

## In Today's Issue

[IDPH Order Allowing Schools to Administer Meds for Opioid Overdoses](#)

[ISHMPR to Host Networking Event on March 7 in O'Fallon](#)

[Webinar: Integrating Behavioral Health in Primary Care](#)

[Healthcare Workers Observe Discrimination Against Patients](#)

[U.S. and U.K. Disrupt Lockbit Ransomware Variant](#)

[COVID-19 Information](#)

[Briefly Noted](#)

### IDPH Order Allowing Schools to Administer Meds for Opioid Overdoses

The Illinois Dept. of Public Health (IDPH) has issued an updated [standing order](#) allowing schools to keep a supply of medications like naloxone on hand, and permitting school nurses or other trained personnel to administer them to students in the event of an opioid overdose.

The updated order, signed by IDPH Director Dr. Sameer Vohra, builds upon authority established in 2015 to expand access to naloxone, which can reverse the effects of an opioid overdose. The new order makes clear that schools can obtain a supply of such medications, known as opioid "antagonists," without a prescription, and that a school nurse or other person who has been trained in their use may administer the medications to someone exhibiting signs of an overdose on school property. Under [Public Act 103-0348](#), which took effect Jan. 1, 2024, public and private schools are now required to keep a supply of an opioid antagonist on hand to be used in the event of an overdose. Illinois is just one of nine states to have this requirement for schools.

The revised order also adds nalmeferene as an approved opioid antagonist. In May 2023, the U.S. Food and Drug Administration approved nalmeferene for use on persons 12 years of age and older.

Illinois State Board of Education records show that during the 2022-23 school year, there were 10 instances where school personnel administered an opioid antagonist to a student exhibiting signs of an overdose. Each of the incidents happened during regular school hours.

Administration of an opioid antagonist reduces the time to treatment for someone experiencing an overdose. More than one dose of the medication may be required. The revised standing order is in effect through early February 2025.

### ISHMPR to Host Networking Event on March 7 in O'Fallon

If you are looking for an opportunity to connect and share ideas with your fellow healthcare marketing and public relations experts, consider attending the Illinois Society for Healthcare Marketing and Public Relations (ISHMPR) March Networking Meet Up.

The event will be held on March 7 from 10 a.m.-2 p.m. at SIHF Healthcare in O'Fallon. Attendees will have the chance to collaborate and learn more about the following topics and more:

- Guidance changes from the U.S. Dept. of Health and Human Services regarding Protected Health Information and HIPAA in digital marketing; and
- Employee engagement and community education.

To learn more about ISHMPR or to become a member, [click here](#). To register for the event, [click here](#).

#### Webinar: Integrating Behavioral Health in Primary Care

A webinar on March 7 from 1-2:15 p.m. CT will highlight Agency for Healthcare Research and Quality (AHRQ)-funded research on the integration of behavioral health in primary care.

Sponsored by AHRQ's National Center for Excellence in Primary Care Research, the webinar will feature AHRQ grantees who are researching behavioral health tools and interventions in ambulatory care settings. It will also highlight tools and research from The Academy, AHRQ's national resource for integrating behavioral health and primary care.

Attendees will be encouraged to participate in a Q&A session. Register for the webinar.

#### Healthcare Workers Observe Discrimination Against Patients

A large national survey conducted by the Commonwealth Fund and the African American Research Collaborative found that nearly half (47%) of all healthcare workers say they have personally witnessed discrimination against patients, and more than half consider it a "major problem or crisis" in healthcare.

According to the study, about half of healthcare workers agreed that they've observed that medical providers can be more accepting of white patients engaging in self-advocacy than they are of patients of color. In fact, survey authors said one of the most notable findings is the 20 percentage point difference between Black healthcare workers and healthcare workers overall (68% vs. 48%) who agreed that medical providers can be more accepting of white patients' self-advocacy compared to Black patients' self-advocacy. Similarly, Latino healthcare workers were 15 percentage points more likely than healthcare workers overall to agree that patients who primarily speak a language other than English may not always receive equal-quality treatment from healthcare providers as compared to English-dominant speaking patients.

Healthcare workers' perceptions of the magnitude of the problem varied by the patients they interact with and where they work. Mental healthcare workers are more likely to say racism is a major problem or crisis compared to the healthcare workforce as a whole (68% vs. 52%). Additionally, while 52% of healthcare workers in facilities with majority-white patients identified discrimination based on race or ethnicity as a crisis or major problem, that number jumped to 79% of healthcare workers in facilities with majority-Black patients and 66% of those working in facilities with majority-Latino patients.

The survey found that racism in healthcare impacts not only patients but takes a serious toll on healthcare workers. Black, Latino, and Asian American and Pacific Islander healthcare workers in the study said that dealing with racial or ethnic discrimination in healthcare creates some or a lot of stress for them. Additionally, younger workers were much more likely than their older colleagues to say they have witnessed discrimination against patients, more likely to report that racism against patients is a crisis and more likely to experience stress as a result.

The survey tested multiple strategies to see which of them healthcare workers thought would be most effective at decreasing discrimination based on race or ethnicity in healthcare. The following solutions were deemed very or somewhat effective by two-thirds or more of the workers surveyed:

- Provide an easy way for patients and healthcare staff to anonymously report situations involving racism or discrimination;
- Examine policies to be sure they result in equitable outcomes;
- Require classes on discrimination at professional schools;
- Create opportunities to listen to patients of color and healthcare professionals of color;
- Examine treatment of non-English-speaking patients; and
- Train healthcare staff to spot discrimination.

#### U.S. and U.K. Disrupt Lockbit Ransomware Variant

As early as January 2020, LockkBit ransomware group launched crippling attacks against critical infrastructure and public and

private organizations around the world. Considered one of the most active ransomware groups in the world, LockBit has targeted over 2,000 victims and received more than \$120 million in ransom payments.

Earlier this week, it was [announced](#) that the U.K. National Crime Agency's (NCA) Cyber Division, working in cooperation with the U.S. Justice Department, FBI and other international law enforcement partners, disrupted the LockBit ransomware group's operation by seizing numerous public-facing websites used by LockBit to connect to the organization's infrastructure and by seizing control of servers used by LockBit administrators. These actions have disrupted the ability of LockBit actors to attack and encrypt networks and extort victims by threatening to publish stolen data.

Additionally, the NCA, in cooperation with the FBI and international law enforcement partners, has developed decryption capabilities that may enable hundreds of victims around the world to restore systems encrypted using the LockBit ransomware variant. Victims targeted by this malware are encouraged to contact the FBI [here](#) to enable law enforcement to determine whether affected systems can be successfully deployed.

#### COVID-19 Information

The Illinois Dept. of Public Health (IDPH) has launched a weekly [Infectious Respiratory Disease Surveillance Dashboard](#) that will be updated weekly on Friday. This report provides the public with the latest data on hospital visits, seasonal trends, lab test positivity and demographic data.

[Click here](#) to visit the IDPH COVID-19 resources webpage. IDPH will continue to report the weekly number of people with COVID-19 admitted to hospitals from emergency departments, deaths and vaccinations, with COVID-19, influenza and respiratory syncytial virus information also reported through the dashboard of the [Illinois Wastewater Surveillance System](#).

#### Briefly Noted

UPI [reports](#) a new study found people exposed to high levels of traffic-related air pollution are more likely to have more amyloid plaques in their brain, a condition associated with Alzheimer's disease. Seniors were nearly twice as likely to have more amyloid plaques if, in the year before their death, they lived in places with high concentrations of particle pollution caused by traffic, study results show.

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