



Kentucky Hospital Research & Education Foundation Emergency Preparedness Update for April 17, 2018

Preparedness index reflects overall gains but some regional gaps

(CIDRAP) A national snapshot used to gauge the health of the nation's health security and emergency preparedness found that readiness has improved significantly over the past 5 years, but earlier identified gaps remain, with some parts of the country lagging.

Published annually since 2013, the National Health Security Preparedness Index (NHSPI) was released today by the Robert Wood Johnson Foundation (RWJF), which funds the effort.

On a 10-point scale, the United States as a whole had a score of 7.1 for 2017, nearly a 3% improvement over 2016 and nearly an 11% improvement since the index was unveiled 5 years ago. Eighteen states were above the national average, and 21 scored below the level. In total, 38 states and the District of Columbia improved their scores from last year, while 8 held steady and 4 declined.

Glen Mays, PhD, MPH, who leads a research team from the University of Kentucky that worked on the index, said in the press release that 5 years of continuous gains is remarkable progress, "But achieving equal protection across the US population remains a critical unmet priority."

CIDRAP article: <http://www.cidrap.umn.edu/news-perspective/2018/04/preparedness-index-reflects-overall-gains-some-regional-gaps>

NHSPI [press release](#)

Summary of Key Findings: <https://nhspi.org/wp-content/uploads/2018/04/2018-Key-Findings.pdf>

FULL Report: <https://nhspi.org/>

Kentucky

- Kentucky's overall health security level reached 7.1 out of 10 in 2017, a 6.0% increase from 2013.
- The overall health security level in Kentucky was in line with the national average health security level of 7.1 in 2017.
- Kentucky's largest improvement occurred in the Health Security Surveillance domain, which increased by 13.2% between 2013-17.
- Health security levels in 2017 declined in one domain: a decline of -7.7% occurring in Environmental & Occupational Health.
- Health security levels in 2017 significantly exceeded the national average in one domain: Health Security Surveillance.
- Health security levels in 2017 were significantly below the national average in one domain: Environmental & Occupational Health.
- The state's highest health security level in 2017 occurred in the domain of Health Security Surveillance with a value of 8.6.
- The state's lowest health security level in 2017 occurred in Healthcare Delivery with a value of 5.2.

Full **KENTUCKY** report: <https://nhspi.org/states/kentucky/>

Appalachian Regional Healthcare and KentuckyOne reach definitive agreement for purchase of Saint Joseph Martin hospital and clinics

(Press Release) The purchase is expected to close by June 30th and ARH will take over operations of the facilities on July 1st. The 25-bed Saint Joseph Martin hospital will operate under the new name, ARH Our Lady of the Way Hospital, and will become the 12th member of the ARH system.

Full Press Release: <http://www.kentuckyonehealth.org/body.cfm?id=7604&action=detail&ref=1519>

Drug overdoses tied to 24-fold rise in organ transplants

(CNN) As the opioid epidemic has skyrocketed in the United States, a rise in the number of drug overdose deaths has contributed to a rise in organ transplants, made possible by overdose-death donors, across the country.

A study published in the journal [Annals of Internal Medicine](#) on Monday now reveals just how much of an increase there has been in the number of overdose-death donors, from being only 1.1% of all donors in 2000 to 13.4% in 2017.

The study suggests that a rise in organ donations from drug overdose deaths could help America's organ shortage -- but it also shows that between 2000 and 2017, many organs from overdose-death donors were not used to save lives when they could have been.

Read more: <https://www.cnn.com/2018/04/16/health/drug-overdoses-organ-transplants-study/index.html>

Naloxone-access programs miss many opioid users

(Reuters Health) - Some opioid users are more likely than others to know about and use naloxone, a medication designed to rapidly reverse opioid overdoses, suggests a study conducted in Chicago.

People who inject heroin tend to be much more aware of naloxone than those who snort or smoke heroin or take prescription pills, the study team reports in the American Journal of Emergency Medicine.

Read more: <https://www.reuters.com/article/us-health-drugabuse-naloxone/naloxone-access-programs-miss-many-opioid-users-idUSKBN1HN2QN>

John Hopkins: Health Security Headlines Extracts from [April 17, 2018](#)

New York Mice Are Crawling with Dangerous Bacteria and Viruses (*New York Times*) Mice that live in the basements of New York City apartment buildings - even at the most exclusive addresses - carry disease-causing bacteria, antibiotic-resistant bugs and viruses that have never been seen before, a new study from Columbia University finds. [Go to article](#)

2 Million More Flu Cases Could Be Avoided by Hitting National Target (*Healio*) Almost 2 million additional cases of influenza could have been averted last season if 70% of Americans got the vaccine - a national target for overall coverage. Even small increases in vaccine effectiveness and coverage could have had a large impact on patient health, according to newly presented findings. [Go to article](#)

Pentagon Wants to Spot Illnesses by Monitoring Soldiers' Smartphones. The Defense Advanced Research Projects Agency announced Thursday that it has awarded a \$5.1 million contract to the Fairfax, VA-based cybersecurity company Kryptowire to develop what DARPA calls the "Warfighter Analytics using Smartphones for Health" program, or WASH, for short. The app would be used to spot diseases based on data that it collects from a person's smartphone. ([Washington Post, 4/15/18](#))

Decontamination Decoded: Disrobing, Dry Wiping Removes 99% of Chemical Contaminants.

ASPR's Biomedical Advanced Research and Development Authority (BARDA) sponsored a set of scientific studies at the University of Hertfordshire on chemical decontamination. The results of these studies, codified as the Primary Response Incident Scene Management (PRISM) Guidance for Chemical Incidents, will help local emergency management planners and first responders prepare for and respond to disasters involving chemical agents. ([ASPR, 4/11/18](#))

Clear boarding creates a "no ply" zone

(US Fire Admin) *Clear board* is an alternative to plywood for boarding up vacant and abandoned buildings. But this new product - which can help prevent arson and other criminal activity - comes with its own set of challenges for the fire service.

It is used to fortify abandoned structures to keep out squatters, thwart criminal activity, and prevent arson. Transparent coverings allow law enforcement and first responders to look inside these vacant buildings, exposing illicit activity.

An alternative to plywood is clear boarding. It is used to fortify abandoned structures to keep out squatters, thwart criminal activity, and prevent arson. Transparent coverings allow law enforcement and first responders to look inside these vacant buildings, exposing illicit activity.

Learn more about clear board: https://www.usfa.fema.gov/current_events/041718.html

**Intermediate ICS for Expanding Incidents
(ICS-300)
June 6-8, 2018
Westwood Fire Department
Boyd County EM; 2nd floor
2039 Main Street, Ashland, KY 41102**

Student Criteria: This course is open to all Emergency Management, Rescue, Fire, Emergency Medical, and Law Enforcement personnel or other organization having responsibility for incident management. Pre-requisites include ICS700, ICS800, ICS100 and ICS200. Copies of these course completion certificates must be provided before the class. You may scan and email or fax to Misty Callahan (information listed below) Please reference which class you are registering for.

Special Notes: A MINIMUM # twenty-five (25) advance student registrations is REQUIRED and must be received by May 27, 2018. You are considered accepted as a student in this class upon receipt of your application by this office so you will not receive a letter acknowledging that acceptance.

Meals, lodging, and travel arrangements/expenses are the responsibility of the student and will NOT be reimbursed by KYEM.

Registration: Click here for registration: www.kyem.ky.gov/training. Students will be notified if the course is cancelled. For this reason, it is imperative that you provide accurate contact information.

For more information, contact:

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The Khref Emergency Preparedness Update is assembled several times a week. When events make it necessary, the Update may be sent out several times a day to keep our hospital and the healthcare community advised on preparedness news and information. Most of this information is compiled from open sources, and where possible reference links will be provided. There is an archive of [Emergency Preparedness Updates available here](#). If you would like to add or delete, or have something you would like to contribute to a future edition of the Emergency Preparedness Update, please contact RBartlett@kyha.com (include your current email address). The preparedness program for the Kentucky Hospital Association (KHA) and Khref are supported by US DHHS ASPR HPP funds through a contract with Kentucky Public Health.