

North Central Wisconsin Healthcare Emergency Readiness Coalition  
 NCW HERC Board Meeting  
 Aspirus Weston Clinic, 10 January 2018, 0900-1200

**Location:** Aspirus Weston Clinic, 4005 Community Center Drive, Weston, WI **Room:** 2<sup>nd</sup> Floor Conference Room  
**Call in Number-** (571) 317-3112 **Pass code-** 214-565-613  
 Go to Meeting Link: <https://global.gotomeeting.com/join/214565613>  
 First GoToMeeting? Try a test session: <http://help.citrix.com/getready>

Agenda Item	Talking Points	Action Steps
<b>1. Attendance and Quorum Determination</b>	Introductions: Present: See attendance roster Phone: See attendance roster <b>**Referenced Quorum Document**</b>	<b>Quorum verified:</b> Yes. Hospital, Primary, Trauma, PH, EMS, EM New attendees Brian ARC, Jim Langlade Co EM
<b>2. Call to Order</b>	Meeting called to order @0900	
<b>3. Approval of Minutes of Previous Meeting</b>	Discussion: Motion to approve previous minutes. Motion: 1 <sup>st</sup> : Del 2 <sup>nd</sup> : Joan Motion carried. <b>**Referenced Attachment**</b>	
<b>4. NCW HERC Demographics &amp; Vulnerabilities</b>	Med Student presentation and discussion, reviewing a document developed synthesizing regional vulnerability considerations. Data from the documents was pulled from: EMPOWER, SVI, Census facts.	HCC Coordinator to post document to NCW HERC website.
<b>5. Coalition Assessment Tool (CAT)</b>	Discussion: 2-week review was provided related to drafted answers provided by HCC Coordinator. No revisions were recommended; however comments were made in agreement with answers. Related to new focus and being in first budget period, most capabilities are in progress or not complete. Many will be closed by conclusion of BP5. Many needs and issues were identified in efforts to close gaps, including lack of SMEs, funding, trained staff, templates and guidance.	HCC Coordinator to submit to state post January meeting. Coordinator will also schedule a review discussion with state. State will be submitting finalized documents to ASPR.

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	<p>The draft survey answers are intended to be conservative, listed as “in progress” until they are definitively completed.        Motion to approve the CAT tool for submission to state and ASPR.        1<sup>st</sup>: Ted 2<sup>nd</sup>: Jason        Motion Carried  <b>**Referenced Attachment**</b></p>	
<p><b>6. CST Prep Discussion</b></p>	<p>Discussion on finalizing dates and times for After Action Review. The review will be scheduled to replace the March board meeting. The meeting is intended to be an in-person event with large group and small group break out discussion.        CST “One Pager”, developed for Nov 8 meeting reviewed. 8 Capabilities of the exercise discussed.        “Perfect World” Quality Improvement discussion conducted.        Exercise discussed as needing to be broken down into phases to make it more palatable.        A matrix developed aligning key tasks with performance measures. Also outlined some early identified strengths and areas for improvement pre-exercise. This is intended to assist play during exercise.</p>	<p>HCC Coordinator to get the “Save the Date” out for the March 14<sup>th</sup> date.        Question document will need to be developed for distribution during the exercise, based on ASPR document.</p>
<p><b>7. CMS Member Engagement</b></p>	<p>Discussion: Over the past few months the coalition has brought in over 60 new active members from the CMS sector. Concerns exist that there is not enough focus currently incorporating these new partners. Current meetings do not fulfill their needs. Consideration made for developing an additional meeting like WHEPP or PH HERC meetings.        During these meetings current needs, best practices, and exercises could be discussed.        Discussion LTC does currently do this with a LTC focus. Potential facilitators of these meetings were discussed.        Discussion on other partners to incorporate were discussed: Blood Banks, WPS, Kwik Trip, Media.</p>	<p>HCC Coordinator to reach out to: Becky Linder and Micky Gould, and begin coordinating another CMS Partner meeting.</p>

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<p><b>8. Membership Needs</b></p>	<p>EM Representation: Two Local Ems present from Langlade and Marathon. Discussed how critical EM involvement is r/t how all preparedness efforts start stem from EM Annexes and ESFs.                  Clinic Representation: Molly continues to represent clinic aspects.                  Improved partnership extensions                  Discussion: As we approach new partners clear purpose and outreach is needed. Utilizing Mission, Vision and Objectives will help.</p>	<p>Feb look acknowledge EM</p>
<p><b>9. Fiscal report</b></p>	<p>Discussion:                  Independent review. Revised budget approved 12.13.17 and shared with state. FA information verified through Nov.                  Showed the actuals page created per request showing percentage of budget lines.  <b>**Referenced Attachment**</b></p>	<p>Please contact HCC Coordinator if you have any questions or comments related to the budget.</p>
<p><b>10. BP1 Work Plan Review</b></p>	<p>Updated 1/3/18.                  Independent Review  <b>**Referenced Attachment**</b></p>	<p>HCC Coordinator will continue to provide monthly updates. Contact HCC Coordinator with any questions.</p>
<p><b>11. WITRAC: Bed Count/ MCI Report</b></p>	<p>Semi-monthly drills underway. ~ 60% within 30 min                  Goal of 85% (13/15 hospitals)                  Independent review.                  Discussion the need to move to 2<sup>nd</sup> and 3<sup>rd</sup> shift drills. Concerns noted that MCI is not at the 85% desired. No one clear hospital consistently missing.  <b>**Referenced Attachment**</b></p>	<p>HCC Coordinator will continue to provide monthly updates. Contact HCC Coordinator with any questions.                  HCC Coordinator to outreach to hospitals to survey issues in response.                  2<sup>nd</sup> and 3<sup>rd</sup> shift drills to be commenced.</p>
<p><b>12. WISCOM Report</b></p>	<p>Roll Calls ongoing.                  St. Michael's radio installed, tested, verified operational.                  Eagle River Hospital new antenna part ordered and installed.                  Testing to be conducted.                  Marshfield Medical Center meetings conducted with Nielson.                  AWH meeting needs to be scheduled now that new EM has started.</p>	<p>HCC Coordinator will continue to provide monthly updates. Contact HCC Coordinator with any questions.                  HCC Coordinator to coordinate with Eagle River to test radio.                  HCC Coordinator to continue working with AWH and Marshfield to have radios</p>

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	<p>Discussion on potential needs for radios in call centers.          Still working on: Goal 1: Get all hospital radios functional &amp; interoperable          Training Videos objectives identified. Recordings need to be scheduled.  <b>**Referenced Attachment**</b></p>	<p>installed, tested, and verified operational by the end of February 2018.          HCC Coordinator to coordinate WISCOM Training videos.</p>
<p><b>13. HCC Coordinator Report</b></p>	<p>Independent review of HCC Coordinator Monthly Progress Report.          HCC Coordinator using website to provide updates, news, tools, events, effectively completing “Monthly Newsletter”.          HVA moved to the protected site. HCC Coordinator to share approved HVA with active members. Additionally, can be provided as needed.          Discussed Medical Student SMART goals initially presented in December. This will be NCW HERC’s valued voice article.  <b>**Referenced Attachment**</b></p>	<p>HCC Coordinator will continue to provide monthly updates. Contact HCC Coordinator with any questions.          RTAC Coordinator asked to look into website tracking tool. Want to show documented increased traffic to site.</p>
<p><b>14. Sector Reports</b></p>	<p><b>Hospitals</b>-Ed Radtke is now with Aspirus Wausau Hospital. Ed’s Ascension position interviews underway. IV fluids persist medication shortages and prioritizing availability. Med situation going worse, before better. Pharmacy and procurement provisions large weekly discussions.  <b>EM</b>- Intercommunication between counties. Next gen 911 work group as WEM. Following Marathon County. NEWCOM grp. Intertwine with WISCOM? Critical Incident Management first 90 minutes first responders. Open position @ Portage Co. EM. Jeff Lincoln Co. EM will be retiring in May.  <b>EMS</b>- Renewal period through June. Regional outreach meetings Jan 22-26, Eau Claire and Marathon County 1-3 broad band. James Newlun no longer in the EMS section now at Toma Memorial Hospital.  <b>Public Health</b>-None. Infectious Disease Tabletop.</p>	<p>HCC Coordinator to post dates to website.          RTAC Coordinator to post Stop the Bleed dates.</p>

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	<p><b>RTAC-</b> Stop the bleed campaign teaching public TNT. Asked to post upcoming dates to website.                  Other-NA</p>	
<p><b>15. NCW-HERC Upcoming Partner Meetings</b></p>	<p>CISM -ARC Course (June)                  Cyber Security-Madison Tech (June)  <b>Inf. Disease Exercise-</b> Reviewed JSI proposal. Selected tabletop date identified as not going to work. April defined as better for exercise.                  Motion to approve JSI Infectious Disease Tabletop as proposed if JSI can move the date to April.                  1<sup>st</sup>: Joan 2<sup>nd</sup>: Bob                  Motion Approved.                  CST Exercise-March</p>	<p>HCC Coordinator will reach out to JSI for moving exercise date to April.                  HCC Coordinator will seek out CISM and Cyber Security Trainings.</p>
<p><b>16. Other Items for discussion &amp; Future agendas</b></p>	<p><b>HCC Restructuring, AMCC/RMCC, Regional Resource Inventory, Coalition Preparedness Plan</b></p>	
<p><b>17. Next Meeting</b></p>	<p><b>Wednesday, Feb 14, 2018, 0900-1200. Aspirus Weston Clinic</b></p>	
<p><b>18. Adjourn</b></p>	<p><b>Motion</b> to adjourn. 1<sup>st</sup>: Jason 2<sup>nd</sup>: Molly Motion: Carried.</p>	