

North Central Wisconsin Healthcare Emergency Readiness Coalition
 NCW HERC Board Meeting
 Virtual, 12 January 2022, 0900-1200

NCW HERC Board Members		<i>Clinics</i>		NCW HERC Members, Guests & Presenters	
	<i>Hospitals</i>		Daniel Wall		
x	Ed Radtke		Kris Bell		Teresa Erler- WEM
x	Josh Englund (Vice Chair)		<i>CMS</i>		Tim Doerfler
	<i>EMS</i>	x	Wendy Freese		Mike Roberts
x	Delmond Horn (Chair)	x	Sarah Rothmeyer		Suzi Okey
x	Dr. Michael Clark		<i>Tribal</i>		
	<i>Emergency Management</i>	x	Jacee Shepard		
x	Phil Rentmeester	NCW HERC/NCRTAC Staff			
x	September Murphy	x	Robbie Deede		
	<i>Public Health</i>	x	Michael Fraley		
x	Gary Garske	x	Dr. Tim Vayder		
x	Sue Smith		Travis Nixdorf		
	<i>Trauma</i>	x	Ty Zastava		
x	Jason Keffeler	x	Amy Wheeler		
x	Gina Brandl				
Agenda Item		Talking Points		Action Steps	
1. Attendance and Quorum		Introduction & Real Event Discussion Seeing more hospital diversion in last month than we've ever seen. A lot of new users in EMResource, recognize there is a learning curve to usage and continued education is critical. Each facility should identify and share widely who their super user is. There is desire to create common situational awareness.		Quorum verified: Yes	
2. Call to Order		Meeting called to order @ 9:16			
3. Approval of Minutes of Previous Meeting		Discussion: Independent review of minutes Motion to approve previous meeting minutes. 1 st : Ed Radtke 2 nd : September Murphy Motion result: Carried			
4. Agenda Review and Additions		Discussion: Reviewed agenda items Motion to approve current agenda. 1 st : Wendy Freese 2 nd : Sue Smith Motion result: Carried			

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<p>5. Budget Review/Accountant Report</p>	<p>Discussion:</p> <ul style="list-style-type: none"> • Non-profit O’Leary Update <ul style="list-style-type: none"> ○ Subcontract is still ongoing; main correction has been completed • Nov/Dec Financials <ul style="list-style-type: none"> ○ Amy contract update ○ Reviewed budget; have approx. \$120,000 budget left yet; November checks went out, December PO has been submitted • Budget Update and Recommendations <ul style="list-style-type: none"> ○ Logistics <ul style="list-style-type: none"> ▪ PPE bolstering grants – approx. \$42,000 set aside for this ▪ Would we want to allow hospitals to use some of these funds on structural changes made for COVID surge? Not sure there is a need. ▪ Create simple survey for SNFs and EMS to assess their PPE needs; based on survey results, create RFP for PPE bolstering grant ▪ Goal of bolstering would be so they have a supply large enough so as not to require any support • Unrestricted funds/Logo <ul style="list-style-type: none"> ○ Logo cannot be used with HPP funds; however, we can use our unrestricted funds to do so ○ Identified a contractor who provided a quote for a logo for \$300; she also provides additional services we can explore; working to get official quote to move this forward • Need to submit a mid-year budget <ul style="list-style-type: none"> ○ Recommendation from exec team is to reallocate 50% of travel line item; approx. \$26,000 could be reallocated to other projects ○ Travel dollars are not allowed for carry over ○ Logistics 	<p>Budget amendments:</p> <ul style="list-style-type: none"> • Cut travel funds by 50% • Conduct PPE bolstering grants • Shift ABLS seat funds to hazmat virtual seats and explore an in-person train-the-trainer course
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	<ul style="list-style-type: none"> ▪ One isopod is missing, one is moved and needs to be moved back; all 14 isopods need new filters; total cost would be approx. \$1,300 ▪ UV lights – 35 have been deployed, 22 are “on location,” many not being used currently ▪ MCI bags – chest seals, quick clot, and dressings have expired; have 30 kits (3 missing); approx. cost to replace these items: chest seals \$4,200, quick clot is \$6,000 <ul style="list-style-type: none"> • Allocating \$1,300 for isopod filters and \$10,200 for MCI go bag augmentation (funds can come from travel dollars not used) ○ ABLS seats <ul style="list-style-type: none"> ▪ Do we share seats with EMS for Advance Burn Life Support or for virtual hazmat seats? <ul style="list-style-type: none"> • Not sure EMS would utilize ABLS seats as much as we’d like • Hazmat seats would be utilized – viable option; could purchase \$20,000 worth of virtual seats and bring an 8 hr. hands-on course for \$25,000 total; could use Recovery Workshop funds that were unspent to be put towards this (in addition to ABLS funds) <p>Motion to approve November financials 1st: Jason Keffeler 2nd: Josh Englund Motion result: Carried</p> <p>Motion to approve amendments to mid-year budget 1st: Ed Radtke 2nd: Gina Brandl Motion result: Carried</p>	
<p>6. HERC “Extreme Makeover” Update</p>	<p>Discussion Share what we have developed</p>	

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	<ul style="list-style-type: none"> • OPHEC is working with a contractor to revitalize the expectations and structure of how HERC’s work and identifying gaps • HERC Board will be surveyed in early spring • Intent is there will be a large discussion with state advisory group in April, and then final recommendations will be made • Coordinators are due for contract renewal this year – recommendations likely will not be complete by the time this is needed; may be able to just do a contract extension for one year until this process is complete 	
<p>7. Recovery Workshop Follow-up</p>	<p>Review recommendations This document will go to: OPHEC, WI Hospital Association, Rural WI Hospital Coalition, and WI State Advisory Group Motion to approve Recovery Summary Recommendations 1st: Phil Rentmeester 2nd: Gary Garske Motion result: Carried</p>	<p>Send out summary document.</p>
<p>8. Work Plan Review</p>	<p>Mid-year Work Plan</p> <ul style="list-style-type: none"> • Robbie walked through work plan • Been difficult to establish training due to response; some trainings that are required are not available, or only available virtually • Prep plan will go to open review in February • Mass casualty training has been cancelled • Improvement Plan created to compile all AAR and strategic planning recommendations <p>Motion to approve mid-year work plan 1st: Wendy Freese 2nd: Sue Smith Motion result: Carried</p> <p>Mid-year Capability Review Reviewed capability assessment Motion to approve mid-year capability review 1st: Sarah Rothmeyer 2nd: Ed Radtke Motion result: Carried</p>	<ul style="list-style-type: none"> • Amend website that mass casualty training has been cancelled • Submit mid-year workplan • Send out HVA and Supply Chain surveys

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	<p>Projects: MRSE</p> <ul style="list-style-type: none"> • Objectives <ul style="list-style-type: none"> ○ Asses an HCC’s capacity to support large-scale community wide medical surge incident ○ Evaluate a multitude of coalition preparedness and response documents and plans ○ Evaluate coalition members ability to communicate and coordinate quickly to find and match available staffed beds, transportation, supplies and equipment, and personnel in a large-scale surge incident ○ Assist HCCs and their members with improvement planning based on MRSE outcomes ○ Serve as a data source for performance measure reporting required by HPP ○ Provide a flexible exercise which could be customized to meet the needs and/or exercise requirements of HCCs • Injects for MSEL related to objectives <ul style="list-style-type: none"> ○ May be an ammonia or hydrochloric acid release around Wausau area ○ Will involve search and rescue, mass decon, and medical surge ○ More to come after another planning meeting this afternoon • It’s a functional exercise – glorified tabletop, not full-scale • Will be held March 24th <p>Supply Chain Integrity Assessment/HVA</p> <ul style="list-style-type: none"> • Complete, prepped and ready to go – will have open until end of February <p>COOP/ Infectious Disease Annex/ Prep & Response Plan</p> <ul style="list-style-type: none"> • Infectious disease exercise and PIO training still up in air • COOP is drafted and will be incorporated into response plan • Hope to have infectious disease annex in hand by March 	
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	<ul style="list-style-type: none"> • Prep plan will have open review in February, followed by Response plan 	
9. HERC Staff and Advisory Group Meeting	No meeting held in December	
10. Response Updates	<ul style="list-style-type: none"> • Case volume continues to set new records • Average 965 cases/day (probable and confirmed) (562 confirmed was high in 2020) in region • Hospitalizations trending up • Hospitals seeing significant number of staff out sick (571 in Aspirus system are out) • Schools starting to request PPE • Additional guidance on types of masks to use is supposed to come out tomorrow • Regional data tracking <ul style="list-style-type: none"> ○ Will move to a weekly data count due to changes in state data system 	
11. Contractor Updates	<ul style="list-style-type: none"> • HERC Coordinator <ul style="list-style-type: none"> ○ Discussed above • Planning <ul style="list-style-type: none"> ○ Recovery plan is ready for review – will be sent out this spring ○ Recovery Workshop summary is complete ○ Improvement plan has been developed ○ Newsletter will be ready by next week ○ Continue work on COVID AAR ○ Updating Mass Fatality Plan • Logistics <ul style="list-style-type: none"> ○ Looking into the fixing/replacing damaged easy-up tent 	
12. Interoperable Communications Systems	<ul style="list-style-type: none"> • EICS <ul style="list-style-type: none"> ○ Continue to utilize in COVID response ○ Will utilize for HVA input this year • EMTrack 	

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	<ul style="list-style-type: none"> ○ Not a lot of traction on this platform; product is ready, just hesitant to implement with current hospital surge ○ Continue to utilize EMResource ● WISCOM ○ Travis continues to get out and drill and exercise 	
<p>13. Sector Reports/ Top Priorities</p>	<p>Hospitals</p> <ul style="list-style-type: none"> ● None <p>EMS</p> <ul style="list-style-type: none"> ● None <p>EM</p> <ul style="list-style-type: none"> ● Command and General Staff Course coming May 9 – 13, 7:30-4:30 ● WEM strategic plan is being laid out <p>PH</p> <ul style="list-style-type: none"> ● DHS is considering significantly limiting follow-up on positives and contact tracing – in discussion mode at this point ● Pushing to move this to be treated as influenza ● DHS is updating WEDSS platform to automatically move cases from staging ● Moving to letters rather than phone calls – can't keep up ● Having difficulty recruiting staff ● Currently have five interim health officers in region <p>Trauma</p> <ul style="list-style-type: none"> ● Working on conference planning <p>CMS</p> <ul style="list-style-type: none"> ● Significant number of staff positive <p>Tribal</p> <ul style="list-style-type: none"> ● No updates 	
<p>14. Upcoming engagements</p>	<ul style="list-style-type: none"> ● Feb 9 – Board Meeting ● Board Update to continue on Tuesdays ● Regional Medical Coordination Calls ● MSRE/ MRSE Debriefing ● Training 	

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15. Regional Resource Requests/Needs	None	
16. Tabled Items for Future Discussions	HERC Improvement Plan	
17. Next Meeting/ Adjourn	Motion to adjourn. 1st: Sue Smith 2nd: Wendy Freese Motion result: Carried	