

Kentucky Hospital Research & Education Foundation Emergency Preparedness Update Update #1 for October 2, 2020

Final Recommendation Out for COVID Vaccine Distribution

The National Academies of Sciences, Engineering, and Medicine (NASEM) has released its final report, A Framework for Equitable Allocation of Vaccine for the Novel Coronavirus.

In a joint statement today, the American Hospital Association (AHA) President and CEO Rick Pollack, and AAMC (Association of American Medical Colleges) President and CEO David J. Skorton, MD, said, "The AHA and AAMC join together to support the National Academies of Sciences, Engineering, and Medicine (NASEM) report, A Framework for Equitable Allocation of Vaccine for the Novel Coronavirus. This plan is a sensible, well-considered, and, most importantly, an equitable way to distribute a vaccine to all Americans.

SUMMARY

Phase 1 Phase 2 Phase 3 Phase 4 Phase 1a "Jumpstart Phase" • K-12 teachers and school staff and Young adults Everyone residing High-risk health child care workers in the United States Children workers who did not have · Workers in industries access to the settings—workers who are in industries essential to the function- First responders and occupations vaccine in previous Phase 1b important to the ing of society and at substantially phases People of all ages functioning of society higher risk of exposure and at increased risk of exposure not included with comorbid and People of all ages with comorbid and underlying conditions underlying conditions that put them in Phase 1 or 2 that put them at at moderately higher risk significantly higher risk People in homeless shelters or Older adults living in group homes for individuals with congregate or disabilities, including serious me overcrowded settings illness, developmental and intellec tual disabilities, and physical disabilities or in recovery, and staff who work in such settings • People in prisons, jails, detention centers, and similar facilities, and staff who work in such setting · All older adults not included in In each population group, vaccine access should be prioritized Equity is a for geographic areas identified through CDC's Social Vulnerability crosscutting consideration: Index or another more specific index.

FIGURE S-2 A phased approach to vaccine allocation for COVID-19.

We commend NASEM on a thoughtful, thorough, and evidence-based report that recognizes that the implementation of the allocation strategy – as well as the ethical principles that support it – are as important as the framework itself. Given the significant health, social, and economic injustices laid bare by the pandemic, we are particularly pleased to see the emphasis on mitigating inequities in vaccine access and the related foundational principles of fairness, equity, and transparency.

As the report's review of other vaccine programs makes clear, a mass vaccination program "will fail if there is widespread public mistrust." Therefore, the AHA and AAMC strongly urge federal, state, and local government agencies, along with doctors, nurses, and hospitals and health systems, to deploy resources now to engage communities, build trust, create partnerships, and develop the bidirectional communication channels necessary to orient the vaccination effort toward success.

Additionally, the report notes that the "fidelity of the allocation process" requires "comprehensive, consistent, real time data collection that includes the variables needed to assess the program's success in mitigating health inequities such as race/ethnicity, age, sex, and social status." It is well-documented that roughly half of the United States' COVID-19 case data lack race/ethnicity information. We encourage the Academies to enumerate

which data elements are needed and which existing data sets can be leveraged to help states and communities develop a standardized data collection and reporting strategy to achieve the desired fidelity.

The equitable distribution of a vaccine is crucial to ensuring all communities can recover from the COVID-19 pandemic and we look forward to working together with all other stakeholders to help achieve this goal."

Read on-line: https://www.nap.edu/read/25917/chapter/1

Follow-up on President & First Lady's Positive COVID Test Report

- ✓ Second White House journalist tests positive for coronavirus
- ✓ VP Pence and Wife Test Negative for COVID.
- ✓ Joe Biden and Wife tested Negative
- ✓ U.S. Health Secretary Azar Says He Tested Negative for COVID
- ✓ White House residence staff 'nervous' after Trumps test positive for Covid-19
- ✓ Trump Implies Hope Hicks Might Have Caught COVID from Military or Police

Brain Fluid Leak From COVID-19 Nasal Swab Reported

(MedPage Today) Nasal swabbing to test for COVID-19 may have caused a patient to begin leaking cerebrospinal fluid (CSF), researchers reported. The woman in her 40s underwent testing prior to an elective hernia repair, and shortly thereafter developed a variety of symptoms, including unilateral rhinorrhea, headache, and vomiting, but her nasal drainage tested positive for β 2-transferrin, reported Jarrett Walsh, MD, PhD, of University of Iowa Hospitals and Clinics in Iowa City, and colleagues. Key to the patient's case was that she had a history of removal of nasal polyps for 20 years.

Learn more: https://www.medpagetoday.com/infectiousdisease/covid19/88902

Companies Ditch Plans for Rapid Coronavirus Spit Tests at Home

(New York Times) E25Bio and OraSure, two companies pursuing rapid at-home coronavirus tests, have abandoned efforts to use saliva in their products. Their tests, which detect pieces of coronavirus proteins called antigens, will for now rely on shallow nose swabs instead.

HHS Renews \$10.2 Million Contract For Controversial COVID-19 Data Tracking Company

(NPR) The Trump administration has renewed a controversial contract with a Pittsburgh company to collect key COVID-19 data from hospitals. The Department of Health and Human Services decided to award a second \$10.2 million, six-month contract to TeleTracking Technologies even though the company and the process by which the contract was awarded are under investigation by the HHS Inspector General and Congressional committees, an NPR Investigation has learned. Back in the Spring, TeleTracking was awarded a contract to collect COVID-19 data from the nation's hospitals despite no previous experience working on this sort of data collection. And TeleTracking's system has been plagued by errors and inconsistencies from the outset.

"Threats Facing the U.S. Pharmaceutical Biotechnology Sectors" Webinar leads to Operation Warp Speed (OWS) Resources Toolkit for Industry Partners

(DCSA) Last month there was a webinar that looked at OWS concerns over "Threats Facing the U.S. Pharmaceutical Biotechnology Sectors". The Center for Development of Security Excellence (CDSE) has developed the Operation Warp Speed (OWS) Toolkit for Industry Partners designed for cleared and uncleared industry partners associated with OWS. It provides OWS partners with the resources they need to better protect the important work they are doing. While some of these resources were developed with cleared contractors participating in the National Industrial Security Program in mind, the guidance and information provided apply to any industry partner working on sensitive information that is sought after by an adversary, regardless of classification level or designation.

You do not have to have an account or sign in to CDSE to use the toolkit. The direct link on the cdse.edu public website is: https://www.cdse.edu/toolkits/ows/index.html.

Please share this with your senior officials, company employees, and business partners as appropriate.

Save the Date for the next DCSA facilitated OWS Webinar on Thursday October 22, 2020 @ 1300/1:00 p.m. An official invite with more details will be sent out soon.

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 added or deleted, 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.