stationed at the SEOC regularly reach out to these types of partners for information and assistance. Likewise, the organizations often relay information from the field back to DHS for analysis and attention, enhancing situational awareness.

Resources

Achieving a continued state of readiness statewide requires ongoing attention and activity by all partners involved. Attention and activity requires resources to underpin those efforts.

Funding

Following the events of September 11, 2001, and the subsequent anthrax attacks, Congress first appropriated federal health emergency funding in 2002. To manage the funds and all associated activities, Wisconsin created two programs: PHEP and HPP.

Health preparedness efforts through DHS are still fully federally funded. The table below displays the funding amounts for the past two years. In addition to overall PHEP funds, the CDC allocation includes funding designated for the WSLH, which is a member of the nationwide Laboratory Response Network and one of 10 Level 1 chemical labs in the country. Having a lab of WSLH's caliber greatly enhances Wisconsin's ability to recognize and identify both chemical and biological agents of concern during an emergency.

Programs	SFY18	SFY19
PHEP	\$ 9,489,645.00	\$ 9,523,661.00
CRI	\$ 482,103.00	\$ 482,103.00
Level 1 Laboratory	\$ 1,445,235.00	\$ 2,590,435.00
HPP	\$ 3,634,631.00	\$ 3,596,704.00
Yearly Total	\$ 15,051,614.00	\$ 16,192,903.00

*State Fiscal Year (SFY)

The CDC also funds the Cities Readiness Initiative (CRI), a program designed to enhance preparedness in the nation's largest metropolitan areas by promoting the development, testing, and maintenance of plans to receive medical countermeasures from the country's [Strategic National Stockpile \(SNS\)](#). Wisconsin has seven counties and 18 health departments involved in CRI.² Two, Pierce and St. Croix counties, participate in the Minneapolis metropolitan statistical area, while the others collaborate around the Milwaukee area.

The table above displays the breakdown of grant funding for the 2018 and 2019 state fiscal years. From state fiscal year 2018 PHEP base funds, \$5.2 million funded preparedness personnel and activities for local and tribal public health entities, equaling 46% of the total PHEP allocation. The remaining funds went to the Public Health Information Network (PHIN) and the Wisconsin Electronic Disease Surveillance System (WEDSS), and supported further work within the WSLH. From state fiscal year 2017 HPP base funds, \$1.3 million went to the HERCs, equaling 36% of the total HPP allocation. The remaining funds

² Milwaukee County contains 12 health departments organized by municipal jurisdictions: City of Milwaukee, Cudahy, Franklin, Greendale, Greenfield, Hales Corners, North Shore, Oak Creek, St. Francis, and South Milwaukee.

were used to support the seven HERC coordinators that staff the coalitions, a project examining crisis standards of care in Wisconsin, and a range of statewide trainings and exercises.

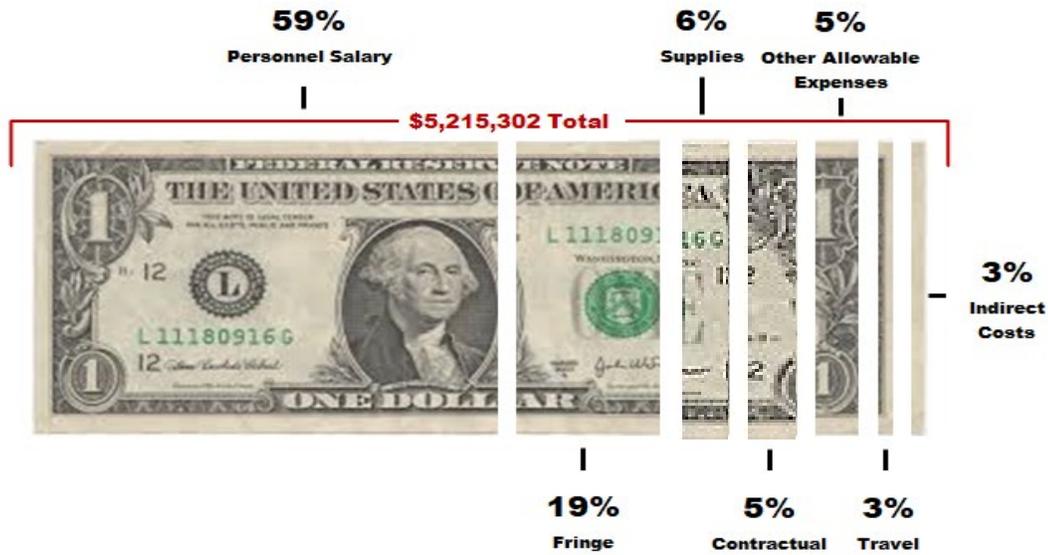


Figure 3: LPHA average budget breakdown

As shown in Figure 3, salary and fringe make up 78% of the average local or tribal health preparedness budget. Four Wisconsin counties use the entirety of their PHEP budget to fund their preparedness personnel. Without these investments, local and tribal health agencies, which are the first line of response during emergencies, would be unable to maintain their readiness for man-made or natural disasters.

Trainings, Conferences, and Learning Opportunities

In January 2019, OPEHC planned and offered the first state health preparedness conference in Stevens Point. Sessions discussed topics ranging from emerging infectious disease prevention; to exercise planning; to learning about the impacts of real world events, such as the mass shooting in Las Vegas; and lessons learned to improve hospital plans for mass casualty incidents. Reviews of the conference were overwhelmingly positive, and OPEHC’s intention is to make this conference an annual event.

To enhance frontline public health readiness, OPEHC offers scholarships to local and tribal health staff to enable them to attend other conferences with



Figure 4: Presentation from the 2019 HEP Conference

preparedness-related content to learn about best practices and new programs. Such conferences include the [National Association of County and City Health Officials \(NACCHO\) Preparedness Conference](#), the [Wisconsin Public Health Association \(WPHA\) annual conference](#), and the WEM Governor's Conference. Scholarships cover registration, transportation, and hotel costs. In state fiscal year 2019, this program supported 285 local public health staff from 71 local and tribal entities. Feedback from the scholarship recipients has been overwhelmingly positive. Many recipients reported that, due to budget restrictions, they would have been unable to attend any conferences without the scholarship.

Functional and Access Needs Mini Grants

During a disaster, everyone is at risk. However, past incidents have shown that those with access and functional needs have the highest rates of morbidity and mortality during disasters and emergencies.³ Individuals with access and functional needs have unique and complex needs, and require more support following a disaster. The best way to make sure that local health departments and tribal health centers meet these needs is to include individuals with those needs in planning efforts. In state fiscal year 2019, to support inclusive planning activities, OPEHC offered stipends to local public health agencies and tribal health centers. The local public health agencies and tribal health centers used these funds to support participation of people with disabilities, individuals with behavioral health conditions, and others with unique needs, in local or tribal emergency planning processes, trainings, and/or exercises.

Opioid Crisis Grants

In state fiscal years 2018 and 2019, Wisconsin received funding through a CDC Public Health Crisis grant to augment efforts to address a non-disaster type of public health emergency: the opioid epidemic. To ensure the support of collaborative activities to address this issue at the local, tribal, and regional levels, where they could do the most good, OPEHC awarded a portion of this funding to health preparedness partners. Local health departments, tribal health centers, regional trauma advisory councils, and health emergency readiness coalitions were all eligible to apply.

OPEHC awarded recipients no more than \$20,000 per applicant, but did allow collaborative efforts among multiple applicants. Recipients' projects included a number of unique and innovative activities and scopes of work. The majority of these projects

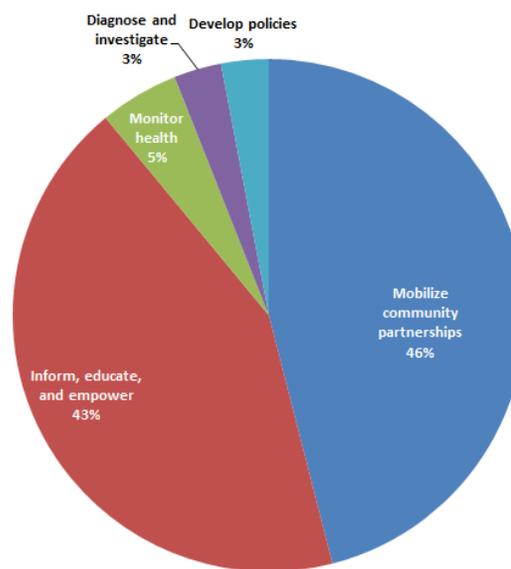


Figure 5: Mini Grantee Functions

³ Mace, Sharon; Doyle, Constance; et al. (2018). Planning Considerations For Persons With Access and Functional Needs In A Disaster. *American Journal of Disaster Medicine*.

focused on mobilizing community partnerships and information, educating, and empowering different populations, as shown in Figure 5.

Information Sharing Systems

Another set of resources that DHS supports to ensure the state's ability to respond in the event of a disaster are its information-sharing platforms. In health emergencies, sharing awareness of the effects of the emergency on hospitals can help to facilitate patient transfers, identify supply needs, and forecast future shortfalls. Wisconsin's EM Resource system (previously known as WI Trac) is a secure, password-protected, database-driven web application designed specifically to track hospital bed and pharmaceutical resource availability for hospitals. It also provides a system that allows state leaders to coordinate closely with hospitals to manage patients in large-scale mass casualty incidents.

The EM Resource system provides real-time tracking of:

- Bed availability status.
- Availability of other hospital and pharmaceutical resources.
- Emergency alert notifications and contingency planning.

The system is an integral and active part of emergency response in Wisconsin, with hospitals routinely utilizing the system in drills and exercises. Currently, DHS is expanding the system to include skilled nursing facilities across the state to reflect their bed availability.

Wisconsin also maintains a secure, web-based platform that contains a public health directory, document storage, and alerting capacity known as the Partner Communications and Alerting Portal, using Microsoft's SharePoint platform. Local public health agencies and tribal health centers regularly use this secure site for basic tasks, such as accessing tools and templates or submitting budgets and progress reports. This familiarity makes it easy for those same staff to use the platform during an emergency.

It is clear that effective communication among hospitals, law enforcement, firefighters, emergency medical services, and other response organizations is vital to an effective emergency response. However, in a number of high-profile disasters, responders reported a lack of interoperability between systems in the field, hindering response operations. The Wisconsin Interoperable System for Communications (WISCOM) is a statewide radio system designed to support public safety communications across all sectors. Training and exercising with WISCOM is critical to addressing interoperability issues.

DHS' health care preparedness program supported the installation of a WISCOM radio in every hospital in Wisconsin several years ago. WISCOM has the ability to enhance the range of communication for hospitals, and is particularly useful for rural access hospitals and air ambulance services. In state fiscal year 2017, through the healthcare coalitions, new, simplified instructional materials were provided to all facilities during face-to-face visits with a WISCOM subject matter expert. Regular tests of the system continue to be conducted statewide.

Conclusion

Health emergency preparedness and response work in Wisconsin is always moving forward and addressing the next challenge. A few of the major initiatives in the next two years include:

- Introduction of a statewide burn mass casualty plan;
- A major full scale exercise in Wisconsin Dells that will challenge hospital surge capacity during a mass casualty event.
- Coordination of public health readiness for a number of national and international events being hosted in Wisconsin in 2020.

In order to fulfill DHS' lead role to protect the health and safety of the people of Wisconsin during emergencies, staff will maintain the relationships and resources built over the last 15 years; use knowledge gained from trainings, exercises, and real world events to improve the department's ability to conduct responses; and build new capabilities and capacities as needed.

Appendix A: Acronym List

Acronym	
ASPR	Assistant Secretary for Preparedness and Response
BEOH	Bureau of Environmental and Occupational Health
CDC	Centers for Disease Control and Prevention
CRI	Cities Readiness Initiative
DEPER	Department's Enhanced Preparedness and Emergency Response
DHS	Department of Health Services
DNR	Department of Natural Resources
DPH	Division of Public Health
HERC	Healthcare emergency readiness coalition
HPP	Healthcare Preparedness Program
NACCHO	National Association of County and City Health Officials
OPEHC	Office of Preparedness and Emergency Health Care
PHAB	Public Health Accreditation Board
PHEP	Public Health Emergency Preparedness Program
PHIN	Public Health Information Network
SEOC	State Emergency Operations Center
SNS	Strategic National Stockpile
VOAD	Volunteer Organizations Active in Disasters
WEDSS	Wisconsin Electronic Disease Surveillance System
WEM	Wisconsin Emergency Management
WISCOM	Wisconsin Interoperable System for Communications
WPHA	Wisconsin Public Health Association
WSLH	Wisconsin State Lab of Hygiene

Appendix B: The Office of Preparedness and Emergency Health Care

Located within the Division of Public Health (DPH), OPEHC leads public health and healthcare sector emergency preparedness efforts for DHS. The office is also responsible for classification of Level 3 and 4 trauma centers and the licensing of emergency medical services in Wisconsin.

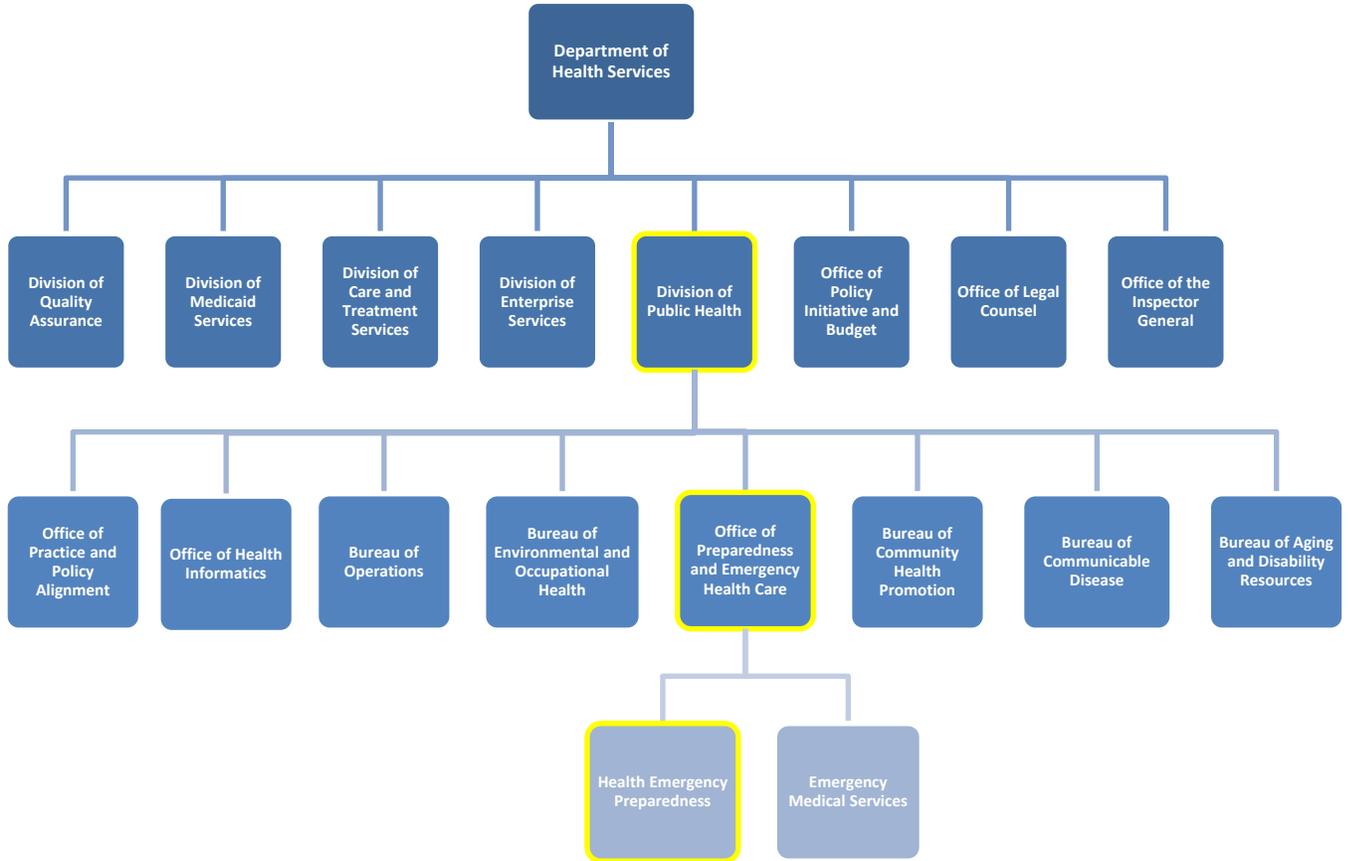


Figure 6: DHS Organizational Chart