

Hospital Amateur Radio Exercise After Action Review Report

HCC Region 4

1. Exercise Name: Hospital Amateur Radio Exercise & Redundant Communications Test #2

2. Exercise Overview: This was a required exercise for the Healthcare Coalition (HCC) for grant requirements. This exercise was incorporated into a redundant communications test to test the ability of select hospitals to respond with bed count data using amateur radio and reporting format from their facility with the assistance of local amateur radio club personnel.

3. Date of Exercise: This exercise was conducted and completed on July 16, 2020.

4. When review was completed:

During Project: A pilot test was conducted and determined to be successful on March 12, 2020. A final test was scheduled for 25 March, however with the outbreak of the COVID-19 pandemic this exercise was postponed to a later date that was deemed safer and more appropriate.

After Project Completion: The final test of this capability was conducted on July 16, 2020 and found to be very successful. Recommend continued use of this capability for the region.

5. Participants:

- Gundersen St. Joseph's Hospital Hillsboro: Terry Sosinsky, KC9IWD; Aaron Hammer, Emergency Management Specialist
- Vernon Memorial Hospital Viroqua: Melody Owen, N9ZWZ & David Owen, N9TUU; Laurie Nundahl, ED, GI & Infusion Nursing Supervisor
- Gunderson Tri-County Hospital in Whitehall: Steven Voller, KB9VUJ & Ron Severson, KD9OHQ; Stephanie Kopp, Education and Safety Program Manager
- Mayo Health System in La Crosse: Kevin Holcomb, KC9ZGD; Wade Rudolph, SWWI Region Facility Operations Director, Facilities Department - Lacrosse
- Tomah Health: Kelley Becker, KD9LQW & Stephen Becker, W9DXE; James Newlun, Emergency Management Specialist
- Net Control Station: Brett Johnson, K9BY; Bill Klemp, Region 4 HERC Coordinator

6. Summary of Exercise:

The exercise coordination began in December of 2019 and through various meetings and discussions with potential participants, it was decided that March of 2020 would be the target date for the exercise. The final test of this capability was the follow up from a pre-exercise test conducted in March of 2020. The intent was to conduct the final test shortly after the pre-exercise test; however, the COVID-19 pandemic was declared and all exercises were halted until a time was determined to be more feasible to conduct this exercise. This exercise was a first of its kind for the Region 4 Healthcare Emergency Readiness Coalition, Western Wisconsin, which required a significant amount of preplanning to ensure this exercise was successful. Beginning in late December of 2019, surveys of hospital equipment and coordination with local amateur radio clubs began to determine if support and the ability to conduct this type of exercise could be facilitated. Based on feedback and support from hospitals, radio clubs and Wisconsin

Emergency Management (WEM), it was deemed feasible this exercise could be conducted. Mr. Paul Hughes from WEM, Mr. Josh Roskos, representing the West Central District // WI ARES/RACES and Mr. David Owen, representing the South West District // WI ARES/RACES provided leadership and facilitated coordination of local operators to support this exercise for all participating hospitals.

A number of pre-exercise calls were conducted to ensure all participants were fully aware of the scope of the exercise and to ensure all knew what was expected of them. Radio club members made themselves available to the various hospitals for training and to verify the equipment the hospitals did or did not have worked or was coordinated for. Coordination was made for the use of the WECOMM radio network in order for this exercise to be successful, both during the pre-exercise test and the final exercise. It was determined that evening hours, 7:00 pm or later, was the best time for radio frequency and radio club member availability. During the pre-exercise test, a redundant frequency was identified and tested in the event the primary frequency, WECOMM, was not working or was not accessible during the pre-exercise test. Upon validating the WECOMM system was the preferred frequency and proven to be a clear and dependable system, it was determined WECOMM would be used for the final exercise. There were four hospitals that participated in the pre-exercise test; Tomah Health, Gundersen Tri-County in Whitehall, Gundersen St. Josephs' in Hillsboro and Vernon Memorial Hospital in Viroqua.

Once the pandemic restrictions eased enough where access to the hospitals was now permitted, a determination was made to proceed with the final test. A date of July 16 was agreed upon and planned for; a shift by a half hour was needed for the exercise due to availability of the WECOMM system. One new hospital was added for the final exercise, Mayo Health Systems in La Crosse. For the conduct of the final exercise an alert email was sent to the participating hospitals approximately 10 minutes prior to the STARTEX for them to update their bed counts in EMResource; a form was developed for reporting the data during this exercise. The types of beds were not identified over the net, only data was provided which was based on the updated information in EMResource. The email sent shortly before the opening of the WECOMM net, allowed the hospitals time to gather the data, transfer it to the form provided and then report this data via amateur radio. The five participating hospitals represented a very good coverage area of the region and demonstrated the feasibility of this concept for redundant communications during large scale events, see attached overlay for locations.

Exercise Timeline for July 16:

1920 – Email sent to participating hospitals requiring them to update EMResource, data form attached to the email, see attachment

1930 – Net Control station began occupation of the net and provided expectations, see attached script

1931 – Net Control took role call of all stations to ensure all locations were online

1935 – First hospital reported data, **Tomah Health**

1938 – Second hospital reported data, **Mayo Health Systems La Crosse**

1940 – Third hospital reported data, **Gundersen St. Josephs' – Hillsboro**

1943 – Fourth hospital reported data, **Vernon Memorial Hospital**

1945 – Fifth and final hospital reported data, **Gundersen Tri-County – Whitehall**

1950 – The exercise was completed and the net was returned to WECOMM system for use by others

7. What went well:

Successes

Local/Regional Radio Clubs

WECOMM System

Hospital staff & Club Members

Coordinated Planning
Radio Operators

The Amateur Radio Redundant System

How to Ensure Success in the Future

Hospitals and members of supporting radio clubs need to continue to conduct training and testing throughout the year

Proved to be a very reliable system and easy to access. Transmissions were very clear.

This was a key factor in the success of the exercise; provided procedures to gain access to hospitals for club members and training and experience for hospital staff

Plan well in advance, plan often, coordinate often
Quickly set up equipment, demonstrated knowledge of the equipment.

The test demonstrates the region's interoperability capabilities and amateur radio as a redundant communication system when needed

8. What can be improved and how?

What can be improved

Additional hospitals participate

Add in County Assets

Use of online collaborative systems

Recommendations

Use the success of this exercise to demonstrate capability to others for their participation

Counties will require same assets during same events as hospitals, need to coordinate into plans & exercises

Provides for smoother planning process by the using of collaborative tools (Zoom, MS Teams etc.), this capability has proven to increase speed of efficiency and clarity for meetings.

This was the first exercise Western Wisconsin Emergency Healthcare Readiness Coalition had ever conducted with amateur radio integrated into it. This has proven to be a very viable concept and should be continued and/or considered for every full scale exercise the coalition conducts. This exercise aligns with the Assistant Secretary of Preparedness and Readiness, under the Health and Human Services Department, Capability 2, Health Care and Medical Response Coordination; Objective 2, Utilize Information Sharing Procedures and Platforms. This includes developing procedures around sharing information, identifying ways to ensure protection of information access and data protection, and utilization of various redundant communications systems and platforms.

This After-Action Review/Report was compiled and developed by the undersigned and can be reached at loren.klemp@gmail.com or 608-751-0698.

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