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## COVID DIGEST

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## MONKEYPOX DIGEST

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## Communications

### **\*UPDATE\* Monthly Communications Drills**

Communication drill schedule for 2<sup>nd</sup> quarter of FY23:

- November 4 – statewide communications drill. Focus will be on the entire region and will request status board updates and acknowledgment of request information.
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### **Site Visits Continue!**

The coalition offers site visits to all members annually. These non-punitively visits review emergency operations plans, identify best practices in planning bring the wealth of the region's planning knowledge directly to the staff. The meetings are open to emergency managers and health district planners, last no more than an hour and can be scheduled between July and April of each fiscal year. If interested in participating, contact Amy Green, Medically Vulnerable Populations Coordinator, at [agreen@vaems.org](mailto:agreen@vaems.org).

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### **\*UPDATE\* Long Term Care Focus Group**

The Long Term Care Focus Group is excited to offer our members a hybrid (in person and virtual) meeting option this fiscal year. Each quarter we will offer an in person option for discussing pressing topics in emergency operations, planning opportunities and resources. This collaborative group dives into preparedness from the lens of Long Term Care organizations in our region. We encourage organizations such as assisted living facilities, home health, hospice, dialysis and the like to get involved in this amazing group. The next meeting will take place **February 2, 2023 starting at 9AM**. To get your invitation please register using the following [link](#) or contact Amy Green at [agreen@vaems.org](mailto:agreen@vaems.org).

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## Emergency Operations Planning

### **Trends, Policies, and Protocols Related to Healthcare Workplace Violence**

From HHS.gov, this [article](#) provides an overview of workplace violence, highlights risk factors that contribute to healthcare workplace violence, and summarizes related legislation and policies. It also highlights strategies and guidance healthcare staff and security partners can incorporate into their coordinated healthcare workplace violence plans.

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## **\*NEW\* Winter Weather Preparedness**

Here are several quick steps to take to keep safe this winter.

- Have an emergency kit prepared with supplies such as an alternate fuel source for heating your home, flashlights and batteries in your home and car, blankets, food that needs no cooking or refrigeration, a 3-day supply of water, prescription medicines, a battery operated radio and flashlights, battery powered cell phone chargers, snow shovel etc. Learn more about preparing a winter preparedness plan by visiting, [www.readyvirginia.gov](http://www.readyvirginia.gov).
- Winterize homes by insulating walls and attics, caulking and weather-stripping doors and windows. In addition, if using woodstoves or fireplaces to heat, remember to have them professionally serviced and cleaned.
- Check batteries in smoke detectors and carbon monoxide monitors.
- Prepare vehicles with emergency supplies and have maintenance service as often as the manufacturer recommends.

Follow this [link](#) for more information.

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## **Emergency Psychiatric Care That Finally Works for Patients Source**

According to the Alameda Health System, up to 15% of emergency department visits now involve behavioral health emergencies, including substance use and mental health crises. Yet in managing these patients, too many hospitals adhere to historically inefficient care models that benefit few—and may actually cause patients’ symptoms to worsen. To improve emergency psychiatric care, we must first challenge the assumption that most behavioral health patients require inpatient admission as their disposition. Experience at Vituity suggests that with urgent interventions, as many as 80% of patients in behavioral health crisis can be stabilized and returned home or to outpatient care within 24 hours (that is, in less time than many are sitting waiting in EDs today). Follow this [link](#) for more information.

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## **American Academy of Pediatrics Urges Schools To Be Prepared For Medical Emergencies**

The newly updated policy statement, “Individual Medical Emergencies Occurring at School” (published online June 27), says that schools need to be prepared to deal with medical, behavioral, and traumatic emergencies that students or staff may experience. It is estimated that 10% to 25% of childhood injuries occur while the child is in school. It is prudent for schools to



prepare particularly for potential medical emergencies related to chronic conditions, such as seizures, diabetes, allergies/anaphylaxis, mental illness, substance use, or asthma, through personnel training and emergency action plans, the statement says. Follow this [link](#) for more information.

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## **Ransomware Spurs Weeks, Months of IT Downtime**

According to UC San Diego, Well Being, ransomware encrypts a sufferer's laptop records and data and solely releases them in exchange for a fee. At hospitals, that may imply information-technology methods like digital well-being information, scheduling and even telephone methods develop into unavailable. Docs, nurses and different medical workers have to maneuver to paper charts, and could also be out of shape or have not been skilled on that course. Follow [link](#) this for more information.

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## **Active Shooter Planning and Response in a Healthcare Setting**

According to Healthcare and Public Health Sector Coordinating Council, active shooter events in a healthcare setting present unique challenges: a potentially large vulnerable population, hazardous material (including infectious disease), locked units, special challenges (such as weapons and Magnetic Response Imaging (MRI) machines, as well as caregivers who can respond to treat victims. There is no single method to response to an incident, but prior planning will allow you and your staff to choose the best option during an active shooter situation, with the goal of maximizing lives saved. The best way to save lives is to remove potential targets from the shooter's vicinity. The article addresses some difficult choices that will need to be made in this document. Follow this [link](#) for more information.

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## **Preparedness and Readiness**

### **\*NEW\* National Weather Service Briefs**

EVHC is encouraging all facilities to sign up for National Weather Service delivered weekly directly to you. Please note these weekly briefings will be suspended during times when NWS delivers other weather specific briefings focusing on high impact weather events (e.g. severe weather and coastal storms).

To sign up:

- Gather all email addresses for your organization that need to receive NWS briefings.
- Email your list to [AKQ-REPORT@NOAA.GOV](mailto:AKQ-REPORT@NOAA.GOV)
- Include "NWS Wakefield Weekly Briefing Signup" in subject line.



Wakefield NWS will process these requests and you should begin receiving the briefings within 3-5 business days.

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## **Administration for Strategic Preparedness and Response Health Care Readiness Bulletin**

This bulletin provides the latest news and information related to ASPR's Health Care Readiness Programs, in addition to links to a variety of emergency preparedness and response tools and resources. To receive weekly bulletins via email, follow this [link](#) to subscribe.

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## **ASPR Critical Infrastructure Protection Bulletins**

The Administration for Strategic Preparedness and Response (ASPR) Division of Critical Infrastructure Protection offers a variety of bulletins to stakeholders of the Healthcare and Public Health (HPH) Sector. These bulletins share need-to-know information, resources, and timely incident alerts that allow HPH Sector stakeholders to personalize the information they receive. For more information and to subscribe to weekly bulletins, please use the following [link](#). Member can choose from:

- **Healthcare and Public Health (HPH) Sector Partnership Bulletin Distribution List:** Sent twice a week to share engagement opportunities open to the HPH stakeholders and as needed for essential HPH Partnership information sharing.
- **Incident Response Bulletin Distribution List:** Sent as needed for all hazard incidents (hurricanes, wildfires, earthquakes, cyber incidents, infectious disease, etc.) effecting the HPH Sector.
- **Preparedness, Response, and COVID-19 Updates Distribution List:** Sent weekly to provide COVID-19 situational updates and resources to enhance organizational preparedness and resilience.
- **Cybersecurity Weekly Bulletin Distribution List:** Sent weekly to provide cyber news, resources, engagement opportunities, and security updates.
- **Cyber Incident Response Bulletin Distribution List:** Sent as needed to provide alerts for major cyber incidents affecting the HPH Sector and mitigation tactics.
- **Healthcare Supply Chain Bulletin Distribution List:** Sent every other week to provide supply chain news, alerts, resources, and engagement opportunities
- **Infectious Disease Update Distribution List:** Sent every other week to provide emerging infectious disease tracking, news, resources, and engagement opportunities. To be noted, this bulletin will not provide coverage on the COVID-19 pandemic. For COVID-19 coverage subscribe to the Preparedness, Response, and COVID-19 Updates Distribution List.



## VHASS Verified Phone Numbers

Missed a monthly Coalition Communications Drill? The coalition has the solution. Many of our members do not have their phone numbers verified in the Virginia Healthcare Alerting and Status System (VHASS). Those without this verification will not receive the alerts that initiate our communication drills. Please use the document attached to this edition of the digest to verify your phone number. If you have difficulty please feel free to email us at [evhc@vaems.org](mailto:evhc@vaems.org).



How-to-setup-text-alerts-in-VHASS.pdf

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## How Nursing Homes Could Benefit From Having a Seat at the Table in Community-Wide Disaster Planning

One way to improve how nursing homes respond to emergencies going forward is to ensure that leadership is involved and prepared throughout the process. This may include enacting policy to better regulate and track that nursing homes effective train facility leadership for the rigors of dealing with a disaster. Follow this [link](#) for more information.

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## **\*UPDATE\*** Behavioral Health Professional Workforce Resiliency TeleECHO Program

The Behavioral-Health Professional Workforce Resilience ECHO program, in partnership with the [Health Resources and Services Administration's behavioral health program](#), gives overworked and overburdened professionals resources and connects them with a community facing the same challenges. These sessions are held every Monday from 3:00 – 4:00 PM ET. Follow this [link](#) to register. Upcoming sessions available November 7, 14, 21 and 28, 2022.

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## **\*UPDATE\*** Hazard Vulnerability Assessment Workshop

These workshops review the purpose and function of the Kaiser Permanente Hazard Vulnerability Assessment. The next workshop will take place virtually on January 12, 2023, at 9 AM. Please register by following this [link](#) or email Amy Green at [agreen@vaems.org](mailto:agreen@vaems.org).

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## 2023 Preparedness Summit

The 2023 Preparedness Summit is scheduled for April 24-27, 2023, in Atlanta. The 2023 theme, “Recover. Renew: Reprioritizing All-Hazards Preparedness,” will provide an opportunity to revisit pressing issues in preparedness and share resources, shape policies, and build skills to

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mitigate a variety of threats. More information about the event is available on the [Preparedness Summit website](#).

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## Regulatory News and Updates

### **\*NEW\*** Food and Drug Administration Breakthrough Devices Program

On October 28, 2022, the FDA updated the [list](#) of Breakthrough Devices that have been authorized for marketing. The list includes 56 Breakthrough Devices that the FDA has authorized for marketing. Online metrics show the number of granted Breakthrough Device designations by fiscal year and by clinical panel, which totals 728 as of September 30, 2022.

The [Breakthrough Devices Program](#) provides patients and health care providers with timely access to medical devices by speeding up their development, assessment, and review, while preserving the statutory standards consistent with the FDA's mission to protect and promote public health.

The FDA seeks input on the draft guidance "[Select Updates for the Breakthrough Devices Program Guidance: Reducing Disparities in Health and Health Care](#)." Submit comments before December 20, 2022.

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### **\*NEW\*** Mighty Bliss electric heating pads recall

On October 25, 2022, the FDA issued a [Safety Communications](#) warning consumers, caregivers and health care providers not to use the recalled Mighty Bliss electric heating pads distributed by Whele LLC (doing business as Perch) due to the risks of injury, including electric shocks, skin burns, rashes or irritation. Yesterday, Whele LLC, announced a [recall](#) of over 500,000 Mighty Bliss electric heating pads that were distributed between July 2021 and July 2022. These products were sold through Amazon.com and Walmart.com and have the following descriptions and model numbers:

- Blue Electric Heating Pad: Extra-Large (12" x 24"), Model Number: MB-002 (NA-H21C)
- Grey Electric Heating Pad: Large (12" x 24"), Model Number: PE-MtyBlis-HeatPad-12x24-Gry-V2(NA-H1121B)
- Blue Electric Heating Pad: Large (12" x 24"), Model Number: MB-001 (NA-H1121B)

To date, the FDA is not aware of any deaths associated with the use of these products. The company has received reports of user injuries and device malfunctions.

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## Exercises and Training

**Exercise and Training Workgroup meeting** – next meeting: Wednesday, January 18, 2023, at 9:30. If you are interested in participating in the workgroup please email [mcolmer@vaems.org](mailto:mcolmer@vaems.org) or call (757) 963-0632, ext 325.

## Upcoming Exercises

### **Severe Winter Weather Combined Table-top and Functional Exercise**

EVHC is partnering with Home Health Agencies, Hospice, Dialysis Centers and Long-term Care Facilities to design and conduct a series of exercise focusing on preparedness for, continuity of care during and response to a severe winter weather incident. The planning process is currently underway. A Table-top Exercise will be conducted on November 15 and a Functional exercise will be conducted on December 7, both from 9AM-12PM. If any facility of these four types is interested in participating in the exercise, please email EVHC at [EVHC@vaems.org](mailto:EVHC@vaems.org). A more formal registration process will be forthcoming.

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### **\*UPDATE\* Psychiatric and Mental Health Facility Evacuation Planning**

On November 1, 2022, EVHC facilitated a workshop to develop a regional plan focusing on evacuation of patients from psychiatric and mental health facilities. The workshop examined the Long-term Care Facility Mutual Aid Plan as a model to develop a similar support plan.

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## Upcoming Training

### **\*NEW\* VHASS Events Calendar**

As the Virginia Healthcare Emergency Management Program (VHEMP) continues to develop and deploy statewide training and education offerings – we redesigned our [Events Calendar](https://vhass.org/events/) (<https://vhass.org/events/>) on the [VHASS.org](https://vhass.org) website to provide a consistent location to market these opportunities.

The redesigned page includes multiple view options (list, month, day), keyword search box, search by date feature, preview and full detail display capabilities, as well as a “subscribe to calendar” feature which provides the ability to import the VHEMP Events calendar to your work or personal calendars. Please see the attached images for illustration.





## Flight 60 Training

Flight 60 has agreed to do monthly training for Respiratory Therapy and anyone interested in learning the flight 60 units the second Tuesday of every month from 11:00 – 12:00. See the connection information below. This number will be used through at least December 2022.

<https://us02web.zoom.us/j/5411003757?pwd=NjZ2ZDFtYlgwaVd4d0pNamVldWhhdz09>

Meeting ID: 541 100 3757

Passcode: 143775

One tap mobile:

+13017158592,,5411003757#,,,,\*143775# US (Washington D.C)

+13126266799,,5411003757#,,,,\*143775# US (Chicago)

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## **\*UPDATE\* Burn Training**

Sentara Norfolk General will be hosting a series of Burn Trainings in the next fiscal year. The first course has been delayed until December. Exact dates, times and how to register will be forthcoming. Look for updates in the monthly EVHC Ready and via the EVHC ListServ.

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## Homeland Security Exercise and Evaluation Program

The Homeland Security Exercise and Evaluation Program course is an intermediate-level course designed to provide a set of guiding principles, standardized methodology, available resources and practical skill development, which will assist in developing an HSEEP consistent exercise program. This course describes a common approach to exercise program management, design and development, conduct, evaluation, and improvement planning.

The student must achieve a minimum passing score of 75% on final knowledge assessment to earn the IACET CEU.

The target audience for this training are those involved in planning, program management, design and development, conduct, evaluation, and improvement planning of HSEEP consistent exercises.

Go to: [https://training.fema.gov/netc\\_online\\_admissions/](https://training.fema.gov/netc_online_admissions/) then select NETC Online Admissions Application. In the “Select a Course” pull-down menu, type in k0146 for a virtual course, L0146 of an in person courses. There are two in person sessions in Virginia in 2022;

- November 2-3 in Culpeper, VA
-



Your application requires the approval from a supervisor only. Maximum attendance is 30.

To apply for this or any FEMA EMI course, you must have a FEMA Student ID. Go to: <https://cdp.dhs.gov/femasid> to get a Student ID.

A complete list of EMI courses can be found here: <https://www.firstrespondertraining.gov/frts/npccatalog?catalog=EMI>. The schedule of upcoming courses can be found here: <https://training.fema.gov/emcourses/schedules.aspx>.

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## **Medical Management of Chemical, Biological, Radiological, Nuclear, and Explosive (CBRNE) Events.**

In conjunction with FEMA, CHKD, Eastern Virginia Medical School (EVMS), EVHC, and National Domestic Preparedness Consortium, The Texas A&M Engineering Extension Service (TEEX) will be holding training on Medical Management of CBRNE Events at EVMS. See the attached flyer for more information and how to register. Core participants include but are not limited to, Fire Services; Law Enforcement; EMS; Hospital Personnel, Physicians, and Nurses; Public Health Services; Emergency Management Organizations; City, County, State, Federal Medical; Private Industry; Community Emergency Response Teams (CERT); and Dispatchers.

When: December 13-14, 8:00 to 5:00

Where: Eastern VA Medical School Campus

Registration: <https://my.teex.org/TeexPortal/?MO=mExtLogin>

Creating a username and password will eliminate the need to fill out registration paperwork in class and will be the same site you will log in to after successful completion of the class to view and print your certificate.

For more information, visit TEEX website at: <https://teex.org>

Contact: Walter Soto Phone: 757-668-6903 email: [walter.soto@chkd.org](mailto:walter.soto@chkd.org)



TEEX CBRNE FLYER  
2022 (December).pdf



## Upcoming Webinars

### **\*UPDATE\*** Weekly National COVID-19 Call Series

CDC hosts a series of national calls with state, tribal, local, and territorial (STLT) partners to deliver the latest information on the COVID-19 outbreak and U.S. preparedness efforts. Next call is November 21 at 2:00. Click [here](#) for connection information and registration.

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### **\*UPDATE\*** 2022 Flu Outlook for Virginia Healthcare Professionals

The Virginia Healthcare Emergency Management Program (VHEMP), in conjunction with the Virginia Department of Health's (VDH) Office of Emergency Preparedness and the Virginia Hospital & Healthcare Association (VHHA), is hosting a webinar on November 10 at noon that will feature updates from the National Weather Service regarding the 2022-3 winter weather outlook.

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## Resources

### **Sentinel XL S-3000 PAPR Units**

EVHC is offering ILC Dover Sentinel XL HP PAPR Systems to members free of charge. This is a blower-assisted air purifying respirator that includes a head cover, battery pack, hoses and other components. Chemical, biological, radiological and nuclear (CBRN) Conversion kits are also available for the PAPR units. If you have interest please contact Ben Cibock, EVHC Inventory and Management Specialist at [bcibock@vaems.org](mailto:bcibock@vaems.org).

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### **Personal Protection Equipment**

If anyone is in need of PPE as they continue COVID response efforts, contact Ben Cibock, EVHC Inventory and Management Specialist at [bcibock@vaems.org](mailto:bcibock@vaems.org). Items provided would be at no cost to our members.

- N-95 Mask
  - Face Shields
  - Hair Covers
  - Shoe Covers
  - Adult Surgical Masks
  - Isolation Gowns
  - Lysol Wipes
-



## Additional Events and Announcements

### **Healthcare Organizations Emergency Preparedness Seminar**

The Eastern Virginia Healthcare Coalition is bringing back the Healthcare Organizations Emergency Preparedness Seminar (HOEPS). HOEPS anticipated to occur the week of May 2, 2023, with the intent of having one session on the Peninsula and one on the Southside. EVHC is looking for more topics and training possibilities. Thus far, the Seminar is considering:

- EMS transfer concerns for LTC Facilities
- Hazardous Vulnerability Assessments
- Q&A panel with local jurisdictional Emergency Managers
- Any training that could have CEUs attached
- Small in scope Table-top Exercise
- New Emergency Management reality – adjustments and improvements due to COVID-19.

Please reach out to EVHC at [EVHC@vaems.org](mailto:EVHC@vaems.org) with your ideas and suggestions.

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## COVID Digest

### **\*NEW\* Virginia Department of Health Changes to COVID-19 Dashboards**

The Virginia Department of Health (VDH) continues to streamline information on its COVID-19 data dashboards to better highlight current COVID-19 trends in Virginia and inform action. As of October 24, 2022, VDH retired several COVID-19 data dashboards and updated others. No access to any currently available data is being removed, rather the dashboards are being streamlined and consolidated.

The following dashboards have been retired:

- **COVID-19 Cases Among Children:** Cases, hospitalizations, and deaths by age group, including children, are available on the [Cases Demographics](#) dashboard.
- **MIS-C:** Multisystem Inflammatory System in Children (MIS-C) total cases and deaths in Virginia are available on the [Cases Summary](#) dashboard.
- **COVID-19 Testing:** The most recent-7 day positivity percentage for PCR testing in Virginia is available on the [Cases Summary](#) dashboard. Other testing data is available on the [CDC Community Levels](#) dashboard.

The following dashboards have been updated:

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- **COVID-19 Vaccine Summary:** Reduced high-level statewide vaccine metrics and graphs about vaccine doses administered.
- **COVID-19 Vaccine Demographics:** Updated vaccination status filters to replace “first booster” and “second booster” with “monovalent booster” and “bivalent booster.”

The changes are intended to streamline the information that is most helpful in tracking COVID-19 and its impacts on Virginia at this point in the pandemic. The VDH COVID-19 dashboards are available [here](#).

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## Virginia Daily COVID-19 Cases and Testing Count

Total Cases: 2,120,280 Total Hospitalization: 56,959 Death: 22,199  
PCR 7-day Positivity Rate: 9.0% Total MIS-C cases: 181 MIS-C deaths: 1

Source: Virginia Department of Health. VDH is closely monitoring and investigating cases of the novel coronavirus in the Commonwealth and Multisystem Inflammatory Syndrome in Children (MIS-C). Follow [link](#) for more detailed information. (Data as of October 31, 2022)

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## Virginia Daily Vaccine

Total Doses Administered: 16,936,716 At Least One Dose: 7,106,715  
Full Vaccinated: 6,274,967  
% of Population Fully Vaccinated: 73.0%  
People with Booster/Third Dose: 4,486,075

Source: Virginia Department of Health. People vaccinated with two doses of 2-dose vaccine or a one dose of a single dose vaccine are included. Follow [link](#) for more detailed information. (Data as of October 28, 2022)

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## COVID-19 VHHA – Hospital COVID Data

Currently Hospitalized: 455  
Hospitalized in the ICU with confirmed COVID positive test: 64

Source: Virginia Hospital and Healthcare Association. VHASS status board data is used at the state level for COVID surge modeling and emergency management. Follow this [link](#) for more detailed information. (Data as of October 31, 2022)



## **CDC Updates COVID-19 Guidance for Health Care Providers**

The Centers for Disease Control and Prevention (CDC) Friday, Sept. 23 released updates to certain COVID-19 guidance pertaining to health care providers (HCP). The CDC cites as its rationale for these decisions the high levels of vaccine- and infection-induced immunity, the availability of effective treatment and prevention tools, and the need to streamline and consolidate current guidance. The updates include changes to the following: [Infection Control](#), [Potential Exposure at Work](#) and [Mitigating Staff Shortages](#).

Recognizing the staffing challenges facing hospitals and health systems, the agency updated its [conventional strategies](#) to advise that, in most circumstances, asymptomatic HCP with higher-risk exposures do not require work restrictions. This update applies to all HCP, regardless of vaccination status. As a result of these changes, the contingency and crisis strategies about earlier return to work for this group of HCP was removed. In addition to this change, the updated guidance for CDC also provides recommendations for hospitals and health systems pertaining to mitigating staffing shortages under conventional, contingency and crisis strategies. Additional details on the CDC guidance updates are below.

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## **FDA Updates COVID-19 Test Policy, Encourages Developers to Seek Traditional Premarket Review for Most Test Types**

The U.S. Food and Drug Administration updated its COVID-19 test policy to ensure continued access to tests while encouraging the transition of these important public health tools to traditional premarket review pathways. The updated policy describes the FDA's intent to review only a small subset of new emergency use authorization (EUA) requests for diagnostic tests and encourages developers of all test types interested in marketing authorization to pursue authorization through the de novo classification or 510(k) clearance pre-market review pathways. Follow this [link](#) for more information.

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## **Monkeypox Digest**

### **U.S. Monkeypox Outbreak 2022: Situation Summary**

The Center for Disease Control and Prevention is urging healthcare providers in the U.S. to be alert for patients who have rash illnesses [consistent with monkeypox](#), regardless of whether they have travel or specific risk factors for monkeypox and regardless of gender or sexual orientation. CDC is working with state and local health officials to identify people who may have been in contact with individuals who have tested positive for monkeypox, so they can [monitor their health](#). Follow this [link](#) for more information ([Signs and Symptoms](#)). ([Outbreak Map](#)).





**\*NEW\* Clinical Considerations for Monkeypox in Children and Adolescents**

Historically, monkeypox has been documented in children and adolescents living in areas where monkeypox infections occur more commonly. Once illness occurs, the clinical presentation is expected to be similar to illness in adults. However, it is not known whether children are more susceptible to monkeypox than adults or whether clinical outcomes differ from those in adults. In the current global outbreak, monkeypox has only been known to spread by people from the time symptoms start until the rash has fully healed and a fresh layer of skin has formed. However, monkeypox virus has been detected in some samples taken from people who reported no symptoms. CDC will continue to monitor case data and [available science](#) for new or changing information about transmission. Monkeypox can also be transmitted to the fetus during pregnancy or to the newborn by close contact during and after birth. Follow this [link](#) for more information.

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**U.S.-Based Production of Smallpox and Monkeypox Vaccine**

"Rapidly increasing the supply and safe delivery of Monkeypox vaccine to at-risk Americans is a top priority," said Assistant Secretary for Preparedness and Response Dawn O'Connell. "BARDA's support helps ensure success in doubling the capacity available to fill and finish this vaccine, improves preparedness for smallpox bioterrorism, and strengthens the security of the U.S. supply chain. Production of JYNNEOS in the U.S. creates jobs and speeds the availability of the vaccine." The agreement between the Biomedical Advanced Research and Development Authority ([BARDA](#)), part of the HHS Administration for Strategic Preparedness and Response (ASPR), and GRAM aids the company in accelerating the fill and finish manufacturing qualification and production in its recently expanded facility. The funding will allow GRAM to purchase additional equipment necessary for JYNNEOS production and recruit and train additional staff to operate the line. With BARDA's support, vaccine production at the facility is expected to be underway later this year, months ahead of the 9-month schedule typical for this type of work. For more information, follow this [link](#).

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**CDC Provides Recommendations to Prevent Occupationally Acquired Monkeypox Infection in Health Care Personnel**

Reports of occupationally acquired monkeypox infection in healthcare personnel (HCP) remain rare in this outbreak, with most reports involving HCP sustaining a sharps injury during specimen collection or not using [recommended personal protective equipment \(PPE\)](#). Currently, there are more than 61,000 [reported cases of monkeypox infection worldwide](#). CDC recommends HCP adhere to all recommended [infection prevention and control](#) measures including [recommended PPE](#) to reduce the risk of monkeypox virus transmission in health care settings.