



**North Central Wisconsin  
Healthcare Emergency Readiness Coalition**

**Medical Response Surge Exercise  
After-Action Report and Improvement Plan  
April 10, 2024**



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# North Central WI HERC MRSE

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## After-Action Report/Improvement Plan

April 10, 2024

The After-Action Report/Improvement Plan (AAR/IP) aligns exercise objectives with preparedness doctrine 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

<b>Exercise Name</b>	North Central WI Healthcare Emergency Readiness Coalition (NCW HERC) Medical Response Surge Exercise (MRSE)
<b>Exercise Dates</b>	April 10, 2024
<b>Scope</b>	This exercise is a functional exercise, planned for three (3) hours. Exercise participants will play at their designated organizations. Exercise play is limited to NCW HERC members.
<b>Focus Area(s)</b>	Response
<b>Capabilities</b>	Foundations of Health Care and Medical Readiness Health Care and Medical Response Coordination Continuity of Health Care Service Delivery Medical Surge
<b>Objectives</b>	<p>Assess NCW HERC’s ability to engage coalition members and their executives to participate in the exercise and the After-Action Review within the HPP budget period.</p> <p>Gauge NCW HERC’s ability to effectively notify HCC members of an incident and facilitate ongoing information sharing during a community-wide emergency or disaster.</p> <p>Evaluate NCW HERC’s ability to assess and meet the critical personnel and resource needs (supplies, equipment, etc.) to manage patient surge during a community-wide emergency or disaster by the end of the MRSE.</p> <p>Judge NCW HERC’s ability to assess and meet the critical EMS personnel and resource needs to manage patient surge during a community-wide emergency or disaster by the end of the MRSE.</p> <p>Apprise NCW HERC’s ability to reduce patient morbidity and mortality through appropriate patient placement during a large patient surge by assisting with the identification and coordination of available patient care resources by the end of the MRSE.</p> <p>Evaluate NCW HERCs ability to use EM Track to assist and facilitate patient tracking and family assistance/reunification.</p> <p>Weigh NCW HERC’s ability to successfully coordinate and execute all relevant response plans during a community-wide emergency or disaster.</p>
<b>Threat or Hazard</b>	Structural collapse

<b>Exercise Name</b>	North Central WI Healthcare Emergency Readiness Coalition (NCW HERC) Medical Response Surge Exercise (MRSE)
<b>Scenario</b>	9-1-1 operators receive a flurry of calls from attendees at the largest event center in your region, where large crowds were present for the occasion. Shortly after it began, some of the attendees reported hearing a loud rumble and suddenly, the roof collapsed. The first EMS agencies arrive on-scene to find hundreds of injured persons, an unknown number of fatalities, persons trapped in the debris, and lots of confusion.
<b>Sponsor</b>	NCW HERC
<b>Participating Organizations</b>	See full list of participating agencies in Appendix A.
<b>Point of Contact</b>	<p><b>NCW HERC</b>                  Tyler Zastava, MPH, CHES                  North Central Wisconsin HERC (NCW HERC) Coordinator                  herc.coordinator@ncw-herc.org                  P: 715-572-0816</p> <p><b>HSS</b>                  Stephen Weiler, IPEM, MEP, CPP, CPD                  Manager of Resiliency Services                  Stephen.Weiler@hss-us.com                  P: 630-601-8012</p>

## ANALYSIS OF CAPABILITIES

Aligning exercise objectives and 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 capabilities, and performance ratings for each capability as observed during the exercise and determined by the evaluation team.

Objective	Capability	Performed without Challenges (P)	Performed with Some Challenges (S)	Performed with Major Challenges (M)	Unable to be Performed (U)
Assess NCW HERC’s ability to engage coalition members and their executives to participate in the exercise and the After-Action Review within the HPP budget period.	Foundations for Health Care and Medical Readiness		x		
Gauge NCW HERC’s ability to effectively notify HCC members of an incident and facilitate ongoing information sharing during a community-wide emergency or disaster.	Health Care and Medical Response Coordination		x		
Evaluate NCW HERC’s ability to assess and meet the critical personnel and resource needs (supplies, equipment, etc.) to manage patient surge during a community-wide emergency or disaster by the end of the MRSE.	Medical Surge		x		
Judge NCW HERC’s ability to assess and meet the critical EMS personnel and resource needs to manage patient surge during a community-wide emergency or disaster by the end of the MRSE.	Medical Surge		x		

Objective	Capability	Performed without Challenges (P)	Performed with Some Challenges (S)	Performed with Major Challenges (M)	Unable to be Performed (U)
Apprise NCW HERC’s ability to reduce patient morbidity and mortality through appropriate patient placement during a large patient surge by assisting with the identification and coordination of available patient care resources by the end of the MRSE.	Medical Surge		x		
Evaluate NCW HERC’s ability to use EM Track to assist and facilitate patient tracking and family assistance/reunification.	Health Care and Medical Response Coordination			x	
Weigh NCW HERC’s ability to successfully coordinate and execute all relevant response plans during a community-wide emergency or disaster.	Foundations of Health Care and Medical Readiness		x		

Table 1. Summary of Core Capability Performance

**Ratings Definitions:**

**Performed without Challenges (P):** The targets and critical tasks associated with the 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 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 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 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 capability, highlighting strengths and areas for improvement.

**Objective 1: Assess NCW HERC's ability to engage coalition members and their executives to participate in the exercise and the After-Action Review within the HPP budget period.**

The strengths and areas for improvement for each capability aligned to this objective are described in this section.

**HPP Capability: Foundations for Health Care and Medical Readiness**

**Strengths**

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

**Strength 1:** Collaboration between hospital systems and leadership

**Strength 2:** Skill and training of current Incident Command Team

**Strength 3:** Information Sharing

**Areas for Improvement**

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

**Area for Improvement 1:** Internal Communication

**Analysis:** Lack of clarity on staffing contacts hindered rapid resource allocation.

**Recommendation:** Maintain an updated database accessible to all staff.

**Area for Improvement 2:** Exercise Participation

**Analysis:** Broadening executive participation would enrich discussions and outcomes.

**Recommendation:** Develop inclusive outreach strategies for broader engagement.



## Objective 2: Gauge NCW HERC's ability to effectively notify HCC members of an incident and facilitate ongoing information sharing during a community-wide emergency or disaster.

The strengths and areas for improvement for each capability aligned to this objective are described in this section.

### HPP Capability: Health Care and Medical Response Coordination

#### Strengths

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

**Strength 1:** Excellent overall communication and collaboration between stakeholders.

**Strength 2:** Strong clinical team response.

**Strength 3:** Effective communication between participating hospitals.

#### Areas for Improvement

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

##### Area for Improvement 1: Mass communication

**Analysis:** Lack of cohesive Incident Command setup (physical and virtual) and failed mass communication methods resulted in delays in sharing critical information with coalition partners, impacting their ability to respond effectively to the incident, ultimately

**Recommendation:** Training and updating mass communication infrastructure for prompt information dissemination.

**Resource(s):** EMResource, WISCOM

##### Area for Improvement 2: Standardized Communication

**Analysis:** Absence of standardized and updated communication protocols led to confusion and inefficiencies in information sharing among HERC members, highlighting the need for clear communication guidelines to ensure accurate and timely information is disseminated.

**Recommendation:** Establish standardized communication protocols among HERC members to ensure efficient and clear information exchange.

### **Objective 3: Evaluate NCW HERC's ability to assess and meet the critical personnel and resource needs to manage patient surge during a community-wide emergency or disaster by the end of the MRSE.**

The strengths and areas for improvement for each capability aligned to this objective are described in this section.

#### **HPP Capability: Medical Surge**

##### **Strengths**

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

**Strength 1:** Hospital staff quickly assessed and triaged patients in appropriate beds.

**Strength 2:** Communication between departments ensured appropriate resource sharing.

**Strength 3:** Surge plan is robust.

##### **Areas for Improvement**

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

**Area for Improvement 1:** Off-hours staffing protocols.

**Analysis:** Although this incident happened during the day when most facilities are fully staffed, it was recognized that there could be a threat of inadequate staffing coverage during off-hours which would impact response capacity, highlighting the importance of revising protocols and implementing measures to enhance staffing resilience and availability.

**Recommendation:** Revise off-hours staffing protocols to ensure adequate coverage, including proactive recruitment and training of additional personnel.

**Area for Improvement 2:** Notification Mechanisms

**Analysis:** Ineffective communication channels delayed resource mobilization efforts, emphasizing the need for streamlined notification procedures and proactive engagement strategies to ensure all pertinent staff received correct and timely information.

**Recommendation:** Implement a proactive plan for a notification system to alert physicians and stakeholders about the need for additional resources during patient surge events.

## **Objective 4: Judge NCW HERC's ability to assess and meet the critical EMS personnel and resource needs to manage patient surge during a community-wide emergency or disaster by the end of the MRSE.**

The strengths and areas for improvement for each capability aligned to this objective are described in this section.

### **HPP Capability: Medical Surge**

#### **Strengths**

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

**Strength 1:** Interagency collaboration fostered strong coordination.

**Strength 2:** Successful patient transfers based on EMResource bed availability and EMS coordination.

**Strength 3:** Majority of facilities fully staffed, enabling them to handle patient surges.

#### **Areas for Improvement**

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

##### **Area for Improvement 1: EMS Resources**

**Analysis:** Shortages in EMS personnel hindered response and timely patient transfer in some facilities.

**Recommendation:** Develop and train comprehensive EMS plans, including access to rural areas.

##### **Area for Improvement 2: Collaboration with Law Enforcement**

**Analysis:** Insufficient police and fire presence hindered crowd control efforts and potential patient transfer efforts.

**Recommendation:** Strengthen collaboration with law enforcement for a secure response. Discussions should include managing expectations of law enforcement support at the facilities and opportunities to leverage law enforcement mutual aid. Facilities should seek opportunities to implement technologies to manage access control.

## **Objective 5: Apprise NCW HERC's ability to reduce patient morbidity and mortality through appropriate patient placement during a large patient surge by assisting with the identification and coordination of available patient care resources by the end of the MRSE.**

The strengths and areas for improvement for each capability aligned to this objective are described in this section.

### **HPP Capability: Medical Surge**

#### **Strengths**

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

**Strength 1:** Strong coordination internally for patient placement and resource allocation.

**Strength 2:** Rapid triage and patient placement processes implemented effectively.

**Strength 3:** Utilization of existing regional plans and protocols.

#### **Areas for Improvement**

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

##### **Area for Improvement 1: Patient Tracking and Transfer**

**Analysis:** Deficiencies in patient tracking and transfer procedures led to disruptions in care continuity and credentialing, underscoring the importance of streamlining processes and implementing robust tracking systems to facilitate efficient patient management and coordination.

**Recommendation:** Develop and implement comprehensive training programs for clinical staff focusing on patient triage and tracking during surge events (EMTrack).

**Resource(s):** EMTrack, EMResource

##### **Area for Improvement 2: Emergency Management (EM) Training**

**Analysis:** Insufficient EM training among clinical staff altered their ability to efficiently triage patients during the patient surge, further pointing out the importance of clinical staff undergoing EM training.

**Recommendation:** Implement EM training for clinical staff specifically.

**Resource(s):** NIMS, HICS, EM Training Courses

## **Objective 6: Evaluate NCW HERC's ability to use EM Track to assist and facilitate patient tracking and family assistance/reunification.**

The strengths and areas for improvement for each capability aligned to this objective are described in this section.

### **HPP Capability: Foundations for Health Care and Medical Readiness**

#### **Strengths**

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

**Strength 1:** Comprehensive Training and Drills – HERC conducts regular training sessions and emergency drills to ensure personnel are well-prepared to respond effectively.

**Strength 2:** Identified needs for onsite and/or offsite family assistance and reunification.

#### **Areas for Improvement**

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

##### **Area for Improvement 1: EMTrack Utilization**

**Analysis:** Limited utilization and unfamiliarity with EMTrack functionalities hindered its effectiveness in patient tracking and resource management, necessitating enhanced training programs and user support to improve utilization.

**Recommendation:** Provide enhanced training and user support for healthcare personnel on EMTrack functionalities to improve utilization.

**Resource(s):** EMTrack

##### **Area for Improvement 2: Family Assistance and Reunification**

**Analysis:** Absence of standardized protocols and procedures for family assistance and reunification led to challenges in coordinating family reunification efforts, highlighting the need for integrated processes within EMTrack for family assistance.

**Recommendation:** Develop standardized protocols/plans for family assistance and reunification to streamline coordination efforts.

## Objective 7: Weigh NCW HERC's ability to successfully coordinate and execute all relevant response plans during a community-wide emergency or disaster.

The strengths and areas for improvement for each capability aligned to this objective are described in this section.

### HPP Capability: Health Care and Medical Response Coordination

#### Strengths

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

**Strength 1:** Effective Incident Command Structure enabled a coordinated response.

**Strength 2:** Communication systems and coordination between departments ensured proper internal resource sharing and information sharing.

**Strength 3:** Involvement of medical staff and leadership ensured effective patient care.

#### Areas for Improvement

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

##### Area for Improvement 1: Non-healthcare/Community Partnerships

**Analysis:** Limited integration and coordination with external partners hindered the effectiveness of response efforts, emphasizing the need for improved collaboration and partnerships to enhance response capabilities and resource sharing.

**Recommendation:** Strengthen integration with external partners and community resources through formal plans, structures, and continued joint planning exercises.

##### Area for Improvement 2: Communication system updates and training needs

**Analysis:** Technical difficulties in incident command centers due to communication system failures and lack of training hindered response times and mass notification.

**Recommendation:** Create and implement plans for communication system updates and contact lists on a regular basis.

## Appendix A: IMPROVEMENT PLAN

This IP is developed specifically for NCW HERC as a result of the 2024 MRSE conducted on April 10, 2024.

Objective	Issue/Area for Improvement	Corrective Action	Capability Element(s) <sup>1</sup>	Primary Responsible Organization	Start Date	End Date
Assess NCW HERC’s ability to engage coalition members and their executives to participate in the exercise and the After-Action Review within the HPP budget period.	Internal Communication	Implement an updated database accessible to all staff members containing clear staffing contacts for rapid resource allocation.	Planning, Training, Exercise	NCW HERC		
	Exercise Participation	Develop inclusive outreach strategies for broader executive engagement in exercises and After-Action Reviews.	Planning	NCW HERC, WHA, Healthcare Facilities		
Gauge NCW HERC’s ability to effectively notify HCC members of an incident and facilitate ongoing information sharing during a community-wide emergency or disaster.	Mass communication	Train staff on mass communication platforms and regularly update	Organization, Equipment, Training	Healthcare Facilities, NCW HERC		
	Standardized Communication	Implement clear and standardized communication protocols across all member organizations and provide training on their use.	Training, Planning, Exercise	Healthcare Facilities, NCW HERC		

<sup>1</sup> Capability Elements are Planning, Organization, Equipment, Training, or Exercise.

Evaluate NCW HERC’s ability to assess and meet the critical personnel and resource needs (supplies, equipment, etc.) to manage patient surge during a community-wide emergency or disaster by the end of the MRSE.	Off-hours staffing protocols	Develop and distribute staffing protocol revision guidelines and provide comprehensive training materials on off-hours staffing procedures.	Planning, Exercise	Healthcare Facilities, NCW HERC		
	Notification Mechanisms	Implement proactive notification systems for resource needs and ensure all relevant staff are trained on their use.	Equipment, Training, Exercise	NCW HERC, Healthcare Facilities		
Judge NCW HERC’s ability to assess and meet the critical EMS personnel and resource needs to manage patient surge during a community-wide emergency or disaster by the end of the MRSE.	EMS Resources	Develop comprehensive EMS plans and provide training to ensure adequate response during patient surges.	Planning, Exercise	NCW HERC, EMS Partners, Healthcare Facilities		
	Collaboration with Law Enforcement	Strengthen collaboration with law enforcement agencies to enhance crowd control efforts and ensure a secure response environment.	Planning, Training	NCW HERC, Law Enforcement Partners		
Apprise NCW HERC’s ability to reduce patient morbidity and mortality through appropriate patient placement during a large patient surge by assisting with the identification and coordination of available patient care resources by the end of the MRSE.	Patient Tracking and Transfer	Implement comprehensive training programs for clinical staff on patient tracking systems like EMTrack.	Training, Exercise	Healthcare Facilities, NCW HERC		
	Emergency Management (EM) Training	Implement targeted EM training programs, including courses on ICS, HICS, and NIMS, to ensure staff readiness during emergencies.	Training, Exercise	NCW HERC, Healthcare Facilities		



Evaluate NCW HERCs ability to use EM Track to assist and facilitate patient tracking and family assistance/reunification.	EMTrack Utilization	Enhance training for EMTrack to ensure effective utilization for patient tracking and family assistance.	Training, Exercise	NCW HERC, Healthcare Facilities		
	Family Assistance and Reunification Planning	Establish standardized protocols for family reunification and provide training on their implementation across all member facilities.	Planning, Organization, Exercise	NCW HERC, Healthcare Facilities, Community Partners		
Weigh NCW HERC's ability to successfully coordinate and execute all relevant response plans during a community-wide emergency or disaster.	Non-healthcare/Community Partnerships	Establish MOUs and plans with community-based partners to aid in emergency response.	Planning, Organization	Healthcare Facilities, Community Partners, NCW HERC		
	Communication system updates and training needs	Create and implement plans for communication system updates and contact lists on a regular basis.	Training, Exercise	Healthcare Facilities		

## APPENDIX B: EXERCISE PARTICIPANTS

Participating Organizations	
<b>HOSPITALS</b>	
Aspirus Langlade Hospital	Aspirus Stevens Point Hospital
Aspirus Medford Hospital	Marshfield Medical Center – Park Falls
Aspirus Merrill Hospital	Marshfield Medical Center – Minocqua
Aspirus Plover	Marshfield Medical Center – Neillsville
Aspirus Stanley Hospital	
<b>EMS, EMA, PH/LHD, HERC</b>	
Bone and Joint Surgery Centers	Marathon County Health Department
Champion Care	Muskego Health and Rehabilitation Center
City of Antigo Fire Department	NCRTAC
Davita Rhinelander and Davita Northern Star (Woodruff)	NCW HERC
Edgewater Haven Nursing Home	Oneida County Health Department
Greenwood Area Ambulance Service/NCW HERC Chair	Plover Fire Department
Iron County Health Department	Portage County HHS
Langlade County Emergency Management	Price County Health and Human Services
Langlade County Health Department	Vilas County Emergency Management
SCC	Wausau Surgery Center
Sheridan Health and Rehabilitation	WI DHS
Stevens Point Fire Department / City of Stevens Point	Wisconsin Rapids Fire Department
Suring Health and Rehabilitation	Wood County Emergency Management
Lincoln County	Wood County Health Department
Marathon County Emergency Management	Woodlands Home Health