

BLUEGRASS HEALTHCARE COALITION MEETING

AUGUST 22ND, 2024

| TOPIC | DISCUSSION | ACTION/FOLLOW-UP |
|--------------------------------------|---|--|
| Approval of Previous Meeting Minutes | <ul style="list-style-type: none"> Minutes approved without questions or edits – motion by Mike Hennigan; 2nd by Jacob Cook | |
| EEI Board | <ul style="list-style-type: none"> Dave showed attendees the Essential Elements of Information (EEI) board that displays hospital information for which we request updates during exercises, drills, and real-world events. This information is collected using the facility-specific ReadyOp form link we have sent members previously. The board has conditional formatting to color cells indicating any current status that is not “normal operations” as well as the time since the information was last updated – not all hospitals update this information through their ReadyOp link routinely, so any entries that are over 2 days old will be indicated in red. Tara made the point that we may want to work toward updating this board and associated EEI form to provide a more <i>operational</i> picture of facility capacity. There is some grey area regarding licensed beds vs staffed beds as well as what a facility’s true surge capacity is. Working toward this board being more of a real-time, accurate depiction of each facility during an emergency would give it the same or similar user functionality as the patient-tracking board. Dave also addressed the issue with hospitals often needing to be resent their form link because they did not save his initial email, or a desktop shortcut/web bookmark wasn’t created. This often results in delayed entries. | <p>More discussions will be necessary regarding any proposed changes as we move away from using WebEOC and toward using the EEI data as our main repository of hospital status info in an emergency or disaster.</p> |
| Hazard Vulnerability Analysis (HVA) | <ul style="list-style-type: none"> The APSR Risk Assessment Tool that Dave had previously mentioned as a possible method for collecting member HVA data will not be required, per Cpt. Link, our ASPR HPP Project Officer. Facilities will be able to use whatever tool they would prefer. The Executive Committee will be reviewing our previous regional HVA results and will determine when we will be requesting each individual facility’s results to roll-up into an updated regional HVA. | |
| Review of Coalition Response Plans | <ul style="list-style-type: none"> Given our new 5-year grant cycle, our HPP deliverable have changed, and in some cases considerably. We will therefore be reviewing and possibly making changes to our coalition response plans to align with our new HPP work plan. | |
| Budget FY 24/25 | <ul style="list-style-type: none"> With COVID funding having ended, ASPR has decided to maintain level funding for one additional year and then will reevaluate for BP 2-5. As of the time of this meeting, we still do not have a definitive number regarding our coalition budget for this year, though we have been told it may be slightly lower than the previous year(s) due to changes in coalition allocations and salaries (i.e. increases and paying for small percentages of non-field staff salaries). We do predict KY will have level, or possibly increased funding, for BP 2-5 given the number of federally declared disaster we have experienced in recent years. | <p>Work continues toward develop and increase our 501c3 non-profit funding to supplement and offset any federal funding changes.</p> |

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| <p>Presentation by Tim Carpenter, IT Director at Taylor Regional Medical Center</p> | <ul style="list-style-type: none"> Tim Carpenter shared his knowledge and expertise from more than 30 years in Information Technology and his direct experience from managing a recent cyber attack at Taylor Regional Medical Center. His presentation also included invaluable information on how organizations and individuals can improve their online and offline technology security and how bad actors attempts to overcome and circumvent these efforts. <p>***Due to technical difficulties (no pun intended), additional discussion during his presentation was unable to be captured, but his presentation can be found below these minutes***</p> | |
| <p>Trainings/Exercises</p> | <ul style="list-style-type: none"> ICS 300: Oct. 28th-30th at Lexington Airport Fire Station #34, register on KYEM website NDMS Bed Reporting Exercise: Sept. 12th EI and Redundant Communications Drill: Sept. 24th Upcoming Triage Tuesdays: Sept. 2nd, Oct. 1st, Nov. 5th, Dec. 3rd Senior Living Communities Preparedness Education Day: Nov. 12th @ Sayre Christian Village ALICE training (Active Shooter): Reach out to Dave/Rebecca Lynn to schedule | |
| <p>Senior Living Communities</p> | <ul style="list-style-type: none"> Next SLC Meeting: Sept. 10th @ Sayre Christian Village, 9:00am-10:30am | |
| <p>RPC Updates</p> | <ul style="list-style-type: none"> Rebecca and Vicki will begin scheduling their Q1 visits to LHDs in Sept.; 3 new preparedness coordinators in Rebecca’s region – Mercer, Powell, and Lincoln; Discussed some of the feedback and follow-up coming out of the Preparedness Summit that was held the previous two days with LHDs, KDPH, and HCCs. One comment of note that might apply to those attending this meeting came during the presentation given by our new KYEM Director who mentioned that FEMA reimbursement requests will require pre-disaster documentation for buildings and property. This should prompt agencies to document, and preferably with photos, the structure and status of buildings, parking lots, equipment, etc. to be able to show that any damage was a result from the disaster and was not preexisting.; September is Preparedness Month! Engage with your communities and make updates to your community-facing information, like websites and Facebook pages.; Solar storm activity is peaking soon and may result in more and longer outages. | |
| <p>MRC Updates</p> | <ul style="list-style-type: none"> Have surpassed 150 MRC volunteers in our region and are continuing to increase the total number of fully credentialed volunteers as well; On Sept. 19th Mercer Co. HD will be hosting a Volunteers and Donations Mgmt. training; Keep Stacy informed on any upcoming preparedness events that could utilize MRC volunteers or provide an opportunity to promote and recruit for MRC; The kickoff for partnering with HOSA students to participate | |

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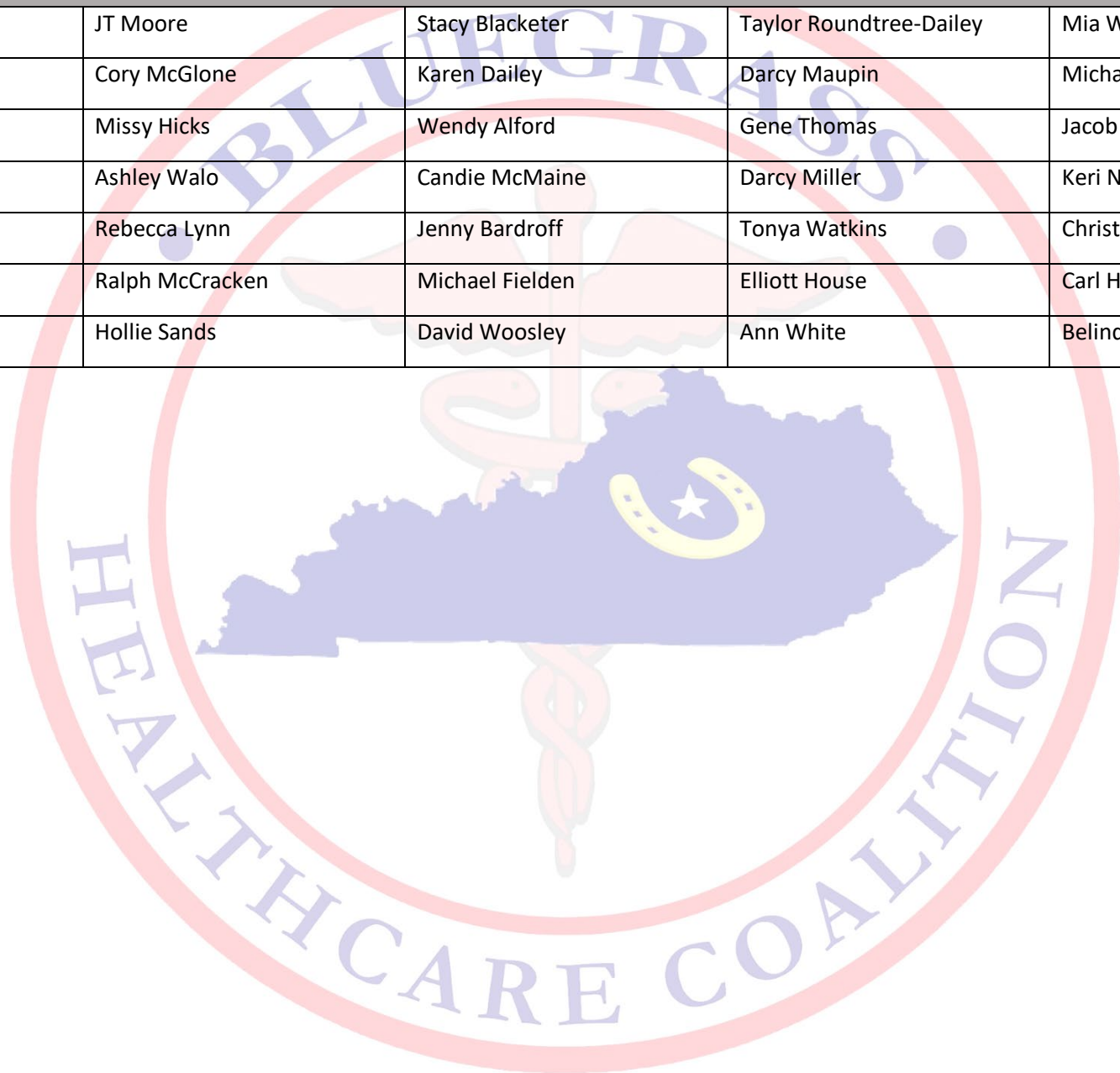
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| | <p>in the recruitment challenge has gone well and Stacy has heard from additional teachers interested in joining. Continuing to engage with these schools and students interested in participating can go a long way toward increasing our region’s MRC capabilities, especially since there are a number of counties that still don’t have MRC volunteers yet.</p> | |
| NDMS Updates | <ul style="list-style-type: none"> • Elliott reminded everyone of the upcoming NDMS Bed Reporting Exercise on Sept. 12th; Reported out on the BG Airport full-scale exercise that took place since last meeting. The exercise went very well, and Elliott was very appreciative of the members who participated. An After-Action Report will be sent out to participants noting the strengths and areas of improvement identified during the exercise. | |
| Epi Updates | <ul style="list-style-type: none"> • Capital Region – Respiratory season has arrived which has resulted in increasing COVID cases, including outbreaks in nearly every LTC within the region; Still seeing increasing pertussis cases, so work is being done to share tool kits and health alerts with the community, and especially in schools.; Mpox has been declared a global health emergency, but we do not currently have any cases in our coalition region. This may, however, become something we will need to address and be prepared for. • Bluegrass Region – COVID outbreaks in LTCs and increasing cases regionally; Flu cases beginning to be seen; Amber, Hollie, Mia, and Ronnie had the first of a recurring meeting with the hospital Infection Preventionists within our region. Having these meeting will help to keep everyone informed on epi-related concerns within facilities and throughout the region as well as increase and improve collaborative relationships with the IPs. • Lexington-Fayette – Still in the midst of a pertussis outbreak, though there have been no new cases this week even though school has begun, and most cases are school-aged children. Sent out an informational flyer to parents on what to be watching for and what to do if their child begins showing symptoms, including requesting pertussis testing be performed since a number of cases were initially diagnosed as allergies by PCPs due to the mild nature of symptoms and the fact that the individuals were fully vaccinated; performed an environmental assessment, including sample collection and testing, following notification by CDC about two legionella cases involving a hotel.; Investigated an imported Dengue case (mosquito-borne) which was fortunately discovered early allowing for early intervention with treatment.; CDC HAN Alert was sent out regarding Oropouche which is a mosquito-borne virus typically seen in South America but has been found in Cuba as well. It has vertical transmission, meaning pregnant individuals can transmit it to the fetus.; Fayette Co. will be having their annual rabies clinic on Sept. 17th at Castlewood Park.; Flu clinic scheduled at Fayette Mall on Oct. 3rd. | |
| Next Coalition Meeting | <ul style="list-style-type: none"> • Oct 24th @ BEAUMONT BRANCH LIBRARY in Lexington | |

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ATTENDEES

| | | | | |
|-----------------|-----------------|-----------------|-------------------------|------------------|
| Dave Carney | JT Moore | Stacy Blacketer | Taylor Roundtree-Dailey | Mia Williams |
| Matthew Simpson | Cory McGlone | Karen Dailey | Darcy Maupin | Michael Hennigan |
| Barrett Schoeck | Missy Hicks | Wendy Alford | Gene Thomas | Jacob Cook |
| Danni Hutson | Ashley Walo | Candie McMaine | Darcy Miller | Keri Noe |
| Michael Curran | Rebecca Lynn | Jenny Bardroff | Tonya Watkins | Christy Nentwick |
| Andrea Brown | Ralph McCracken | Michael Fielden | Elliott House | Carl Hinson |
| Lindsay Ames | Hollie Sands | David Woosley | Ann White | Belinda Corder |



Cyber Attack

REAL WORLD EXPERIENCE FROM A KENTUCKY HOSPITAL

Attack Overview

- ▶ January 19, 2022 at 12:16 am
- ▶ All server systems, clinical and business, were inoperable
- ▶ 96% virtual server system configuration
 - ▶ The attack encrypted the virtual server system layer
- ▶ Network connections and internet access not impacted

Recovery Overview

- ▶ Electronic Medical Record System online in March 2022
 - ▶ Fully functional April 2022
- ▶ On premise Email System online in May 2022
 - ▶ Conversion to cloud based email in June 2022
- ▶ Telephone system available in June 2022
 - ▶ Voice mail available in July 2022

Patient Care Impact

- ▶ Clinical Paper charting
 - ▶ Newer providers and clinical staff had not experienced paper charting
- ▶ Pharmacy
 - ▶ Outpatient pharmacy could not easily fill new medications
- ▶ Laboratory
 - ▶ Test results not available online

Daily Operations Impact

- ▶ Business Office
 - ▶ Electronic Claims could not be processed
- ▶ Material Management
 - ▶ Could not electronically order critical supplies
- ▶ Employees could not communication via email
- ▶ Telephone system was inoperable (internal and external calls)
- ▶ All on premise electronic systems were down

Staff Impact

- ▶ Clinical and Business staff lost confidence in IT
- ▶ IT Impact
 - ▶ Rebuild of systems delayed due to investigations
 - ▶ Repaired/Rebuilt 160 server systems and applications
 - ▶ Worked 93 - 12 hour days without a break

Bottom Line

- ▶ Millions lost in revenue
- ▶ We did not go on diversion
- ▶ Negative impact to the hospital's reputation
- ▶ Every task was slow and much more complex due to lack of technology
- ▶ Employee frustration at an all time high

Steps for Technology Recovery & Improvement

- ▶ The IT Team rebuilt, reinstalled and reconfigured all impacted server systems to reduce the lead time to return to production
 - ▶ All systems on premise initially
- ▶ Computing environment improvement steps:
 - ▶ Moved to a hybrid technology model utilizing cloud and on premise configurations
 - ▶ Moved to cloud based email and office software system
 - ▶ Implemented industry standard control systems
 - ▶ Implemented monitoring system for all network and server systems

Security Improvement Steps

- ▶ Implemented processes and software:
 - ▶ User audit process for quarterly review
 - ▶ Security software on each server and end point
 - ▶ Multi-factor authentication for all external access
 - ▶ Scanning for rogue devices (wireless and wired)
 - ▶ Turned off Guest Wi-Fi

Planned Security Improvements

- ▶ Multi-Factor authentication internally
- ▶ Full integration of the existing security platforms (3 layers)
- ▶ Completion of auditing automation
- ▶ Implementation of intrusion protection system
- ▶ Limit use of USB/CD storage devices

Real Life Threats (not always Ransomware)

- ▶ Social Engineering
 - ▶ MGM Grand / Caesars – Las Vegas
 - ▶ Banking information change – email based
- ▶ Phishing and Spear Phishing email
 - ▶ Happens in personal and professional settings
- ▶ Text messaging
 - ▶ Undeliverable US Postal Service package – Hong Kong based
- ▶ Hacking devices
 - ▶ Flipper Zero (ID Cards, Hotel Keys, Car, Garage, Wi-Fi, etc)
 - ▶ Hack RF (Wi-Fi, Any radio signal such as airplane, police, etc)
 - ▶ Wi-Fi Pineapple (Man in the middle attack, etc)
- ▶ \$1 dollar donation
 - ▶ Uses charity and hospital systems to check stolen payment card information

Questions?