

State of Wisconsin Department of Health Services

Tony Evers, Governor Kirsten L. Johnson, Secretary

October 21, 2025

The Honorable Tony Evers Governor 115 East State Capitol Madison, WI 53702

Dear Governor Evers:

The Department of Health Services (DHS) is pleased to submit to you the biennial report on the status of readiness for Health Emergencies in Wisconsin as required by Wis. Stat. § 250.03(3)(b).

Wisconsin's public health emergency preparedness programs continue 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.

The successes detailed in the report 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,

Kirsten L. Johnson Secretary-designee



Biennial Report on the Status of Readiness for Health Emergencies in Wisconsin (2023-2025)

Executive Summary

The Wisconsin Department of Health Services (DHS) is charged with administering programs for the control and prevention of public health issues. In the Division of Public Health (DPH), public health emergency preparedness and response professionals fulfill this responsibility through collaborative work with state boards and councils and public health partners from local, regional, Tribal, state, and federal levels. Over this last biennium DPH has expanded statewide preparedness work with local partners through technical assistance, distribution of funding, and program improvements. DPH has also demonstrated its response capabilities in supporting the Republican National Convention, National Football League Draft, and responding to a measles outbreak.

Key preparedness initiatives highlighted in this report include:

- Providing 36 local health departments with information on power dependent individuals in their communication areas following a spring 2025 severe weather event.
- Distributing approximately \$5 million annually in public health emergency preparedness (PHEP) funding to local and Tribal health departments.
- Launching the Wisconsin Public Health Emergency Management Certification (WPHEM) program to recognize the professional expertise and specialty subset in public health.
- Developing a Public Health Emergency Preparedness (PHEP) toolkit that includes exercise starter kits that can be customized locally to create discussion-based exercises to validate plans and policies.

Preparedness and Response

DPH established partnerships along with a multidisciplinary approach to disaster preparedness and response is key towards a successful incident outcome. DPH incorporates a collaborative effort and mechanisms to implement preparedness and response practices across different agencies, associations, councils, and alliances. Staff participate on the Homeland Security Council, Wisconsin Emergency Management Interagency Group and National Qualification Review Board, Wisconsin State disaster Medical Advisory Committee, Wisconsin Homelessness forum, Wisconsin Association of Hazardous Materials Responders and Mortuary Affairs group, to name a few.

The following public health and health care partnership highlights include a sample of DPH's concerted work with various organizations and sectors but is not inclusive of all of the partnerships and collective work that supports public health preparedness and response.

Internal Resources

DPH On-Call Teams

DPH maintains 24/7 technical support teams to provide advice or assistance to public health partners such as health care providers, local and Tribal public health, laboratories, government agencies, and emergency responders in response to public health concerns and emergencies. DPH has four on-call teams consisting of Chemical and Natural Disasters in the Bureau of Environmental and Occupational Health (BEOH) Health Assessment Section, Communicable Diseases in Bureau of Communicable Disease (BCD), Human Services in the Office of Preparedness and Emergency Health Care (OPEHC), and Nuclear and Radiological team in BEOH Radiation Protection Section.

On average, DPH receives approximately 200 calls each year with requests for technical assistance and notifications regarding possible rabies exposures, organ donor assistance, Avian Influenza, Tuberculosis, Botulism, emPOWER data requests, chemical spills, and more.

emPOWER Program

The emPOWER program is a partnership between the Administration for Strategic Preparedness and Response (ASPR) and the Centers for Medicare & Medicaid Services with states, providing data to help communities protect the health of Medicare beneficiaries who live independently and rely on electricity-dependent medical equipment and health care services. Local incidents, such as prolonged power outages and large-scale emergencies or disasters, can rapidly put these individuals into life-threatening situations. During periods where extended power outages are anticipated or actively occurring, local and Tribal health departments can request an identifiable emPOWER dataset.



Up until 2024, the emPOWER program only contained federal Medicare data. Medicare data includes adults who are 65 and older and those that are dual eligible for both Medicaid and Medicare. In 2024, DHS expanded the program within Wisconsin to include state Medicaid data which consists of adults aged 18–64 and children who are enrolled in Medicaid. By including Medicaid data, this increased the number of individuals that local jurisdictions can help. This way, the local jurisdictions receive an additional data set

they can use to reach an expanded group of individuals who are power dependent for their medical

devices. Without the Medicaid data set, only Medicare recipients who are 65 plus would be reached. In Wisconsin, there are 66,331 Medicare and Medicaid beneficiaries who are currently in the emPOWER Program.

During this report period, DPH received 45 requests from local public health partners for emPOWER data in preparation for severe weather that could result in power outages. Of those requests received, 36 used the information for their preparedness and response efforts.

DHS Functional Assessment Service Team (FAST)

When Wisconsin residents are displaced from their homes during a disaster and find it necessary to stay in a community emergency shelter, it is essential that community officials, responders, and shelter managers be prepared to provide service and reasonable accommodations to all shelter residents, including those with disabilities, access, and functional needs. A FAST is a team of two to eight trained members that:

- Evaluate the needs people may have to determine whether they can be supported within a reception center or shelter.
- Help response staff distinguish between people who have access and functional needs from those who have medical needs.
- Understand behavioral health, physical disabilities, chronic health conditions, and has local community knowledge of languages, culture, and available resources.



OPEHC is reinvigorating this statewide initiative to identify, recruit, and train partners to rebuild the FAST program capabilities.

Medical Countermeasures (MCM) Planning

ASPR requires that states maintain a Receive, Stage, and Store facility to receive, store, and process orders for MCM distribution to local jurisdictions to assure we are able to expeditiously request, receive, and distribute MCM's received from the Strategic National Stockpile to our partners. The facilities must be validated by ASPR every three years to assure storage and security criteria are adequate. During this report period covering State Fiscal Year beginning July 1, 2023, through June 30, 2025, the MCM coordinator convened ASPR representatives, local law enforcement, Wisconsin State Patrol, and the United States Marshal Service at the private warehouse locations to conduct the successful validation in August of 2022. At the time of this document's publication, DHS has successfully completed the most recent ASPR validation in August 2025. In addition, there are 37 CHEMPACK containers in Wisconsin which enhance our states capability to respond to nerve agent incidents and organophosphate releases. CHEMPACK containers carry potent antidote and symptomatic treatments for use by first responders in the event of a nerve agent attack or unintentional release. The CHEMPACK program's role includes serving as a liaison to ASPR and host

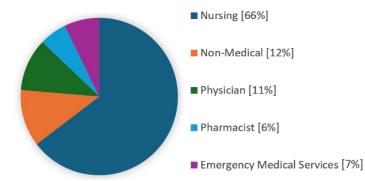
facilities for sustainment, and other logistical activities. Over the course of the last two years, DHS has provided local and Tribal health agencies, emergency management, hospitals, EMS, and dispatch partners with 16 training sessions, a seminar, and three in-person conference sessions along with resources needed to plan and exercise the deployment of the antidotes.

Wisconsin Emergency Assistance Volunteer Registry (WEAVR)

WEAVR, per <u>Wis. Stat. §257.02</u>, is a statewide system designed to pre-register, manage, and deploy both clinical and non-clinical volunteers in response to all types of disasters and public health emergencies. As part of a national effort to ensure rapid and effective mobilization, WEAVR facilitates the swift identification and credential verification of qualified volunteers, enabling safe and appropriate assignments where they are most needed. The system is administered by DHS through its Health Emergency Preparedness (HEP) Section in OPEHC and serves as Wisconsin's implementation of the Emergency System for Advance Registration of Volunteer Health Professionals (ESAR-VHP), a federal initiative to build a coordinated, interoperable network of emergency health volunteers nationwide.

Currently, Wisconsin has 12,591 registered volunteers in WEAVR. Local and Tribal health agencies, along with the Medical Reserve Corps, have access to and can utilize WEAVR during emergencies or

disasters. The chart lists the top five groups currently listed in the WEAVR registry by occupation. Nursing includes registered nurses, public health nurses, and certified nurse assistants. Emergency Medical Services (EMS) includes emergency medical responders, emergency medical technicians, advanced emergency medical technicians, and paramedics.



Technical Assistance

DPH provides technical assistance through regularly scheduled meetings and webinars. A few examples of these include:

- BEOH's Climate and Health Program offers climate focused heat, flooding, air quality and climate communications technical assistance presentations on an as-needed basis for local public health, Tribal health agencies, and community partners.
- Bi-weekly PHEP update calls where local and Tribal PHEP partners join to receive timely updates to the PHEP program and to hear from guest speakers who are subject matter experts in the field of public health.
- Bi-weekly PHEP open office hour calls are hosted by OPEHC staff and an opportunity for local and Tribal preparedness staff to ask questions and obtain technical assistance with budgets, reporting requirements, or other PHEP related topics.

• On the first Friday of each month the BCD hosts webinars for health care providers that offer timely updates on public health issues.

External Partners

Healthcare Emergency Readiness Coalitions (HERC) and HERC Coordinators

The establishment and maintenance of the HERCs is a Hospital Preparedness Program (HPP)

Cooperative Agreement grant requirement from the Administration Strategic Preparedness and Response (ASPR). Wisconsin has seven HERC regions with a board consisting of representatives from police, fire, EMS, hospitals, nursing homes, Tribal partners, emergency management, and HERC coordinators, who work collaboratively on phases of health care emergency management within their communities.



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HERC coordinators work as direct conduits between Wisconsin HPP staff and HERCs. They meet regularly with Wisconsin HPP staff to plan and prepare for the overall direction of the coalitions. This consistent collaboration positively impacts the ongoing health care emergency preparedness work at the regional level.

Emergency Medical Services-Children (EMSC) Grant

In Wisconsin, the federally funded EMSC <u>program</u> aims to expand the capacity and improve the quality of pediatric emergency care across pre-hospital and hospital-based settings in Wisconsin. The program is administered through DPH and managed through close collaboration between DPH and the Children's Health Alliance of Wisconsin. Program staff also coordinate with other related program areas and organizations including the Statewide Trauma Program, Wisconsin Statewide Trauma Advisory Council (STAC), Regional Trauma Advisory Council (RTAC), HERCs, HPP, hospitals, and EMS agencies, among others. Core functions focus on achieving the nine nationally designated <u>performance measures.</u>

Region V Emerging Special Pathogen Treatment Centers (RESPTC)

Corewell Health in Michigan and the University of Minnesota Medical Center are two of the 13 federally funded RESPTCs. These RESPTC Programs work to enhance and support the National Special Pathogen System of Care to safely and effectively manage special pathogen response. Wisconsin HPP has recently partnered with Corewell Health to begin implementing steps for future planning and to improve readiness for the RESPTCs and their Wisconsin partners. The focus is primarily around potential responses to incidents involving special pathogens. Some of this collaboration has included providing opportunities for the Region V RESPTCs to get their messages out, sharing RESPTC information with pertinent partners, and helping connect the RESPTCs to additional partners, hospitals and EMS agencies across Wisconsin for training and education purposes.

Wisconsin State Lab of Hygiene (WSLH)

WSLH and DPH partnered to develop real time response capability for chemical threat events related to fentanyl, other fentanyl analogs, and toxins. It has been a known detection capability gap in the response community as first responders and state HazMat teams have limited general field screening capabilities with presumptive field identification of potential threat substances.

In response to this capability gap, WSLH worked with DPH and Wisconsin HazMat team members to develop a presumptive threat detection screening process that provides reasonable results within a few hours so first responders and local and state decision makers, have the information they need to manage these response events. This screening was employed for multiple chemical threat events in Wisconsin around the 2024 election season and into 2025.



Large Scale Planned Events and Emergency Response

DPH plays a crucial role in ensuring the public health of Wisconsin residents by working to prevent and control disease, promote healthy lifestyles, and address other public health concerns in accordance with Wis. Stat. § 250.042(3)(a). In support of this, DPH has a comprehensive document that outlines the procedures and in the event of a public health emergency incident called the Emergency Operations Plan (EOP). This plan provides a roadmap for DPH in roles and responsibilities during an incident, describes notification, decision-making, and documentation processes used to address incidents. The EOP consists of two parts: first, the base plan that provides an overview of response information; and second, functional annexes that include additional information based on certain incident types.

The plan is assessed during both exercises and actual incidents for areas where changes, updates, or improvements could be made and is updated based on that feedback and information on an annual basis. The following section identifies some of the planned largescale events and incident responses that utilized the guidance in the EOP to structure responses in a way that minimizes the impacts and risks often related with emergencies and retore normal operations.

2024 Republican National Convention (RNC)

DPH participated in the planning for and support of the City of Milwaukee for the July, 2024 RNC. This convention is categorized as a large scale National Special Security Event and was spread across several different venues in the Milwaukee area.

In coordination with local, regional, state and federal partners, OPEHC led the preparedness effort for DHS staff that supported the event in different areas of their own specific expertise. OPEHC's objectives included:

- Work with state and local partners to create preparedness plans for the event.
- Activate a virtual Public Health Emergency Operations Center during the event.
- Share and receive information during the event to maintain a common operating picture.
- Co-lead the public health surveillance team with City of Milwaukee Health Department.

National Football League (NFL) Draft

The NFL Draft occurred April 24–26, 2025. It was the 90th annual meeting of the NFL franchises to select newly eligible players and was marketed as a family friendly event with estimated attendance to be approximately 300,000 attendees across the three days. While it is not considered a National Special Security Event, it is designated as a Special Event Assessment Rating by the United State Secret Service.

DPH support the event by providing state resources including the OPEHC epidemiologist who led the public health surveillance workgroup, an incident management team member supported the local unified command structure on operations, tracked medical surge via EMResource for hospitals in the impacted areas, brought together area local and Tribal health departments in the area of infectious disease, syndromic and water surveillance, and maintained situational awareness throughout the event in case additional support was needed.

2024 Hospital Closures Response

In 2024, HSHS and Preva announce closures of HSHS Sacred Heart in Eau Claire and HSHS St. Joseph's Hospital in Chippewa Falls. Impacts to Wisconsinites include access to trauma and primary care in the region, the loss of a CHEMPACK hospital site, the state's only Ebola assessment center, and Wisconsin's designated radiological emergency response hospital in support of the Prairie Island Nuclear Generating Plant.

DPH supported the local community in the following ways:

- Weekly check-in meetings with OPEHC, HERC, and RTAC representatives.
- Division of Quality Care assisted with technical assistance regarding records retention, providing records and alternative care, investigating alternative placements for residents of Sacred Heart, and notification of facility closures to patients.
- Division of Care and Treatment Services was engaged surrounding loss of substance use disorder and behavioral health services.
- DHS leadership met with surrounding impacted health systems and provided support where possible as neighboring hospitals experienced an influx in patients and increased demand for certain services.

- OPEHC coordinated the relocation of the CHEMPACK assets to a temporary location in the Milwaukee area.
- Together, OPEHC and BCD assisted in changing over from specifically identified Ebola assessment centers to frontline facilities serving as High Consequence Infectious Disease assessment facilities.

The DHS Trauma Team collaborated with trauma program coordinators at remaining Eau

Claire trauma centers to monitor impacts and provide technical assistance.

- Leveraged EMResource to monitor and report regional bed capacity and capabilities through data visualizations and situational awareness for public health and health care partners.
- Assisted Eau Claire Public Health with the development of data visualizations showing the impact of the closures on residents' access to care.



2024 Southern Wisconsin Measles Response

On April 15, 2024, DHS notified Public Health Madison & Dane County (PHMDC) of a potential measles contact on a flight. After further investigation and testing, the contact's partner was confirmed to have measles. Rock County Public Health (RCPH) was notified of the confirmed case as the individual had multiple exposure events in Rock County, including a large exposure event at SSM Health in Janesville.

Following notifications, local health departments, including PHMDC, RCPH, and Walworth County Health and Human Services, worked with SSM Health, DHS, and other state partners to prevent further spread of the virus. The response concluded on May 14, 2024.

The Immunization Section of the BCD continues to prepare for any future vaccine preventable disease outbreaks by readying and updating internal processes and documents, including updating written surveillance and control guidance documents, collaboratively drafting a concept of operations that will complement the DPH EOP, pre-identifying the Division's response structure between BCD and OPEHC if Wisconsin were to have another measles outbreak and working closely with the Wisconsin State Laboratory of Hygiene regarding laboratory testing.

Additionally, the section is working with external partners by providing training, education, and resources for local and Tribal public health departments, health care partners and schools, as well as providing communications and raising awareness about the importance of measles vaccination to the general public.

High Pathogen Avian Influenza A (H5N1)

From 2024–2025, the CDC confirmed that humans in the U.S. have tested positive for H5N1, also known as bird flu. The 2023–2025 H5N1 response was more complex compared to other H5N1 responses. Nationally, beginning in the spring of 2024, for the first time, dairy cattle infected with H5N1 were identified, first in Texas and then across the country. Also, in the spring of 2024, a large number of human infections were reported in the United States associated with exposure to infected poultry or dairy cattle.

During 2023–2025 biennium, there were 11 poultry farms infected with H5N1 in Wisconsin and only one poultry farm worker infected. No infected dairy cattle have been identified in Wisconsin to date.

The emergence of H5N1 in dairy cattle lead to response activities at DHS in preparation for potentially infected dairy cattle being identified in Wisconsin. Response activities involved coordination between OPEHC, BCD, and BEOH within DPH. Specific response activities included:

- Distributing personal protective equipment to occupations at risk.
- Ensuring access to treatment and post exposure prophylaxis.
- Updating guidance for local and Tribal health departments.
- Farmworker outreach.
- Increased influenza subtyping.
- Wastewater surveillance for Influenza A also known as H5.

DPH continues coordination with multiple other state agencies including, Department of Agriculture Trade and Consumer Protection, Department of Natural Resources, WSLH, and Wisconsin Veterinary Diagnostic Laboratory.

Chemical Emergency Response Incidents

From 2023–2025, WSLH Laboratory Response Network- Chemical (LRN-C) and DPH supported over 65 chemical emergency response events related to public health, safety, and credible threats. This WSLH response work included providing 24/7 technical support for reach back with the 25 Wisconsin State Asset HazMat Team locations. Additionally, the WSLH LRN-C provided expert training to the first responder and public health communities of Wisconsin. Between 2023 and 2025 WSLH provided over 33 training sessions for approximately 775 first responders and public health personnel.

Training included topics such as response protocols for handling unknown substances and credible threats, HazMat sample collection for potential threat samples, advanced spectroscopy equipment instruction for HazMat teams when working with unknowns or credible threats, and WSLH resources available to support public health and safety response efforts.

Trainings, Conferences, and Learning Opportunities

Wisconsin Public Health Emergency Management (WPHEM) Certification Program

There has been a longstanding movement to build a more collaborative relationship between Public Health Emergency Preparedness and Emergency Management as demonstrated by public health involvement in emergency incidents such as the 2021 Waukesha Christmas parade attack, June 2022 South Milwaukee citywide water loss due to storm damage, and annual support of the Prairie Island Nuclear Generating Plant, and NextEra Energy's Point Beach nuclear power plant full scale exercises, public health responses go beyond the focus of outbreaks only.

Developed in 2024, the WPHEM certification program is a public health emergency management professional development program. The intent of the program is to promote the emerging and evolving discipline within public health emergency management.

The program requires that candidates complete a series of professional development courses and pass a proctored, multiple-choice exam that consists of questions related to knowledge of public health emergency management and preparedness, and public health emergency powers as defined in <u>Wis. Stat. ch. 323</u> and <u>Wis. Stat. § 250.042</u>, respectively.

The WPHEM program is designed to equip seasoned and new personnel in the public health field who have emergency preparedness responsibilities with the knowledge, skills, and abilities to effectively plan, respond, and recover from disasters affecting their community, forming an all-hazards approach to do so.

Wisconsin Recovery Task Force (WRTF) – Bright Horizons Recovery Exercise

Wisconsin Emergency Management's Wisconsin Recovery Task Force (WRTF) hosted the 2024 Bright Horizons Recovery Exercise, the first of its kind in the state to focus exclusively on recovery from an emergency incident rather than initial response. Conducted over four weeks, the exercise engaged state agencies, counties, Tribal nations, and non-governmental organizations in a comprehensive, scenario-based recovery effort.

DPH led the Health and Social Services Subcommittee of the WRTF, coordinating participation from a broad range of organizations and agencies. These included the American Red Cross, U.S. Department of Housing and Urban Development, United Way 211, Wisconsin Volunteer Organizations Active in Disaster United Methodist Committee on Relief, Salvation Army, Wisconsin Department of Children and Families, WEM, Department of Health Services' Division of Care and Treatment Services, and Federal Emergency Management Agency partners.

Lessons learned from this groundbreaking exercise will be instrumental in strengthening Wisconsin's ability to plan for and conduct effective recovery operations. Additionally, the exercise reinforced the

critical importance of strong partnerships among government, non-governmental, and private sector entities with are vital to future response and recovery efforts.

Wisconsin Governor's Conference on Emergency Management and Homeland Security—Public Health Tract

Each year WEM hosts the Governor's Conference on Emergency Management and Homeland Security focused on building resilience and preparing communities for emergencies, with sessions covering communications, public health, private sector, emergency response, and homeland security, with a different theme each year that is current and relevant for partners.

Beginning in 2022 a specific Public Health and Community Resilience tract was added as a permanent offering for the conference with sessions on health care emergency preparedness, public health preparedness systems, emergency human services, medical countermeasures, and public health preparedness resources.

OPEHC assist with identifying opportunities and coordinating these presentations.



Both the awareness of and interest in this conference tract has grown over time with requests from attendees that continues to grow and include more ways that public health and emergency management can work together in emergency preparedness and response efforts.

Trauma Program Educational Courses

In October of 2021, the Wisconsin Trauma Care System (WTCS) implemented new standards for trauma centers to meet through the administrative rule making process. In 2019, 7% of Wisconsin hospitals were not classified as trauma centers. By 2023 this increased to 19% of Wisconsin hospitals not classified as trauma centers. Through data and one-on-one meetings, it was discovered that there was a lack of knowledge regarding the new criteria and performance improvement processes.

In response, WTCS staff developed and implemented Trauma Program 101 and 201 courses, training 100 participants on trauma program basics (101) and 49 participants on trauma performance improvement criteria and best practices. Also developed and implemented were Trauma Registry 101 and 102 courses. Trauma Registry 101 and 102 courses trained 52 participants on data entry and utilization. In addition, \$40,945 was allocated for supplemental education courses through RTACs for trauma center staff in SFY25.

Integrated Preparedness Plan

Wisconsin's PHEP and HPP programs each conduct activities with respect to the specific requirements, goals, and expectations associated with each individual program striving towards continuous quality improvement using nationally recognized processes, such as the Homeland Security Exercise and Evaluation Program (HSEEP) cycle of planning, training, exercising, and incorporating lessons learned and corrective actions. Also utilized at the PHEP Capabilities Planning Guide as an assessment tool to measure progress as we close gaps in prioritized capabilities.

The purpose of an IPP is to lay the framework for an effective and evolving sequence of training and exercise activities by establishing strategic priorities that support emergency preparedness goals for public health departments, health care organizations, and the Wisconsin Department of Health Services. It is designed to be implemented in coordination with partners including WEM and HERC regions. OPEHC reviews and updates the IPP annually based on information gathered during incidents, drills and exercises, large scale planned events, and as needed to adjust to changes in organization, authorities, or capabilities.

Exercise Starter Toolkits

The OPEHC Training and Exercise Coordinator developed a PHEP Toolkit for local and Tribal public health partners, including exercise starter toolkits (EST's) that are HSEEP compliant document templates, PowerPoint templates, games, and other resources. The exercise current topics include:

- Administrative Emergency Response Planning
- Cyber Security
- Chemical/Biological Preparedness
 - o Communicable Disease
 - Infectious Disease
 - o MCM
- Large Scale Population Movement & Resettlement
- Radiological Incidents
- Reunification
- Supply Chain



Boards and Councils

DHS is committed to protecting and promoting the health and safety of the people of Wisconsin. One way this is accomplished is through state boards and councils comprised of public health and health care subject matter experts that relate to partners whose primary purpose it is to advise state

public health and elected officials on policies, rules, and regulations. The following are some of these external community partners specific to public health and health care emergency preparedness.

Public Health Emergency Preparedness Advisory Committee (PHEPAC)

The establishment and maintenance for the PHEPAC is a programmatic requirement of the PHEP cooperative agreement from the Centers of Disease Control and Prevention (CDC). Membership of the PHEPAC consists of representatives from a broad base of partners including Wisconsin Association of Local Health Departments and Boards, Wisconsin Public Health Association, local health agencies, Tribes, Wisconsin State Laboratory of Hygiene, the Office on Aging and Disability, human services, Wisconsin Emergency Management (WEM), DPH staff from the Hospital Preparedness Program (HPP), PHEP, and other community sector partners as needed based on the work of the PHEPAC.

The PHEPAC meets quarterly to provide recommendations to DHS on public health emergency preparedness policy and PHEP specific program and resource allocation to support Wisconsin's goal to effectively and efficiently prepare for and respond to public health incidents. Additionally, the PHEPAC can make recommendations to the Public Health Council on priorities and strategies to achieve this similar goal.

Healthcare Emergency Readiness Coalition Advisory Group (HERC AG)

The establishment and maintenance of the HERC AG is an HPP Cooperative Agreement grant requirement from ASPR. The HERC AG primarily consists of representatives from government, non-governmental organizations, and private entities. Some of these partners include the Wisconsin Hospital Association, University of Wisconsin Hospitals and Clinics Special Pathogens Workgroup, Emergency Medical Services for Children (EMSC), the Wisconsin Primary Health Care Association, hospitals, and Emergency Medical Services (EMS) agencies. The HERC AG advises on issues that Wisconsin HPP staff and HERC coalitions face when working towards completing cooperative agreement deliverables.

Statewide Trauma Advisory Council (STAC)

Per <u>Wis. Stat. § 15.197(25)</u>, the Statewide Trauma Advisory Council (STAC) shall consist of the following members who have an interest and expertise in EMS and who are appointed by the DHS Secretary, four physicians who represent urban and rural area, two registered nurses, as defined in <u>Wis. Stat. § 146.40(1)(f)</u>, two prehospital emergency EMS providers, including one representative of a municipality, two representatives of a rural hospital, two representatives of an urban hospital, and one member of the EMS Advisory Board.

The Wisconsin trauma care system aims to ensure that all trauma patients in the state of Wisconsin receive comprehensive trauma care. STAC advises the department on the development, implementation and evaluation of the statewide trauma care system.

Regional Trauma Advisory Council (RTAC)

An RTAC is a group of health care organizations, first responder agencies, and public safety and public health partners collaborating to develop, implement, monitor, and improve their regional trauma system. Wisconsin has established seven RTACs that align with the seven <u>HERCs</u>.

In order to serve their purpose, RTACs are charged with doing all of the following:

- Establishing an executive council that reflects professional representation from out-of-hospital providers, trauma care facilities, education and injury prevention.
- Analyzing local and regional trauma registry data.
- Creating a local and regional performance improvement process.
- Developing and implementing injury prevention and education strategies based on performance improvement findings.
- Developing and submitting to DHS a regional trauma plan based on a needs assessment.
- Developing regional triage and transport protocols.

Bleeding control, including Stop the Bleed kits, continues to be a priority for our Regional Trauma Advisory Councils. In SFY23 a total of \$40,678.38 and in SFY24 a total of \$17,719.00 was dedicated to training and equipment.

Conclusion

The ability to sustain an effective emergency preparedness and response capability are crucial for protecting lives and minimizing the impacts from various public health threats. This biennial report highlights some of the work performed by the which supports that effort on a daily basis.

DPH continues to maintain and grow partnerships, provide and support training opportunities for public health partners, and support large scale planned events and emergency incidents. With continued federal funding for public health preparedness and response, programs that support a qualified, knowledgeable, and well-prepared public heath workforce will remain strong.