

Kaiser Permanente Los Angeles Medical Center



Maintaining Readiness for Emerging Infectious Diseases

Kelly M. Anderson
Emergency Preparedness Planner

Be Prepared for Emerging!



An emerging infectious disease is one that has appeared in a population for the first time, or that may have existed previously but is rapidly increasing in incidence or geographic range.

www.who.org

Top of the List Emerging Infectious Diseases!



The initial list of disease priorities needing urgent R&D attention comprises: Crimean Congo haemorrhagic fever, Ebola, Marburg, Lassa fever, MERS, Zika, SARS, Nipah and Rift Valley fever.

The list will be reviewed annually or when new diseases emerge.
www.who.org

Tools for Maintaining Teams

- Building strong partnerships
- Who.org & CDC.gov updates
- 100% Dedicated Training time – not during patient care duties
- Physician & nurse leadership support & ongoing education
- Physician & nurse staff support ongoing education
- Dedicated & committed voluntary team members
- Local public health & emergency management partners
- Administrative & executive sponsorship including financial support
- Grants
- National Ebola Training & Education Center (NETEC)

Tools in Disaster: Mass Notification

Send Word Now – Mass Notification System

- Add YOUR work cell & personal cell to **MYHR**
- You can make # NOT public
- If all phone numbers in **MYHR** you will receive Disaster Mass Notification!

Partnerships



UCLA
Stanford University
LA County EMS
LA County Public Health
CDC
NETEC
Kaiser-to-Kaiser collaborations

Program Update

- LAMC has overseen 4 patients to date:
 - None confirmed EVD
- Coordination with CDPH and CDC on all fronts
- 2 mobile team responses
 - Activated April 5 and Aug. 27, 2015
 - Logistics and cost reductions
 - Community and responder safety
 - New paradigm
- Our future
 - Program operations development through 2019
 - Joint operations review with UCLA Aug. – Sep. 2015
 - Solid training program



KAISER PERMANENTE®

- Matthew Smith, MD, Chief of Emergency Services
- David Silberstein, MD, Pulmonary and Critical Care Medicine
- LAMC Operating Departments
 - EH&S – Program Coordination and Field Support
 - EVS – Waste Handling/Management
 - Engineering – Controls and Infrastructure
 - Infection Prevention – Safety and Disease Containment
 - Security – Exclusion Enforcement
 - Education and Training
 - LAMC Nursing – Scheduling, Clinical Process Management and Team Participation
 - AR&L – Liaison and Regulatory Management
 - LAMC Labor Partners – Front Line Efforts/Engagement
 - Medical Center Leadership – Active Involvement/Continuous Sponsorship
- National EH&S/KP Region Operations

EBOLA & INFECTIOUS DISEASE DRILLS & EXERCISE SCHEDULE 2016 - 2017

PROJECT/EVENT	EMERGENCY MANAGEMENT PREPAREDNESS	This schedule will highlight monthly drills & yearly exercises for the Ebola Response Team, Mobile Response Team and team members involved in an activation surrounding an infectious disease response.
ORGANIZER	KELLY ANDERSON	

DRILLS & EXERCISES	STARTING	ENDING	DRILLS & EXERCISES	STARTING	ENDING
EBOLA DRILL ISOPOD & SPILLS	7.21.2016	7.21.2016	EBOLA DRILL ISOPOD & SPILLS	1.19.2017	1.19.2017
MOBILE EBOLA RESPONSE	8.18.2016	8.18.2016	MOBILE EBOLA RESPONSE	2.16.2017	2.16.2017
EBOLA DRILL DON & DOFF	9.15.2016	9.15.2016	EBOLA DRILL DON & DOFF	3.16.2017	3.16.2017
EBOLA OUTBREAK! EXERCISE	10.20.2016	10.20.2016	MOBILE EBOLA RESPONSE	4.20.2017	4.20.2017
EBOLA LONGTERM CARE	11.17.2016	11.17.2016	EBOLA LONGTERM CARE	5.18.2017	5.18.2017
EBOLA DRILL WASTE MGMT	12.15.2016	12.15.2016	EBOLA DRILL WASTE MGMT	6.15.2017	6.15.2017

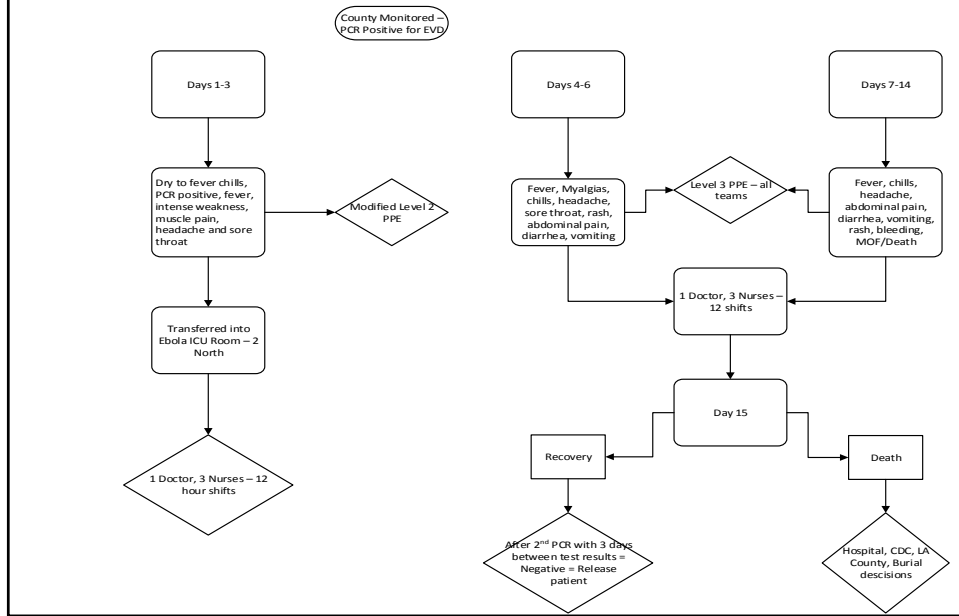
JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER
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JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE
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Practice Makes for Safe Teams

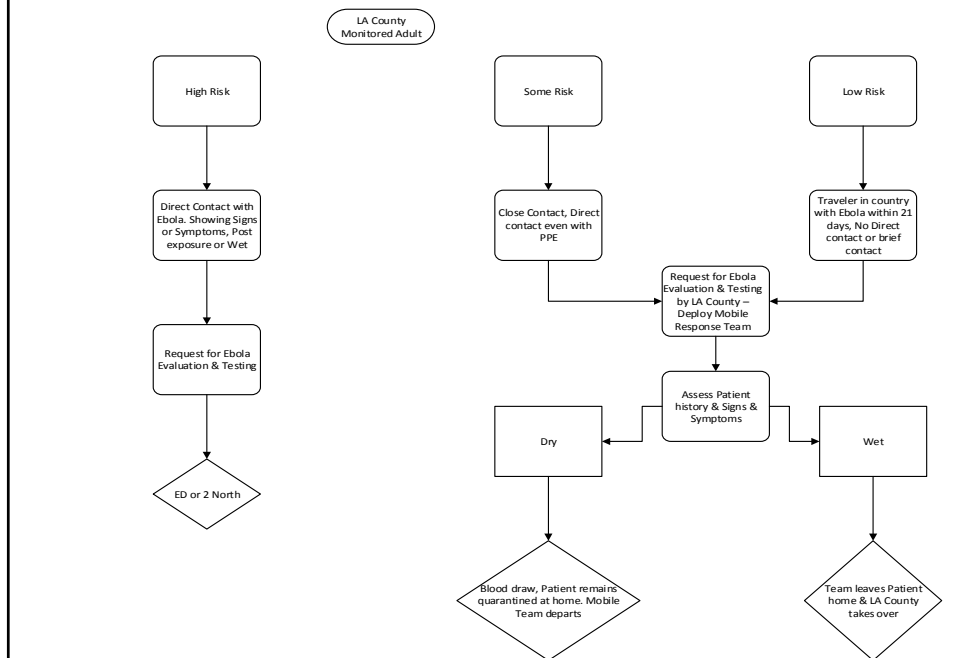


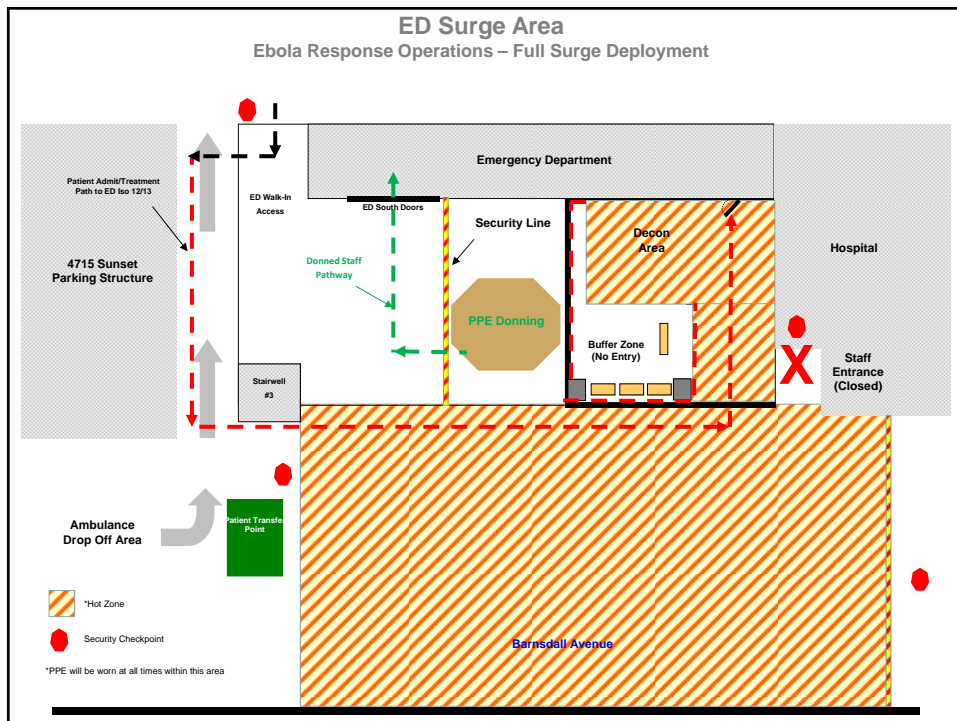
Ebola Workflow Algorithm

LAMC ED to ICU TRANSFER EBOLA DECISION ALGORITHM as of 12-4-2015 – Adult

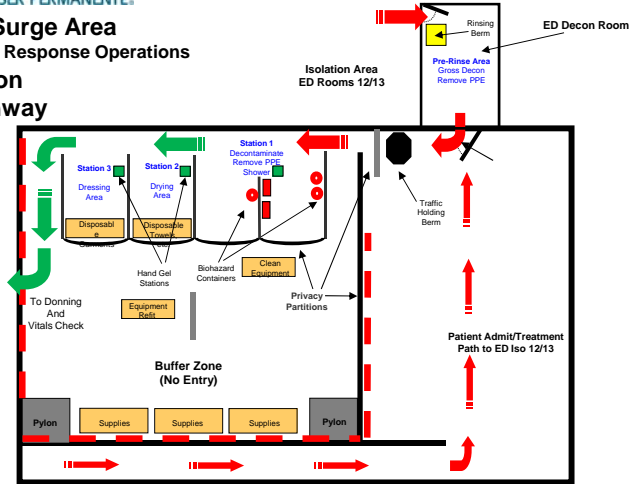


PUI & LAMC MOBILE RESPONSE EBOLA DECISION ALGORITHM as of 12-4-2015 - ADULT

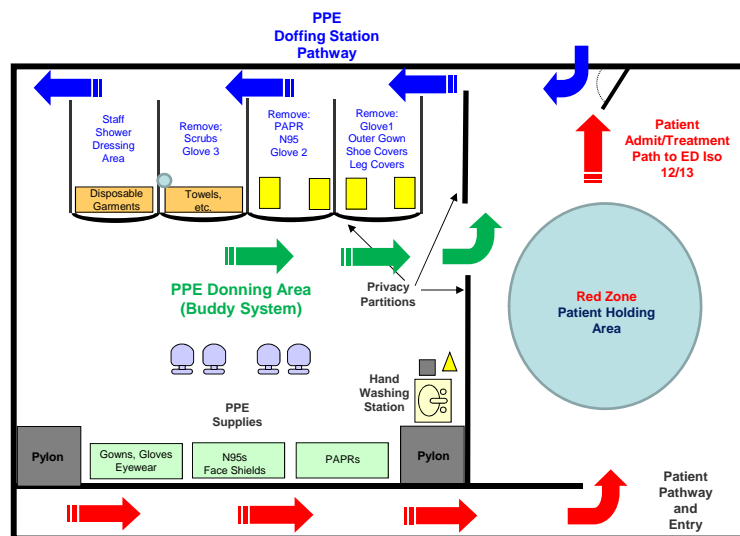


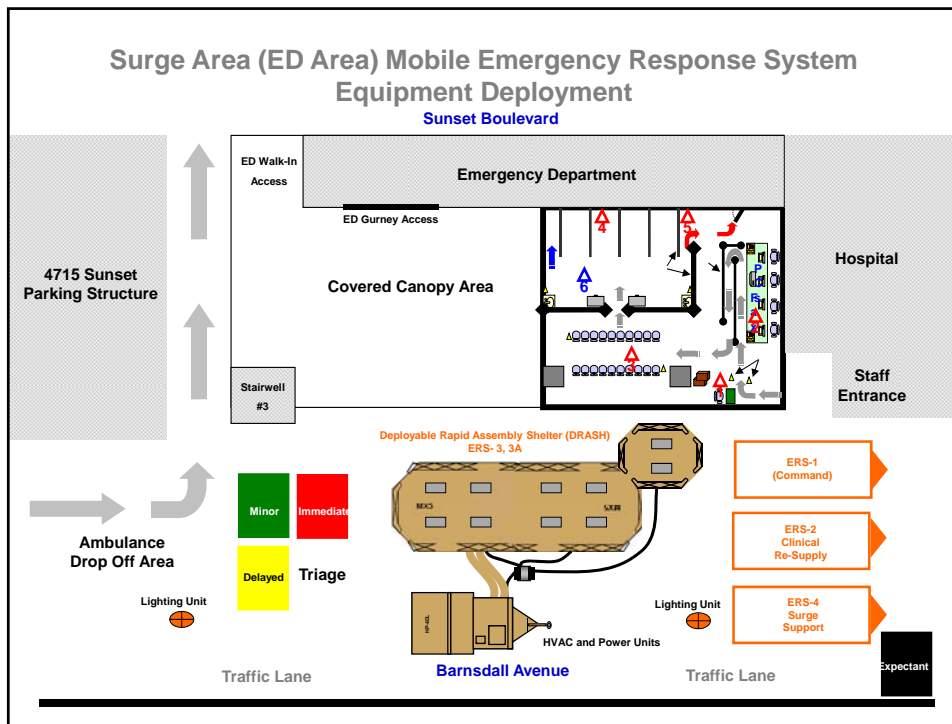


ED Surge Area Ebola Response Operations Decon Pathway



ED Surge Area (Ebola Setup)



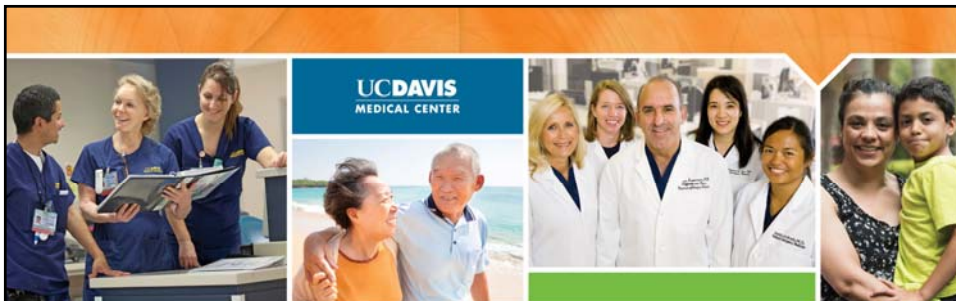


KP LAMC Emerging Infectious Diseases Response Program



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Preparing for Emergencies Emerging Infectious Disease Response Team

Karrin Dunbar, RN, BSN, MS

Conflict of Interest

- I have no conflict of interest and will not be discussing any off-label products

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Objectives

- Describe methods to cultivate a hybrid emergency response team
- Review modalities to maintain team competency
- Evaluate critical resources to transform teams

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History

- With the worldwide panic of Ebola, a team was assembled to treat any potential patients
- As the outbreak subsided, concern turned towards the potential of other infectious disease emergencies

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Emerging Infectious Disease Response Team (EIDRT)

- Cultivated from the volunteer Ebola team
- Is a highly specialized care team to meet the need should a patient with a highly infectious disease arrive in our hospital
- The goal of EIDRT is to ensure staff safety, maintain competency and be prepared for the next infectious disease

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Team Training Partners

- Infectious disease department
- Nursing education
- Team members

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Infection Prevention

- Content experts
- Provide curriculum to advance knowledge of a variety of infectious diseases

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Nursing Education

- Simulation Professionals
- Create scenarios from Infection Prevention content
- Construct an environment for the team practice and become proficient

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EIDRT Training Program

- Rigorous training program to educate and expose the team to high risk low volume events in a safe protected environment
- Components
 - Didactic
 - Simulation
 - Deliberate practice

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Lecture Series Courses

- **Hemorrhagic Fevers Lecture**
 - Ebola
 - Lassa
 - Marburg
- **Respiratory Illness Lecture**
 - SARS
 - MERS
 - “Bird flu”
 - “Swine flu”
- **Vector Borne Illness Lecture**
 - West Nile
 - Dengue
 - Chikungunya
 - Malaria
- **Outbreaks Lecture**
 - Norovirus
 - Pertussis
 - Chicken pox
 - Measles

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2016 EIDRT TRAINING

EMERGING INFECTIOUS DISEASE RESPONSE TEAM

February 16, 2016	<u>Update meeting</u>	0730-0830	Davis 8712
March 10, 2016	<u>Learning Series #1</u> Hemorrhagic Fevers Course # 09134	0800-1630	ACC- 3010A
May 12, 2016	<u>Simulation</u> Hemorrhagic Fevers	#1 @ 0800-1130 #2 @ 1230-1600	East 7 room 7125
June 9, 2016	<u>Learning Series #2</u> Vector Borne Illness Course # 09137	0800-1630	ACC- 3010A
September 8, 2016	<u>Learning Series #3</u> Respiratory Illness Course # 09136	0800-1630	ACC- 3010A
November 10, 2016	<u>Simulation</u> Vector Borne & Respiratory	#1 @ 0800-1130 #2 @ 1230-1600	East 7 room 7125
December 8, 2016	<u>Learning Series #4</u> Outbreaks Course # 09135	0800-1630	ACC- 3010A
May 11, 2017	<u>Simulation</u> Outbreaks	#1 @ 0800-1130 #2 @ 1230-1600	East 7 room 7125

- **Dates for the year**
 - Topics
 - Location
 - Course numbers
 - Times

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Lecture Series Objectives

- Define Emerging Infectious Disease
- Identify the cause of diseases
- Explain similarities and differences between diseases
- Describe isolation precautions needed for diseases

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Class Agenda

Introductions – Review of the Day –
Team Update

Assess illness prevalence

- State, Community, Globally
- Transmission, Signs and symptoms, Treatment, Patient care, Isolation precautions
- Group discussion similarities and differences of diseases

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EIDRT Quick Guide

Creation and Update of Guide

- Isolation – Type
- Personal Protective Equipment (PPE) – Type
- Transmission – Method

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Emerging Infectious Disease Quick Guide 2016

Hemorrhagic Fevers					
Disease	Transmission Method	Isolation	PPE	Signs & Symptoms	Patient Care
Ebola <ul style="list-style-type: none"> • Tropical • Unknown host • Most Severe • Direct Contact • Droplet • 25%-90% fatal • Not infectious until s/sx • 2-21 days post exposure 	<ul style="list-style-type: none"> • Blood Body • Human to Human • Stays in breast milk for 16 mos • Bush meet • Ocular • Semen 	<ul style="list-style-type: none"> • Strict contact • Droplet 	<ul style="list-style-type: none"> • Full PPE • Highest Level • Hemorrhagic PPE 	<ul style="list-style-type: none"> • Flu like • Muscle • Sore throat • Head ache • Diarrhea • Vomiting • Rash • Temperature • Bleeding • Onset 2-21 days 	<ul style="list-style-type: none"> • Supportive care • Treat symptoms • Fluid/Blood/electrolytes • Minimal Diagnostics
Disease	Transmission Method	Isolation	PPE	Signs & Symptoms	Patient Care
Lassa <ul style="list-style-type: none"> • 1-15% fatal • Endemic • Dry regions/drought seasons • Host-rat 	<ul style="list-style-type: none"> • Rat feces/urine • Ingested • Inhaled/aerosolized dust • Human to human blood body fluid 	<ul style="list-style-type: none"> • Strict Contact 	<ul style="list-style-type: none"> • Full PPE 	<ul style="list-style-type: none"> • 1 to 3 week onset • No rash Neuro deficit • Hearing loss w/survival • Death occurs in 2 weeks • 20% MOD 	<ul style="list-style-type: none"> • Supportive • Ribavirin • Immunotherapy survivors • Treat complicating infections
Disease	Transmission Method	Isolation	PPE	Signs & Symptoms	Patient Care
Marburg <ul style="list-style-type: none"> • Scrotal sloughing • Large demographic • Host- fruit bat • Tropical areas/caves • 25-88% fatality • Incubation 5-10 days 	<ul style="list-style-type: none"> • Direct contact blood/body fluids • Ill/dead primates • Bush meet • Needle sticks 	<ul style="list-style-type: none"> • Strict 	<ul style="list-style-type: none"> • Full PPE 	<ul style="list-style-type: none"> • Flu like symptoms • Scrotal sloughing • Painful rash • DIC • Bleeding • Neurologic changes- psychosis, aggression 	<ul style="list-style-type: none"> • Supportive • Fluid, blood, electrolytes, clotting factors • Monitor oxygenation saturation

Skills

- **Proficiency and competency perfected**
 - Simulation
 - Deliberate practice

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Simulation

- Organize and practice nursing care for patients in a simulated environment
- Accurate selection of PPE
 - Safely don and doff PPE
 - Provide appropriate nursing care for specific disease

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Team Cohesiveness and Commitment

- EIDRT hospital website
- Communication
- Connectivity
- Team pride

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Highlight Team Members

Nurses Making a Difference

Paige Sisk BSN, RN

Home Unit: SICU

Specialty Certifications: TNCC, ATCN

Years at UCDMC: 11

Fun Fact: Paige loves to travel. She has visited, South America, North America, Europe and Africa. Her favorite activity is long walks on the beach listening to Kenny G.



Become A Member




What can YOU do?

If you are interested in joining the Emerging Infectious Disease Response Team (EIDRT) please click on the link below to submit an interest form.

Become a Teammember of the Response Team now!

Fill out the (PDF) form today





Emerging Infectious Disease - Response Team (EIDRT)
Volunteer Now!

Name:

Email Address:

Contact Phone #:

Specialty Certifications:

Department:

Shift:

FT / PT :


Additional Comments:

Submit

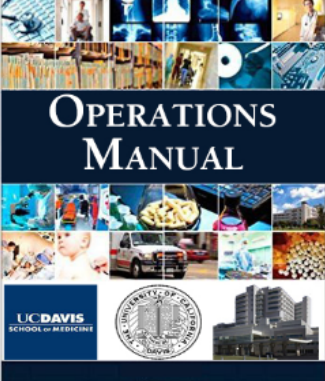
Thank You For Volunteering

Emailed to
Manager &
Education
Coordinator

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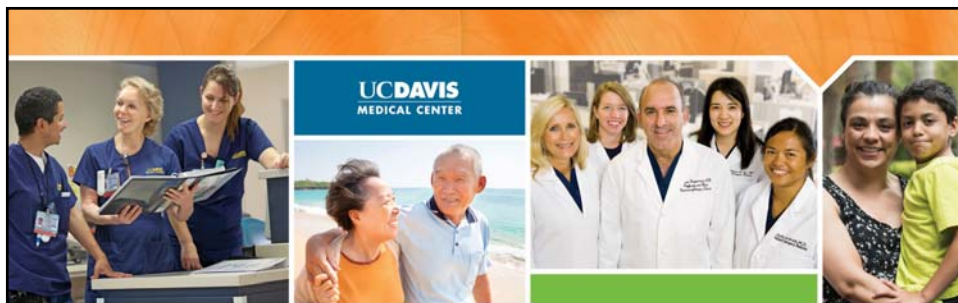
**OPERATIONS
MANUAL**



At UCDMC, the Ebola Care Team is being molded into the new Emerging Infectious Disease Response Team (EIDRT). This is a team of dedicated nurses, laboratory technicians, radiology technicians, and support staff that is trained to respond when a patient with a novel, or unknown infectious disease is identified. This team is highly trained in the use of extensive Personal Protective Equipment (PPE), specialized care functions, and communication techniques. The EIDRT is responsible for attending drills and practice sessions monthly to maintain competency in these skills. They will be the team caring for any patient admitted with a disease requiring special precautions, such as Ebola.

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UCDHS has cultivated a team that has advanced skills, developed safe procedures and processes, and maintained competency to care for a variety of potential infectious patients.



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Questions?

