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## Communications

### **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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### **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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### **Fixed Satellite Phone Program**

The Coalition supports redundant communication for our members through our Fixed Satellite Phone Program. Each quarter we conduct region wide testing with participants. We encourage organizations who wish to acquire satellite phones to contact Amy Green at [agreen@vaems.org](mailto:agreen@vaems.org).

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### **\*NEW\* ESRD Emergency Hub**

The ESRD Emergency Hub is designed to help people with kidney disease who are on dialysis or have received a transplant prepare for and stay safe during an emergency. Access free resources and tools created by kidney care and emergency management experts. Easily create, store, and find your treatment information, emergency resources and needed phone numbers for treatment centers and support organization. Receive critical information in real time based from trusted resources including your ESRD Network. Download the app or watch a video to learn more. Visit [esrdemergencyhub.ipro.org](http://esrdemergencyhub.ipro.org).



## **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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### **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\* Push for Emergency Declaration amid Respiratory Syncytial Virus (RSV)**

*“On behalf of America’s pediatricians and children’s hospitals, we ask you to declare an emergency to support the national response to the alarming surge of pediatric hospitalizations due to pediatric respiratory syncytial virus (RSV) and influenza along with the continuing children’s mental health emergency. The confluence of these capacity issues in pediatric*

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*hospitals and communities requires nimbleness and flexibilities that can only be provided through a Presidential declaration of an emergency under the Stafford Act or National Emergencies Act and a Public Health Emergency declaration. These flexibilities have been provided under COVID-19 and were critical during the height of the surge and ongoing fluctuations of the virus. Children and children's providers require the same capacity support as they strive to keep up with increasing needs of our youngest Americans." To read the letter in its entirety please utilize the following [link](#).*

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## **\*NEW\* Ransomware attacks trend up on holidays, weekends**

While the survey involved a number of industries' security operations teams (SOC), 30% of SOC teams in healthcare said it took longer to assess the scope of a weekend or holiday attack. The healthcare SOC respondents said it took their organizations three to six days (21%), one to two days (19%) or seven to 23 hours (15%) to resolve ransomware attacks. Only education SOC teams were more likely to report resolution timeframes from one to six days. Cybereason recommended that all industries explore staffing models that can improve incident response – giving a nod to the healthcare cybersecurity industry. To read the letter in its entirety please utilize the following [link](#).

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## **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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## **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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### **\*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 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\* Outbreaks of Nontuberculous Mycobacteria Infections Highlight Importance of Maintain and Monitoring Dental Waterlines**

The Centers for Disease Control and Prevention (CDC) is issuing this Health Alert Network (HAN) Health Advisory to emphasize the importance of following existing recommendations for maintaining and monitoring dental waterlines. Multiple outbreaks of nontuberculous Mycobacteria (NTM) infections have occurred in children who received pulpotomies in pediatric dental clinics where the dental treatment water contained high levels of bacteria. CDC provides guidelines on infection control in dental settings which contain recommendations to treat dental unit waterlines and monitor water quality. Dental providers should be familiar with these recommendations on how to properly maintain and monitor their dental equipment to ensure that dental treatment water is safe for patient care. For more information please utilize the following [link](#).

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## 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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## 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

### Upcoming Exercises

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

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# December 2022

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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## Upcoming Training

### **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=NjZ2ZDFtbgwaVd4d0pNamVldWhhdz09>

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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## COVID-19

### Virginia Daily COVID-19 Cases and Testing Count

Total Cases: 2,149,512 Total Hospitalization: 57,612 Death: 22,418  
PCR 7-day Positivity Rate: 9.6% Total MIS-C cases: 180 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 November 29, 2022)

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### Virginia Daily Vaccine

Total Doses Administered: 17,927,075 Full Vaccinated: 6,311,566  
% of Population Fully Vaccinated: 73.5%  
People with Booster/Third Dose: 4,918,844

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 November 29, 2022)

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### COVID-19 VHHA – Hospital COVID Data

Currently Hospitalized: 582  
Hospitalized in the ICU with confirmed COVID positive test: 59

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 November 29, 2022)

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### **\* UPDATE\* CMS Urges Timely Patient Access to COVID-19 Vaccines, Therapeutics**

CMS is also reemphasizing the need for providers and suppliers to stay up to date with COVID-19 vaccinations, including any updated COVID vaccines, as they provide the best defense against severe illness, hospitalization, and death from the virus.

CMS is encouraging nursing homes, in particular, to increase their vaccination efforts and review and reinforce their infection control protocols. CMS requires nursing homes to educate residents and staff on the risks and benefits of the COVID vaccines and offer to administer the vaccine. In addition, in consultation with their physician and family, nursing homes should ensure residents who test positive for COVID-19 receive appropriate treatments. For more information please utilize the following [link](#).

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## Monkeypox

### **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](#)).

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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.

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### **\*NEW\* Update on Managing Monkeypox in Patients Receiving Therapeutic**

Monkeypox cases have declined since mid-August 2022 in the United States; however, new cases—including clinically severe cases—continue to occur. While there are currently no treatments specifically approved for monkeypox, therapeutics developed for patients with smallpox have been deployed during the current outbreak. This Health Alert Network (HAN) Health Update provides clinicians and public health officials with new information about managing monkeypox in patients requiring therapeutics. Follow this [link](#) for more information.

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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

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**EVHC READY**  
The Eastern Region's Pulse On Healthcare Emergency Preparedness



**December 2022**

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