



Kentucky Hospital Research & Education Foundation Emergency Preparedness Update for August 8, 2019

HHS ASPR - Reflecting on Last Weekend's Events

Every day, healthcare and public health sector members across the country perform heroic work for the American people. This weekend's shootings in El Paso, TX and Dayton, OH were no exception. EMS, healthcare facilities, coalitions, and FSLTT government, together with law enforcement and many others, rose to meet the needs of their communities. Active shooter situations bring unique challenges with a no-notice surge in trauma patients and additional safety concerns – demanding efficiency and coordination among multiple response entities.

No-notice situations can impact any community at any time, making preparedness essential. Resources such as the [ASPR TRACIE Resource Guide on Mass Violence](#) contain useful tip sheets on no-notice events and promising practices and lessons learned from previous responses to help stakeholders in the health community prepare. Further, the importance of local relationships with healthcare partners, law enforcement, and emergency management through coalitions and other mechanisms cannot be overestimated. The Healthcare and Public Health Sector Partnership also serves as a valuable collaboration mechanism, with Partnership members sharing information bi-directionally throughout these responses and others.

Thank you for all you do every day to save lives and protect Americans.

For additional resources or questions, please contact cjp@hhs.gov or secretariat@healthcareready.org.

----- FEMA Issues Planning Considerations:

Evacuation and Shelter-in-Place Guidance for State, Local, Tribal, and Territorial Partners

FEMA has released [Planning Considerations: Evacuation and Shelter-in-Place: Guidance for State, Local, Tribal, and Territorial Partners](#) today. The document draws upon the collective experience of those partners to provide relevant concepts, principals, and guidance as a resource for emergency managers and planners.

Evacuation and shelter-in-place protective actions are prompted by a variety of threats and hazards. Incident-specific circumstances drive the relevant protective actions based on a community's demographics, infrastructure, resources, authorities, and decision-making process. Determining that an evacuation needs to take place is not an all-or-nothing approach. Lessons learned from recent disasters, to include hurricanes, wildfires, and floods, have highlighted the value of enacting a zone-phased approach to evacuation and shelter-in-place, enabling jurisdictions to move as few people as necessary. Sheltering-in-place populations that are not directly in harm's way, rather than having them evacuate, can help jurisdictions reduce costs and resource requirements, and limit the negative impacts of evacuations, while promoting improved response and quicker re-entry and recovery.

FEMA will host a series of 60-minute webinars to discuss the document, related efforts, and answer participants' questions. The webinars will be open to the whole community

To view the document and for additional webinar information, please visit <https://www.fema.gov/plan>.

Related info: [Hospital Reimbursement Guidance after Evacuation](#)

This ASPR TRACIE TA response includes links to resources related to hospital reimbursement following an evacuation (due to a hurricane) and comments from ASPR TRACIE SME Cadre members.

Link: <https://files.asprtracie.hhs.gov/documents/aspr-tracie-ta---cms---hospital-reimbursement-following-hurricane---7-30-19-final.pdf>

----- Johns Hopkins: Health Security Headlines Extracts from [August 8, 2019](#)

DRC Ebola impact getting worse for children (CIDRAP) The Ebola outbreak has killed more than 500 children in the Democratic Republic of the Congo (DRC) since the outbreak began last August, and deaths in kids have accelerated over the past 6 months, Save the Children, a nongovernmental group that is working in DRC, said yesterday.

MERS analysis highlights concerns over healthcare spread (CIDRAP) In its latest annual global risk assessment of MERS-CoV, the World Health Organization (WHO) said transmission, symptom profile, and virus characteristics haven't changed since its last report, but officials are still deeply concerned about transmission *in hospitals*.

Truman Medical Centers hit with ransomware; patient information not impacted

(KSHB - Kansas City) Truman Medical Centers in Kansas City, Missouri, was forced to pay to unlock parts of its system after it was hit with a ransomware attack. Truman Medical Centers said that patients' personal health and financial information is housed on a different system and was not impacted by the incident.

Full story: <https://www.kshb.com/news/local-news/truman-medical-centers-hit-with-ransomware-patient-information-not-impacted>

The Return of Domsday - The New Nuclear Arms Race How Washington and Moscow Can Stop It

(NTI News) - August 2 - The U.S. withdrawal from the Intermediate-Range Nuclear Forces (INF) Treaty took effect last Friday, bringing to an end a 30-year ban on a class of weapons that both the United States and the Soviet Union recognized at the time were particularly dangerous and destabilizing. These banned, land-based shorter- and intermediate-range nuclear-capable missiles posed a hair-trigger threat to NATO and to Russia by reducing decision and warning time for leaders, due to their short time of flight to their intended targets.

The end of the INF Treaty means a key guardrail erected to move us away from the era of Cold War nuclear rivalry has come down, and the risks of nuclear blunder are rising. As a result, the United States, our allies and Russia will be less secure, and the world less safe. The costs of an accelerating nuclear arms race are unacceptably high. As the two countries with the vast majority of the world's nuclear weapons, the United States and Russia have a responsibility to reduce nuclear risks.

The article discusses a path forward to prevent a nuclear arms race and reduce the possibility of blundering or escalating into a nuclear conflict.. Read more: <https://www.nti.org/newsroom/news/statement-ernest-j-moniz-and-sam-nunn-co-chairs-nuclear-threat-initiative-termination-inf-treaty/>

Hospital Preparedness for Unplanned Information Technology Downtime Events: A Toolkit for Planning and Response

(ASPR) This toolkit is designed to assist hospitals and other healthcare organizations with improving their readiness for unplanned information technology (IT) downtime events, which is essential in emergency preparedness. It is organized with these sections: Recognizing the Scope of the Issue; Collaborative Planning; Multidisciplinary Response Teams; Improving Response Tools; Ensuring Efficient Communication; Speeding Recovery; and Training and Exercise.

Toolkit link: <https://www.massgeneral.org/disaster-medicine/assets/PDFs/Downtime%20Toolkit.pdf>

Two weeks until the 2019 Lake Cumberland Healthcare Symposium August 22-23, 2019 Extra! - "Disaster Readiness for the First Responder" Wilderness Course, Aug 23rd

Lake Cumberland State Park
5465 State Park Rd, Jamestown, KY 42629
CEU for EMS, Nursing, Respiratory Therapists, and Firefighters
Questions to: Michael Reynolds at Russell Co EMS mreynolds@rcems.com
For more info, [schedule](#) and registration: <http://www.rcems.com/symposium.html>

2019 Healthcare Coalition Conference

Secure registration for the conference and hotel today
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September 17-19, 2019

Kentucky International Convention Center | Louisville KY

Please click [HERE](#) to view our working agenda

REGISTRATION: <https://kshe.org/event/hcc2019registration>

On-line hotel reservations: <https://www.hyatt.com/en-US/group-booking/SDFRL/G-KSHE>

Golf Scramble: https://kshe.org/event/hcc2019golf_scramble

CHFM Cert Prep & Exam: <https://kshe.org/page/chfm2019>

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.