

Expert: Patrick P. Rose

Title of the Session: Implementing a robust public health security strategy to the all-hazards disaster preparedness approach in order to limit second-order public health disasters

Date: 17/11/2014 to 23/11/2014

Summary

Throughout disaster operations, one of the more complex issues disaster management professionals have to contend with is implementing crisis standards of care (i.e., treating injured individuals, caring for individuals with functional needs, providing routine medical services) in a resource constrained environment. Regardless of the type of impending disaster scenario, the impact will undoubtedly degrade into a humanitarian crisis. Cascading effects are prone to strain operations much of which involves dealing with the public health impact. Overwhelmed and understaffed, the struggle is to figure out how to leverage existing resources to prevent a second-order impact such as public health disaster.

Context

Whatever the disaster scenario is that we are faced with, the biggest burden is to meet the needs of those displaced and prevent a public health disaster from occurring. The challenges often faced are enormous and can be exacerbated simply by the sheer volume of persons impacted by the disaster. Immediately, healthcare capacities will become strained as casualties require life-saving treatments and worried-well (e.g., individuals psychologically effected, stressed individuals with pre-existing conditions) require support; not to mention healthy individuals will continue to need basic healthcare services. In such a stressful situation survivors will be vulnerable, which demands that the coordination of disaster operations is pre-meditated and expedited.

Public health disasters are a very unique scenario because they do not always directly follow physical destruction. Sometimes the public health disaster is a second-order effect of another disaster. In either case, it will not be immediately evident that a public health disaster is imminent. For this reason, it is even more important to be able to recognize signs that a public health disaster is developing and respond appropriately. The key to being successful is ensuring, a public health disaster is a whole-of-government responsibility; not just the responsibility of healthcare professionals.

Early on, disaster response operations chart a path for how recovery strategies will be most effective. Meanwhile not only does the focus of the response have to be on life-saving, but also life-sustaining operations. As for any type of disaster we already know that it is important to implement a whole-of-government approach to disaster operations. The key to successfully executing such a disaster response operation is in having the situational awareness to be able to reallocate resources as needed. Sometimes resources and assets primarily designated for one type of operation may provide invaluable for another; another time the operations capability of an organization may be able to provide resources and assets where other organizations have a gap. For example, militaries or law enforcement

often have the most resources and assets available along with a highly structured response capability. For public health disasters, certain organizations may not immediately see themselves as playing a role in responding to a public health disaster; however, these agencies' capabilities can provide immensely valuable in a public health disaster. Integration of different response organizations needs to occur as part of preparedness efforts, especially in the case of a public health disaster. It is vital to include all government agencies and educate disaster responders of the operational constraints of public health disaster, so we can build better capacity to respond successfully.