

The Montana Health Care Coalitions Newsletter is a publication of the Montana Hospital Association published on Thursdays.



Montana Hospital Association | November 17, 2022

Today is National Rural Health Day (NRHD). NRHD is an opportunity to “Celebrate the Power of Rural” by honoring the selfless, community-minded and determined spirit that prevails in rural America. NRHD showcases the efforts of rural healthcare providers, organizations and cooperatives, State Offices of Rural Health, and stakeholders from various industry sectors dedicated to addressing Social Determinants of Health (SDOH) and the unique healthcare challenges that rural citizens face today and into the future.

Thank you for all you do to serve the rural communities throughout the state.

No newsletter will be published next week due to the Thanksgiving holiday.

New & Noteworthy

New Rural Emergency Preparedness and Response Toolkit

The [Rural Health Information Hub](#) (RHlhub) has developed a new [Rural Emergency Preparedness and Response Toolkit](#) which may be of value to you and your organization.

Emergency planning, response, and recovery has never been more important for rural communities, healthcare providers, and other stakeholders and organizations with an interest in rural health. This toolkit describes unique considerations and issues rural populations face when responding to disasters and public health emergencies but also the strengths and assets they can leverage to support their emergency preparedness efforts. This new toolkit was developed in collaboration with the NORC Walsh Center for Rural Health Analysis. It compiles evidence-based and promising models and resources to support organizations implementing emergency planning, response, and recovery efforts in rural communities across the United States.

COVID-19 Vaccination and Therapeutics Toolkit: Resources for Clinicians

Attaching a VERY well put together [resource](#) for your CLINICIANS to help increase awareness of the critical importance, effectiveness and accessibility of the COVID-19 bivalent booster and anti-viral therapeutics in post-acute and long-term care settings.

- Contains Standing Orders for Antiviral Treatments
- Pharmacist Ordering Flowchart for Paxlovid
- Info about Antivirals
- Bivalent Facts and Myths

Pneumonia Fact Sheet

View the [Pneumonia Fact Sheet](#) developed by Mountain-Pacific Quality Health in partnership with their Patient and Family Advocacy Council.

EMS, Healthcare Clinicians: "Identify, Isolate and Inform" During Ebola Outbreak

The National Emerging Special Pathogens Training and Education Center (NETEC) is providing updates about the recently evolving situation in Uganda regarding the spread of Ebola Virus Disease (EVD), a highly contagious and serious infectious disease. The Centers for Disease Control and Prevention (CDC) has also updated [guidance for EMS systems and 911 emergency communications centers/public safety answering points \(ECCs/PSAPs\)](#) to help manage patients under investigation (PUI) for EVD in the United States.

EVD spreads through direct contact with blood or body fluids, contaminated objects (such as needles and syringes), or a person who is sick with or has died from EVD. Signs and symptoms of EVD—which may appear anywhere from two to 21 days after contact with the virus—include fever, severe headache, weakness, fatigue, muscle pain, abdominal (stomach) pain, diarrhea, vomiting, and unexplained hemorrhage, such as bleeding from the gums, blood in urine or bruising. Persons with these signs and symptoms who have traveled to a region endemic for and/or currently experiencing Viral Hemorrhagic Fevers (VHF) outbreaks in the last 21 days should be screened.

The NETEC and CDC urge EMS and healthcare clinicians to keep these key points in mind:

- While the chance of encountering a person infected with EVD in the US is low it is important that personnel know how to identify and manage patients who might have EVD.
- Personnel should be ready to take three steps: Identify, Isolate and Inform. This paradigm is a way to:
 - Identify (assess) the risk that the person they are interacting with might be infected with a high-consequence infectious disease
 - Implement infection prevention measures to reduce the risks of exposure to infectious bodily fluids

- Inform others that the person they are caring for might be infected with a high-consequence infectious disease
- Ask patients with signs and symptoms of illness if they have traveled to a country with a known Ebola outbreak or had contact with someone with EVD in the last 21 days.
- If a patient appears to be at risk for EVD, immediately isolate the patient, put on appropriate PPE, and notify the receiving facility and local and state health departments.

Review CDC resources:

- [Guidance for EMS and 911](#)
- [Identify, Isolate, Inform: EMS](#)
- [Guidance for Developing a Plan for Interfacility Transport](#)
- [PPE Guidance](#)
- [PPE Training](#)
- [CDC Health Alert Network \(HAN\) Health Update](#)

Review NETEC resources:

- [Preparing Frontline Healthcare Workers for Ebola Webinar](#)
- [EMS Strategies for Ebola](#)
- [EMS Infectious Disease Playbook](#)

You can also view the latest Uganda Ebola Outbreak news from the CDC [here](#) and updates from DPHHS [here](#).

EMResource API Update

The EMResource API Specialist with the Healthcare Preparedness Program has been participating in bi-weekly calls with Juvare to track the implementation of the EMResource API. To date, less than 25% of all eligible facilities have completed the [Interest Form](#) and only 7 facilities have received testing information to begin this API build. We understand that this is a rather large undertaking, particularly for facilities with limited IT staff but we are requesting that facilities consider this option to ease the data reporting burden.

If your facility has not done so yet, you are encouraged to review the recording of the Juvare API Kick Off webinar held on October 3 [here](#), the passcode is 9gb%m*hn. This API is intended to focus on the HHS required data elements and ease some of the reporting burden for facilities. By utilizing the API, facilities will be able to populate EMResource directly from their EHR. The amount of data that is able to be pulled will be dependent on the capabilities of the facility's EHR and the ability to map the fields from one platform to the other.

If you have questions or would like to schedule a one-on-one call to discuss this platform, please email casey.driscoll@mtha.org and we will connect with you as quickly as possible.

Upcoming Transition from TeleTracking to NHSN for HHS Data

In mid-December reporting of COVID-19 hospital data will transition from TeleTracking to the National Healthcare Safety Network (NHSN). Thursday, December 15, 2022 will be the first day of COVID-19 hospital data reporting in NHSN. This transition is only related to COVID-19 hospital data reporting, which is detailed in the [COVID-19 hospital data reporting guidance](#). More information on the transition is available on the [NHSN COVID-19 reporting transition website](#).

As part of the transition, the COVID-19 hospital data reporting module is now available in NHSN for testing purposes only. This testing phase is intended to help users gain familiarity with the module, add users to NHSN as needed, and set-up and test reporting. As a reminder, someone in your facility (likely in the infection prevention and control department), likely has access to NHSN. Reporting of COVID-19 hospital data will continue through current reporting mechanisms - current availability of the NHSN module is for testing purposes only. During the testing phase - Wednesday, November 2, 2022 through Wednesday, December 14, 2022 - the team will prioritize identifying any issues for submission of COVID-19 hospital data in order to address these prior to the December transition. Please feel free to share feedback with NHSN.

To access the COVID-19 module, log in to the Patient Safety Component of NHSN and select COVID-19 and Pathway Data Reporting in the left navigation bar.

Multiple trainings and demos are being scheduled for the coming weeks - please register on the [transition website](#). Note: Please check the transition website regularly for additional trainings.

Important notes on the transition:

- There are no significant changes to the questions or to the reporting cadence. The only minor change is that the NHSN orgID now serves as the facility identifier
- Reporting processes will remain the same
 - Hospitals will still be able to report individually (See the overview steps for [individual facility reporting](#))
 - Hospital systems will still be able to report at an enterprise level (See the overview steps in the [bulk upload guide](#), and upcoming Nov. 2 training for bulk uploaders)
 - Jurisdictions will still be able to report on behalf of their facilities (See the overview steps in the [bulk upload guide](#))
 - Third party vendors will still be able to report on behalf of facilities and/or jurisdictions (See the overview steps in the [bulk upload guide](#)). **This includes Juvare/EMResouce.**
- Reporting capabilities for webform interface, CSV upload (for both individual facility and multiple facilities), and API will be available in NHSN
- Historical data submitted via TeleTracking will not be available in NHSN at this time, but may be available in the future

- Please follow guidance from your jurisdiction to ensure you are meeting any state, tribal, local, or territorial requirements

Please also view the [frequently asked questions on the transition](#). Helpdesk support is also available through nhsn@cdc.gov.

Data & Situational Awareness

Update on Transition from TeleTracking to NHSN

Please see the update above. In mid-December reporting of COVID-19 hospital data will transition from TeleTracking to the National Healthcare Safety Network (NHSN). Facilities will be able to continue to utilize the exact same process for updating data in EMResource as HHS transitions from TeleTracking to NHSN. All of the required elements will be in place for the data to transfer from EMResource to NHSN just as it has been doing to TeleTracking. Facilities are encouraged to develop processes for entering the information in NHSN if a day is missed or if weekends are not reported into EMResource.

If your facility has not done so yet, you are encouraged to review the recording of the Juvare API Kick Off webinar held on October 3 [here](#), the passcode is 9gb%*m*hn. This API is intended to focus on the HHS required data elements and ease some of the reporting burden for facilities. By utilizing the API, facilities will be able to populate EMResource directly from their EHR. The amount of data that is able to be pulled will be dependent on the capabilities of the facility's EHR and the ability to map the fields from one platform to the other. Please email casey.driscoll@mtha.org if you have questions or would like additional information.

Upcoming Events

Meetings

Health Care Coalition Executive Committee Meetings

Executive Committee meeting will resume after the holiday season.

Webinars

DNRC Floodplain Resource Seminar

November 30 - December 2

Virtual

Visit the [website](#) for agenda and details

Emergency Management and New Americans - Preparing for Disasters

December 6, 0930 - 1100 MT

The Administration for Children and Families (ACF) Office of Refugee Resettlement (ORR) and the Office of Regional Operations (ORO) in Region 8 invite you to a webinar that brings together emergency management and resettlement programs to promote conversations about supporting communities of New Americans and newcomers during disasters.

[Register](#)

CISA Region 8 Training & Exercise Resources Webinar

December 6, 1000 - 1100

[Register](#)

PER 404: Logistics and Supply Chain Resilience in Disasters

December 5 - 8, 1100 - 1500 Mountain Time

[View Flyer](#)

HHS IEA Weekly Monkeypox Briefing

Thursdays, 12:00 MT

[Register](#)

First Responder Resilience TeleECHO Program

Every other Monday, 14:00 - 15:00 MDT

[Register](#)

EOC Virtual Classes hosted by EMI

View the full Course Catalog [here](#)

[Montana Health Network Course Catalog](#)

In-Person Trainings

ICS 300

November 29 - December 1

ExpoPark, Great Falls

Register by calling or emailing Glenna Violette gviolette@cascadecountymt.gov or 406-454-6900

ICS 400

November 29 - 30 – only 7 seats left

Fort Harrison, MT

POC: Betsy Ross, betsy.ross@mt.gov

Save the Dates

K0428 Community Emergency Response Team (CERT) Train-the-Trainer (Virtual)

Multiple dates beginning December 2022

[View Flyer](#)

Colorado Wildland Fire & Incident Management Academy

January 7 - 12

Colorado College, Colorado Springs

February 20 - 24

Marriott, Colorado Springs

[Register](#)

All Hazards Consortium – Virtual National Resilience Exchange Summit

January 24-26, 2023, 1030-1600 daily

No cost

[Register](#)

Tribal Nations Training Week

March 11 - 18, 2023

Center for Domestic Preparedness (CDP) in Anniston, AL

CDP training is completely funded for state, local, and tribal emergency responders to include travel, meals, and lodging.

[Register](#) through CDP

ICS449 Train-the-Trainer for FEMA ICS Courses

March 27 - 31, 2023

Fort Harrison, instructed by TEEX

Registration coming soon, email [Betsy Ross](#) for more information.

L0212 Hazard Mitigation Assistance: Developing Quality Applications

May 1 - 5, 2023

Helena, MT

More Information Forthcoming

[| Engagement & Other News](#)

CISA Cyber Update

Click [here](#) to view the most recent CISA Cyber Update.

Cybersecurity Training Online Course Catalog

CISA released a [Cybersecurity Training Online Course Catalog](#) that includes no-cost cybersecurity online trainings. The catalog is organized into two sections highlighting introductory cybersecurity courses, and intermediate level courses compiled from the Federal Virtual Training Environment (FedVTE), DHS HQ Interim Training Site (HITS), CISA Virtual Learning Portal, and Microsoft.

Questions?

We are committed to supporting you and answering questions as quickly as possible. Please send any questions or comments to hppcoordinators@mtha.org.

Visit the [Montana Regional Health Care Coalitions](#) website for additional information and resources.



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