Northwest WI Healthcare Emergency Readiness Coalition (NWWIHERC) & Western WI Public Health Readiness Consortium (WWPHRC)
BP 1 Regional Exercise: Holiday Festivities

After-Action Report/Improvement Plan

May 22, 2019

The After-Action Report/Improvement Plan (AAR/IP) aligns exercise objectives with preparedness doctrine to include the National Preparedness Goal and related frameworks and guidance. Exercise information required for preparedness reporting and trend analysis is included; users are encouraged to add additional sections as needed to support their own organizational needs.

EXERCISE OVERVIEW

Exercise Name	Holiday Festivities
Exercise Dates	Regional Functional Exercise: Tuesday, April 23, 2019, 1000-1500
Scope	The Regional Exercise is a large scale TTX exercise with functional elements held at Wisconsin Indianhead Technical College in Rice Lake, WI. Exercise play is limited to appropriate NWWIHERC and WWPHRC partners.
Mission Area(s)	Response
Core Capabilities	Operational Coordination (Emergency Operations Coordination) (EOC) Emergency Public Information and Warning (Public Information and Warning) (EPIW) Operational Communication (Information Sharing) (IS) Fatality Management (FM)
Objectives	(EOC) Ensure coordinated response throughout simulated event by activating and sustaining the incident command system. (EPIW) Deliver coordinated, prompt, reliable, and actionable information to the whole community through the use of clear, consistent, accessible, and culturally and linguistically appropriate methods to effectively relay information regarding any threat or hazard, as well as the actions being taken and the assistance being made available, as appropriate. (IS) Ensure the capacity for timely communications in support of security, situational awareness, and operations by any and all means available, among and between affected communities in the impact area and all response forces. (FM) Ensure coordinated response throughout simulated event by activating and sustaining the capability of fatality management.
Threat or Hazard	Act of Violence: Truck drives down crowded parade route causing mass injury and fatalities for unknown reason. Loss of power due to crash into power pole.

Scenario	It is the 4th of July and the local community is hosting the annual parade down main street. Suddenly a truck drives through the crowd for an unknown reason, striking and injuring multiple victims. The truck is stopped when it strikes a power pole, thus knocking out power to part of the town including a long term care facility. Family reunification, patient tracking, and restoration of power are key elements of this exercise.
Sponsor	Northwest Wisconsin Healthcare Emergency Readiness Coalition, WWPHRC, and WI Office of Preparedness and Emergency Health Care with funding from Healthcare Preparedness Program (HPP) ASPR Grant.
Participant Feedback	See Appendix A
Participating Organizations	See Appendix B
Points of Contact	Aimee Wollman Nesseth Program Coordinator Northwest Wisconsin Emergency Readiness Coalition 1003 Prairie Circle Menomonie, WI 54751 aimee.wollmannesseth@wisconsin.gov 715-379-6664 Brittany Fry Director Western Wisconsin Public Health Readiness Consortium 100 Polk Plaza Balsam Lake, WI 54012 715-485-8801 brittany.fry@co.polk.wi.us www.wwphrc.org

ANALYSIS OF CORE CAPABILITIES

Aligning exercise objectives and core capabilities provides a consistent taxonomy for evaluation that transcends individual exercises to support preparedness reporting and trend analysis. Table 1 includes the exercise objectives, aligned core capabilities, and performance ratings for each core capability as observed during the exercise and determined by the evaluation team.

Objective	Core Capability	Performed without Challenges (P)	Performed with Some Challenges (S)	Performed with Major Challenges (M)	Unable to be Performed (U)
Ensure coordinated response throughout simulated event by activating and sustaining the incident command system.	Operation Coordination Emergency Operations Coordination		**S**		
Ensure continuous, timely, and coordinated public information dissemination.	Emergency Public Information and Warning Public Information and Warning		**S**		
Ensure situational awareness throughout simulated event by maintaining a common operating picture.	Operational Communication Information Sharing			**M**	

Objective	Core Capability	Performed without Challenges (P)	Performed with Some Challenges (S)	Performed with Major Challenges (M)	Unable to be Performed (U)
Ensure coordinated response throughout simulated event by activating and sustaining the capability of fatality management.	Fatality Management			**M**	

Table 1. Summary of Core Capability Performance

Ratings Definitions:

Performed without Challenges (P): The targets and critical tasks associated with the core capability were completed in a manner that achieved the objective(s) and did not negatively impact the performance of other activities. Performance of this activity did not contribute to additional health and/or safety risks for the public or for emergency workers, and it was conducted in accordance with applicable plans, policies, procedures, regulations, and laws.

Performed with Some Challenges (S): The targets and critical tasks associated with the core capability were completed in a manner that achieved the objective(s) and did not negatively impact the performance of other activities. Performance of this activity did not contribute to additional health and/or safety risks for the public or for emergency workers, and it was conducted in accordance with applicable plans, policies, procedures, regulations, and laws. However, opportunities to enhance effectiveness and/or efficiency were identified.

Performed with Major Challenges (M): The targets and critical tasks associated with the core capability were completed in a manner that achieved the objective(s), but some or all of the following were observed: demonstrated performance had a negative impact on the performance of other activities; contributed to additional health and/or safety risks for the public or for emergency workers; and/or was not conducted in accordance with applicable plans, policies, procedures, regulations, and laws.

Unable to be Performed (U): The targets and critical tasks associated with the core capability were not performed in a manner that achieved the objective(s).

The following sections provide an overview of the performance related to each exercise objective and associated core capability, highlighting strengths and areas for improvement.

Objective 1:

Ensure coordinated response throughout simulated event by activating and sustaining the incident command system.

Core Capability 1:

Operational Coordination (Emergency Operations Coordination). Ensure and maintain a unified and coordinated operational structure and process that appropriately integrates all critical stakeholders and supports the execution of core capabilities.

Capability Target:

1. Work within the ICS structure.

   Critical Tasks:

   - Activate ICS
   - Respond within scope of ICS structure.
   - Distinguish between Incident Command and Unified Command.
   - Implement incident communications interoperability plans and protocols.
   - Communicate incident response information.
   - Provide direction, information, and/or support as appropriate to Incident Command or Unified Command.
   - Coordinate and provide telecommunications and information technology support to Federal, regional, State, tribal, and local officials and the private sector(s).
   - Identify who in each organization will perform what role.
   - Determine how each role will be provided the responsibilities.

Regional Exercise Strengths

The **partial** capability level can be attributed to the following strengths:

Strength 1: Participants clearly articulated which agencies would be responsible for immediate scene response and on scene Incident Command.

Strength 2: Many partners utilize the Incident Command System within their own agencies and organizations and have an increasing level of comfort with this system.

Strength 3: Several counties expressed having good relationships with neighboring counties for mutual aid resources as needed.

Overall Strength:

Familiarity with the Incident Command System exists with many partner agencies. This familiarity helps these organizations integrate with other responding agencies in the event of an emergency or community disaster.

Regional Exercise: Areas for Improvement

The following areas require improvement to achieve the full capability level:

Area for Improvement 1: While some agencies are very familiar with the Incident Command concept, others are new to the Incident Command System and need a better understanding of what ICS is, and how it can benefit their own organization as well as integrate them with other response agencies.

Area for Improvement 2: Incident Command conversations reflected internal processes within organizations. The concept of a Unified Command in this type of community wide event is still a relatively new concept.

Overall Area for Improvement:

There is an identified need to continue to provide ongoing education regarding the Incident Command System for all healthcare partners. Developing strategies to use social media platforms to the advantage of response was identified as an operational need.

Objective 2:

Ensure continuous, timely, and coordinated public information dissemination.

Core Capability 2:

Emergency Public Information Sharing and Warning (Public Information and Warning): Deliver coordinated, prompt, reliable, and actionable information to the whole community through the use of clear, consistent, accessible, and culturally and linguistically appropriate methods to effectively relay information regarding any threat or hazard, as well as the actions being taken and the assistance being made available, as appropriate.

Capability Target:

1. Determine Public Information Officer/Joint Information Center and communication mechanisms for the incident.

   Critical Tasks:

   - Identify who will be the PIO/JIC team.
   - Determine modalities for communication.
   - Determine what is being shared.

Regional Exercise Strengths

The **partial** capability level can be attributed to the following strengths:

Strength 1: Many participating organizations have identified Public Information Officers who have received some training in this specific role.

Strength 2: There was good discussion regarding what types of messages would need to be shared with the public during this event and the need for a joint and consistent message from responding agencies.

Strength 3: Most Counties have public information sharing platforms that are used regularly for weather alerts and other messages.

Overall Strength:

Most Counties have developed modalities for public information sharing and warning and continue to build this capability to reach the public in a disaster. Many organizations within the region have heard of and understand the concept of Public Information Crisis and Emergency Risk Communication. Some have tasked and trained specific individuals to serve in this role during an event.

Regional Exercise: Areas for Improvement

The following areas require improvement to achieve the full capability level:

Area for Improvement 1: Some participating agencies identified the need to train personnel to be the Public Information Officer for their organization and to clarify the difference between a Public Information Office and an agency spokesperson. Additional PIO training would be beneficial in this area.

Overall Area for Improvement:

Emergency Public Information Sharing and Warning in general remains a challenge for all agencies. Making sure the right message gets to the right people at the right time requires forethought, plans, and training. Developing social media expertise would be beneficial for almost all agencies.

Objective 3:

Ensure situational awareness throughout simulated event by maintaining a common operating picture.

Core Capability 3:

Ensure the capacity for timely communications in support of security, situational awareness, and operations by any and all means available, among and between affected communities in the impact area and all response forces.

Capability Target:

1. Discuss the ability of local agencies to establish and maintain communications essential to support response to a major incident.

   Critical Tasks:

   - Discuss communicating incident response information to responding units and agencies.
   - Discuss establishing and maintaining response communication systems.
   - Discuss information sharing modalities between agencies.

Regional Exercise Strengths

The **partial** capability level can be attributed to the following strengths:

Strength 1: This exercise provided the opportunity for County partners to learn more about each other's roles and responsibilities in emergency events.

Strength 2: Within disciplines, communication strategies do exist, for example the use of EM Resource and WISCOM to communicate needs to other hospitals.

Strength 3: Within individual agencies and organizations, communication plans exist and are utilized to share information with staff.

Overall Strength:

County partners expressed gratitude for the opportunity to discuss different viewpoints and to develop professional relationships. It is hoped this networking and relationship building will be an asset in times of emergency or disaster. Understanding each disciplines' capabilities is vital to emergency response. Internal communication systems are well established within individual organizations and within some healthcare systems.

Regional Exercise: Areas for Improvement

The following areas require improvement to achieve the full capability level:

Area for Improvement 1: Identifying clear communication strategies between agencies and organizations remains a challenge. Many County wide or community wide alerts systems are in place, however, making sure all appropriate partners are on the alert list remains a work in progress.

Area for Improvement 2: There was a recognition that not all Healthcare Organizations would receive timely notification of a community wide event. (i.e. Public Health). Concern was expressed that notification would happen from social media sources which many not provide accurate information.

Area for Improvement 3: There was some discussion of the use of EM Resource and WISCOM, however, these methods of communication are not currently utilized by all healthcare or response agencies.

Area for Improvement 4: Determination of how long term care facilities, home health and hospice agencies, and public health departments would be notified and discussion of what response would be asked of them was discussed at some tables, but not clarified.

Overall Area for Improvement:

The multitude of communication modalities remains a challenge for response agencies in this region. There is no one method of receiving information to build situational awareness that is available to all healthcare and response agencies, particularly when faced with potential power outages or cell phone reception failures. Cross training on the various modalities (i.e. Web EOC, EM Resource, etc.) and deciding on a primary method of communication would be helpful.

Objective 4:

Ensure coordinated response throughout simulated event by activating and sustaining the capability of fatality management.

Core Capability 4:

Fatality Management: Establish and maintain a coordinated operational structure that effectively addresses Mass Casualty Incidents and Family Assistance Center operations.

Capability Targets:

1. Discuss the ability to establish and perform mass fatality operations for an incident.

   Critical Tasks

   - Activate a Family Assistance Center
   - Identify triggers for Family Assistance Center activation.
   - Determine structure and operations of Family Assistance Center
   - Discuss communication mechanisms between organizations and Family Assistance Center.
   - Determine which organizations are needed for effective Family Assistance Center operations.

- Discuss communication across state lines.

Regional Exercise Strengths

The **partial** capability level can be attributed to the following strengths:

Strength 1: Some County Public Health Departments have received training on Family Assistance Center operations and have a working knowledge of what would be expected should a Family Assistance Center be requested.

Strength 2: Public Health Departments have written Mass Fatality plans.

Overall Strength:

There is recognition among regional partners that Fatality Management resources would be limited in a large event. Therefore, Counties have thought about and written plans to include mutual aid and other regional and state resources.

Regional Exercise: Areas for Improvement

The following areas require improvement to achieve the full capability level:

Area for Improvement 1: All Counties identified limited staff resources as a challenge when considering opening a Family Assistance Center for more than two or three consecutive operational periods (2-3 days).

Area for Improvement 2: Limited morgue space in hospitals would require outreach to local, regional, and potentially state resources for fatality management. Not all agencies are aware of these plans or resources.

Area for Improvement 3: Some regional partners were unclear about how a Family Assistance Center would be requested and which agency has the responsibility of being the Lead Agency for setting up and running a Family Assistance Center.

Area for Improvement 4: Patient Tracking remains a challenge from the scene, to treatment facilities or morgues. Agencies have a variety of methods of tracking, however, these are not consistent and do not integrate with hospital Emergency Medical Records. Some Long Term Care Facilities need to develop a method of identifying and tracking their residents when they are out of the building for an outing.

Overall Area for Improvement:

Patient tracking throughout the response is an identified gap. Hospitals, Long Term Care Facilities, and other regional partners need to develop well integrated patient tracking systems to facility Family Reunification and Family Assistance during this type of event. Expanding the understanding of a Family Assistance Center, the roles, responsibilities, and agency leadership is also an identified project for this region.

Date of Exercise:	**Name of Agency or Jurisdiction Completing this form:**	**Name, Phone, Email of PRIMARY POC for this document:**	**Number of Agencies that participated in this exercise (including your own):**	**Total number of local participants (people) that participated in exercise: Table**	
April 23, 2019 Wisconsin Indianhead Technical College, Rice Lake, WI Holiday Festivities	Amery Hospital & Clinics	Lynn Gaffney 715-268-0227 Lynn.m.gaffney@amerymedical.com	58	1	

Please identify the 3 Greatest Strengths You Observed During this Exercise:	**Please identify the top 3 Areas of Improvement You Observed During this Exercise:**
1. Variety of county representatives 2. Preparation for initial response 3. Resources identified	1. Identifying threshold to use resources, i.e. HERC 2. Consider adding disaster family assistance training with County 3. Consider fast tract registration plan

Target Capability	Identify the Observation you saw that should be corrected	Identified Corrective Action (How should it be fixed?)	Agency Responsible	Individual Responsible	Completion Date
Operational Coordination	Not sure what the triggers are to request outside resources	Identify what the threshold is to bring in resources	AHC	Leaders	3rd quarter 2019
Fatality Management	Unfamiliar with Family Assistance Center plans and processes	Family Assistance training with County	AHC, Polk Cty		

Operational Coordination and Communication	Registration during a Medical Surge could be difficult	Registration process with limited staff and multiple patient incident	AHC		

Executive Summary:
Tuesday, 4/23/19, Amery Hospital & Clinic participated in the Regional Symposium and Table Top Exercise at the WITC Conference center in Rice Lake, Wisconsin. Our hospital, along with representatives from Polk County Public Health, and Divine Nursing Home representatives interacted with several other northwestern Wisconsin counties including personnel from EMS, DHS, Police, Public Health, Hospitals and Long Term Care Facilities. The speaker, Brett Van Ess, was very informative and interesting expanding on risks and lessons learned from previous critical events.

Our table top exercise involved responding to a driver crashing into pedestrians and a power pole at a July 4th local parade in 90 degree weather and the subsequent response. Strengths identified included from our point of view include: 1. hospital notification process in place (Send Word Now – changing to Everbridge this summer), 2. Preparedness with active drills and real time events improving plan. 3. Active multi-agency information sharing. Opportunities identified include 1. Easily identifiable thresholds to know when to bring in HERC, outside help. 2. identifying disaster family assistance plan with county. 3. Consider plan for fast track registration process to avoid potential bottlenecks.

This is a valuable use of time and resources, it was a very good learning experience and I will take suggestions to our Emergency Preparedness Director for consideration as well as leaders.

Date of Exercise:	**Name of Agency or Jurisdiction Completing this form:**	**Name, Phone, Email of PRIMARY POC for this document:**	**Number of Agencies that participated in this exercise (including your own):**	**Total number of local participants (people) that participated in exercise:**	
April 23, 2019 Wisconsin Indianhead Technical College, Rice Lake, WI Holiday Festivities	Ashland County Health & Human Services	Cyndi Zach 715-682-7028 Cyndi.zach@co.ashland.wi.us	58	5	

Please identify the 3 Greatest Strengths You Observed During this Exercise:	**Please identify the top 3 Areas of Improvement You Observed During this Exercise:**
1. Information Sharing 2. Operational coordination specific to entity 3. Understanding of local resources, capabilities 4. Realistic scenario	1. Wider array of local participants; specifically city, fire, law enforcement 2. Collaboration among all entities in planning 3. External communication

Target Capability	Identify the Observation you saw that should be corrected	Identified Corrective Action (How should it be fixed?)	Agency Responsible	Individual Responsible	Completion Date
Operational coordination	Lack of collaboration in local plans; plans are entity specific	An increase in planning and exercising with partners	Emergency Management; City of Ashland officials	Emergency Manager; Mayor	12/31/2019
Communication	Lack of a detailed plan to share	All entities need to meet to develop a plan of contact/communication	Ashland County, partners	Emergency manager; partner	12/31/2019

	information with county agencies, partners			representatives	
Public Information & Warning	Lack of communication tool to alert partners, residents	Ashland County needs a tool to disseminate emergency information to county residents	Ashland County	County Administrator	12/31/2019

Executive Summary:

On April 23, 2019, Ashland County Public Health participated in a regional exercise. Ashland County participants who collaborated in this exercise were Ashland County Emergency Manager, Ashland County Public Health (2), and Memorial Medical Center (2). The scenario was a truck crashing into a 4th of July parade in the City of Ashland. Three strengths observed from this exercise were: information sharing – guest speakers provided pertinent information to apply to this scenario; the AC entities had a good working understanding of how their agency would respond to such an event; and each AC participants was aware of the local resources available to respond, those capabilities, and the gaps of responsiveness. Three areas of improvement observed from this exercise were: a lack of AC participants – no representation from the City of Ashland, fire and/or law enforcement, or long-term care; collaborative planning – each entity had plans in place for their specific response but were not aware of how others would respond, which made it difficult to gage what needs were being met; and external communication as there is no identified organized mechanism/process to alert residents such as routing traffic, where an family assistance center would be located, and how to locate family members.

The scenario was very realistic and certainly applicable to Ashland County. It was helpful to discuss with partners on the strengths of our response and a mutual understanding of areas that need to be addressed. In terms of our entity, Ashland County Public Health needs to revisit the Family Assistance Center plan to include the information brought forward by the presenters. Also, AC PH will advocate to both the county agencies and partners the need to plan together for an emergency event and practice those plans with county-wide participation.

Date of Exercise:	**Name of Agency or Jurisdiction Completing this form:**	**Name, Phone, Email of PRIMARY POC for this document:**	**Number of Agencies that participated in this exercise (including your own):**	**Total number of local participants (people) that participated in exercise:**	
April 23, 2019 Wisconsin Indianhead Technical College, Rice Lake, WI Holiday Festivities	Barron County Department of Health & Human Services	Laura Sauve laura.sauve@co.barron.wi.us 715-537-6109	58	3	

Please identify the 3 Greatest Strengths You Observed During this Exercise:	**Please identify the top 3 Areas of Improvement You Observed During this Exercise:**
1. Discussion on obtaining immediate consent to share information with FAC, sharing of ideas on patient tracking, sharing of information between agencies. 2. Diverse agency representation and knowledge sharing, cooperation from each. 3. Trust between agencies to share information and trusting what each would contribute. Ongoing relationship building of participants.	1. Early notification of the incident to key positions/agencies. 2. Communication challenges between the FAC/Hospital/JIC. 3. Patient tracking between facilities. Each had a different method of tracking.

Target Capability	Identify the Observation you saw that should be corrected	Identified Corrective Action (How should it be fixed?)	Agency Responsible	Individual Responsible	Completion Date

Operational Coordination	Emergency Management was focused only on emergency response notification, didn't consider notifying others to help with early public information, bringing in additional support	Set up a distribution group for mass casualty events to send out early notification to all partners through the app "I am responding".	Emergency Management	Michael Judy	By June 2019
Communication	From the exercise we anticipate difficulties sharing information between locations such as the FAC/ Hospitals/ JIC/incident command. Some planned to use google docs, some traditional methods.	Google documents cannot be used by several partners, conventional communication may not be feasible. Plan to use Web EOC to share information.	This is already in place through the State Emergency Management.	Michael Judy, EM	In place, affirmed what would be used
Operational Coordination	Each location planned to use a different patient/family tracking method.	Electronic medical records are not able to integrate the wrist bands/bar codes that the hospital systems have set up. The hospital systems are similar and use identification numbers /colors to identify patients. This is easily combined with registration information once known. PH had no tracking system for family members set up and will implement a similar system as hospitals with basic name of family, name and DOB of injured/missing/dead they are trying to locate and then give a packet of additional registration materials.	PH to develop family packets and tracking database to enter information into. Keep packets in a FAC tote with clipboards for easy deployment.	Laura Sauve, PH	By June 2019

Barron County Department of Health and Human Services

Executive Summary and Improvement Plan/Corrective Action **April 23, 2019**
NWWIHERC and WWPHRC Regional Exercise

Executive Summary:

Three Barron County DHHS- Public Health staff attended the HERC and WWPHRC table top preparedness exercise at WITC in Rice Lake WI on Tuesday April 23, 2019. There were multiple other Barron County agencies represented including: Life Link Helicopter Responder, Emergency Management, Mayo Clinic Health System Northland, and Marshfield Medical Center-Rice Lake. The exercise involved a vehicle running over multiple parade goers at a Fourth of July parade celebration. We used the Chetek Liberty Festival 4th of July parade as our scenario for setting up response and the Family Assistance Center. The strengths we identified in this operation were overall trust and cooperation between those participating, information sharing ideas, and representation from multiple agencies. Our agencies developed close working relationships after the 2017 tornado and recognize what each entity can bring to make a difficult situation better. Our hospital systems had plans to gather patient consent to send information on their location to the FAC during the admission process when possible. This information will help speed the sharing of data with families. We also had a good variety of responders at the table which allowed us to process several aspects of the exercise with specific examples of how response is planned. Areas of opportunity identified include early notification of partners beyond first responders, communication between locations, and patient /family tracking and registration processes. We plan to develop a system for key partners to download the app "I am responding" and emergency management will set up a group alert for key partners in a mass casualty situation that will involve increased response needs. We found that each entity had different plans on how to communicate with one another. We did conclude the best way to share information will be through the emergency platform Web EOC. Patient and family tracking and information gathering was another area where we differed in plans. The hospitals had similar plans and public health/FAC had a very different plan (google docs). Public Health will develop a packet of information gathering resources and will more closely mimic the hospital registration system in order to gather information from family members seeking information on potential victims and match these needs.

Date of Exercise:	**Name of Agency or Jurisdiction Completing this form:**	**Name, Phone, Email of PRIMARY POC for this document:**	**Number of Agencies that participated in this exercise (including your own):**	**Total number of local participants (people) that participated in exercise:**	
April 23, 2019 Wisconsin Indianhead Technical College, Rice Lake, WI Holiday Festivities	Barron County-MCHS-Northland	Melissa Miller miller.melissa2@mayo.edu 715-537-6758	58	5	

Please identify the 3 Greatest Strengths You Observed During this Exercise:	**Please identify the top 3 Areas of Improvement You Observed During this Exercise:**
1. Good working relationships within our county. 2. The idea of having quick registration and patient consent at the time of patient arrival built into our discussion gave us the idea to try it. 3. We were able to make the scenario realistic and really brainstorm ideas.	1. Patient consent upon arrival would help FAC. 2. Dispatch/EM Director to implement an FYI Emergency page to high priority disciplines of an event happening by using I AM Responding. 3. Continue to work together on emergency plans and exercises.

Target Capability	Identify the Observation you saw that should be corrected	Identified Corrective Action (How should it be fixed?)	Agency Responsible	Individual Responsible	Completion Date
Operational Coordination/Communication	Emergency page/communication	Trial using I AM Responding app at future exercises.	EM Director, Hospitals, Public Health	Mike Judy	June 1

Operational Coordination	Continue to work together and strengthen our emergency plans and relationships	Continue to work together to build stronger relationships and strengthen our emergency plans.	All	All	Ongoing
Fatality Management	Patient Consent to share with FAC	Trial having patient consent upon patient arrival at future exercises.	Hospitals, Public Health	Lacey Huset	June 1

Executive Summary:

On Tuesday, April 23, 2019 members from the following agencies: Emergency Management Director, Barron County; LifeLink; Barron County Public Health; Marshfield Medical Center; Mayo Clinic Health System-Northland participated in a Mass Fatality exercise. The scenario was during Chetek Liberty Fest parade on July 4th a truck ran over spectators on the sidewalk and took out a power pole. This incident we had 78 injured and 10 fatalities.

Quickly upon this incident we talked about a message to go out to high priority agencies as a heads up that this incident occurred and we need to activate our emergency plans. This is an improvement that we will work on during upcoming exercises to pilot the I AM Responding app. Upon patient arrival to our hospitals we would want to get patient consent so that we can share this information with the Family Assistance Center (FAC) (Public Health) to help with family reunification. This will also be trialed at our upcoming exercises. With the power outage that also occurred during this incident we had to discuss where staging areas, FAC, shelters, Red Cross would set up. We utilized several businesses in the city of Chetek since traffic would be blocked off for emergency personnel only.

This exercise was a success in helping our county agencies build stronger relationships and strengthen our Emergency plans at our own agencies as well as the county. Our county just updated the mortuary plan and we were able to test the plan during this exercise.

Date of Exercise:	**Name of Agency or Jurisdiction Completing this form:**	**Name, Phone, Email of PRIMARY POC for this document:**	**Number of Agencies that participated in this exercise (including your own):**	**Total number of local participants (people) that participated in exercise:**	
April 23, 2019 Wisconsin Indianhead Technical College, Rice Lake, WI Holiday Festivities	Bayfield County Health Department	Becki Nelles, RN 715-373-3323 bnelles@bayfieldcounty.org	58	2	

Please identify the 3 Greatest Strengths You Observed During this Exercise:	**Please identify the top 3 Areas of Improvement You Observed During this Exercise:**
1. There was a good mix of disciplines at our table for this exercise. 2. There was good dialogue and review of hypothetical situations. 3. Good relationship with neighboring counties and jurisdictions.	1. There wasn't an emergency manager present in our group. 2. PIO training was needed by the hospital, clinic and public health department in our group. 3. VOADs need to be identified in Bayfield county so they can be included in planning.

Executive Summary:

This exercise took place on 04/23/2019 at WITC in Rice Lake, Wisconsin. The scenario for the exercise included a truck driving into the crowd during the local 4th of July parade. The Bayfield County Health Officer and Public Health Nurse were the only two players in attendance at this exercise for Bayfield County. However, located at our table were the Health and Human Services Director from Douglas County; a Public Health Nurse from Douglas County; an Administrator from a nursing home in Douglas County; two maintenance workers from a nursing home in Douglas County; and a contract employee for Wisconsin DHS.

3 Strengths Identified from this Exercise were:

1. There was a good mix of disciplines at our table for this exercise.
2. There was good dialogue and review of hypothetical situations.
3. Good relationship with neighboring counties and jurisdictions.

3 Opportunities for Improvement from this Exercise were:

1. There wasn't an emergency manager present in our group.
2. PIO training was needed by the hospital, clinic and public health department in our group.
3. VOADs need to be identified in Bayfield County so we they can be included in planning.

Overall, this exercise was a success. It was interesting to learn what Douglas County had for resources in their area. It was also interesting to learn that the Middle River Health and Rehab Center is a self-sustaining facility due to their rural location. Moving forward the Bayfield County Health Officer will attend PIO training. We will get in contact with VOADs in our area and include them in preparedness planning. The Bayfield County Health Department has already purchased a WISCOM radio, but they do not currently have access to it. The Bayfield County Sheriff's Department has it. This is something the Bayfield County Health Department will get back and receive training on how to use. John Kruk from Sawyer County would be a good contact to help us with this. For the next exercise, we will encourage our Emergency Manager to attend. We will also do more outreach to other partners such as EMS, coroner, and law enforcement in an attempt to get them more involved in exercises.

Date of Exercise:	**Name of Agency or Jurisdiction Completing this form:**	**Name, Phone, Email of PRIMARY POC for this document:**	**Number of Agencies that participated in this exercise (including your own):**	**Total number of local participants (people) that participated in exercise:**	
April 23, 2019 Wisconsin Indianhead Technical College, Rice Lake, WI Holiday Festivities	Burnett County Department of Health and Human Services- Public Health Unit	Sarah Miller, 715-349-7600 Ext. 1952, smiller@burnettcounty.org	58	**1**	

Please identify the 3 Greatest Strengths You Observed During this Exercise:	**Please identify the top 3 Areas of Improvement You Observed During this Exercise:**
1. Collaborative efforts of different disciplines and agencies or organizations to work to together to address the identified concerns. **2.** The scenario was realistic to what could actually happen. **3.** Many of the participants were aware of quite a few resources available to access as needed, and/or learned of new ones that they were not aware of.	1. Some partners not understanding or aware of some other's roles during emergency responses and HERC not activated or notified right away. 2. Staffing in rural areas can be limited, and may not be prepared for some emergency events- needing to rely on partners and be aware of them and what they can do. 3. Trying to get more first responders/EMS and Emergency Management to attend the exercises to obtain their perspectives.

Target Capability	Identify the Observation you saw that should be corrected	Identified Corrective Action (How should it be fixed?)	Agency Responsible	Individual Responsible	Completion Date

1) Operational Coordination (Incident Command, Emergency Operations Center, working with partners)	Some partners not aware of other emergency partners roles and responsibilities, and HERC was not activated or notified right away for the exercise.	Ensure following Incident Command in emergency responses and roles of PH and others, and notify HERC right away for additional support. Continue to attend Consortium meetings, trainings and exercises. Keep staff informed at PH staff meetings, and continue partnership with county emergency management and LEAP.	Burnett County DHHS-Public Health	Sarah Miller	2019-2020, and ongoing
2) Communication (information sharing, internally or externally),	Some partners not aware of some communication avenues available in cases of emergencies.	Ensure at least PH staff are aware of emergency communication information avenues available to use in cases of emergencies. Reviewing this with staff at PH meetings.	Burnett County DHHS-Public Health	Sarah Miller	2019-2020, and ongoing
3) Fatality Management	PH staff aware of FAC but not all have been trained about this.	Ensure all PH staff are aware of what an FAC is, when it is needed, and PH and other partner's roles with them. Share the power point presentation w/ staff to review, and discussion at PH staff meetings.	Burnett County DHHS-Public Health	Sarah Miller	2019-2020, and ongoing as needed

Executive Summary:

This emergency preparedness exercise took place on April 23, 2019. The exercise was a power outage in the county affecting many residents. Many different county health, safety and emergency partners were present to participate in the exercise such as Public Health, some emergency managers, some EMT, some hospitals and some nursing homes. The participants were given the power outage scenario and were asked what their specific organization would do about it and/or what their roles are in helping to meet the emergency need.

Participants of the exercise discussed the emergency together and came up with some ideas, solutions, and resources available to address the emergency need. Three strengths identified by partners were: Having the opportunity to collaborate with other emergency community partners to hear their perspective on emergency responses and what their roles are and resources available, as well as, sharing ours; getting familiar with emergency resources and communication avenues available during an emergency; and having a realistic emergency exercise that we all could relate too, and could possibly experience at some point. Three opportunities

identified by the partners were: Identifying resources and communication avenues available that may have not been otherwise known; and identifying different roles and responsibilities of the emergency partners who participated that may have not been known; and identifying what protocols to follow and those to alert/activate right away in an emergency.
Overall, this was a successful exercise because it was a realistic emergency that could potentially happen in any of our counties and gave us experience with thinking through what our agency would do in this situation, what roles and responsibilities we and others have, how we would communicate with other partners and the community, and how we can work together to help our community.
Moving forward, information and/or knowledge gained through this exercise will be shared with local PH staff, as well as, emergency management and other emergency community partners as needed.

Date of Exercise:	**Name of Agency or Jurisdiction Completing this form:**	**Name, Phone, Email of PRIMARY POC for this document:**	**Number of Agencies that participated in this exercise (including your own):**	**Total number of local participants (people) that participated in exercise:**	
April 23, 2019 Wisconsin Indianhead Technical College, Rice Lake, WI Holiday Festivities	Care & Rehab Barron	Len Fast 715-537-5643 lfast@careandrehab.org	58	1	

Please identify the 3 Greatest Strengths You Observed During this Exercise:	**Please identify the top 3 Areas of Improvement You Observed During this Exercise:**
1. Everyone working together 2. Availability of resources	1. Emergency Power 2. Communication

Executive Summary:

Players: Public Health Department, two skilled nursing centers Care & Rehab Barron & Dove Rice Lake.

Scenario: Sunday, July 4 at a parade, an attacker used a truck to run into a crowd of people. The attack was stopped when the truck hit a power pole, knocking out power for a portion of the community. Several people are dead, more wounded.

Strengths observed: 1: everyone seemed to know what would be needed and how to participate in the response.

Opportunities: Staff challenges would be high given it was a holiday weekend and we identified a weakness in our emergency power supply.

Overall, I think it was a success and I have started an evaluation of our emergency power system.

Date of Exercise:	**Name of Agency or Jurisdiction Completing this form:**	**Name, Phone, Email of PRIMARY POC for this document:**	**Number of Agencies that participated in this exercise (including your own):**	**Total number of local participants (people) that participated in exercise:**	
April 23, 2019 Wisconsin Indianhead Technical College, Rice Lake, WI Holiday Festivities	Chippewa County Department of Public Health	Jennifer Lenbom 715-726-7900 jlenbom@co.chippewa.wi.us	58	15	

Please identify the 3 Greatest Strengths You Observed During this Exercise:	**Please identify the top 3 Areas of Improvement You Observed During this Exercise:**
1. Multiple disciplines & partner viewpoints were shared and learned about. 2. Our community is prepared to handle a power outage emergency. 3. The exercise was very realistic and many participants could relate to the event in some capacity.	1. Need to have one location to post public information in the event of an emergency. 2. Increase number of staff with PIO training. 3. Need to connect and involve Human Services in more preparedness planning and exercises. 4. Continue to provide updates at all staff meetings.

Target Capability	Identify the Observation you saw that should be corrected	Identified Corrective Action (How should it be fixed?)	Agency Responsible	Individual Responsible	Completion Date
EPIW	Need a central location for emergency updates	Creation of a page on CCDPH website designated for emergency updates	CCDPH	Audra Knowlton	6-30-19

Information Sharing	Human services has had limited involvement in planning/exercising/knowing roles.	Planner to meet with Human Services department to provide an over view of and background on plans and response.	CCDPH	Jennifer Lenbom	8-31-19
EPIW	New CH manager.	Have Community Health Division Manager attend PIO Training.	CCDPH	Kristen Kelm	6-30-19
Information Sharing	Not all staff feel comfortable with ICS roles and knowing plans	Planner to continue to provide updates during all staff meetings regarding ICS roles, plans, response, and responsibilities.	CCDPH	Jennifer Lenbom	Continuous

Executive Summary:

Northwest Wisconsin Healthcare Emergency Readiness Coalition and Western Wisconsin Public Health Readiness Consortium hosted a regional symposium and table top exercise with functional elements on April 23, 2019. Agencies from Chippewa County included Chippewa County Department of Public Health, Chippewa County Emergency Management, Mayo Clinic-Chippewa Valley, St. Joseph's Hospital, and Cornell Care Center. The scenario was a truck driving down a sidewalk filled with spectators watching a parade on the Fourth of July in a local town.

Three strengths that were identified included: Having multiple disciplines and partners attend and learning from their response. Reviewing what a response to a power outage would be and our ability to respond. The scenario being realistic so participants could relate and discuss the response.

Three opportunities for improvement included: Increasing the involvement of Human Services in the emergency response so they better understand their roles and responsibilities. Increasing staff with PIO training. Having a central location to post emergency information.

Chippewa County Department of Public Health took this opportunity to bring internal staff with ICS roles to the exercise to allow them to experience and give feedback. This was a great success as it has given more insight about improvements that can be made in our program.

As with many exercises, communication is a big piece to continue to improve. We plan to implement more communications with human services so they are more comfortable with preparedness planning, response, and recovery. We plan to create a dedicated page on our website to be able to post emergency communications. We will continue to provide updates to all CCDPH staff at meetings to increase their comfort with emergency response, as well as have our new community health division manager attend PIO training.

Date of Exercise:	**Name of Agency or Jurisdiction Completing this form:**	**Name, Phone, Email of PRIMARY POC for this document:**	**Number of Agencies that participated in this exercise (including your own):**	**Total number of local participants (people) that participated in exercise:**	
April 23, 2019 Wisconsin Indianhead Technical College, Rice Lake, WI Holiday Festivities	Douglas County Department of Health and Human Services	Cindy Freeberg RN, BSN Public Health Nurse Douglas County Department of Health and Human Services 715-395-1617 cynthia.freeberg@douglascountywi.org	58	2	

Please identify the 3 Greatest Strengths You Observed During this Exercise:	**Please identify the top 3 Areas of Improvement You Observed During this Exercise:**
1. Partnerships/Mutual Aid agreements in place 2. Knowledge of and sharing of resources 3. COOP Plan	1. PIO needs to be designated and trained 2. Communication (EOC activation, consistent messaging to the public, common tracking system) 3. Plan TOGETHER with partners, know roles of partner agencies.

Target Capability	Identify the Observation you saw that should be corrected	Identified Corrective Action (How should it be fixed?)	Agency Responsible	Individual Responsible	Completion Date
Emergency Operations Coordination	Clearly identifying incident command roles and responsibilities	Have bi-monthly meetings with HHS and EM for continued communication on roles and responsibilities	EM Health and Human Services (HHS)	HHS	December 2019

		Knowing where our electricity-dependent clients are located in our county EOC Activation Communication policy and procedure			
Fatality Management	Identify roles in an incident that involves fatalities. Knowledge in opening a family assistance center in your county.	FAC training for our department (HHS) Sharing FAC plans with department, EM and Medical Examiner and also become familiar with those plans Communicating with our County's Medical Examiner on FM plans	Health and Human Services Medical examiner Local Hospital Funeral Home Directors	HHS	December 2019
Information Sharing	Determine primary notification method of partners. Determine how continuous communication will be maintained with all partners.	Having messaging templates ready to go for different potential emergency events Update partner notifications list and maintain communication throughout the year Invite internal and external agencies to participate in preparedness trainings and exercises so that everyone knows who the players are and that information is consistent with everyone.	Emergency Management County/City IT Department Public Health Local Hospital LEPC	EM HHS	December 2019

		Making partners aware of public health emergency plans. Designate public messaging sites and communicate that with Community Being more aware and prepared for appropriate messaging of those with disabilities (ex: hearing, vision) Making partners aware of the NWWHERC and WWPHRC			
Emergency Public Information and Warning	Appointing a PIO and backup PIO for future emergency events Identify fast and effective mechanisms for public information	Designating a PIO for departments/situations PIO/Crisis Emergency Risk communication training Designate public messaging sites and communicate that with Community. Developing an official policy and procedure for consistent technological use during an event.	Emergency Management Public Health Government Officials	EM HHS	December 2019

Executive Summary:

Douglas County participated in the Northwest WI HERC and WWPHRC Regional Exercise on April 23, 2019. The agency from Douglas County that attended and participated in the exercise was Health and Human Services (with representation from Human Services and Public Health). The scenario was as follows: *On the 4th of July, during your towns' local parade, a truck drove down a sidewalk filled with spectators watching the parade. It is a humid, 90 degree day. The truck stopped its path of destruction when it crashed into a power pole. The number of injuries and fatalities are unknown at this time.*

Our strengths were: Partnerships/mutual aid agreements in place, knowledge of and sharing of resources, and a strong COOP plan. The opportunities that we identified to work on were: PIO designation and training, communication consistency, and to increase partnerships and plan TOGETHER. Overall, this exercise was a success because it brought people in different agencies and counties together to discuss and plan for a real life scenario that could impact any of us. It is so helpful to meet together to put faces to names of other preparedness personnel in other counties….the more we meet, the more familiar we become with our region and our relationships continue to strengthen each time. We will be moving forward and using what we have learned by sharing it with our respective units and will start to have more intentional regular preparedness meetings.

Date of Exercise:	**Name of Agency or Jurisdiction Completing this form:**	**Name, Phone, Email of PRIMARY POC for this document:**	**Number of Agencies that participated in this exercise (including your own):**	**Total number of local participants (people) that participated in exercise:**	
April 23, 2019 Wisconsin Indianhead Technical College, Rice Lake, WI Holiday Festivities	Dove Healthcare – Rice Lake	Ariel Miller 715-234-2604 ext 18001 amiller@dovehealthcare.com	58	2	

Please identify the 3 Greatest Strengths You Observed During this Exercise:	**Please identify the top 3 Areas of Improvement You Observed During this Exercise:**
1. The scenario was realistic and helped us work through a situation we could experience. 2. Disaster plans include many procedures for possible situations the facility may need to work through. 3. Facility and other providers are able to work together well to assist in an emergency situation.	1. Knowing local resources in the community. 2. Making sure we have contact information readily available for many vendors we may need in a crisis. 3. Making sure we have contact information for our staff readily available for staff on site at the facility.

Target Capability	Identify the Observation you saw that should be corrected	Identified Corrective Action (How should it be fixed?)	Agency Responsible	Individual Responsible	Completion Date
Communication	Our current disaster binder does not include contact information for vendors staff may	Include a list of vendors and their contact information in the facility's disaster binder	Facility	Administrator and Maintenance Director	June 14, 2019

	need to contact in a crisis				
Communication	Our current disaster binder does not include contact information of incident command such as cell phone numbers	Include contact for incident command such as our leadership team in the facility's disaster binder	Facility	Adminitrator and Maintenance Director	June 14, 2019
Operational Coordination	The facility has held table top exercises as a team but not an evacuation drill	The facility will run an evacuation drill this summer involving community representatives	Facility	Administrator and Maintenance Director	August 31, 2019

On April 23rd, 2019 two representatives from Dove Healthcare – Rice Lake attended the 2019 Regional Symposium and Table Top Exercise at the Rice Lake WITC campus. Casey Cunningham, Maintenance Director, and Ariel Miller, Administrator, both attended. We worked with other counties and providers to work through the scenario of a truck crashing through a parade on the fourth of July. In the scenario our facility has staff and residents at the parade.

During the table top exercise we recognized three strengths. The scenario was very realistic and helped us work through a situation we could experience. We found that our disaster plans at our facility include many procedures for possible situations the facility may need to work through. Finally, our facility and other providers were able to work together well to assist in an emergency situation.

Throughout the exercise we were also able to recognize three weaknesses or areas in need of further development and improvement. We noted that we learned about local resources in the community that we did not know much about before the exercise. We need to make sure we have contact information readily available for vendors we may need to contact during a crisis. We need to make sure we have contact information for our leadership staff readily available for staff on site at the facility.

Overall, we greatly appreciated this opportunity and learned from it. We will take the strengths and weaknesses that were identified and further develop our disaster plans.

Date of Exercise:	**Name of Agency or Jurisdiction Completing this form:**	**Name, Phone, Email of PRIMARY POC for this document:**	**Number of Agencies that participated in this exercise (including your own):**	**Total number of local participants (people) that participated in exercise:**	
April 23, 2019 Wisconsin Indianhead Technical College, Rice Lake, WI Holiday Festivities	Dunn County Health Department, Human Services, Home Care	Thomas Aarrestad 715-231-6442 taarrestad@co.dunn.wi.us	58	3	

Please identify the 3 Greatest Strengths You Observed During this Exercise:	**Please identify the top 3 Areas of Improvement You Observed During this Exercise:**
1.Learning differing points of view from different agencies 2.Realistic exercise for our area to learn capacities 3.Learning surge capacities from hospitals	1.Alerting communication between agencies 2.Too much jargon and acronyms 3.Tracking patients between different facilities

Target Capability	Identify the Observation you saw that should be corrected	Identified Corrective Action (How should it be fixed?)	Agency Responsible	Individual Responsible	Completion Date
Operational Coordination , Communication (information sharing, internally or externally)	Better coordination of communication between partner agencies	Connecting with partner agencies to outline ways of communicating, ordered by preference depending on infrastructure capacity	Dunn County Health, Human Services, Homecare and partner agencies	EM planner	July 1, 2020

Fatality Management	Unknown capacity for management of fatalities	Identify capacity for fatality management of each healthcare facility	Health Department, and EM	EM planner	July 1, 2020
Public Information and Warning	Outdated public communication venues	Include latest sources of communication including social media and alerting systems	Health Department, Human Services, Homecare and EM	EM planner	July 1, 2020 and continuing

Executive Summary:

On April 23, 2019 our regional partners met for our Emergency Readiness Coalition Exercise. Partners from across the region met to participate in an exercise where a truck plowed through a Fourth of July parade, coming to rest after hitting an electrical pole that fell over, taking out power to a section of the city. Our table partners included people representing public health, hospitals, home care, and long-term care facilities. New from our county are home care and human services representatives (although the human services person was at another table).

We had people from diverse agencies represented giving us all a good observation of the differing points of view the different agencies bring to the exercise. It was also a good exercise for applying our learning to a realistic situation that could easily exist in each of our communities. It proved a good exercise for learning the surge capacity for each of our facilities. Opportunities that we identified during the exercise include identifying the best way to communicate with each of our partners during an emergency and how that might change depending of the infrastructure capacity, avoiding jargon and acronyms to avoid confusion, and identifying ways of tracking patients between facilities.

These continue to be helpful exercises for connecting with agencies to learn who our partners are, who we will be working with during emergencies so we can be better prepared for resource sharing in the future.

We (fellow county partners) will look for opportunities to gather together with one another and with our partners in the community for the sharing of contacts and resources to face future exercises and real emergency situations.

Date of Exercise:	**Name of Agency or Jurisdiction Completing this form:**	**Name, Phone, Email of PRIMARY POC for this document:**	**Number of Agencies that participated in this exercise (including your own):**	**Total number of local participants (people) that participated in exercise:**	
April 23, 2019 Wisconsin Indianhead Technical College, Rice Lake, WI Holiday Festivities	Hammond Health Services	Laurie Edelman 715-796-2218 ledelman@nshorehc.com	58	3	

Please identify the 3 Greatest Strengths You Observed During this Exercise:	**Please identify the top 3 Areas of Improvement You Observed During this Exercise:**
1. Excellent way to meet others in our county and learn more about how we can work together in these situations. 2. Very realistic scenario. Allowed us to work through and utilize our emergency operations plans. 3. We always take away new ideas on things we can potentially adopt at our facility, such as Send Word Now app for mass notifications.	1. Develop process of tracking residents in the event of an emergency when they are outside the facility. 2. Explore how Hammond Health Services would assist with a Family Assistance Center. 3. Need to exercise the Evacuation Plan to educate all departments within the facility.

Target Capability	Identify the Observation you saw that should be corrected	Identified Corrective Action (How should it be fixed?)	Agency Responsible	Individual Responsible	Completion Date
Tracking of residents	Unsure of how we would track our residents that are	Put system in place so list of residents attending an outing/event is left at the facility as well as taken with on the outing.	HHS	Activity Director	5/3/19

	taken to area hospitals.				
Emergency Operations Plan improved	We were not aware of what a FAC was and do not have that in our plan. We also don't have Aimee listed in our plan.	Executive Director and Mtn Director to make these enhancements to the EOP	HHS	Mtn Director	5/15/19
Education of Staff	We believe we need to do more drilling at the facility level to include all departments.	Complete an evacuation drill to include all departments.	HHS	Exec. Dir/Mtn. Dire.	6/15/19

Executive Summary:

On 4/23/19 an emergency table top exercise was held with the Northwest WI Healthcare Emergency Readiness coalition. Participants for St. Croix County included 2 area hospitals, public health and one long term care facility. The scenario was an emergency that occurred at the local 4th of July parade where a person drove his truck into spectators on the sidewalk and eventually hit a power pole. There were 6 fatalities and around 60 people injured. There were several long term care residents in attendance at the parade and power was lost due to the driver hitting the pole. The team talked through how we would handle this situation. Strengths identified through this exercise included the ability to handle power outages with ease, good working relationships with partners in the county, and we definitely learned of potential mass notification possibilities used by our hospital partners. Opportunities identified included tracking of residents during an emergency, understanding a FAC and how it can help us during an emergency and increased emergency drilling at the facility to ensure we can carry out emergency situations with ease. We believe this was a very realistic scenario and it was a success. We have outlined an action plan to follow up on the opportunities identified.

Date of Exercise:	**Name of Agency or Jurisdiction Completing this form:**	**Name, Phone, Email of PRIMARY POC for this document:**	**Number of Agencies that participated in this exercise (including your own):**	**Total number of local participants (people) that participated in exercise:**	
April 23, 2019 Wisconsin Indianhead Technical College, Rice Lake, WI Holiday Festivities	Heritage of Elmwood	Ellen Thompson 715-639-2911 ellen.thompson@heritage-elmwood.com	58	1	

Please identify the 3 Greatest Strengths You Observed During this Exercise:	**Please identify the top 3 Areas of Improvement You Observed During this Exercise:**
1. Good collaboration with other Pierce County entities 2. Good discussion with other County entities about County protocols and rolls within the County departments 3. Can easily recall and apply policies to the exercise/situation 4. Diverse County perspectives represented	1. Need an Activity Policy and Procedure regarding resident outings 2. Include more resources in Emergency Manual 3. Need to include/invite more Grace Lutheran Buildings into future tabletop exercises

Target Capability	Identify the Observation you saw that should be corrected	Identified Corrective Action (How should it be fixed?)	Agency Responsible	Individual Responsible	Completion Date
Operational Coordination	Accounting for residents in the event an emergency happens, and residents are out of	Create Activity Outing Policy and Procedure	Heritage of Elmwood	NHA	June 1, 2019

	the facility, or if an emergency occurs while on the outing				
Operational Coordination	Simplified step by step guide for someone who may not be as well versed in the Emergency Manual	Create a quick reference guide for the Emergency Manuals	Heritage of Elmwood	NHA	June 1, 2019
Include more corporate facilities in Emergency Preparedness	Only one Grace Lutheran facility was present at tabletop exercise	Ensure all facilities receive communication regarding NWWIHERC and future tabletop and education opportunities	Heritage of Elmwood/Grace Lutheran Communities	NHA	Ongoing/ future

Executive Summary:

Heritage of Elmwood identified several strengths and opportunities for improvement, as stated above. The first thing that needs to be developed is an Activity Outing Policy and Procedure. This is needed in the event that there is an emergency situation either at the facility while residents are out on an activity, or at the activity itself. The next task to be completed is to create a "Quick Reference Guide," to be put in the front of the Emergency Manual. This will include a quick step by step guide on what to do quickly in the event of an emergency, this will help in situations where a staff person may begin to panic or become stressed quickly, and need simplified instructions. Lastly, more Grace Lutheran Communities (corporate mothership) facilities should be invited and included in future exercises. This will make the corporation stronger as a whole, especially in the case of an emergency situation. Overall, the Heritage of Elmwood believes this exercise was a success, with lessons learned. These types of exercises will continue to be attended in the future.

Date of Exercise: April 23, 2019 Wisconsin Indianhead Technical College, Rice Lake, WI Holiday Festivities	**Name of Agency or Jurisdiction Completing this form:** Marshfield Medical Center-Eau Claire	**Name, Phone, Email of PRIMARY POC for this document:** Raquel Shinee 715-858-8248 shinee.raquel@marshfieldclinic.org	**Number of Agencies that participated in this exercise (including your own):** 58	**Total number of local participants (people) that participated in exercise:** 2	
Target Capability	Identify the Observation you saw that should be cshorrected	Identified Corrective Action (How should it be fixed?)	Agency Responsible	Individual Responsible	Completion Date
Operational Coordination	The hospital has been open less than one year and has not activated Incident Command for any event yet.	Continue training staff in ICS. Consider exercising activation of ICS.	MMC-Eau Claire		
Fatality Management	Limited internal morgue capacity	Develop Fatality Management plan to include consideration of a Family Assistance Center.	MMC-Eau Claire		
Information Sharing	Communication with staff in disaster and identifying resource needs	Develop Commnication plan both internally and externally with public in times of disaster.	MMC-Eau Claire		
Executive Summary:					

On Tuesday, 4/23/19, two representatives from Marshfield Medical Center-Eau Claire participated in the Regional Symposium and Table Top Exercise at the WITC Conference center in Rice Lake, Wisconsin. This is a little bit of a difficult task at this point for our facility. We are unsure at this time of our full capabilities and weaknesses. Only due to the fact that we are new and we haven't had the need or encountered anything that would activate ICS. Things that are obvious concerns would be the fact of minimal or incomplete staff training for disaster and IC. We are working on the basics with staff at this point but again still a work in progress. Another one is as always, communication. How to use the org chart and who to call first along with getting the appropriate equipment needed and training to improve communication internally and externally. Another project is our morgue and the capacity that it may lack, but will have to work on that and look at finding someone with a cooler truck. Family reunification is also something that we will have to work on. This will entail how we will be doing patient tracking if they are moved to another facility (in a MCI) along with using our PIO in a major incident.

Date of Exercise: April 23, 2019 Wisconsin Indianhead Technical College, Rice Lake, WI Holiday Festivities	Mayo Clinic Health System Chippewa Valley	Brenda Nacke Regional Safety Coordinator 715-568-6883	**Number of Agencies that participated in this exercise (including your own):** 58	**Total number of local participants (people) that participated in exercise:** 1	

Please identify the 3 Greatest Strengths You Observed During this Exercise:	**Please identify the top 3 Areas of Improvement You Observed During this Exercise:**
1. Incident Command was implemented immediately 2. Good, realistic scenario 3. Variety of entities represented allowing for good collaboration	1. Hospital did not use tools available for communication including WI Trac, WISCOM, and Healthcare Coalition 2. Hospital does not have a good plan for activating or requesting a Family Assistance Center 3. Hospital does not have a process in place for managing the influx of phone calls during an event of this magnitude

Target Capability	Identify the Observation you saw that should be corrected	Identified Corrective Action (How should it be fixed?)	Agency Responsible	Individual Responsible	Completion Date
Operational Coordination and Communication	Use of WI Trac was not identified as a way to communicate with	Provide additional training to staff on use of WI Trac, specifically on putting out alerts and requesting bed counts.	Northwest WI Healthcare Emergency		

	other healthcare organizations during the incident.		Readiness Coalition; Mayo Clinic Health System Chippewa Valley		

Date of Exercise:	**Name of Agency or Jurisdiction Completing this form:**	**Name, Phone, Email of PRIMARY POC for this document:**	**Number of Agencies that participated in this exercise (including your own):**	**Total number of local participants (people) that participated in exercise:**	
April 23, 2019 Wisconsin Indianhead Technical College, Rice Lake, WI Holiday Festivities	Mayo Clinic Health System Home Health Hospice Palliative Care	Barb Jaderborg RN 715-579-2933 Jaderborg.barbara@mayo.edu	58	1	

Please identify the 3 Greatest Strengths You Observed During this Exercise:	**Please identify the top 3 Areas of Improvement You Observed During this Exercise:**
1. Collaboration face to face with Public Health, hospitals, regional HERC 2. Scenario provided opportunity for learning and discussing response 3. Learned how to obtain phone card for leadership in disaster-contact Public Health	1. Process for notifying organizations of a disaster is initially weak and informal. May learn via social media first. 2. Need to see more EMS, law enforcement, fire at exercise as they are key players in our plans. 3. Long term Care facilities were not represented and we need to work with them on exercises especially patient tracking in a relocation scenario.

Target Capability	Identify the Observation you saw that should be corrected	Identified Corrective Action (How should it be fixed?)	Agency Responsible	Individual Responsible	Completion Date
Working with our partners	Emergency manager, Fire, Law	Eau Claire county Public Health Emergency Preparedness meets	EC Public Health and all the		12/31/19

	enforcement not present for exercise	regularly with participation from County EM, Fire, Law Enforcement, ADRC, hospitals, and more. Participation in a disaster scenario at one of the regular meetings could allow partners to talk through response plans.	partners attending the Emergency Preparedness meetings		
Collaboration within our organization during mass casualty disaster	MCIs may trigger a surge of patients needing hospice or home health care. Increase ED staff knowledge of notifying HHH MOC for prompt hospice admission during MCI.	Hospice leadership and case managers collaborate with ED to stream line crisis communication and patient care during surge.	Hospice Leadership and ED	Erin S/ Mary T Laura Barb Wayne	9/30/19

Executive Summary:

On Tuesday 4/23/19 EC and Pepin Public Health, Durand Hospital, Marshfield CHS, Mayo Clinic Health System Hospital, and Mayo Clinic Home Health Hospice Palliative Care along with regional HERC and state emergency preparedness participated in a tabletop exercise. The scenario began with a 7/4/19 parade crowd struck by a truck.

3 Strengths included: on scene responders starting the notification by requesting air help distributing patients to multiple hospitals; prompt dispatch communication used to notify utilities since pole struck; and collaboration with Incident Command.

3 Improvement opportunities focus on communication. County public health and emergency managers were not initially notified; which PIO is identified as the lead (we all have PIOs) and how does one message go out; who fills roles in Incident Command.

The interactive scenario exercise with Joe Cordova and Brett Van Ess, Criminal Analyst was successful.

Our department will prioritize participation in emergency preparedness meetings and exercises. We recognize practice working together on disaster scenario such as this has value.

Date of Exercise:	**Name of Agency or Jurisdiction Completing this form:**	**Name, Phone, Email of PRIMARY POC for this document:**	**Number of Agencies that participated in this exercise (including your own):**	**Total number of local participants (people) that participated in exercise:**	
April 23, 2019 Wisconsin Indianhead Technical College, Rice Lake, WI Holiday Festivities	Middle River Health & Rehab	Christy Frye, 715-398-3523, christyf@vmhealth.com	58	3	

Please identify the 3 Greatest Strengths You Observed During this Exercise:	**Please identify the top 3 Areas of Improvement You Observed During this Exercise:**
1. Made us think about how we could apply this to our facility 2. Contacts with other counties (networking) 3. Thinking about soft targets/96 hour plan/volunteers and applying that to our Emergency Preparedness.	1. It didn't fit with a nursing home scenario 2. Not have such a broad exercise, have a little better scenario

Executive Summary:

Date of the exercise was April 23, 2019. This exercise was attended by the Administrator, Maintenance Supervisor and one maintenance staff. The scenario was training on Disaster Family Assistance Center. This scenario did not necessarily fit a skilled nursing facility but we did have some takeaways. They talked about soft targets in a few difference scenarios, not necessarily a direct target but just to hurt a general group. We use volunteers need to make sure they are informed on our policies and trained in case of an event that they may help in. Operational sustainment after the event is another very important part that we need to be aware of after an event and staying sanitary as needed. Having a 96 hour plan is also something that needs to be focused on.

Other things that are very important is having an MOU with local or outlying Hospitals and facilities that we may need to rely on in case of different events. Surge – how do you have that determined with making sure you have the care that is needed in different events. Have an employee entrance set if you need to lock the building but need employees to be able to leave and enter. Also,

we use codes so often but they highlighted that it may not be the best way to communicate and to use regular language that everyone can understand.

Overall I did not feel that this particular scenario fit a skilled nursing facility but I did have some very good takeaways that I can apply to our emergency plans.

Date of Exercise:	**Name of Agency or Jurisdiction Completing this form:**	**Name, Phone, Email of PRIMARY POC for this document:**	**Number of Agencies that participated in this exercise (including your own):**	**Total number of local participants (people) that participated in exercise:**
April 23, 2019 Wisconsin Indianhead Technical College, Rice Lake, WI Holiday Festivities	Pepin County	Maria Nelson Emergency Manager 715-672-8897	58	3

Please identify the 3 Greatest Strengths You Observed During this Exercise:	**Please identify the top 3 Areas of Improvement You Observed During this Exercise:**
1. Sharing of information regarding GET's Cards/FIRSTNET phones 2. Speakers and exercise time incorporated throughout the day instead of at the end provided better opportunity to collaborate/discuss scenario 3. Learning additional information about family assistance centers	1. Participation from additional agencies/organizations 2. More time to discuss scenario 3. Lack of people to effectively respond within our community (might be parade, but might not have equipment)

Target Capability	Identify the Observation you saw that should be corrected	Identified Corrective Action (How should it be fixed?)	Agency Responsible	Individual Responsible	Completion Date
Operational Coordination	Within our community, it is uncertain that the EM Director would be notified to open up EOC (if needed).	Remind emergency response agencies to notify the EM Director if a situation occurs that requires outside help or additional coordination.	Fire, Law Enforcement, EMS, and EM	EM Director	Ongoing
Communication	Work to notify hospitals of situations that may surge capacity	Continuously work on improving communications between response based organizations	Fire, Law Enforcement, EMS, Dispatch	Ambulance (EMS)	Ongoing

Fatality Management	Involve coroners in exercises (greater training for new team)	Continue to work with new coroner to provide greater involvement in training, exercises, etc.	Coroner, Health Department, EM, Fire, EMS, Law Enforcement	Health Department Law Enforcement & EM	Ongoing
Public Information & Warning	Coordinate efforts to provide messaging	1) Update PIO list & train additional people 2) Work on message templates	EM	EM Director	June 2019 Ongoing

Executive Summary:

Pepin County participated in the Northwest Wisconsin Emergency Readiness Coalition exercise on April 23, 2019. We had three individuals able to attend: Tammi Bechel, representing Pepin County Health Department; Angela Jacobson, representing Advent Health; and Maria Nelson, Emergency Management Director. The exercise scenario asked us to evaluate the capacity of our organizations and emergency response based partners to effectively respond to an accident involving a vehicle driving into a crowd of people during a holiday parade. Based on the exercise, we found the scenario plausible and helpful in evaluating our ability to respond as a community/county. During the exercise, we were able to communicate to share information about what is most likely to occur in this situation, discuss plans and staffing challenges, and help each other to expand our toolkit of available resources. We also gained a better understanding of establishing a family assistance center and gained insight from being located with regional hospitals. Opportunities for improvement include exercising/training with a greater variety of partners, greater time for discussion of scenario, and increasing the number of responders/volunteers in our community to support each other in the event of a disaster/emergency.

Overall, this was a successful exercise which left us better prepared for an incident that requires us to set up a family assistance center or coordinate other recovery orientated facilities. Pepin County will continue to work with its' emergency preparedness and response partners to update phone lists and plans and to train/exercise.

Date of Exercise:	**Name of Agency or Jurisdiction Completing this form:**	**Name, Phone, Email of PRIMARY POC for this document:**	**Number of Agencies that participated in this exercise (including your own):**	**Total number of local participants (people) that participated in exercise:**	
April 23, 2019 Wisconsin Indianhead Technical College, Rice Lake, WI Holiday Festivities	Pierce County	AZ Snyder 715-273-6782 Ayslinn.snyder@co.pierce.wi.us	58	8	

Please identify the 3 Greatest Strengths You Observed During this Exercise:	**Please identify the top 3 Areas of Improvement You Observed During this Exercise:**
1. Partners were willing and able to work together to problem solve for special populations (the elderly in long term care). 2. We do have adequate plans in place to address hazards like this one. 3. We have many communication tools for both public and staff notification (cell phone trees, cell phone priority tools, Everbridge, RAVE, Facebook).	1. Although we have plans we are familiar with, we might revert back to informal relationships in an emergency. 2. We need more people trained to handle a Family Assistance Center if the incident is sustained. 3. We don't currently have a method for contacting all county department heads for situational awareness.

Target Capability	Identify the Observation you saw that should be corrected	Identified Corrective Action (How should it be fixed?)	Agency Responsible	Individual Responsible	Completion Date
Communication	We don't currently have a method for contacting all county department	Create an Everbridge list for county department heads.	Emergency Management	Gary Brown	

	heads for situational awareness.				
Communication	Long term care facilities may not be signed up for Everbridge.	Have management staff sign up for Everbridge alerts	Heritage of Elmwood and Spring Valley Senior Living	Kevin Larson and Ellen Thompson	
Fatality Management	Sustaining a family assistance center in a sustained incident could be difficult given the small number of staff trained.	Have a FAC training or drill for public health and human services staff in the next year	Public Health	AZ Snyder	

Executive Summary:

The exercise occurred on April 23, 2019. Representatives from Pierce County included Public Health (AZ Snyder, Craig Martin, Dianne H-Robinson), Pierce County Law Enforcement (Nancy Hove and Steve Albarado), and Long-Term Care Facilities (Kevin Larson, Ellen Thompson, Jennifer Gossen. The scenario was a mass fatality and injury incident at a summer parade. A driver drove into a crowd for unknown reasons.

The team identified several of our strengths during the exercise. Partners were willing and able to work together to problem solve for special populations (the elderly in long term care). We do have adequate plans in place to address hazards like this one. We have many communication tools for both public and staff notification (cell phone trees, cell phone priority tools, Everbridge, RAVE, Facebook). We also identified several weaknesses. Although we have plans we are familiar with, we might revert back to informal relationships in an emergency. We need more people trained to handle a Family Assistance Center if the incident is sustained. We don't currently have a method for contacting all county department heads for situational awareness.

Date of Exercise:	**Name of Agency or Jurisdiction Completing this form:**	**Name, Phone, Email of PRIMARY POC for this document:**	**Number of Agencies that participated in this exercise (including your own):**	**Total number of local participants (people) that participated in exercise:**	
April 23, 2019 Wisconsin Indianhead Technical College, Rice Lake, WI Holiday Festivities	Polk County Health Department	Megan Krieglmeier megan.krieglmeier@co.polk.wi.us 715-485-8500	58	4	

Please identify the 3 Greatest Strengths You Observed During this Exercise:	**Please identify the top 3 Areas of Improvement You Observed During this Exercise:**
1. Good representation from disciplines except EMS 2. All partners were prepared to manage at least the initial response. 3. Partners were able to identify resources to meet unmet needs and/or surge.	1. Need to remember to call the HERC for help. 2. LTCF's feel the need PIO training. 3. Need to develop and implement a better way of identifying and registering patients/residents and tracking.

Target Capability	Identify the Observation you saw that should be corrected	Identified Corrective Action (How should it be fixed?)	Agency Responsible	Individual Responsible	Completion Date
Emergency Operations Coordination	HERC was not contacted	Identify this in plans. Add to response partner directory	Polk County Health Department	Brittany Fry	05/30/2019

Emergency Public Information and Warning	Not all agencies have a trained PIO.	Share trainings with partners, especially upcoming trainings involving emergency communication	Polk County Health Department	Brittany Fry	05/01/2019
Fatality Management	During an incident where people are injured/displaced/ or one that results in Mass Casualty there is not a consistent system to track people.	Update, review, and share FAC/ Family Reunification Tracking Forms.	Polk County Health Department	Brittany Fry	04/23/2020

Executive Summary:

On April 23rd, 2019 there was a regional exercise for all HERC Partners in the Northwestern Wisconsin HERC Region. In this table top exercise, a truck drove down a parade route on the Fourth of July resulting in many injuries and fatalities. This resulted in hospitals being overwhelmed and the need to establish a family assistance center. The three strengths of this exercise were, good representation from disciplines except EMS, all partners were prepared to manage at least the initial response, and partners were able to identify resources to meet unmet needs and/or surge. There were also areas of improvement. These included, need **to** remember to call the HERC for help, LTCF's feel the need PIO training, and need to develop and implement a better way of identifying and registering patients/residents and tracking.

Overall, this exercise was a success due to the fact that there are plans established and partners know their basic role in this type of situation, along with bringing partners together and making contacting. However, there are areas in the response that can be improved. The results from this exercise will be brought to the county and changes will be made based on the opportunities for improvement. These changes will help solidify our response capabilities in the event that this type of response is ever needed.

Date of Exercise:	**Name of Agency or Jurisdiction Completing this form:**	**Name, Phone, Email of PRIMARY POC for this document:**	**Number of Agencies that participated in this exercise (including your own):**	**Total number of local participants (people) that participated in exercise:**	
April 23, 2019 Wisconsin Indianhead Technical College, Rice Lake, WI Holiday Festivities	Price County Emergency Management	Roxanne I. Kahan (715) 339-5239, Roxanne.kahan@co.price.wi.us	58	1	

Executive Summary:

One representative from Price County, the Emergency Management Coordinator, participated in the Northwest WI Healthcare Emergency Readiness Coalition and WWPHRC Regional Exercise on April 23, 2019 at the Wisconsin Indianhead Technical College, Rice Lake, WI. The scenario involved a mass casualty event during a 4th of July parade. While the scenario involved spectators being struck by a truck, it also had the added bonus of the truck hitting a power pole.

In reality, Price County Emergency Management is part of the Northwest Wisconsin Emergency Management (WEM) region, but is actually part of the North Central Wisconsin Healthcare Emergency Readiness Coalition (NCW HERC). Because most emergency management offices has a staff of one (1), it would not be uncommon to be asked to assist other emergency managers in the Northwest region. In which case, being somewhat familiar with the NWW HERC capabilities and procedures is useful. The opportunity to work with multiple regions helps to enhance overall preparedness, with the added advantage of understanding assets from both HERC regions.

It was wonderful to have a wide variety of players (Hospitals, Public Health from two counties, etc.) at the exercise to share their knowledge, practices/policies, as well as their limitations. The exercise provided an opportunity to consider our gaps in responding and what we might need to do to address them (both internally and externally). Many emergency responders, Fire/EMS/LE would be part of the parade in the scenario; so identifying possible exits for emergency vehicles is something worth considering when planning future community parades. There were thought provoking questions throughout the exercise, i.e. FAC staffing, IC/UC location and operations, communicating across disciplines and with public, fueling emergency vehicles during a power outage… which will be discussed locally to enhance our plans and provide insight into our response capabilities. Thank you for the opportunity to play!

Date of Exercise:	**Name of Agency or Jurisdiction Completing this form:**	**Name, Phone, Email of PRIMARY POC for this document:**	**Number of Agencies that participated in this exercise (including your own):**	**Total number of local participants (people) that participated in exercise:**	
April 23, 2019 Wisconsin Indianhead Technical College, Rice Lake, WI Holiday Festivities	Rusk County Public Health Department	Nicole Nelson 715-532-2227 nnelson@ruskcountywi.us	58	6	

Please identify the 3 Greatest Strengths You Observed During this Exercise:	**Please identify the top 3 Areas of Improvement You Observed During this Exercise:**
1. This event was realistic, which made it easier to communicate how the group would handle the situation. 2. There were different counties at the table and it was great to hear everyone's perspective on the event. 3. Resources were shared between agencies to help speed up communication between staff.	1. The communication for a live event needs to be evaluated and test runs are necessary to prepare for a real event. 2. Staffing for a FAC needs to be worked on to include more volunteers in the counties plans. 3. Police and HHS have big rolls in this event and neither were at the table.

Target Capability	Identify the Observation you saw that should be corrected	Identified Corrective Action (How should it be fixed?)	Agency Responsible	Individual Responsible	Completion Date
Operational Coordination and Communication	More involvement with other departments that	There needs to be more communication about plans for the county and the roles	Communicate with	Public Health Preparedness	

	play a role in the ICS structure.	of departments in the county during events.	department heads	Coordinator/EM	
Fatality Management	There is not enough room in the county for more than 3 deceased individuals.	The fatality management plan needs to be reviewed and updated. This plan is made for a situation where an event had multiple causalities. Contact information and contracts need to be updated annually.	Update plan annually	Public Health Preparedness Coordinator.	
Information Sharing	Not all the correct partners are being notified right away.	Drills with dispatch need to be done to ensure the correct people are being notified when an event happens.	Be involved in communication drills	EM/County Administrator	

Executive Summary:
On April 23, 2019, representatives from the following Rusk County organizations participated in the Regional Exercise. Partners included: Marshfield Medical Center-Ladysmith, Rusk County Public Health, and Rusk County Emergency Management.

During the 4th of July parade in Ladysmith, WI on a humid 90 degree day a truck drove down a sidewalk hitting and injuring multiple people who were watching the parade. The truck stopped when it hit a telephone pole which took out power to the long term care facilities in the town. Some residents were watching the parade when this happened and family members are now looking for them. Also people are overwhelming the local hospital with injuries caused by this event. After some time victims are been transferred to other neighboring hospitals, and the FAC is opened, all victims have been transported from the scene. There were 58 people that have been seen in Wisconsin emergency departments and 6 fatalities from the scene. After 3 days there are now 10 fatalities and 68 people that were scene in the emergency room for this event.

This exercise could happen in any county during a major holiday where a big group of people are gathered. There were 3 counties at the table during this exercise and each person contributed and gave great input. One key partner that was missing from all counties was a representative from HHS. With the FAC they play a huge role in helping to run the center and bring experts to help victims during this crisis. With the FAC being open for multiple days staffing becomes a problem. Volunteers are needed to give county employees a break and right now the county doesn't have any volunteers. Communication is always important in an event. With this exercise there were areas where we need to practice using our communication system and make sure dispatch knows how to use it. Overall this was a great exercise and there were weaknesses identified during this exercise that we will work on improving.

Date of Exercise:	**Name of Agency or Jurisdiction Completing this form:**	**Name, Phone, Email of PRIMARY POC for this document:**	**Number of Agencies that participated in this exercise (including your own):**	**Total number of local participants (people) that participated in exercise:**	
April 23, 2019 Wisconsin Indianhead Technical College, Rice Lake, WI Holiday Festivities	St Joseph's Hospital, Chippewa Falls Sacred Heart Hospital, Eau Claire	Mark Anderson 715-717-3702 Mark.anderson@hshs.org	58	1	

Please identify the 3 Greatest Strengths You Observed During this Exercise:	**Please identify the top 3 Areas of Improvement You Observed During this Exercise:**
1. The familiarity of community partners with the communication structures utilized in the event of an emergency. 2. Familiarity with community partners. The exercise provided an opportunity to more completely understand various agency roles in an emergency. 3. MCI readiness in the community. A variety opf resources available.	1. Need to evaluate our EOP for reference to a Family Assistance Center and including that possibility in our plans for communication and coordination with community partners. 2. Consider the effectiveness of MCI registration process and evaluate for streamlining opportunities 3. Challenge of coordinating communication between and from multiple agencies.

Target Capability	Identify the Observation you saw that should be corrected	Identified Corrective Action (How should it be fixed?)	Agency Responsible	Individual Responsible	Completion Date
Communication	Recognized that communication between the FAC and	Evaluate EOP for opportunity to more clearly delineate responsibility for and method of communication with FAC.	St Joseph's Hospital	Mark Anderson	June 30, 2019

	the hospitals might be problematic.				

Executive Summary:

The Emergency Management Coordinator for the hospital participated along with representatives from a wide variety of community agencies. The scenario was one involving mass casualties which would easily overwhelm any single receiving hospital. The opportunity to discuss potential actions and considerations with community partners was very valuable.
Communication was identified as critical to the effective response. While there are very clear communication structures that are used for everyday emergency situations, the complexity would be compounded with the creation of a Family Assistance Center (FAC).
The strengths and areas for improvement are described above. These will be addressed through an assessment of current communication plans for inclusion of considerations related to FAC and coordinating communication with multiple agencies.

Date of Exercise:	**Name of Agency or Jurisdiction Completing this form:**	**Name, Phone, Email of PRIMARY POC for this document:**	**Number of Agencies that participated in this exercise (including your own):**	**Total number of local participants (people) that participated in exercise:**	
April 23, 2019 Wisconsin Indianhead Technical College, Rice Lake, WI Holiday Festivities	Sawyer County Health and Human Services	Julie McCallum	58	3 from Sawyer/LCO	

Please identify the 3 Greatest Strengths You Observed During this Exercise:	**Please identify the top 3 Areas of Improvement You Observed During this Exercise:**
1. Resources available in the community 2. Information sharing model between partners 3. FAC planning in place	1. Staffing needs, especially during the holiday 2. Minimal communication with the public 3. Calling on outside assistance, including HERC

Target Capability	Identify the Observation you saw that should be corrected	Identified Corrective Action (How should it be fixed?)	Agency Responsible	Individual Responsible	Completion Date
Public Information and Warning	Minimal communication with public within the exercise.	Designated PIO to create one clear and concise message to the public.	Sawyer County	Eileen Simak	June 30, 2019

Community Preparedness and Participation	From Sawyer County, the EM, a PHN, and the EM from LCO participated in the activity.	Invite additional partners, including hospital and law enforcement to the table for the next exercise.	Sawyer County	Eileen Simak Julie McCallum	March 31, 2020
Fatality Management	With 6 deaths, this may exceed the available space within the morgues, depending if other bodies not associated with the disaster are being stored at the time of the disaster.	Know mass fatality plan in Sawyer County and the contingency plans should the number of bodies exceed the available space.	Sawyer County	Julie McCallum	June 30, 2019

Executive Summary:

The Table Top Exercise took place in Rice Lake WITC on April 23. Around the table were representatives from Washburn County Health Department, Spooner Hospital, a home care agency, Sawyer County Health Department, and Emergency Management from Washburn and LCO. Our scenario was a vehicle that drove into spectators at the Spooner July 4th parade and hit many people along with a powerline. There were 6 fatalities and many more injuries. We discussed what would happen, who would know and communicate information, and when the different agencies around the table would get involved.

Overall, we felt that the community resources, including the FAC, to handle the emergency were a strength, as was the information sharing between agencies. SharePoint was discussed being a good method to communicate between the agencies listed. Having access to a cell service that makes your calls a priority, the GETS card, and the radio gave other methods of communication. Opportunities for improvement include staffing on a holiday when many staff are not available or even accessible by cell phone, notifying the public in a timely way, calling HERC as a resource or other agencies at the state level to inform them, and coordination of the mass fatality plan.

The learning exercise was a success, talking through community resources and the policies already in place and what might happen with similar disaster. Moving forward, knowing the community policies and partners before an emergency is important, as is making sure staff are aware of their role in an emergency.

Date of Exercise:	**Name of Agency or Jurisdiction Completing this form:**	**Name, Phone, Email of PRIMARY POC for this document:**	**Number of Agencies that participated in this exercise (including your own):**	**Total number of local participants (people) that participated in exercise:**	
April 23, 2019 Wisconsin Indianhead Technical College, Rice Lake, WI Holiday Festivities	Spring Valley Health and Rehabilitation Center & Valley Villas Assisted Living | Spring Valley Senior Living and Health Care Campus	Kevin Larson 715-778-5545 x203 KevinL@svhcs.org	58	2	

Please identify the 3 Greatest Strengths You Observed During this Exercise:	**Please identify the top 3 Areas of Improvement You Observed During this Exercise:**
1. Participating partners were willing and able to work together to problem solve for special populations (the elderly in long term care). 2. Pierce County does have adequate plans in place to address hazards like this one. 3. Pierce County has many communication tools for both public and staff notification (cell phone trees, cell phone priority tools, Everbridge, RAVE, Facebook).	1. Although Pierce County has plans which are familiar with, there may be tendencies to revert back to informal relationships in an emergency. 2. Pierce County needs more people trained and prepared to handle a Family Assistance Center if the incident is protracted for any extended period of time. 3. Pierce County doesn't currently have a method for contacting all county department heads for situational awareness. 4. Long term care & senior living providers should be included and take advantage of communication platforms presently established by Pierce County for critical event – situation awareness communications.

Target Capability	Identify the Observation you saw that should be corrected	Identified Corrective Action (How should it be fixed?)	Agency Responsible	Individual Responsible	Completion Date
Intra-Agency Communication	We don't currently have a method for contacting all county department heads for situational awareness.	Create an Everbridge list for county department heads.	Emergency Management	Gary Brown	
Inter-Agency Communication	Long-term care & senior living facilities may not be signed up for Everbridge.	Have management staff sign up for Everbridge alerts	Heritage of Elmwood and Spring Valley Health & Rehab Center | Spring Valley Senior Living & Health Care Campus	Ellen Thompson Kevin Larson and Jennifer Gossen	
Fatality Management	Sustaining a family assistance center in a sustained incident could be difficult given the small number of Pierce County Department of Human Services and Public Health staff trained.	Have a FAC training or drill for public health and human services staff in the next year	Public Health	AZ Snyder	

Special Population Evacuation Protocols	Long-term care & senior living campuses evacuation protocols need to be updated and shared with other Pierce County agencies.	Evacuation equipment and supplies provided by the Northwest WI Healthcare Emergency Readiness Coalition to the long term care & senior living providers need to be implemented. Protocols and training for professional and para-professional caregivers (end-users) needs to be developed and put in place. County agencies especially law enforcement and emergency management system professionals need to be made aware of these unique emergency evacuation protocols and equipment for long-term care & senior living providers.	Heritage of Elmwood and Spring Valley Health & Rehab Center | Spring Valley Senior Living & Health Care Campus	Ellen Thompson Kevin Larson and Jennifer Gossen	

Executive Summary:
The exercise occurred on April 23, 2019. Representatives from Pierce County included Public Health (AZ Snyder, Craig Martin, Dianne H. Robinson), Pierce County Law Enforcement (Nancy Hove and Steve Albarado), and Long-Term Care Facilities (Kevin Larson, Ellen Thompson, Jennifer Gossen). The scenario was a mass fatality and injury incident at a summer parade. A semi-truck driver drove into a crowd for unknown reasons.

The Pierce County Participants identified numerous strengths during the exercise. Participating partners were willing and able to work together to problem solve for special populations (i.e. the elderly in long term care). Pierce County does have adequate plans in place to address hazards like this one. Pierce County does have many communication tools for both public and staff notification (cell phone trees, cell phone priority tools, Everbridge, RAVE, Facebook). Participants from Pierce County identified several weaknesses. Although Pierce County has established plans that are familiar, individuals could possibly revert back to informal relationships in an emergency. Pierce County needs more professionals to handle a Family Assistance Center if the incident is sustained. Pierce County could benefit from more formal communication methods for contacting all county department heads for situational awareness.

Date of Exercise:	**Name of Agency or Jurisdiction Completing this form:**	**Name, Phone, Email of PRIMARY POC for this document:**	**Number of Agencies that participated in this exercise (including your own):**	**Total number of local participants (people) that participated in exercise:**	
April 23, 2019 Wisconsin Indianhead Technical College, Rice Lake, WI Holiday Festivities	United Pioneer Home	Jay Andress Administrator	58	1	

Please identify the 3 Greatest Strengths You Observed During this Exercise:	**Please identify the top 3 Areas of Improvement You Observed During this Exercise:**
1. It was a realistic scenario, one that could happen in any of our communities and had the potential to impact many of the different stakeholders participating. 2. It gave us an opportunity to meet and collaborate with other community partners. 3. The speakers were able to give us examples of real-life events and the issues/challenges presented by these events so we could learn from them.	1. Acronyms were sometimes used in the presentations and printed material that I wasn't familiar with until I asked someone at my table – this may be just because I was new to this event.

Target Capability	Identify the Observation you saw that should be corrected	Identified Corrective Action (How should it be fixed?)	Agency Responsible	Individual Responsible	Completion Date
Operational Coordination	Working with community partners	Enter into Memorandums of Understanding with more community	Long term care centers	Administ-rator	June 1, 2019

		partners for relocation of facility residents as the receiving facility's ability to take a large number maybe limited due to space and staffing.			
Communication	Lack of internal public Information Officer	A PIO should be identified and trained.	United Pioneer Home	Administrator	August 1, 2019
Communication	Internal challenges of communicating with off-duty staff	Inquire about obtaining a GETS card – do we qualify?	United Pioneer Home	Administrator	June 1, 2019

Executive Summary:

On April 23rd, 2019 a Regional Symposium and Table Top exercise was conducted from 10:00 AM to 3:00 PM at the Wisconsin Indianhead Technical College Conference Center in Rice Lake, WI. The event was hosted by the Northwest Wisconsin Healthcare Emergency Readiness Coalition and was attended by various agencies and healthcare facilities representing a 15-county area. I attended the event as the administrator of a 50 bed long-term care facility located in Luck, WI in Polk county. The scenario that was presented was a 4th of July event that occurred at a local parade. For an unknown reason, a vehicle slammed into a crowd of parade on-lookers, resulting in at least 6 casualties and many injuries. The scenario challenged each of us to think how this event would have impacted our organization and how we would have handled the response to such an event. For us, we learned that some of our nursing home residents were at the event and we did not have immediate information as to their status/safety yet we had concerned family members contacting us for information. How would we handle this?

The strengths of this exercise were that it was a realistic scenario, one that could occur in any of our communities regardless of size. We were also seated at tables representing our counties, so we had the opportunity to meet and work with the actual people that would be involved in a real situation. This gave us an idea of who we might want to reach out to in a real emergency. Another strength was that we got to hear from experts in the field who had real-life experiences that we could benefit hearing from. The only real opportunity I thought with this event was to "dumb-it-down" a bit for those of us who were new to an event like this and may not necessarily have the background to know the various players, what they do and how they would benefit us in a real event. Also, the use of acronyms sometime caused issues for some in the audience.

Overall, I thought this was an excellent event and I learned a great deal about emergency preparedness and what we could do as an organization to better prepare ourselves. I can take what I learned from this event to seek additional training and to strengthen our own policies and procedures, for example, making sure our resident have some kind of identification on them when going out of the facility for an event.

Date of Exercise:	**Name of Agency or Jurisdiction Completing this form:**	**Name, Phone, Email of PRIMARY POC for this document:**	**Number of local Agencies that participated in this exercise:**	**Total number of local participants (people) that participated in exercise:**	
April 23, 2019 Wisconsin Indianhead Technical College, Rice Lake, WI Holiday Festivities	Washburn County Health & Human Services	Cheri Nickell, Health Officer 715-635-4400 cnickell@co.washburn.wi.us	58	6	

Please identify the 3 Greatest Strengths You Observed During this Exercise:	**Please identify the top 3 Areas of Improvement You Observed During this Exercise:**
1. Great working relationship between EM and PH 2. Understanding of both internal ICS structure and county ICS structure 3. Communications redundancy	1. Need platform for Information sharing 2. Staff unfamiliar with GETS 3. Increased PIO capacity

Target Capability	Identify the Observation you saw that should be corrected	Identified Corrective Action (How should it be fixed?)	Agency Responsible	Individual Responsible	Completion Date
Information sharing	No system in place to share and update missing/injured/ dead list between partners other than	An information sharing platform will be purchased by Public health and the necessary forms to be used will be developed and shared with planning partners	WCHD	C nickell	By 12/31/2019

	by phone, which is not very feasible				
Public Information & warning	Due to staff retirements, only the Health Officer currently has any PIO training	At least one additional staff member will complete basic PIO training by 12/31/2019	WCHD	C nickell	By 12/31/19
Operational Coordination	New staff unfamiliar with GETS	Review GETS use, along with basic ICS structure at a staff meeting	WCHD	C Nickell	By 12/31/19

Executive Summary:

Washburn County participated in NWWIHERC's Holiday festivities tabletop exercise on 4/23/2019. The scenario was a truck plowing into a crowd of parade goers during a 4th of July parade. Capabilities tested included Emergency Operations Coordination, Emergency Public Information and Warning/Information Sharing, and Mass Fatality. There were 6 participants from 4 Washburn County agencies at the regional TTEX.

Hearts of Gold Home Care (1)	Spooner Health (2)	Washburn Co. EM (1)	Washburn Co. Public Health (2)

Three strengths were:

1. **Great working relationship between EM and PH.**
2. **Understanding of both internal ICS structure and county ICS structure**
3. **Communications redundancy**

Three Opportunities were:

1. **Need platform for Information sharing**
2. **Staff unfamiliar with GETS**
3. **Increased PIO capacity**

Washburn County would find it challenging to respond to a large scale mass injury/mass fatality scenario, just because our local resources are limited. However, within the scope of that limitation, the county has response plans in place that will suffice until mutual aid can be invoked. Our EM Director has engaged community partners in several EOC exercises, so that partners know how information will be gathered and shared with both partners and the community. Public Health does need to have more depth at PIO, as the only one with any PIO training is the Health Officer. The plan going forward is to have the Public Health Specialist get PIO training; this will be a good fit, as she is very comfortable with social media platforms. Although we have communication redundancy for partner information sharing, it primarily involves one-on-one contact. This would not work well for continually updating a missing/injured/dead list between L.E., Coroner, FAC, call center, EOC, and hospitals. Using a sharepoint file may work, and unlike some larger systems, our local hospitals do not have firewalls preventing sharepoint (I do wonder how those systems access the PCA portal).

Date of Exercise:	**Name of Agency or Jurisdiction Completing this form:**		**Number of Agencies that participated in this exercise (including your own):**	**Total number of local participants (people) that participated in exercise:**	
April 23, 2019 Wisconsin Indianhead Technical College, Rice Lake, WI Holiday Festivities	Linda Maday 715-928-2502 Linda.maday@wwhealth.org Primary POC: Linda Maday Western Wisconsin Health		58	1	

Please identify the 3 Greatest Strengths You Observed During this Exercise:	**Please identify the top 3 Areas of Improvement You Observed During this Exercise:**
1. Identifying how these lessons play into developing our Business Continuity Plan 2. Thorough explanation of Family Assistance / Reunification Needs 3. Identification/sharing of new resources i.e. "I love you guys" foundation, Safe Plans and WI Human Services Hotline	1. Patient Tracking system 2. Public Information Officer 3. Establishment of Family Reunification/Assistance Center

Target Capability	Identify the Observation you saw that should be corrected	Identified Corrective Action (How should it be fixed?)	Agency Responsible	Individual Responsible	Completion Date
Public Information and Warning	Lack of pre-planned public statements	Our PIO should take steps to develop two or three pre-planned public statements r/t our top three HVA risks for rapid dissemination of crucial information to our public.	Western WI Health	Maggie Cogbill	8-1-19

Communication	Need for a workable family assistance center	Develop a plan to identify and plan for implementation of a family assistance center.	Western WI Health	Linda Maday and Robb Paulson	8-1-19
Fatality management	Patient tracking system	Need to improve our current tracking system	Western WI Health	Med Surg leadership with EP Coordinators	8-1-19

Executive Summary:

On April 23, 2019 I attended the Region 1 Symposium and Table Top Exercise and participated in the table top exercise. I joined with a variety of different stakeholders (law enforcement, public health, hospitals, clinics, long term care facilities) in a table top exercise to define how our regional partners could come together in a time of crisis that lasts over an extended period of time.

Combining the morning speaker (topic of a family assistance center) and the scenario for the table top, we followed the HICS system and implementation of Incident Command to coordinate efforts to manage the event. Knowledge regarding our partnerships throughout the region was displayed in being able to identify resources needed to manage the event. Within this exercise I could identify three areas we need improve at our facility: pre-planned public statements by our PIO, development of a family assistance center and improving our patient tracking system. Our public statements are usually developed “after the fact” but as part of a business continuity plan, some basic statements should be developed in conjunction with our top HVA identified risks to have ready if/when an event requires such a statement to the public. We currently have a very “loose” family assistance center” plan in our EOP but it is clear much work needs be completed in this area. This is also true of our patient tracking system; we need to work to improve this and practice it through our own exercise. I feel the tabletop offered a good deal of information we can use to continue to improve our Emergency Operations Plan and Business Continuity Plan which we are currently attempting to develop.

Date of Exercise:	**Name of Agency or Jurisdiction Completing this form:**	**Name, Phone, Email of PRIMARY POC for this document:**	**Number of Agencies that participated in this exercise (including your own):**	**Total number of local participants (people) that participated in exercise:**	
April 23, 2019 Wisconsin Indianhead Technical College, Rice Lake, WI Holiday Festivities	Westfields Hospital and Clinics	Dominic Ehman, RN Dominic.l.ehman@westfieldshospital.com 6513362715	58	3	

Please identify the 3 Greatest Strengths You Observed During this Exercise:	**Please identify the top 3 Areas of Improvement You Observed During this Exercise:**
1. Initial notification went well. ED monitors scanner so would likely hear initial call. 2. Ability for WFH to gather resources quickly through Send Word Now application and several local employees. 3. Good coordination between hospital and family assistance center.	1. How does WFH communicate if lines are full, cell service down? 2. Accurate tracking of patients without ID may be a challenge (from scene, to hospital and between hospitals) 3. Communicating with families during the very early phases of the response. Hospital likely to be overwhelmed with loved ones.

Target Capability	Identify the Observation you saw that should be corrected	Identified Corrective Action (How should it be fixed?)	Agency Responsible	Individual Responsible	Completion Date

Incident Command	Emergency communications capability	Do we have access to GETS cards? We very well might but I am not aware.	Hospital emergency preparedness group		
Patient tracking	IC on scene would likely have a transportation officer to track patient movement from scene, many will be "doe" patients. Hospital might have "doe" patients or ID'd patients. Some will go directly to Regions or elsewhere.	I think patient tracking would be a challenge. Who would hold and disseminate that information from all sources (EMS/Hospital)?	Hospital emergency preparedness group		
Family Assistance	How quickly can we establish family assistance center. When do we involve public health? Red Cross?	Does the hospital have plans to contact county public health for assistance in an event such as this? What would this look like?	Hospital emergency preparedness group		

Question 1: What type of agency do you represent?

ANSWER CHOICES–	RESPONSES–
Hospital	**21.88%** 7
Emergency Management	**12.50%** 4
Public Health Department	**53.14%** 17
EMS/Air Medical	**0.0%**
Home Care/ Hospice	**3.13%** 1
Long Term Care	**9.38%** **3**
TOTAL	32

Question 2: The morning speakers provided interesting and valuable information regarding emergency preparedness.

STRONGLY DISAGREE	DISAGREE	NEUTRAL	AGREE	STRONGLY AGREE	TOTAL	WEIGHTED AVERAGE
0.00% 0	1.75% 1	7.02% 4	38.60% 22	52.63% 30	57	**4.42**

Question 3: The Exercise Scenario was Plausible and Realistic

STRONGLY DISAGREE	DISAGREE	NEUTRAL	AGREE	STRONGLY AGREE	TOTAL	WEIGHTED AVERAGE
0.00% 0	0.00% 0	0.00% 0	45.16% 14	54.84% 17	31	**4.55**

Question 4: Exercise participants included the right people in terms of disciplines.

STRONGLY DISAGREE	DISAGREE	NEUTRAL	AGREE	STRONGLY AGREE	TOTAL	WEIGHTED AVERAGE
3.23% 1	3.23% 1	22.58% 7	61.29% 19	9.68% 3	31	**3.71**

Comments:

1. Could always have more representation; eg. EMS, Emergency Management, Human Services, etc.
2. Wish we would have had more representation from our County.
3. Our EM didn't attend and we were placed with another county that our residents do not use for healthcare.
4. Our county has a hard time getting the right people to trainings/exercises, but I appreciate the mix that was at our table which provided a different perspective.
5. The Ashland County participants were the right people; however not enough discipline representation.

6. Could have been more LE, Fire and EMS, mortuary services.
7. From a hospital standpoint, it would be nice for Senior Leadership to be involved since they would be Incident Command. This is something I will encourage them to attend each year.
8. Would have been good to have more EMS/Fire/LE/to gain their perspective.
9. EMS and Fire could have provided valuable input if they had been able to attend. Also, next time I will invite our ED Manager as well.
10. I wish emergency Management would have been at our table.
11. Could have used fire/law enforcement and LTC at our table.
12. Next time I will invite human services representation.
13. Missing County Human Services, local county and city law enforcement, EMS, fire
14. No EMS
15. EMS, Sheriff, firefighters, dispatch weren't strongly represented.
16. Would have like more PD/Sheriff and DHS

Question 5: Exercise participation was appropriate for someone in my field and level of experience.

STRONGLY DISAGREE	DISAGREE	NEUTRAL	AGREE	STRONGLY AGREE	TOTAL	WEIGHTED AVERAGE
0.00% 0	0.0% 0	12.90% 4	54.84% 17	32.26% 10	31	**4.19**

Comments:

1. It seems that public health is always struggling to find their role in these exercises.
2. I have been in my role for 2 years and it's still confusing. Maybe dummy it down a bit.
3. This was the first time I had attended one of these exercises and had not done basic ICS training in over 5 years so it was a little over my head but still good information.

Question 6: The exercise increased my understanding of and familiarity with the capabilities and resources of other participating organizations.

STRONGLY DISAGREE	DISAGREE	NEUTRAL	AGREE	STRONGLY AGREE	TOTAL	WEIGHTED AVERAGE
3.23% 1	0.00% 0	3.23% 1	58.06% 18	35.48% 11	31	**4.23**

Comments:

1. As stated previously, we were placed with a different county that does not have healthcare facilities our residents use.
2. Of those participating-yes; however needed a wider array of disciplines participating.

Question 7: Please provide recommendations on how this exercise or future exercises could be improved or enhanced?

1. I don't know how this would be fixed, but during the table discussions of the sit reps, it was difficult to hear each other with so many other people at different tables talking at the same time.
2. Please do not try to mix it up again. While it is good to know other partners, it is difficult to get anything out of the exercise when you know nothing about the other county and your residents do not go there for healthcare. You need to place counties together that use the same hospitals, EMS and fire.
3. More time, different setting (hard to hear across table for discussion based exercises with the number of people in the room.
4. Again, better overall participation in terms of agencies/partners/disciplines.
5. Interesting to be paired with a different county than usual for this exercise, but was good to learn more about it.
6. Continue to provide realistic mock events to help all disciplines work together through the states of the event. It was a great idea to have different disciplines at each table.
7. Highly beneficial exercise, would not change a thing.
8. Having a full functional exercise is always great.
9. Continue to provide SME/Speakers who can share their real experience. It helps set the tone of the exercise and often enlightens us to something overlooked in our plans and ID gaps.
10. A little more time for the exercise portion. Also, more participation from EMS, PD, and Fire.
11. My only suggestion is to try to encourage more law enforcement participation. But as you said, that's not always feasible for them.
12. We wished we would have brought our EOC checklist with us.
13. The exercise could have used an extra few minutes for our table discussions.
14. I thought this was very well planned. It helped our team learn a lot.
15. I thought it was great. I learned a lot. Thank you!! I loved how we sat at the same tables as our county. I learned a lot from other entities and we discussed how we can improve each other. It was great!!
16. Include county and city law enforcement, EMS, fire, and human services.
17. Hard to hear people on the other side of the table. Would it be possible to break it down to smaller groups?
18. I would make a separated exercise for the home care and LTCF's. the are lost through so much of the health/EM/EMS response. I don't think these exercises do justice to their needs.

19. Could have used more time to discuss and work through the logistics especially with communication.
20. Make into a simulation/game.
21. Would like to see more human services and law enforcement participation.

Question 8: Please share topics or themes for future exercises/symposiums.

1. Long Term care facility fire; water-borne outbreak in the city
2. Truck turnover, spill to US Hwy
3. More information on Cybersecurity threats
4. A mass casualty exercise that weakens one county and needs assistance from surrounding counties.
5. Large Crowd Active shooter event…Birkie, Fat Tire race, Country Jam, Northern WI State Fair, Eleva Broiler Fest, inner tubing the Chippewa River, etc.
6. I would love to do a foodborne outbreak one.
7. More exercises where we have to work outside our own organizations. More scenarios where the focus is on communication back and forth.
8. School shooting-something no one wants to talk about but everyone is worried about. I would like to see all steps involved with specific details like what would a certain county do-from school plans to hospital plans and reunification process. Involve a local school administrator and have them share their plans and have a facility and public health and health and human services etc. do the same. That would be amazing.
9. Future symposiums: include topics or speakers relating any past incidents to long term care or home health. I'm always eager to hear about hospital related topics, but feel the others tend to be left out.

LOCAL AND REGIONAL EXERCISE PARTICIPANTS

Participating Organizations
Regional (2)
Northwest Wisconsin Healthcare Emergency Readiness Coalition
Western Wisconsin Public Health Readiness Consortium
State (2)
Doug Hill- Crisis Standards of Care
Wisconsin Department of Health Services-Office of Preparedness and Emergency Health Care
County and Tribal Emergency Management (9)
Ashland County
Barron County
Chippewa County
Lac Courte Oreilles Tribe
Pepin County
Price County
Rusk County
Sawyer County
Washburn County
Air Medical/Emergency Medical Services (1)
LifeLink III
Home Health Care and Hospice (3)
Dunn County Home Care
Hearts of Gold
Mayo Clinic Home Healthcare and Hospice
Hospitals (16)
Advent Health-Durand
Amery Hospital and Clinics
Essentia Health-Superior
HSHS Sacred Heart
HSHS St. Joseph's Hospital
Hudson Hospital and Clinics
Marshfield Medical Center-Eau Claire
Marshfield Medical Center-Ladysmith
Marshfield Medical Center-Rice Lake
Mayo Clinic Health System-Chippewa Valley

Mayo Clinic Health System-Eau Claire
Mayo Clinic Health System-Northland
Memorial Medical Center
Spooner Health
Western Wisconsin Health
Westfields Hospital and Clinics
Local Public Health Departments (16)
Ashland County
Barron County
Bayfield County
Burnett County
Chippewa County
Clark County
Douglas County
Dunn County
Eau Claire County
Pepin County
Pierce County
Polk County
Rusk County
Sawyer County
St. Croix County
Washburn County
Long Term Care Facilities (9)
Care and Rehab-Barron
Cornell Health Services
Divine Rehabilitation and Nursing at St. Croix
Dove Healthcare- Rice Lake
Hammond Health Services
Heritage of Elmwood
Middle River Health and Rehab
Spring Valley Senior Living and Healthcare
United Pioneer Home
Sheriff Office (1)
Pierce County

Regional Symposium and Exercise Attendance Sheet

102 Total [redacted] [redacted] [redacted]

NWWIHERC and WWPHRC 2019 Regional Symposium and Exercise			April 23, 2019, 1000-1500, WITC Rice Lake, WI	
Name	**County**	**Discipline**	**Signature**	**email**
Aarrestad, Tom	Dunn 12	PH		taarrestad@co.dunn.wi.us
Abbe, Stephanie	Chippewa 11	PH		sabbe@co.chippewa.wi.us
Albarado, Steven	Pierce 3	LE		albarado@co.pierce.wi.us
Anderson, Christina	Chippewa 12	PH		canderson@co.chippewa.wi.us
Anderson, Kimberly	St. Croix 8	LTC		kanderson@nshorehc.com
Anderson, Mark	Eau Claire/Chippewa 12	Hospital		mark.anderson@hshs.org
Andress, Jay	Polk 4	LTC		jandress@unitedpioneerhome.org
Bechel, Tammi	Pepin 10	PH		tbechel@co.pepin.wi.us
Brost, Dawn	Rusk 6	PH		dbrost@ruskcountywi.us
Brown, Dennis	Chippewa 11	EM		dbrown@co.chippewa.wi.us
~~Buck, Carol~~	~~Washburn 5~~	~~EM~~		cbuck@co.washburn.wi.us
Burkland, Jennifer	Chippewa 12	LTC		jburklund@nshorehc.com
Burns, Mindy	Clark 6	PH		mindy.burns@co.clark.wi.us
Cooley, Sue	Chippewa 11	PH		scooley@co.chippewa.wi.us
Cordova, Joe	State DHS ~	Speaker		joseph.cordova@wisconsin.gov

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Regional Symposium and Exercise Attendance Sheet

April 23, 2019 [redacted]

Name	County	Discipline	Signature	email
Cunningham, Casey	Barron 2	LTC		ccunningham@dovehealthcare.com
Dodge, Loni	Dunn 12	HHH		ldodge@co.dunn.wi.us
Edelman, Laurie	St. Croix 8	LTC		ledelman@nshorehc.com
Eggen, Jon	St. Croix 8	LTC		jeggen@nshorehc.com
Ehman, Dominic	St. Croix 8	Hospital		dominic.l.ehman@westfieldshospital.com
Engen, Kelli	St. Croix 8	PH		kelli.engen@sccwi.gov
Fast, Len	Barron 2	LTC		lfast@careandrehab.org
Fedie, Judy	Chippewa 12	PH		jfedie@co.chippewa.wi.us
Freeberg, Cynthia	Douglas 1	PH		cynthia.freeberg@douglascountywi.org
Fry, Brittany	Polk	Evaluator		brittany.fry@co.polk.wi.us
Frye, Christy	Douglas 1	LTC		christyf@avantihs.com
Gaffney, Lynn	Polk 4	Hospital		lynn.m.gaffney@amerymedical.com
Gast, Cheryl	Chippewa 11	PH		cheryl.gast@co.chippewa.wi.us
Goodland, Robert	RTAC	Evaluator		robert.goodland@wisconsin.gov
Gossen, Jennifer	St. Croix 9	LTC		GOSSENJN4210@uwec.edu
Hall, Brenda	St. Croix 9	Hospital		brenda.k.hall@hudsonhospital.org

Regional Symposium and Exercise Attendance Sheet

April 23, 2019 ~~April 25, 2018~~

Name	County	Discipline	Signature	email
Hall, Tom	Rusk 6	EM		thall@ruskcountywi.us
Hill, Doug	Marathon 1	CSC		djh1967@msn.com
Hinrichsen, Joy	Ashland 7	Hospital		jhinrichsen@ashlandmmc.com
Hove, Nancy	Pierce 3	LE	Nancy Hove	nancy.hove@co.pierce.wi.us
H-Robinson, Dianne	Pierce 3	PH		dhrobins@co.pierce.wi.us
Huset, Lacey	Barron 2	Hospital		huset.lacey@mayo.edu
Jacobson, Angela	Pepin 10	Hospital		angela.jacobson@Adventhealth.com
Jaderborg, Barb	Eau Claire 10	HHH		jaderborg.barbara@mayo.edu
Jensen, Barbara	Washburn 5	HHH	Barbara Jensen, RN	BJ1JENSEN1@CHARTER.NET
Judy, Michael	Barron 2	EM		Michael.Judy@co.barron.wi.us
Kaczmarksi, Brian	Polk /	Evaluator	B. Kaczmarski	brian.kaczmarski@co.polk.wi.us
Kahan, Roxanne	Price 7	EM	Roxanne M. Kahan	roxanne.kahan@co.price.wi.us
Kelm, Kristen	Chippewa 12	PH		kkelm@co.chippewa.wi.us
Knowlton, Audra	Chippewa 11	PH		audraknowlton@co.chippewa.wi.us
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Korpela, Kristin	Dunn 11	PH		kkorpela@co.dunn.wi.us

Regional Symposium and Exercise Attendance Sheet

April 23, 2019 [redacted]

Name	County	Discipline	Signature	email
Krieglmeier, Megan	Polk 4	PH		megan.krieglmeier@co.polk.wi.us
Kron, Randy	Chippewa 12	LTC		rkron@nshorehc.com
Kurtz, Erika	Ashland 7	Hospital		ekurtz@ashlandmmc.com
Larson, Kevin	St. Croix 9	LTC		KevinL@svhcs.org
Lenbom, Jennifer	Chippewa 11	PH		jlenbom@co.chippewa.wi.us
Maday, Linda	St. Croix 9	Hospital		linda.maday@wwhealth.org
Magur, Paulette	Eau Claire 10	PH		paulette.magur@co.eau-claire.wi.us
Manning, Mark	Barron 2	Hospital EMS		manning.mark@lakeviewmedical.org
Martin, Craig	Pierce 3	PH		Craig.Martin@co.pierce.wi.us
McCallum, Julie	Sawyer 5	PH		jmccallum@sawyerhs.hayward.wi.us
McQuillan, Sarah	Chippewa 12	PH		smcquillan@co.chippewa.wi.us
Mentink, Allison	St. Croix 9	Hospital		allison.k.mentink@hudsonhospital.org
Miller, Ariel	Barron 2	LTC		amiller@dovehealthcare.com
Miller, Mellisa	Barron 2	Hospital		miller.melissa2@mayo.edu
Miller, Sarah	Burnett 9	PH		smiller@burnettcounty.org
Nacke, Brenda	Chippewa 11	Hospital		nacke.brenda@mayo.edu

Regional Symposium and Exercise Attendance Sheet

April 23, 2019 [redacted]

Name	County	Discipline	Signature	email
Nelles, Becki	Bayfield 1	PH		bnelles@bayfieldcounty.org
Nelson, Maria	Pepin 10	EM		pepza@co.pepin.wi.us
Nelson, Nicole	Rusk 6	PH		nnelson@ruskcountywi.us
Nickell, Cheri	Washburn 5	PH		cnickell@co.washburn.wi.us
~~Packer, Lee~~	~~Polk 4~~	~~LTC~~		lpacker@divine-hc.com
Persells, Jeff	St. Croix 8	Hospital		
Peterson, Gail	Polk 4	PH		gpeterson@co.polk.wi.us
Riedell, Annie	Washburn 5	Hospital		ariedell@spoonerhealth.com
Riedell, Matthew	Sawyer 5	Tribal EM		matthew.riedell@lco-nsn.gov
~~Roberts, Chad~~	~~Polk 4~~	~~LE~~		chad.roberts@co.polk.wi.us
Salter, David	Eau Claire 10	Hospital		salter.david@mayo.edu
Sanchez, Pat	Sawyer 4	EM		psanchez@sawyercountygov.org
Sauve, Laura	Barron 2	PH		laura.sauve@co.barron.wi.us
Schahczinski, Richard	Eau Claire 10	Hospital		schahczinski.richard@marshfieldclinic.org
Shinee, Raquel	Eau Claire 10	Hospital		shinee.raquel@marshfieldclinic.org
Siedow, Lindsey	St. Croix 8	Hospital		lindsey.siedow@gmail.com

Regional Symposium and Exercise Attendance Sheet

April 23, 2019 [redacted]

Name	County	Discipline	Signature	email
Snyder, AZ	Pierce 3	PH		ayslinn.snyder@co.pierce.wi.us
Stevens, Bethany	Rusk 6	Hospital		stevens.bethany@marshfieldclinic.org
Street, Wayne	Eau Claire 10	Hospital		street.wayne@mayo.edu
Stringer, Lynn	Douglas 1	PH		lynn.stringer@douglascounty.org
Swenson, Rebecca	Polk 4	Hospital		rebecca.a.swenson@amerymedical.com
Szot, Elizabeth	Ashland 7	PH		elizabeth.szot@co.ashland.wi.us
Tank, Dorothy	Ashland 7	EM		dorothy.tank@ashlandcountysheriff.us
Thompson, Ellen	Pierce 3	LTC		ellen.thompson@heritage-elmwood.com
Thompson, Lisa	Chippewa 11	LTC		lthompson@nshorehc.com
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Watson, Cassidy	Washburn 5	PH		cwatson@co.washburn.wi.us
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Wilson, Paul	Barron 2	PH		paul.wilson@co.barron.wi.us
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Wollman Nesseth, Aimee	Dunn /	Evaluator		aimee.wollmannesseth@wisconsin.gov

Regional Symposium and Exercise Attendance Sheet

April 23, 2019 [redacted]

Name	County	Discipline	Signature	email
Zach, Cyndi	Ashland 7	PH	[signature]	cyndi.zach@co.ashland.wi.us
Eckburg-Hess Messy	Spooner			Meckburghess@spoonerhealth.com
Buck, Carol	Washburn	EM	[signature]	
Wood Beth	Barron	PH	Beth Wood	
Sara Wartman	Bayfield	PH	[signature]	swartman@bayfieldcountyorg
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Felicia Tyfman	Polk		[signature]	
Eric Jacobson	Polk	SNF	[signature]	ejacobson@divine-hc.com
Bill Sedenka			[signature]	
Adam Dunshee	Douglas		[signature]	adamd@avantihs.com
Nate Friend	Douglas		[signature]	
Kevin Thill	Barron	Air medical	[signature]	KCThill@Lifelinkiii.com
Robert Goodland	Eau Claire	RTAC	[signature]	

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