



Kentucky Hospital Research & Education Foundation Emergency Preparedness Update for October 30, 2020

Gov. Beshear Urges Kentuckians to Be Safe

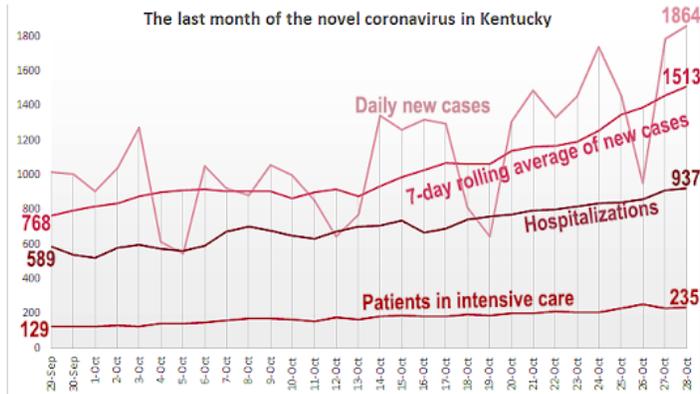
Governor reminds Kentuckians to follow Halloween guidance, **COVID-19 reduction plan**

(From [Press Release](#)) On Friday, Gov. Andy Beshear asked Kentuckians to make a plan now for a safe Halloween, as COVID-19 cases rise across the commonwealth and the nation. To view the Kentucky

Department for Public Health (KDPH) Halloween guidance visit kycovid19.ky.gov.

As of 4 p.m. Friday, Gov. Beshear reported the following COVID-19 numbers:

- New cases today: 1,941
- New deaths today: 15
- Positivity rate: 6.19%
- Total deaths: 1,476
- Currently hospitalized: 974
- Currently in ICU: 241
- Currently on ventilator: 121



Kentucky Health News graph; case numbers are based on initial, unadjusted reports

COVID-19 surges push US cases over 9 million

(CIDRAP) Colorado, Illinois, and New Mexico report record daily cases, and illness levels are rising in 42 states.

Related - 'There's no way to sugarcoat it':

COVID-19 cases are surging; one American dies every 107 seconds

Learn more: <https://www.usatoday.com/story/news/health/2020/10/28/covid-cases-us-sees-surge-americans-tire-pandemic/6052710002/>

Private equity-owned LTC have less PPE vs. other types of ownership

(McKnights) Nursing homes owned by private equity firms had lower levels of personal protective equipment supplies than for-profit, nonprofit and government-owned facilities, according to a new study published in *JAMA*. Researchers suggested that the PPE trends may be due to “cost-cutting strategies undertaken by” private-equity owned facilities.

“If this was the case, it is not clear why staffing levels were not also lower for PE-owned nursing homes. It is possible that PE-owned homes were attempting to control costs by keeping the minimum level of supplies that they anticipated would be necessary,” the investigators wrote.

Overall, researchers analyzed 11,470 nursing homes for the investigation. The study was led by researchers at the Weill Cornell Medical College in New York.

Full story: <https://www.mcknights.com/news/private-equity-owned-nursing-homes-less-likely-to-have-enough-ppe-supplies/>

Mapping Tool visualizes COVID risk of different size events

Learn more: <https://www.govtech.com/health/Mapping-Tool-Visualizes-COVID-Risk-of-Different-Size-Events.html>

Criminologists Say Rise In Homicide Could Be Related To COVID Effects

([IACP News](#)) The [New York Times](#) (10/29, Fuller, Arango) reports that “major cities from Minneapolis to Milwaukee to New York, and even smaller communities like Lubbock, Texas, and Lexington, Ky., are all confronting the same grim pattern” – a surge in gun violence and homicides. Some places, “like Kansas City, Mo., and Indianapolis,” are “setting records for the number of killings in a single year.” Philadelphia, “which was gripped by unrest this week after the police shooting of a Black man, is among the cities with the highest increase in homicides – its 404 killings this year are a more than 40 percent increase compared with the same period last year.” Criminologists “studying the rise in the murder rate point to the effects the pandemic has had on everything from mental health to policing in a time of social distancing, with fewer officers able to perform the up-close-and-personal community outreach work that in normal times has helped mitigate violence.”

Updated Cybersecurity Alert Now Available

CISA, FBI, and HHS have updated [Alert AA20-302A: Ransomware Activity Targeting the Healthcare and Public Health Sector](#) to include the latest threat information. Specifically, the advisory was updated to include information on Conti, TrickBot, and BazarLoader, including Indicators of Compromise (IOCs) and Yara Rules for detection. The advisory describes the tactics, techniques, and procedures (TTPs) used by cybercriminals against targets in the Healthcare and Public Health Sector (HPH) to infect systems with Ryuk ransomware for financial gain.

Johns Hopkins: Health Security Headlines Extracts from October 30, 2020

Incidence of Bacterial and Fungal Bloodstream Infections in COVID-19 Patients in Intensive Care: An Alarming “Collateral Effect” (*Journal of Global Antimicrobial Resistance*) In order to assess the incidence of bacterial and fungal bloodstream infections (BSIs) in COVID-19 patients in Intensive Care, we performed a retrospective cohort study including COVID-19 adult patients hospitalised in intensive care unit (ICU) from March 1st to April 15th, 2020 at the National Institute for Infectious Diseases, Rome, Italy. BSIs occurred in 49% of them (28/57) with an incidence rate of 373 per 10,000 patient-days. The mean time from the ICU admission to the occurrence of BSI was 13 days \pm 7 (range 3-34 days). The commonest isolated agents included Enterococcus spp (11 cases) and Pseudomonas spp (8 cases); Candida spp was isolated in 5 cases; in 3 patients more than one agent was isolated from blood cultures.

Death Rates Have Dropped for Seriously Ill Covid Patients (*New York Times*) As the virus continued its rampage over the summer and fall, infecting nearly 8.5 million Americans, survival rates, even of seriously ill patients, appeared to be improving. At one New York hospital system where 30 percent of coronavirus patients died in March, the death rate had dropped to 3 percent by the end of June.

Internal Documents Reveal COVID-19 Hospitalization Data The Government Keeps Hidden (*NPR*) NPR has obtained documents that give a snapshot of data the U.S. Department of Health and Human Services collects and analyzes daily. The documents — reports sent to agency staffers — highlight trends in hospitalizations and pinpoint cities nearing full hospital capacity and facilities under stress. They paint a granular picture of the strain on hospitals across the country that could help local citizens decide when to take extra precautions against COVID-19.

As Cases Soar, An El Paso Judge Ordered a Shutdown. But the Texas AG Says the Judge Has ‘No Authority.’ (*Washington Post*) Even with an additional 100 beds at El Paso’s University Medical Center and an outdoor tent, the hospital is so full it’s sending patients to a children’s hospital and airlifting patients critically ill with the novel coronavirus to other cities. In April, the hospital had 67 hospitalizations from covid-19 — on Thursday, there were 937.

1 to 2 million tons of US plastic trash go astray

(AP) More than a million tons a year of America’s plastic trash isn’t ending up where it should. The equivalent of as many as 1,300 plastic grocery bags per person is landing in places such as oceans and roadways, according to a new study of U.S. plastic trash.

In 2016 — the last year enough data was available and before several countries cracked down on imports of American waste — the United States generated 46.3 million tons (42 million metric tons) of plastic waste, by far the most in the world. Between 2.7% and 5.3% of that was mismanaged — not burned, placed in landfills or otherwise disposed of properly, according to a study in Friday’s journal [Science Advances](#).

Between 1.2 million and 2.5 million tons (1.1 million to 2.2 million metric tons) of plastic generated in the U.S. were dropped on land, rivers, lakes and oceans as litter, were illegally dumped or shipped abroad then not properly disposed of, the study found.

Full AP story: <https://apnews.com/article/oceans-us-news-united-states-d3ee56012562c6110faf6b9e92b0fd03>

NWS Webinar on

“The Winter Ahead – and New Normals – for the Ohio Valley”

Register now

NETEC COVID-19 Webinars Upcoming

COVID-19 and Acute Renal Failure

Wednesday, November 4, 2020 | Noon CT / 1:00 PM ET

REGISTER HERE

Care Transitions to Home Health: Key COVID-19 Considerations

Friday, November 6, 2020 | Noon CT / 1:00 PM ET

REGISTER HERE

**ASPR Express October Update #3
Webinar Recordings Now Available:
How the Pandemic is Impacting Children**

Access the [one-page summary](#) for links to all webinar recordings within the series.

New: Healthcare Operations During the COVID-19 Pandemic (Speaker Series)

[This speaker series](#) highlights how the COVID-19 pandemic brought healthcare and public health, emergency medical services, and emergency management together to adjust healthcare operations. Topics include the role of pharmacists in the pandemic, adjusting operations to manage patient surge, creating a COVID-19 task force, and meeting supply chain challenges.

FEMA hosting integrated preparedness planning workshop series

([EMR-ISAC InfoGram](#)) The Federal Emergency Management Agency (FEMA) is hosting a series of 10 webinars starting Oct. 29, 2020, and running through Nov. 30, 2020, to assist with the implementation of the Integrated Preparedness Plan (IPP) and Integrated Preparedness Planning Workshop (IPPW) model. FEMA developed the IPP/IPPW model to support the coordination, planning and scheduling of activities across the preparedness cycle, a component of the revised [2020 Homeland Security Exercise and Evaluation Program \(HSEEP\) Doctrine](#).

The IPP/IPPW model has been piloted and refined. Currently there are nine webinars scheduled throughout November. Please visit the [HSEEP Webinar webpage to see the dates available and register](#).

In addition, the HSEEP Course (K/L 0146) is currently being updated and will be released soon. Continue to monitor the [HSEEP webpage at the Emergency Management Institute](#) for release date information.

Source: <https://www.fema.gov/emergency-managers/national-preparedness/exercises/hseep>

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.