



# Kentucky Hospital Research & Education Foundation Emergency Preparedness Update for January 4, 2020

## Gov. Beshear, Dr. Stack Provide Vaccine Update

(From [press release](#)) On Monday, Gov. Andy Beshear and Dr. Steven Stack, commissioner of the Kentucky Department for Public Health, provided an update on the COVID-19 vaccine and announced that Kentuckians will be inoculated in four phases. The Governor said the state's goal is to administer 90% of all vaccine doses received in the state within seven days of arrival. The Governor said 60,414 vaccine doses have already been administered in Kentucky; 57,000 doses (27,300 from Pfizer and from 29,700 from Moderna) will be delivered this week.

The planned vaccination phases are:

- Phase 1a: Long-term care facilities, assisted living facilities, health care personnel
- Phase 1b: First responders, Kentuckians age  $\geq 70$ , K-12 school personnel
- Phase 1c: Kentuckians age  $\geq 60$ , anyone older than 16 with U.S. Centers for Disease Control and Prevention (CDC) highest-risk conditions for COVID-19, all essential workers
- Phase 2: Age  $\geq 40$
- Phase 3: Age  $\geq 16$
- Phase 4: Children under the age of 16 if the vaccine is approved for this age group (estimated to comprise 18% of Kentucky's population)

As of 4 p.m. Monday, Jan. 4, Gov. Beshear reported 2,319 new cases today (291 were 18 or younger), with a positivity rate of 11.2%. There are 1,737 currently hospitalized, with 456 in the ICU, and 216 on vents. There were 26 new deaths reported.

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**KHA Town Hall Tuesday with Dr. Stack**  
**More info on vaccine rollout**

1:30 PM ET

**Zoom:** <https://us02web.zoom.us/j/84910544101?pwd=QVQxTGxjODdwV3ROT1gxM2NWUjN0dz09>

**One tap mobile:** +19292056099,,84910544101#,,,,\*2501# US (New York)

Landline dial-in: +1 929 205 6099 - Meeting ID: 849 1054 4101 - Passcode: 2501

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**Dr. Fauci finally said it...**

### COVID vaccines might be mandatory for some people

(BGR) [In an interview with Newsweek](#), Dr. Fauci speculated that there will probably be some instances where getting the COVID vaccine might be required for certain people, such as those who are traveling. "Everything will be on the table for discussion," Dr. Fauci, who will be a key medical adviser within the incoming Biden-Harris administration, told the magazine. And here's at least one key point about that to understand:

"I'm not sure (the COVID vaccine is) going to be mandatory from a central government standpoint, like federal government mandates," he said — adding that there are certainly institutions, instead, that will likely require people to get vaccinated, like schools and travel-related entities. Of that, Dr. Fauci is already "sure."

Likewise, Dr. Fauci expects school systems to require the COVID vaccine, though that mandate wouldn't come from the federal level. "A citywide school system might require it in some cities but not other cities, and that's what I mean by things not being done centrally but locally," he said.

Talk of a requirement of any kind when it comes to the vaccine will no doubt be met with a wave of opposition.

Learn more: <https://bgr.com/2021/01/02/coronavirus-vaccine-might-be-mandatory-for-travel-school-dr-fauci-comments/>

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**Inflatable Christmas Costume May Have Spread Coronavirus  
to 44 Hospital Workers**

(HuffPost) A California hospital is battling a [coronavirus](#) outbreak that's [infected at least 44 people](#) in the emergency room — including [one who died](#) of complications due to the infection — and it may have been due in part to an inflatable Christmas tree costume. [According to NBC Bay Area](#), the costume used at the Kaiser Permanente San Jose Medical Center was powered by a fan that may have spread droplets around the emergency room on Dec. 25:



The [New York Times reported](#) that staffers who were present began testing positive on Dec. 27. It's unknown if any patients were infected by the encounter; however, air-powered costumes are now banned in the facility, the newspaper reported.

One expert [told The San Francisco Chronicle](#) that the person inside the costume would not have to be infected to spread the virus — only someone nearby, whose droplets could be spread by the fan.

Full story: [https://www.huffpost.com/entry/kaiser-christmas-costume-outbreak\\_n\\_5ff2b685c5b6fd33110f1014](https://www.huffpost.com/entry/kaiser-christmas-costume-outbreak_n_5ff2b685c5b6fd33110f1014)

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**Mexican doctor hospitalized after receiving COVID-19 vaccine**

Learn more: <https://news360.com/article/545635309>

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**'We Are Not Abandoning Resuscitation'  
LA County Healthcare Leader Speaks Out After Memo Raises Concerns**

(CBS-LA) Los Angeles County hospitals are so inundated, officials said they're just trying to provide the best care they can for the people who need it. But a recent memo from a healthcare leader about how to go about treating patients has some residents concerned.

Officials said there's no need for alarm, as they are continuing to treat people who are ill with the same urgency and care they always have.

The memo sent out on December 28 by the medical director of L.A. County's Emergency Medical Services agency, Dr. Marianne Gausche-Hill, addressed how first responders should treat stroke and heart attack patients, saying a patient should be treated at the scene first and have a pulse during resuscitation before transporting them to the hospital.

"We are not abandoning resuscitation," Gausche-Hill said. "We are absolutely doing best practice resuscitation and that is do it in the field, do it right away... What we're asking is that — which is slightly different than before — is that we are emphasizing the fact that transporting these patients arrested leads to very poor outcomes. We knew that already and we just don't want to impact our hospitals."

Treating heart attack and stroke patients at the scene instead of on the way to the hospitals can increase chances of survival, Gausche-Hill said. Full story: <https://news360.com/article/545694883>

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**[From AHA Today](#)**

**FEMA extends rule limiting scarce PPE resources to domestic use**

(From AHA Today) The Federal Emergency Management Agency has extended through June 30, 2021, with changes, a [temporary final rule](#) designating certain scarce health and medical resources exclusively for domestic use during the COVID-19 pandemic. The rule continues to apply to surgical N-95 respirators, surgical masks, nitrile surgical and exam gloves, level 3 and 4 surgical gowns and surgical isolation gowns, and adds specific syringes and hypodermic needles to the covered materials list.

**FDA updates device shortage list during COVID-19 public health emergency**

The Food and Drug Administration last month added to its [device shortage list](#) several device types, along with clarifying notes and resource links. The list now includes pipette tips and micro pipettes in the testing supplies and equipment category; changes also were made to the categories and grouped items. FDA said it will continue to update the list as the COVID-19 public health emergency persists. Find additional information on the FDA's [COVID-19 medical device supplies FAQs page](#).

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**Changes to Therapeutics Allocations**

There will be changes to the Kentucky mAb therapeutics allocations based on feedback from end-users and expansion of the program to include more outpatient infusion centers, FQHCs and RHCs.

The U.S. Department of Health and Human Services (HHS) changed the state allocations *to every other week*. Kentucky did not receive an allocation last week; the next allocation will be this Wednesday, January 6.

Going forward, the Kentucky Department for Public Health (KDPH) asks you to submit the following form to help them allocate what is needed: <https://ky.readyop.com/fs/4jaY/d685>

**Additional information:**

Since Kentucky will receive a shipment every other week, a reserve of approximately 10% of the allocation will be held and distributed as needed. Please contact **Ken Kik** directly if you are low on inventory, supporting an outbreak in your area, etc.

You may be allocated mAbs if this form is not submitted. AmerisourceBergen will contact you to accept or decline all or part of your allotment. This is a slow process and will delay your shipment of mAbs more than 1 week. The ability to completely fulfill your mAb request is solely dependent on the HHS allocations.

If requests are greater than the HHS allocation, KDPH will utilize these requests as justification for additional mAb allocations from HHS.

Please direct any questions to:

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Preparedness Branch, Kentucky Department for Public Health  
Business Mobile: 502-234-8392  
[kenneth.kik@ky.gov](mailto:kenneth.kik@ky.gov)

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**New UK Well@Work Episode Available**

Please follow the link below for the latest Well@Work podcast created by the University of Kentucky Center on Trauma and Children through a SAMHSA grant to the Department for Behavioral Health Developmental and Intellectual Disabilities. This resource is intended for your staff and members. We encourage you to forward this email with the link to all your employees, members, constituents, or licensees.

**Well@Work Podcast- Episode 11: Utilizing Your EAP for Secondary Traumatic Stress**

<https://youtu.be/pw1hLL0d8Tc>

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**Johns Hopkins: Health Security Headlines  
Extracts from January 4, 2021**

**'Still Waiting for My Turn': Primary Care Doctors are Being Left Behind in the Vaccine Rollout** (STAT News) He is not alone among primary care physicians, many of whom are not affiliated with hospitals and so have no direct link to vaccine distribution at this stage. "The rollout so far has been heartbreaking to witness from the standpoint of primary care," said Emily Maxson, chief medical officer at Aledade, a company that works with more than 7,300 providers across 27 states.

**As Rollout Falts, Scientists Debate New Vaccination Tactics** (New York Times) As governments around the world rush to vaccinate their citizens against the surging coronavirus, scientists are locked in a heated debate over a surprising question: Is it wisest to hold back the second doses everyone will need, or to give as many people as possible an inoculation now — and push back the second doses until later?

**Feds May Cut Moderna Vaccine Doses in Half So More People Get Shots, Warp Speed Adviser Says** (POLITICO) The federal government is in talks with Moderna about giving half the recommended dose of the company's Covid-19 shot to speed up immunization efforts, the head of the Trump administration's vaccine rollout said on Sunday. Operation Warp Speed chief adviser Moncef Slaoui said there is evidence that two half doses in people between the ages of 18 and 55 gives "identical immune response" to the recommended one hundred microgram dose, but said the final decision will rest with the FDA.

**Here's Why Distribution of the Vaccine Is Taking Longer Than Expected** (New York Times) In Florida, less than one-quarter of delivered coronavirus vaccines have been used, even as older people sat in lawn chairs all night waiting for their shots. In Puerto Rico, last week's vaccine shipments did not arrive until the workers who would have administered them had left for the Christmas holiday. In California, doctors are worried about whether there will be enough hospital staff members to both administer vaccines and tend to the swelling number of Covid-19 patients. These sorts of logistical problems in clinics across the country have put the campaign to vaccinate the United States against Covid-19 far behind schedule in its third week, raising fears about how quickly the country will be able to tame the epidemic.

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**How Coronavirus Affects the Brain**

(AARP) Scientists are researching the long-term effects of COVID-19 on the brain. Sanjay Gupta reports the latest news and shares tips for cognitive health. Four-fifths of patients hospitalized with COVID-19 have neurological symptoms, and although estimates vary, studies have found that at least half of people who recover from COVID-19 [continue to suffer](#) from neurological symptoms for months after. Brain scans of patients, compared with scans of those who've never been infected, show structural and functional changes to the brain. We don't know yet what that means for these patients' long-term prognosis, but the medical community is serious about figuring it out.

A global consortium of research scientists has been established to study the relationship between COVID-19 and neurological dysfunction. Their work has taken on greater urgency over the past few months, as we grapple with the fact that even those in the highest reaches of government and the military aren't safe from this virus.

Read more: <https://www.aarp.org/health/brain-health/info-2020/brain-health-risks-covid19.html>

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**CDC Updates Contraindications to COVID-19 Vaccination  
Casts wider net on allergic reactions to vaccine components**

(MedPage Today) Anyone with a history of immediate allergic reaction of any severity to any component of mRNA COVID-19 vaccines or to polysorbate should not be vaccinated, the CDC said in [updated interim guidance](#).

While previously the agency released [guidelines for contraindication](#) to vaccination, it's now broadened to include those with a history of immediate allergic reaction to a previous dose of or any component of mRNA COVID-19 vaccines, including polyethylene glycol.

In addition, people developing severe allergic reactions such as anaphylaxis after a first dose of mRNA COVID-19 vaccine should not receive a second dose.

All ingredients in the Pfizer/BioNTech and Moderna vaccines were listed by CDC in an "interim clinical considerations" document posted on the agency's website ([see Appendix B](#)). Polysorbate is not a vaccine ingredient but was included because people sensitive to it may also react to polyethylene glycol.

People with allergy histories involving these substances should be considered for allergist/immunologist referral to determine if they can receive the vaccine, the agency said in a call with clinicians.

"This guidance is being updated primarily because starting in a few days, people who got their first dose will be eligible to receive a second dose and we thought providers needed more guidance," said the CDC's Sarah Mbaeyi, MD, on the call. "We are continuously reevaluating our guidelines to make sure they are based on the best available information, so providers had more information available when people started coming in for their second dose of vaccines."

Learn more: <https://www.medpagetoday.com/infectiousdisease/covid19/90501>

### ----- **US Policing Commission Makes Recommendations**

([IACP News](#)) The [Washington Post](#) (1/3, Jackman) reports, "Every state should require its police departments to have an independent agency investigate all fatal shootings and other serious use-of-force incidents by officers as one way of restoring public faith in American policing, according to the final report of a commission created by President Trump to examine ways to improve the criminal justice system." The Post adds, "The report also calls for expanding the use of various technologies to fight crime, improving recruitment and training of officers, maintaining qualified immunity for officers who are sued for their actions, and reining in reform-minded prosecutors who declare they will not enforce certain laws such as marijuana possession," and "to further reduce the use of police force, the report suggests that police improve the investigations into complaints by civilians." The report "by the President's Commission on Law Enforcement and the Administration of Justice was compiled by 18 police, prosecution and Justice Department officials, aided by 15 working groups composed of 120 members who are also mostly police and prosecutors. The commission, and the report, were the result of a years-long push by police groups such as the International Association of Chiefs of Police (IACP)...to undertake a broad review of policing."

### **States Closing Jails As Guards Contract COVID**

([IACP News](#)) On its front page, the [New York Times](#) (1/1, A1, Derr, Griesbach, Issawi) says that "local jails and state prison systems around the United States have resorted to a drastic strategy to" hold off the coronavirus, with that strategy being to shut down totally and move inmates elsewhere. Officials at the state and local level indicate that such a high total of guards have become "ill with the virus and are unable to work that abruptly closing some correctional facilities is the only way to maintain community security and prisoner safety." According to the Times, "Experts say the fallout is easy to predict: The jails and prisons that stay open will probably become even more crowded, unsanitary and disease-ridden, and the transfers are likely to help the virus proliferate both inside and outside the walls."

### ----- **With Pot Rules Relaxed, More U.S. Teens Driving While High: Study**

([MedicineNet](#)) America's roads are notoriously unsafe on New Year's Eve, and a new study shows that [marijuana](#) legalization could be making the situation even worse. Almost half of teenagers who regularly use pot admit they've gotten behind the wheel while stoned, a new study in *JAMA Network Open* reveals.

Overall, twice as many [teens](#) report driving under the influence of [marijuana](#) than admit to drinking and driving, according to results drawn from a federal survey on youth risk behaviors.

Read more: <https://www.medicinenet.com/script/main/art.asp?articlekey=250376>

### ----- **Concern mounts over government cyber agency's struggle to respond to hack fallout**

Full CNN story: <https://www.cnn.com/2021/01/02/politics/hack-government-cyber-struggle-respond-fallout/index.html>

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 [Preparedness@kyha.com](mailto:Preparedness@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.