



# ***WA Pandemic After Action Review Task Force Meeting #4 May 26, 2022***

# Logistics and Process Timeline/Status/Intros

- Military Department Overview
- Kevin Baker Introduction
  
- Q&A

# Our Agenda for Today

- Welcome
- Logistics and Process Timeline/Status/Intros
  - Q&A
- B → H Instructions
  - Gallery Walk Rotations (First Part)
  - Gallery Walk Rotations (Second Part)
- Additional Essential Topics Exercise
- Closing



# B → H Gallery Walk Instructions

1. Everyone will be placed into small groups.
2. Each group will rotate together through separate B...C...D.. → H 'rooms', spending 15 minutes in each room (together), writing down bullet points to the prompted question.
3. You'll then 'rotate' to the next 'room' with your group, read the last group's comments, discuss and add your own (building up the list).
4. After the first four rotations, you'll take a 10 minute break.
5. Your group will complete the last three rotations (again, 15 minutes in each room), adding your comments to all of the prior groups.
6. At the end of the Gallery Walk, we'll have everyone's input in each of the B → H 'rooms'
7. Take room/slide notes any way you wish (one scribe or individual notes, but **PLACE INITIALS OF EACH BULLET POINT 'AUTHOR' AT THE START OF EACH BULLET!** This is very important!



Question for all the 'rooms':

*What are examples of important issues/lessons to explore under this topic?*

# B → H Gallery Walk Logistics

1. Take room/slide notes any way you wish (one scribe for all, or individual notes, but **PLACE INITIALS OF EACH BULLET POINT 'AUTHOR' AT THE START OF EACH BULLET** - This is very important!
2. Use your own 'text color' to delineate your group from the others - take your best group guess! (no light colors please)
3. Use 'Chat' box (during full group session) to let us know if you'd like to volunteer to spend additional time connected with any specific B → H issue

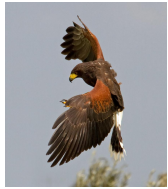


Question for all the 'rooms':

*What are examples of important issues/lessons to explore under this topic?*

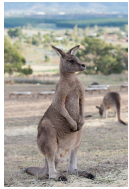
# Gallery Walk Assignments

Eagles



B

Kangaroos



C

Peacocks



D

Sharks



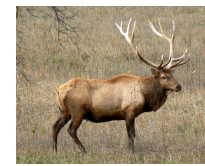
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Turtles



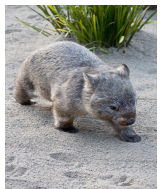
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Moose



G

Koalas



H

Nick  
Robert  
Angie  
Brienne  
Kerstyn  
Amy S.  
Phil

Sen. Rolfes  
Issac  
Ron  
Sharlett  
Faatima  
Tristan  
Ekkarath

Sen. Wilson  
Matt  
Nathan  
Fernando  
Kendrick  
Rayanna

Sen. Lovick  
David  
Adam  
Chandra  
Winona  
Stacy  
Darcy

Sybill  
Amy  
Theresa A  
Travis  
Rep.  
Donaghy  
Chris Corry

Martin  
Nariman  
Samantha  
Melanie  
Carina  
Lou  
Erik R.

Sudhir  
Nomi  
Michael  
Alison  
Brendan  
Jane  
Sheri

# "B" Gallery

*Emergency responses that would benefit the business community and workers during a pandemic*

## Eagles:

- For workers, having a reserve force of Unemployment Insurance adjudicators and call center staff to handle claims.
- Proactive and clear instructions immediately posted and disseminated to businesses and workers with how to activate their respective benefits
- Providing active measures to support those businesses. Provide vaccinations to those employees in order to support those businesses. Use cluster outbreak data to focus preventative measures.
- We left the accountability of providing safety measures to businesses. This was exacerbated in the Latino community, an example would be agricultural work. PPE and preventive measures were not provided/available. This lack of resources created dangerous working environments and lower income workers forced to take those risks. Shifting the accountability to an emergency resource focused on business preparedness would mitigate this.

## Peacocks:

- Consistent Criteria of how to operate - Create consistent understanding of how to run the business in accordance with their business plan and predictability
- Businesses had to have more input
- Best Practice learning from other cities and border states - Senator Wilson
- What type of contingencies would support businesses
- Did businesses use prior experience as a springboard to managing the business
- How do we create a community where consistent support for businesses exists?
  - Examine what was done by legislature, understand the gaps, and create a new resource opportunities (help for landlords).
- Business Interruption Insurance is excluded in most policies and therefore there is no protection
  - Penalties if there is no compliance even as businesses are working to survive the pandemic
- Businesses are in the business providing a service, survive the pandemic, and then being penalized by the government

# “B” Gallery

*Emergency responses that would benefit the business community and workers during a pandemic*

## Koalas:

- **BM: med-large business = business continuity resources but small businesses not so much...might be helpful to have business continuity resources available to businesses of all sizes; state assistance with this**
- **JH: many small business were left to navigate the system on their own; some went out of business because they were not aware of available resources—how can we make it easier for them to know how to find those resources? Applying racial equity lens: consider relationships with banks, technological access. Important to always consider solutions with a racial equity lens applied consistently.**
- **SO: access to real-time information is critical; provide examples of how to integrate continuity effectively; easily-accessible resources and information that can be utilized right away; do not want to overwhelm with too much information—just what is needed and appropriate at the time; also the utilization of on-site operations via mobile units may be helpful to address any disparities faced by certain communities**
- **BM: not everyone has access to and/or uses the internet effectively; any resources on the internet should also be available in other ways (hard copy, audio, video, community leaders, etc.)**
- **TNP: utilizing trusted resources who are figures who have influence and impact in their community**
- **SO: layering information and providing multiple means to get the same up-to-date, accurate information**
- **BM: forum for assistance to be provided to businesses by other businesses**
- **SO: linking businesses through some type of liaison or forum; more linkage and more integration into systems that are already in place because some people do not have access to this critical information**



# “B” Gallery

*Emergency responses that would benefit the business community and workers during a pandemic*

## Sharks:

- Equitable communications for rural and underserved communities.
- Safety for employees, care providers, grocery store workers, nurses.

## Moose:

- Establish consistent criteria so that businesses didn't feel decisions were ever changing and arbitrary (MelB)
- Notion of essential workers: what could be already part of a statewide pandemic plan that could make arriving at the framework for who should be at work and who should stay at home, what businesses should be open and which closed, more quickly and equitably (Martin)
- Engagement of businesses early on for having forums for government to share a preview of what ideas and decisions are being proposed in order to get a better buy-in, recognizing size of business impacts what's important to them. Also coordination of labor in these decisions and briefings (Carina E)
- Need to get to a spot where we're not moving on the fly (Martin)
- Coordinated, targeted mechanism so employers and employees remain engaged in the conversation in an ongoing basis (Lou S)

## Kangaroos:

- Explore how the state defined “essential workers” and produce a recommendation that includes a refined definition and standard for future pandemics that accounts for lessons learned from COVID-19
- Assess the state's role in supply chain sustainment for critical commodities during the pandemic and generate recommendations for future actions the state can take to ensure continued delivery of these commodities
- Using an equity lens, document lessons learned around support to small businesses and generate recommendations for state actions to support small businesses through future disruptions
- Language access to limited english proficient communities.
- Outreach that addresses the diversity of communication methods used by different sub-groups. Outreach that leverages trusted community messengers.
- Formal process needed to support child care support for essential workers - those jobs who could not retreat to the virtual environment need childcare support first when school closures occur as part of a pandemic public health intervention

# “B” Gallery

*Emergency responses that would benefit the business community and workers during a pandemic*

## Turtles:

- **Clear communication to workers about what their rights are. What is the enforcement pathway if rights and safety is not being respected. I.e. when shared responsibility between DOH and L&I, there was lack of clarity on how to manage the outbreak. The handoffs between agencies in the workplace was confusing for staff in agencies and jobsite/ workers. What enforcement was possible was often in question.SH**
  - **Clarity for business owners would have helped this as well**
- **Disparity in impact from policy on small business vs large business. This had profound impact in rural communities that did not have large employers to maintain services. CC.**
- **Consistent data and reporting on impact to workers during the pandemic. Reports that outlined infection by industry was helpful to community. Knowing that healthcare, agriculture and others was helpful to understand where interventions were impactful during the pandemic. SH.**

# “C” Gallery

*Standards regarding flexible rent and repayment plans for residential and commercial tenants during a pandemic*

## Peacocks:

- What did the federal gov't do to support low income housing programs? Is there anything we could learn and benefit from that?
- Large cities were getting money from the Feds directly, smaller cities had to go to the state. Took a while for disbursement of funds. 2nd grant has still not been disbursed by the state of WA. Senator Wilson
- Flow from Federal to State and Local jurisdictions - Review to ensure resources flow more smoothly and quickly.
- It was difficult for jurisdictions to understand how they could disburse and use their funds.
- How as an enterprise the state frames it as supportive.
- Did the Billions of dollars that were distributed for rental assistance work? How were the funds spread, did it work, what were the gaps, what were the results.
  - What downstream problems have been created as a result of the program assistance.
  - Legislators were not consulted when it came to identifying problems and making recommendations to solve.
- As legislators information was slow and sporadic.
- Now that we are recovery what lessons have we learned

## Kangaroos:

- Assess the state's ability to distribute rental assistance statewide and document areas for improvement.
- Language access to limited english proficient communities.
- Outreach that addresses the diversity of communication methods used by different sub-groups. Outreach that leverages trusted community messengers.
- To address equity, diversity and inclusion, give consideration to local communities, individuals and organizations with the greatest relative need and the fewest resources.
- Explore the federal and state eviction moratoriums and rent assistance programs that occurred during COVID-19 to generate lessons learned relating to the timing, implementation, and impacts of these actions.

# “C” Gallery

*Standards regarding flexible rent and repayment plans for residential and commercial tenants during a pandemic*

## Moose:

- (Carina) If we hadn't had the federal resources, it would have been a lot more problematic. Eviction moratoriums were helpful to tenants.
- (Lou S) Solutions that work for both landlords and tenants so things don't get slowed down in legal battles. Efficient solutions needed; funds need to get to the people who need them in a timely manner. A lot of funding allocated still hasn't been received.
- (Mel B) If a jurisdiction had good systems in place to get the dollars out, it worked—but if they didn't already have those systems in place, people suffered.

## Koalas:

- SO: pushing rent back does not help the renter; landlord still has financial responsibilities; endgame was not considered; examine the fundamental institution requiring money to come in—work with banks to waive some debt; would provide relief for both the renter and the landlord; helps with business continuity; a lot of the information about renters' assistance was online; many communities without online access/navigation savvy/do not trust what is online might have benefited from other ways to have access to the information
- BM: general distrust of gov't must be acknowledged; if gov't offering these programs, how do we get residents to trust the gov't for this assistance; once again, must apply equity lens to this consideration

## Eagles:

- Supplemental programs for rent assistance don't have specifications that protect the tenant from a landlord who chooses not to accept types of governmental assistance. The tenant is still liable for that debt.
- Many members of the community took out loans or borrowed money were not able to use assistance programs to pay back those loans. Many programs do not allow for loan repayment. This keeps the debt centered on the community member and lack of flexibility in the assistance is a deficit

# “C” Gallery

*Standards regarding flexible rent and repayment plans for residential and commercial tenants during a pandemic*

## Turtles:

- Support for landlords is just as important as eviction moratorium and fiscal assistance for renters. These landlord assistance resources are critical as failure to provide may force smaller landlords out of the market, further constraining the rental market. This will be exacerbated in future events. This context also applies for small business renting from landlord. AO
- For similar events, need a more targeted approach to rental assistance. Create threshold for qualifications, a blunt tool like what was employed during this pandemic creates perverse incentives. CC

## Sharks:

- Adult Family Home business owners to leverage and access rent and repayment plans.
- Be more inclusive of non traditional ways people are cared for eligibility of rent assistance. Creating more equity and awareness in this area.
- Idea: Set up an emergency navigator “system” to help under resourced communities access and navigate central access points to apply for resources, support, and services. Centralized system.

# "D" Gallery

*Whether establishing regional emergency management agencies would benefit Washington state emergency response to future pandemics*

## Moose:

- (MelB) this occurred and was a challenge when different sized jurisdictions were put together and those jurisdictions had different experiences and case counts and did not speak to the unique needs of the jurisdictions.
- (Martin) - it was not so much about the need for regionalization but the need for standardization and regional level-setting so that each community in the region does things a bit more consistently. Regional approach for communication and information sharing but harder for decision making.
- (LouS) - Adding another regional agency on top of the jurisdictions is problematic but need mechanisms to support cross jurisdictional collaboration.
- (CarinaE) Standardization, similar response plans, elements of those plans, and framework for coordination, while respecting jurisdictional authority
- (Martin) Need to respect sovereignty of local governments while sharing information

## Eagles:

- Think this is a positive to assess local demographics, specific needs, availability of resources and response capabilities. This resource would assist in data collection to more accurately and quickly identify community needs. Also we think this would be a huge asset to marginalized communities. This would provide a direct connection and allow the state to have clear vision over those populations and their needs.
- Enables local relationship building with non-profits and community based organizations to partner and have a unified effort. We saw a disconnect during the pandemic. There was not a coordinated effort. A deep relationship and partnership would provide for a collective, unified effort.

# "D" Gallery

*Whether establishing regional emergency management agencies would benefit Washington state emergency response to future pandemics*

## Turtles:

- For some municipalities, including Duvall, full time EM is not available. Larger regional resources, i.e. from King Co. add some value, but have clear limitations. Consideration of a regional EM that would cover similar cities would mean that every jurisdiction served under EM would be demanding services at the example of Duvall, four surrounding jurisdictions duplicated policies and plans, a regional EM could have removed this burden. AO
- Consider reframing the question: not regional vs local. More importantly, how the services are delivered locally (county/city) is more important.
  - Remember that responsibility still likes with jurisdiction however services are delivered. AO
  - Control **must** remain local.
    - When your elected responsibility and statutory responsibility, must have flexibility to meet the needs
- Artificial boundaries on paper may not make sense from operational standpoint CC
  - Let people choose the region that they are going to respond with is essential. Naturally migrate to each other to prevent duplication. Funding and mechanisms in place to expand the region or contract the region would be helpful. Should be considered in addition to not taking away. TA
    - King Co also supported with an organic process.
  - Working example of success was regional IMT where IMT focused on paperwork and documentation and locals did partner relations work. TA
- There is a pathway for county and locals to cede control to a regional entity. AO
  - Regional entity can provide supporting resources. Planning templates, training resources, support for mutual aid, additional point of contact to provide assistance.
- Delivery of services rely on local leaders to be successful.
  - Regional structures often are aligned with population leading to large geographic structures that lead to an expectation to connect unlike communities.
- One model to consider for study is ESD. These are 'in addition to' the local school districts. Not taking away from. TA
- Mayor Ockerlander is interested in supporting the process as Ruckelshaus moves forward

# "D" Gallery

*Whether establishing regional emergency management agencies would benefit Washington state emergency response to future pandemics*

## Sharks:

- Pro: A regional emergency management structure could potentially enhance closer collaboration and relationship building with local governments, nongovernmental agencies, and the private sector. This model would expand state's response capabilities.
- Con: This would be an incredibly expensive appropriation for the state to maintain and may duplicate efforts and costs needed to maintain capabilities. The cost may outweigh the benefit.
- Proposal: For a pandemic response a serious conversation is needed to give local regions autonomy with accountability/ leadership needed at a state level. Shake up the status quo so future responses are more effective.

## Peacocks:

- Region 4 has some models to help think about Regionality and how they help each other.
- Look at places where regionality was successful, learn, and apply to a larger scale.
- Regionality must have resources to support the sustainability of the region. You can add and Emergency Management Office - but if you do not resource, it will fail.
- Managing span of communications, information sharing, is important.
- At the State level it is difficult to understand how FEMA reimburses. Understanding how reimbursements occur from the Feds is important so we do not leave money on the table. Look at other states that deal with reimbursements.
- Working with FEMA is an opportunity.
- Federal dollars spend rules were all over the place & inconsistent.



# “D” Gallery

*Whether establishing regional emergency management agencies would benefit Washington state emergency response to future pandemics*

## Koalas:

- **BM/TNP: equity of emphasis, regional approach for all of Washington State**
- **SO: must take care to not neglect smaller areas in Eastern Washington; how is “regional” being defined? Might be helpful to have system in place to make sure all areas of state receiving adequate resources/assistance**
- **BM: we already have Homeland Security regions in WA but with the exception of King and Pierce counties, Homeland Security regions contain multiple counties. How regions are defined is a critical consideration. How resources are allocated and organized per region must also be considered carefully.**
- **SO: Are regions based on geography or governmental perimeters? What about looking at regions geologically, agriculturally? Perhaps move away from traditional ways of defining and establishing “regional lines/boundaries.”**
- **BM: challenge = when create a region, there is also a political boundary that must be considered; if a region extends beyond political boundaries, it can be difficult to overcome resistance/reluctance to abandon the political boundary**
- **SO: competing for resources by region is not helpful; important to implement system to help different regions work together as teams**
- **BM: what is the role and responsibility(s) of the regional agency?**
- **SO: is there any enforcement or backing of requirements of the regional entity (as it relates to the point above from BM); important to ensure that funds are used appropriately and have real, measurable impact**
- **TNP: will this be a response-based capability or will it be permanent**

# “E” Gallery

*Gaps and needs for volunteers to support medical professionals in performing their pandemic emergency response functions within Washington state*

## Kangaroos:

- Explore improvements to the state’s volunteer management structure during future disasters. Assign a lead agency and public a framework that is tied to the state’s Comprehensive Emergency Management Plan
- Determine what is needed for a state medical reserve corps, ensuring they have standardized training and activation process and liability coverage across all WA’s political subdivisions.
- Capture learning from creative solutions that were implemented to get more skilled medical professionals into volunteer roles during COVID-19 (e.g. phlebotomists, academia)
- Provide a more efficient process for accessing licensed health care volunteers for all settings, including mental health and developmental disabilities institutions.
- Understanding health care needs with volunteer capabilities
- Challenges with WAServes with timing of getting volunteers onboarded and able to serve.
- Need clarity on the definition of the term “volunteer.”
- Clear designation/understanding of the definition of the word volunteer. Paid vs. non-paid.
- Clarity on the specification for the job openings and parameters, skill sets needed by potential volunteers.
- Confusion around utilizing National Guard resources for non clinical support.

## Eagles:

- **Need to have systems in place that keeps volunteers engaged when there isn’t a pandemic; providing funding for training, regular events, refresh skills and engage with their supported areas; would be great if there was a coordinator who was supported by those regional emergency medical centers**
- **Establish funding to support those medical personnel when volunteering becomes untenable; nonprofits who volunteered in some cases used all of their reserves to support and were not financially supported**
- **Some pandemic mandates can hamper the ability to have a strong volunteer network; establish a specific mandate for volunteers that spells out exceptions and support for that group**

# “E” Gallery

*Gaps and needs for volunteers to support medical professionals in performing their pandemic emergency response functions within Washington state*

## Turtles:

- Revisit medical reserve corps. For many communities, this resource was not maintained. State volunteer system put in que for whole state, did not draw local volunteers for local challenges. TA
- Success: reissue licenses for retired medical professionals was brilliant. Paramedics expanded scope of practice to provide vaccines.
- Volunteer safety should still be top priority. Deployment should come with expectations of safety, this may mean adjusting the mission area. AO.
- Using *all* volunteers could have been an option to fill gaps during emergency. I.e. using CERT volunteers to support some mission areas. . Donaghy
- Rotary, Lions, other community based organizations that could have been mobilized as a volunteer effort. How do we engage them in responding to disaster in the future. CC
- Identification of volunteers during an incident proved challenging for many LHJ or EM. Having a fast track validation/verification/registration process would have been helpful in welcoming new groups. SH
- Language access was not available in all spoken languages. Some community groups could have assisted, if they had more access to the opportunities. SH.
- Including underrepresented communities can provide resources we don't expect, helps remove barriers. Donaghy

## Moose:

- (Carina) need to explore the mobilization of volunteers across county and state lines—determining whose authority they work under if they work in another jurisdiction. Layers of liability & insurance issues. Need to better understand credentialing.
- (Martin) Also interstate issues, and licensing. Not sure if that was efficient.
- (Carina) State used people listed in the State system. But issue with volunteers is: they don't generally have the time availability to cover shifts, work 5 day p/w, etc.
- (Martin) need recruitment strategy to build out better bench of volunteers who will last.
- (Carina) need to work with hospital system to see how they want to utilize volunteers.

# “E” Gallery

*Gaps and needs for volunteers to support medical professionals in performing their pandemic emergency response functions within Washington state*

## Koalas:

- TNP: standardized training for volunteers (particularly as it applies to administration of vaccines)
- SO: important to identify which professions would need volunteers and which roles/activities are applicable/appropriate
- BM: what are helpful ways to incentivize volunteers? Suggested incentives include more than just monetary, easier to recertify license, etc.
- TNP: maybe rental assistance as incentive, student loan assistance?
- SO: safety considerations for volunteers are critical
- BM: incentives can be license activation, continuation, state-based resources
- TNP: centralized information needed?
- SO: grouping for the centralized information is essential—make sure that the info is appropriate and applicable; equity lens needed; consider tribal communities, rural communities, make sure accurate information is making it to the volunteers in those communities; in politically-charged times, important to make sure no one is excluded and there is equal volunteerism

# "E" Gallery

*Gaps and needs for volunteers to support medical professionals in performing their pandemic emergency response functions within Washington state*

## Peacocks:

- PPE was a challenge to support our medical
- Government does not need to get involved in the medical needs. Let the professional be the professional that they are.
- Hospitals know how to run the hospitals.
- How to support Volunteers and Hospitals -
  - Volunteer recoup of expenses
- Could not find a stable definition of "Essential Workers"
- Mental Health, Child Care Services, Wrap Around Services
- Capital Funds - Hospitals could benefit from more funding with existing infrastructure
- Hospital Surge: Look for in hospital spaces to retrofit for surges
  - How do we build a pool of volunteers that can help when they have their own work to do
- Definitions and Metrics were changing consistently - Different requirements for volunteers consistently changing - hospitals will not know what changes are coming therefore could not plan accordingly
- Using volunteers for cleanups, the question is Volunteer Liability -
  - How do we make certain the mechanisms for volunteer deployment is protected from liability - Liability protection is dependant upon where volunteers come from
  - Senator Wilson passed a bill in 2017 re: Volunteer liability protection Bill 5185 in 2017
- PRACK: Fed look at what every state did with funds?
  - This group can look to PRACK for best practice learning resource.

# “F” Gallery

*Gaps and needs for tools to measure the scale of an impact caused by a pandemic and tailoring the pandemic response to affected regions based on the scale of the impact in those regions*

## Turtles:

- Scale played a large role in LHJ meeting needs of community for data. How do we regionally build capacity to meet need? How do we quickly bring on volunteers to support across mission areas? TA
- Decision making *with* elected officials who may not have SME has caused challenges. The division between PHO and LHJ administrator and County Commissioners caused tremendous challenge. Decision making structure that provides protection for LHJ and PHO during pandemic. TA
- Challenge in data came from local reporting varied by jurisdiction across the state. SHB1152 may help? CC.
- Clear need to modernize data systems. Not everyone had access to the same information. Too localized. TA
- Data collected, did not resolve disinformation challenges in the response. Because information was pulled from different sources *and* information was being interpreted differently, this fueled the waves of disinformation causing confusion and division. Donaghy
- Lack of consistency in message and policy by jurisdiction, not based on data, fueled the disinformation to take hold. People used non-credible medical sources to validate their preferences. AO

## Kangaroos:

- Explore roles, responsibilities and authorities between fed, state, local government to provide more standardization for future public health emergencies

## Sharks:

- Tools exist however how does the information get shared or available at a sustainable level that doesn't cause undue burden for organizations submitting the data and the state agency designated to maintain the data platform. Data sharing agreements can be organized in advance.
- Ways to empower community volunteers (churches, civic orgs, etc) to engage as a resource before we are in crisis. Example: a resource pool of volunteers to incorporate their skills and resources to support the response.

# "F" Gallery

*Gaps and needs for tools to measure the scale of an impact caused by a pandemic and tailoring the pandemic response to affected regions based on the scale of the impact in those regions*

## Moose:

- (Carina) Standard practices with measures and indicators, but local ability to implement. Different approaches depending on the level of the local emergency, ie building on the state reopening plan as a resource.
- (Lou S) It would be useful to have a menu of standard indicators, to help in assessing the situation and allow targeting of resources based on those indicators. Different jurisdictions might need to tailor the indicators based on their situation. Start with the reopening plan.
- (Martin) We have measurement tools but the time period it takes to gather the data for decision making needs to be shortened so the data is more timely and useful. At home testing means people aren't reporting, so how do we overcome that so we're more sensitive to what is actually happening.
- (Carina) to begin we lacked consistent idea of what data was needed; **the data systems need further refinement in order to capture the data and make it useful to the public and decision makers.** Dashboards were important but resource-intensive.

## Eagles:

- **Transparency**
- **Advocacy for the sharing of data between types of organizations**
- **Disaggregate data to understand different demographics. Latino communities as an example were not reflected accurately within the data. The more disaggregated the data, the better our understanding of where the problems exist and how to mitigate**
- **Make the data available to all; real time data would be more beneficial vs. data that was a week old. Have a central repository for data where all sources are contributing. Health, employment, transportation, business, etc. There has to be a responsible entity for the analysis.**
- **We must have qualitative data as well as quantitative. What does this mean? Examples of stories that the data points to.**

# "F" Gallery

*Gaps and needs for tools to measure the scale of an impact caused by a pandemic and tailoring the pandemic response to affected regions based on the scale of the impact in those regions*

## Peacocks:

- Were Roundtable held to understand was happening across all counties.
- The biggest tool will be people. This group should be reaching out to people across the state to understand.
- Communities felt the need to have a voice at the state level vs. local. Need to think about the breadth of the impact across all communities and not generalize.
- J-Lark Committee to do a Study on effect of shut down of schools on children of color.
- What were those Behavioral Health Issues that resulted from the shut down e.g., Abuse,
- Once IT infrastructure is designed and activated - must allocate resources to upkeep
- Public health information sharing was hindered by the fact that systems were outdated and not interconnected.

## Koalas:

- TNP: rely on and seek expertise of professionals who are trained in the utilization and relaying of the measurements
- SO: look at what exactly is a business impact? Neighborhood-to-neighborhood impact in some areas; may not be able to get down to that level, but important to recognize
- BM: Data reliability must be considered, especially in neighborhood-to-neighborhood impact; how do you accurately measure impact and needs in two or more vastly different neighborhood/communities; how do you make good decisions without good data?
- SO: concept of reconnaissance team (gathering information in an area where there is unreliable data) trained to gather specific data
- BM: important to validate existing data as well
- SO: do not exclude individuals who may not necessarily have a DOH background for the reconnaissance team mentioned above



# “G” Gallery

*Gaps and needs in health care system capacity and case tracking, monitoring, control, isolation, and quarantine, and deploying medical supplies and personnel*

## Kangaroos:

- Considerations for staffing impacts when future medical surge capacity is needed
- Better coordination between insurance providers and government regulators to help the population quickly navigate illness during the pandemic
- Isolation and quarantine authorities were blurred between state and federal authorities, especially when dealing with ports of entry

## Moose:

- (MelB) Case tracking impossible when military is part of the jurisdiction, because the military wouldn't share their numbers with the local government
- (Carina) Data monitoring and sharing is one issue; another is need to understand how we can explore regionalization of some issues like isolation facilities which are resource intensive. Also: determining when we should “stop” and recognize the thing is so pervasive that case tracking is not valuable. Also: hospital resources taken up by people who can't be discharged because no support at home or other facilities not available. Systemic issues that if we could address we wouldn't need to stand up other resources. Long term care facilities an important part of this—if they fail, those people go to the hospital
- (Martin) Informatics: lack of interoperability, data availability, data transparency; impacted PPE availability in schools; similar thing happened with testing availability. First half of the pandemic was awful for schools and testing. Last 15 months have been better, but more result of at-home tests.
- (carina) PPE was a huge challenge. Still don't have great mechanisms for stockpiling because of expense and infrastructure needed.
- (carina) adult family homes and smaller clinics needed additional support and often were serving the most at-risk and marginalized communities
- (MelB) smaller HCF including hospitals, didn't have infrastructure to request federal reimbursement and manage the bureaucracy
- (Lou S) - issue was lack of access for essential workers to access vaccine - need mechanisms to get them MCM in a timely manner; tribes stepped up and supported home health care and other essential workers with providing vaccines
- (Martin) the plans we had didn't contemplate the scale of the emergency.

# "G" Gallery

*Gaps and needs in health care system capacity and case tracking, monitoring, control, isolation, and quarantine, and deploying medical supplies and personnel*

## Koalas:

- JH : shortage of healthcare workers–need process to increase capacity; how to get HCW from one side of state to other–need process to make it easier to move HCW from one place to the other; scale up more people when needed. Supplies shortage–every hospital had to find own supplies; should consider state stockpile
- SO : Medical Reserve Corps utilized? What processes in place to keep them safe?
- JH: need more resources for the public health system; who should we call if we need help in another pandemic (this is not clear)
- BM: how can we help difficult discharge patients (do not need acute care but have nowhere to go following discharge)
- SO: more isolation tents would be helpful
- TNP: centralized sources of information specific to whichever group needs the info

## Eagles:

- Case investigation was incredibly resource intensive. Once it was determined that case investigation was not going to contain the virus, perhaps moving that responsibility elsewhere or having a separate entity for it would be optimal.
- One size does not fit all especially for communities of color. There are examples where those communities care for their elders or those needing care at home. Care homes were provided vaccinations but our diverse communities were not considered in that grouping. Communities of color don't necessarily do things in the same way and we need to have an equity lens when creating prioritizations around vaccinations and other mitigations.
- To prevent shortages, the state incentivises both governmental and nongovernmental organizations to source multiple supply avenues.
- PPE shortage impacted service delivery. There was not a uniform way to get PPE. Also it was very confusing around PPE requirements. They were in some cases implemented by counties. Plus there were Federal mandates vs. State mandates to contend with. Need to establish a source of truth that we'll operate from more quickly.

# "G" Gallery

*Gaps and needs in health care system capacity and case tracking, monitoring, control, isolation, and quarantine, and deploying medical supplies and personnel*

## Peacocks:

- All medical institutions are conducting After Action Studies
- Shear magnitude of the pandemic event ran our capacity to track and manage information
- Trust experts, include experts in understanding how to run the business - organization.
- Did the fed funds get to where they were intended.
- Must learn from other states and countries how to effectively manage this type of event.
- What effect have the lock downs had on our communities.
  - Suicides, Mental Health,
  - How do we help - how do we ensure Counselors are accessible

## Sharks:

- Continue to ensure the WA Medical Coordinating Centers is operational continually or at a moments notice. (NWRN and Readi)
- Continue the coordination between hospitals and long-term care facilities via incentives to decompress hospital census of senior patients in acute care. Continued funding will be essential to maintain additional mitigations such as dedicated COVID+ units and rapid response teams.
- Need infrastructure for case tracking.
- Response for communities of color was delayed for the correct type of PPE needed. There was not a concerted effort for the equitable distribution of PPE.
- When Federal money was available the \$ went to large pass through organizations that smaller organizations then would need to apply for grants and assistance. This caused delayed response. Second tier responses are not acceptable!
- Challenges deploying state medical supplies. This logistical function needs support and to be streamlined.
- Community-based care for people with disabilities and elderly was not taken into consideration for PPE, spread by community-based workforce (home care), vaccination - can't just have facility-based distribution and intervention (need data on home care, community-licensed and certified care (Adult Family Homes, Supported Living) as much as facility based care)

# "G" Gallery

*Gaps and needs in health care system capacity and case tracking, monitoring, control, isolation, and quarantine, and deploying medical supplies and personnel*

## Turtles:

- System (healthcare) was overwhelmed. Lack of staffing to meet the surge in demand was a primary issue to consider.
- Evaluate PH system funding to meet scale and demand of pandemic. I.e. We staff up our fire department to respond to fire. There is not a fire every single day, but they are ready to respond. PH needs to be considered a staffed and ready first responder
- Evaluate stockpile of medical material that include this in our supply chain. Don't want to open a vault and find thousands of expired masks. Need to be sure that we had a pathway to be successful. Donaghy
  - People don't like preparing for disaster because it causes emotional distress and monetary distress. Post incident, there is a golden period, that allows us to build resilient & self refreshing systems.
  - Build stockpile into supply chain.
  - Funding needs to allow for us to rotate/own stock
- State, regional and local all need to invest in emergency preparedness. Co-occurring events complicate the incident.
- Healthcare staffing existed prior to the pandemic. Significant challenge has been changes to the staffing models so there is increased burden leading to great resignation. Workplaces need to develop respect, adequate workload, and sustainable workloads. Sustainable workplace means more than just increased pay, it means workplace culture and a reasonable amount of work. SH
  - Same for local government. With growth in population, government was not staffed to meet demand. AO
  - If systems are already stretched prior to the pandemic, naturally they will fail. We can't just return to the previous structure that put us at risk. Donaghy.

# “H” Gallery

## *Implementing guidelines for school closures during a pandemic*

### Turtles:

- Suggestion to rephrase language to focus on continuity of operations vs. closure. Ensure steps are taken to minimize learning loss. CC
- Long term plans for hybrid learning options. Including tiered plans to support children that do not have in-home care to support home based learning. Health and safety, including infection prevention, should be first priority.
- Economic disruption of those not going to work has tremendous health impacts and learning impacts. Economic stability to provide nutrition and shelter is essential. Need to take into account economic disruption and alternative care like childcare for frontline workers when making decisions about education operations. Donaghy
- School operations needs to be considered in connection to childcare options. CC
- Need to consider both education during the school day AND extra curricular activities. TA
- Need to understand that not all children will recover from this pandemic in the same way and we need to provide services accordingly. Donaghy

### Sharks:

- Balance between statewide plan and local control for disproportionately impacted communities.
- Some schools were already under resourced prior to the pandemic. We need to level the resources across the board. There needs to be a clear pathway for equity regarding this topic
- Businesses and technical community (Amazon, Microsoft, Google) that do not pay taxes need to be called to action earlier in the response with a commitment to support for our schools and our school systems. Equitable access to technological support needs of all communities needs to be addressed.
- What can we learn from the private schools who were able to get back to school earlier successfully.
- Large Corporate accountability. Why are we not bringing these companies into the conversation and this AAR process?
- What lessons can we learn from childcare - that largely remained open - when schools were closed
- What children were most disproportionately impacted by school closures? Some groups of children should be prioritized for essential services, return to school, other strategies (children with disabilities very impacted)

# “H” Gallery

## *Implementing guidelines for school closures during a pandemic*

### Koalas:

- SO: having mindset to create alternative measures to meet the needs (food, education, shelter) that remain regardless of school closure
- BM: considerable nutrition obtained in schools; if schools are closed, cannot get the required nutrition
- JH: what provisions will be in place for parents of daycare-age children who may need their children to have care so that they can go to work?
- SO: guidelines for school closures for children of daycare age (infant to preschool); essential workers forced to choose between work and childcare
- JH: making sure every child has technological equipment and training on how to use the equipment properly; racial equity lens yields that some parents not able to help children learn with technological equipment with which they are not familiar
- SO: more inclusion of parents so can have built-in capability and access to bandwidth and critical cybersecurity
- JH: make sure that racial equity lens consistently applied; look at all facets and ramifications of children learning in virtual settings; some children are behind (gaps in learning advancement) because did not have the needed support to learn 100% at home
- SO: educators will be trained to help children transition to hybrid or 100% virtual learning environment smoothly
- BM: in the future, if there is a catastrophe or disaster that is smaller-scale (wildfires, snowstorms), are there guidelines established via AAR related to school closures that could be applied/utilized in the smaller-scale examples?
- JH: might be a good idea to consider the above point so that if these smaller-scale events happen and there are school closures, it might not be so jarring for children and their parents
- SO: important to examine how parents can have fluidity to remain at home if needed and still maintain their jobs, if there is a school closure

# “H” Gallery

## *Implementing guidelines for school closures during a pandemic*

### Moose:

- (Martin) We need to refine what “school closure” is. If it’s no school going on, that was a very short period of time. Then we transferred to remote, which lasted through first year and 2/3rds of second year. Instead of saying “closure” we should say “school operations”. A lot of child care issues arose because of this for the families. A scramble to maintain child care for essential workers. Notion of scale: we had a robust plan from 2009 for swine flu, which was inadequate for what we had to deal with in this pandemic. Did not consider kids being out of school for 1+ years. Planning gap: we need to think about technology. The plan needs to address: Can we deliver education from distance, and if so how?
- (Lou S) Issue of access to broadband in all areas of Washington; it significantly impacted ability of children to continue their education.
- (Carina) We had plans, but never had money or staff to sustain the planning effort. If we don’t make plans manageable and relevant to everyday experiences they have no value. We need to think about how do we sustain this work. Re school closures: we need to understand the infrastructure to bring kids back--PPE, ventilation. The aging infrastructure of our schools exacerbated the problem because of ventilation.
- (Martin) Complexities at local level to improve aging infrastructure. What part of the planning can we do to account for local decision making--very steep learning curve for many local school districts, to learn the part that other authorities had.
- (Martin) so much of this impacted schools--PPE, testing, broadband, child care. The impact is more disproportionality. The most vulnerable kids and families paid the price.
- (Carina) small family day care homes--don’t have opportunity to stockpile PPE, etc. We need to know where to appropriately make the biggest investments. For-profit child cares were kept out of the loop because they were private businesses so weren’t always eligible for federal and FEMA resources.
- (Martin) Relationship with labor very important in the K-12 setting.
- (LouS) school staff were having issues accessing vaccine for school district staff, the tribes stood up clinics to vaccinate - need pre-planned mechanisms to provide vaccine to teachers (vaccinating non-tribal school members)

# “H” Gallery

*Implementing guidelines for school closures during a pandemic*

## Eagles:

- Defining when decision authority moves from local level to state level for school closures; what data drives those decisions and making that availability
- Need to take into considering the downstream impacts like: availability of child care, employment, food security, ability to pay rent (home security).
- What are the effects on our children? We know that there will be long lasting impacts of children staying at home through school. We need analysis over the impacts on children to consider should this happen again. There are likely social/emotional impacts that may even impact their physical wellbeing. How many did not come back? How many that might have gone off to college didn't? How many dropped out of high school as a result? College enrollments are way down; need a plan to compensate. We need a study done to assess the impacts on the students of Washington State.

## Peacocks:

- Need to see resources in our schools that would support Positive Mental Health
- Is the education system antiquated compared to what students need
- Do we have the right teachers teaching?

## Additionally:

- Child Care was a disparate issue
- Family Home Violence - did not have anything in place to help families
- What was the economic effect to businesses and families of color
- During an economic downturn - calls of abuse go down but abuse goes up.



# Additional Essential Topic Ideas

Take some time to learn from what worked well.

Role of federal resources (requested vs delivered, impact of delivered.

Food safety - support for food supply chain to transition from restaurant packaging to food bank distribution packaging

Legislative input from the entire legislature included at most levels of discussion affecting the public.

In the initial response to the COVID-19 pandemic, the state began response planning centered around 12 non-pharmaceutical interventions. These interventions grew on each other and ultimately had extreme measures planned such as cordon sanitaire. While the risks associated with COVID-19 did not ultimately necessitate such extreme measures (phew!), our state should revisit this in anticipation that future pandemics may produce transmission and case fatality rates that justify such extreme interventions

ChildCare

What I have wanted throughout this experience has been a template for planning for our next pandemic, so that my jurisdiction can check the boxes: Yep, we've done that; nope, we still need to work on that; opps--is anyone paying attention to this other thing. I sincerely hope that this after-action review will result in such a thing, so that we can be confident our residents, businesses, schools, medical professionals, can all trust that the folks in charge know what they're doing.

Include Behavioral Health in the medical section

Food Security

# Additional Essential Topic Ideas

Do we need to define essential workers?

Anticipating surges in requests for unemployment benefits

Family/child violence prevention during mandatory quarantining.

Mental and behavioral health access

More communication at all levels

Racism as the dual pandemic

Behavioral and Mental Health Supports

The elephant in the room is the Dual pandemic

childcare

Emergency services

Food safety

DITTO

Different demographic impacts

Housing security

Mental health services and peer support groups continuing when schools close

Affordable and accessible legal assistance for health care workers impacted by the pandemic

Anticipating Culturally specific issues

Unemployment for undocumented workers

Lack of equity

Mortgage Assistance

Centering equity in our response

Steady access to PPE

Indoor air quality and ventilation

# Additional Essential Topic Ideas

Creating an internal supply chain of goods within the state during emergencies

A theme that came through the discussions was the impact that the pandemic had on kids... And the intersections between, health, economics, and education

Timely communications in non-English languages so information is current

Funding and partnerships with nonprofits

Supply chain logistics

Roles of Community Navigator/ equity, messengers

Childcare was disparate among families of color

Fund small organizations who do direct work with community rather than partnering with the same larger ones over and over.

Would like to see the State of WA assessment and analysis of the economic effect on businesses and communities of color

To promote equity services provided thru grants can no longer be first come/ first serve approach.

Engaging with communities about how governmental organizations plan to respond to emergencies before an event, like a pandemic occurs

Suicide Prevention

Language Access

Analysis of long term effects of school closures on students

DEI: Disaggregated Data

Rapid training capabilities to build an emergency response force of citizens when work is limited

Maintain or grow high tech/high touch service delivery

# Additional Essential Topic Ideas

Rapid training capabilities to build an emergency response force of citizens when work is limited

Changing manufacturing capabilities within the state to produce needed emergency products

During economic downturn: Family Home Violence: In home abuse went up but calls for help from the state went down

Equity as a part of each conversation not separate note

Plans for assuring timely prioritized access to MCM for essential workers.

Family home violence - there was nothing to support families in need

Equity strategies for access to essential services such as education, health care, home health care services, etc.

# Thank You...

...for learning and sharing with us today.

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- Future Meetings: Fourth Thursday of each month
- Next Meeting: **June 23rd** - 9:00 am to Noon

Link to AAR website:

<https://mil.wa.gov/pandemic-after-action-report-task-force>

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