



Kentucky Hospital Research & Education Foundation Emergency Preparedness Update-2 for June 12, 2018

The U.S. Needs a Disaster Health Response System to Save Lives After an Emergency

(ASPR & AHA) Bombings, multi-country cyberattacks, severe natural disasters and deliberate chemical attacks reflect the real and complicated threats our nation faces in the 21st century. To save lives, the nation's health care systems must be ready. Combating modern threats requires innovative solutions to train, equip, and organize our health care systems in ways that make our local communities more resilient.

The U.S. Department of Health and Human Services' Assistant Secretary for Preparedness and Response – ASPR – advocates for using established investments in health care preparedness and trauma systems to serve as the foundation of a new, “regional disaster health response system.”

This approach builds on existing health care coalitions – more than 28,000 health care businesses, emergency medical services, state public health agencies and local health departments across the country that work together with funding and guidance from ASPR's Hospital Preparedness Program. The regional disaster health response system will expand this public-private partnership, adding trauma centers, burn centers, pediatric hospitals, public health labs, outpatient services, and federal facilities like Veterans Affairs clinics to better meet the health care needs of the public in a disaster.

The system will take a tiered approach, much like trauma care is handled across the country.

Full article: <https://www.aha.org/news/insights-and-analysis/2018-05-10-us-needs-disaster-health-response-system-save-lives-after>

Healthcare Response to a No-notice Incident: Lessons Learned from Las Vegas Festival Shooting (Meliisa Harvey, Dir. Div. of National Healthcare Preparedness, ASPR)

On October 1, 2017, during the Route 91 Harvest Music Festival on the Las Vegas Strip, a gunman opened fired from the 32nd floor of a nearby hotel on the crowd of concertgoers. He fired more than 1,100 rounds leaving 59 dead and 527 injured.

ASPR staff spoke with responding agencies from the Las Vegas shooting to help identify lessons learned that can help other communities, specifically members of the nation's 476 [health care coalitions](#) prepare for, respond to, and recover from these traumatic, no-notice incidents. Here are some of those lessons:

- Lesson One: Prepare for Non-triaged Patients.
- Lesson Two: Identify and Conduct Drills Using Personnel Notification Tools
- Lesson Three: Anticipate Challenges in Intake and Throughput.
- Lesson Four: Expand Traditional Healthcare Roles to Address Patient Surge.
- Lesson Five: Coordinate Communications with Area Hospitals. Be Ready to Shelter Patients in Place.
- Lesson Six: Review Your Existing Mass Fatality Plan.
- Lesson Seven. Incorporate Family Notification in Planning Efforts.
- Lesson Eight. Plan for Intense Media Interest.

Read detailed information on each lesson: <https://www.phe.gov/ASPRBlog/pages/BlogArticlePage.aspx?PostID=308>

ASPR TRACIE Technical Assistance Spotlights: Best Practices for Temporarily Naming Unidentified Patients during a Disaster or Emergency

ASPR TRACIE receives, on average, over 100 requests for technical assistance (TA) per month. Some of their redacted responses are summarized [here](#) and can be found in the [Information](#)

[Exchange](#) to benefit stakeholders. In these weekly reports, ASPR TRACIE will periodically highlight TAs that may be of particular interest to stakeholders.

A requestor asked for best practices for temporarily naming unidentified patients during disaster or emergency. ASPR TRACIE reached out to their subject matter expert (SME) cadre and this [redacted response](#) provides their responses as well as additional resources.

Register Now: Health Care Challenges after Radiological Incidents

There is an abundance of resources geared towards health care, public health, and emergency management professionals planning for a large-scale radiological release or nuclear detonation incident, but concrete planning is challenging and few jurisdictions have detailed plans. Power plant incidents, radiation dispersal devices, and improvised nuclear device detonations result in very different injury and exposure patterns and response planning must account for all of these.

From **2:00 – 3:15 PM ET on July 11, 2018**, webinar panelists will discuss the impact of radiological incidents on health and health care and planning strategies related to different incidents. They will also share guidance and lessons learned from recent exercises and research in assessing, triaging, treating, and following-up on casualties of radiological and nuclear emergencies.

Register for the webinar [here](#). Participation is limited to the first 1,000 registrants.

John Hopkins: Health Security Headlines
Extracts from [June 12, 2018](#)

[FEMA Funds on Their Way to Ohio... Eventually](#) (*Emergency Management*) Director of the Scioto County, Ohio, Emergency Management Agency Kim Carver said this week there is federal disaster relief money headed to Southern Ohio. It's arrival just may take longer than expected, she added. [Go to article](#)

[Matching the Right Medicine to Treat Flu is Still a Challenge](#) (*Pittsburgh Post-Gazette*) Coming off the heels of one of the worst flu seasons on record--locally and nationally--is a federal report that shows doctors are still overprescribing antibiotics to treat the flu. Simply put: That's the wrong medicine--it doesn't work on the virus. [Go to article](#)

[Kenyan Official Says Five Dead in Reemergence of Rift Valley Fever](#) (*Reuters*) Five people in Kenya have died of the Rift Valley Fever disease in the past week, a health official said on Monday, in the first reports of the disease since an outbreak killed more than 200 people a decade ago. The highly contagious disease is transmitted to humans by mosquitoes or close contact with contaminated animals' blood or organs, according to the WHO. [Go to article](#)

[Polio Re-Emerges in Venezuela Nearly 30 Years After Eradication](#) (*CNN*) A child has been diagnosed with polio in Venezuela, where the infectious viral disease has been eradicated since 1989, according to the Pan American Health Organization, a regional apparatus of the WHO. The Western Hemisphere has been certified polio-free since 1994. [Go to article](#)

[DRC Notes 14 More Suspected Ebola Cases, New Death](#) (*CIDRAP*) Over the past few days, 14 more suspected cases have been reported in the Democratic Republic of Congo Ebola outbreak, and one more patient has died from the disease, according to one of the top WHO officials leading the response. [Go to article](#)

[Ebola Virus Disease--Operational Readiness and Preparedness in Nine Countries Neighboring the Democratic Republic of the Congo](#) (*WHO*) Following the notification of an Ebola virus disease outbreak in Equateur Province in the Democratic Republic of the Congo on 5 May 2018, WHO conducted a formal rapid risk assessment which determined that the public risk is high at the regional level. [Go to article](#)

[Crucial Test of Ebola Vaccine Raises Hopes, Doubts in Congo](#) (*AP News*) Irene Mboyo Mola spent 11 days caring for her husband as he died of Ebola in a hospital where she said nurses were

too scared to get close. She helped him to the bathroom, picked up his feverish body when he lost his balance, and reinserted an IV that fell out of his bleeding arm. [Go to article](#)

[Speedy Ebola Tests Help Contain Africa's Latest Outbreak](#) (*Nature*) Health workers fighting the Ebola epidemic that swept West Africa several years ago waited days, even a week, for the results of laboratory tests to detect the deadly virus. But in an Ebola outbreak that began in early April in the Democratic Republic of the Congo, this waiting time has shrunk to hours--thanks to a genetic test that was developed in response to the 2014-2016 West African epidemic. [Go to article](#)

Red Cross of SC KY Recruiting a *Disaster Program Manager*

Position based in Bowling Green; Covering 17 counties.

Interested persons should apply online:

https://americanredcross.wd1.myworkdayjobs.com/en-US/American_Red_Cross_Careers/job/Bowling-Green-KY/Disaster-Program-Manager_RC19152

At least one boater has died after a sinkhole developed on the north Arkansas River creating a whirlpool.



(Fox) At least one boater has died after a sinkhole developed on the bed of a north Arkansas River, creating a whirlpool. Arkansas Game and Fish Commission spokesman Trey Reid told The Washington Post Monday that the victim has been identified as Donald Wright, 64, from Searcy, Ark. Reid told The Post that when the sinkhole opened and formed the whirlpool on Saturday afternoon, boaters were ejected from their boats. Wright, who was in a kayak, paddled toward the whirlpool

to try to help them.

Full story: <http://www.foxnews.com/us/2018/06/11/boater-dies-after-sinkhole-creates-whirlpool-on-arkansas-river.html>

[Joint Commission Accepting Abstracts for 2019 Emergency Preparedness Conference](#)

The Joint Commission and Joint Commission Resources (JCR) are seeking proposals for practitioner-based, change-focused processes and practices for the 2019 Emergency Preparedness Conference. The focus of the abstracts should include new processes, technologies, techniques and/or tools, creativity, and innovation used within any health care setting used to demonstrate a successful approach to preparedness. The deadline for abstract submission to the conference is **September 1, 2018**. Start your submission [here](#).

[Safe Kids: Walk to School Day 2018](#) – October 10, 2018

International Walk to School Day is a global event that involves communities from more than 40 countries walking and biking to school on the same day. <http://www.walkbiketoschool.org/learn-more/about-the-events/about-walk-to-school-day/>

[Did EMS Worker Commit HIPAA Violation With Facebook Post?](#)

“HIPAA isn’t always at the top of most ambulance services’ priority lists. It’s complicated, certainly not written with medical professionals who perform their skills in the backs of moving vehicles in mind, and not a key piece of what we need to do to protect our communities in case of emergency.”

HIPAA regulations affect how EMS workers use and transfer patient information. HIPAA requires EMS agencies to appoint a compliance officer and create standard operating procedures for workers to follow. Of relevance to this case, HIPAA mandates training of EMS personnel and administrative support staff on the law’s requirements.

EMS personnel must follow HIPAA regulations during patient care situations, when transporting patient information, for administrative functions, and in retaining, managing, and releasing patient information.

25% of employees use the same password for every account

Employees may be a company's greatest asset, but they also remain the greatest cybersecurity risk, according to a Monday report from OpenVPN.

Despite an increased focus on security training, 25% of the 500 US employees surveyed report that they use the same password for every account, the report found. Another 23% of employees said they frequently click on links before verifying that they lead to a legitimate, safe website.

Of the employees that use the same password for everything, a whopping 81% said they do not password protect their computer or phone at all, according to the report.

Read more: <https://www.techrepublic.com/article/25-of-employees-use-the-same-password-for-every-account/>

[Pediatric TB Radiology: It's Not Black and White webinar](#)
[Part 2](#)

Monday June 18th, 2018

10:00 - 11:15 a.m. (Pacific Time) [1 p.m. Eastern]

A National Webinar

Register: <http://www.currytbcenter.ucsf.edu/user/login?destination=node/2309/takecourse>

Registration Deadline: Thursday, June 14, 2018. ***note: registration will be on a first come-first served basis until the webinar capacity is reached.*

Cost: There is no fee for this training.

Credit: This training is approved for up to 1.25 Category 1 ACCME continuing education hours/nursing education hours.

Target Audience: This training is intended for physicians, nurses, and other health professionals who diagnose and treat patients with TB. This training opportunity is available to a national audience.

Description: This 60-minute webinar presentation (followed by a 15-minute Q & A session) is the continuation of the [Pediatric TB Radiology webinar Part 1](#) (May 2017) which focused on the diagnosis and follow-up of pediatric TB through interpretation of chest x-rays.

System Requirements:

Visual: Computer with Internet connection

Audio: Audio streaming via the computer (preferred), or Phone

For more information on the Adobe Connect Technical Specs [click here](#).

75-Minute On-Demand Webinar **[Part 1](#) Originally Aired May 5, 2017**

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.