



Environmental Health Preparedness and Recovery Training

A series highlighting challenges for emergency response

Children's Preparedness – National Guidance and Resources for Addressing the Unique Needs of Children

Florida Department of Health
Division of Environmental Health

We'll get started in a minute...





Environmental Health Preparedness and Recovery Training

A series highlighting challenges for emergency response

Children's Preparedness – National Guidance and Resources for Addressing the Unique Needs of Children

Let's get started!



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Housekeeping

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- Post-test required for course completion
- Evaluation is appreciated
- Course closes in two weeks
- Will be made available on FL DOH YouTube channel in May
- CEUs are available for Lab and EH Professionals (login to Trak-It is required)



Housekeeping

- Webinar is being recorded
- Discussion period at the end of the presentation
 - WebEx chat feature
 - All lines muted
 - Press #6 to un-mute
 - Press *6 to mute
- Use the “chat” feature to submit a question or comment at any time during the presentation
- WebEx connections intended for CHDs and partner agencies

Presenters

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Save the Children.

Advisor, Domestic Emergencies



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Save the Children.

Deputy Director

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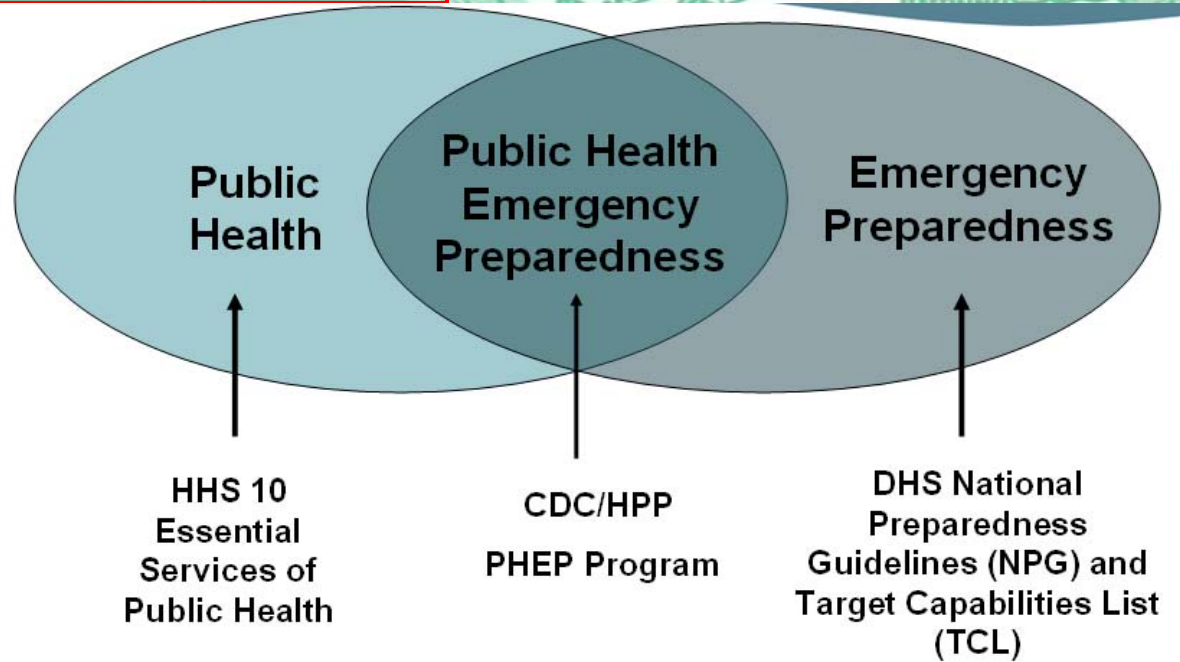
Objectives

- Recognize the needs of children and youth in emergencies
- Describe the current national efforts around emergency preparedness for children and youth
- Gain the ability to locate resources addressing children's preparedness
- Facilitate what Health Care professionals and emergency responders can do to participate in children's community preparedness



Purpose: National Health Security Strategy

minimize the risks associated with a wide range of potential large-scale incidents that put the health and well-being of the Nation's people at risk, whether at home, in the workplace, or in any other setting.



Florida's Public Health and Medical Strategic Plan

Goal #6 Community Resilience – Community resilience requires an informed, empowered and resilient public and a prepared health care system. This goal encompasses Community Health Care System Resilience, the Community Preparedness and Participation Capability, the Mass Care Capability, and the Critical Infrastructure Protections Capability



Florida's Public Health and Medical Strategic Plan

Themes:

- 1-meeting the needs of vulnerable populations,
- 2-developing a competent and trained workforce,
- 3-building sustainable processes, and
- 4-monitoring and measuring progress



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At-Risk and Vulnerable Individuals

Children are classified in most federal/state plans as.....
“At risk populations”
“Vulnerable populations”
“Underserved populations”

U.S. Department of Health & Human Services:

- **Children**, senior citizens, & pregnant women
- Those who have disabilities
- Live in institutionalized settings
- Are from diverse cultures
- Have limited English proficiency
- Non-English speaking
- Transportation disadvantaged
- Chronic medical disorders
- Pharmacological dependency





Children are involved directly or indirectly in the great majority of disasters and multicasualty incidents

Small problems...

...become big problems when they involve our children.





Children are NOT small adults

- Physical and physiological differences
 - Breathe faster -> ↑ inhalation
 - Less blood and fluid reserves
- Larger surface area to mass ratio
 - More sensitive to skin toxins
- Higher metabolic rate
- More sensitive to changes in temp
- Developmental vulnerabilities
 - Lack cognitive decision making

Response of Children to an Event Depends On

- Extent of exposure to the disaster
- Family distress
- Loss of loved ones and/or property
- Available support systems
- Disruption of school programs
- Community's response to the disaster
- Individual, family and community resilience



Key Concept

Pediatric disaster planning at all levels and for all hazards must be locally based and community-family centered



Pediatric Preparedness Systems

- Families, community, schools
- Local hospital preparedness
- State EMS-C, FCHA and CMS
- DOH Children's Preparedness Coalition
- Southeast Regional Pediatric Disaster Surge Response Network
- Federal and National Initiatives



Introduction to Save the Children



Save the Children is a member of Save the Children International, working to ensure the well-being and protection of children in more than 120 countries



US Disasters

In the US, Save the Children is the leading advocate and responder for children in emergencies

- Served as Chair of NCCD and on FEMA Advisory Council
- National and State VOAD member
- Serving on National Mass Care Council



Save the Children

US Disasters Goal: Reduce Risks for Children

- Federal and State Advocacy & Policy Change
- Preparedness, Response and Recovery Programming



FEDERAL ADVOCACY AND CHANGE:

Recent Progress to Protect Children in Disasters



National Commission on Children and Disasters (NCCD)

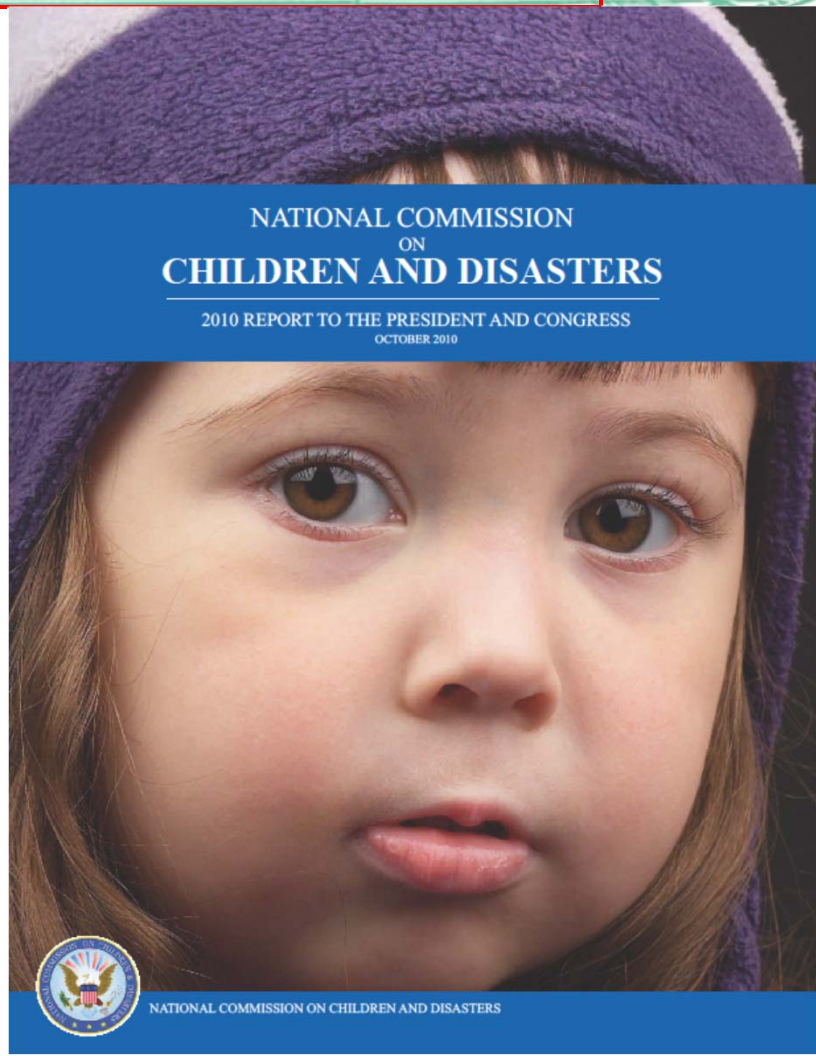
- Independent: Authorized by Congress in 2007 under Federal law; not tied to any agency
- Bipartisan: 10 members appointed by President, Senate and House leaders
- Diverse: Expertise drawn from several disciplines: pediatrics, state and local emergency management, non-governmental organizations, and state elected office



NCCD Purpose

- Assess needs of children related to preparedness, response and recovery from all-hazards and emergencies
- Report gaps and recommendations to the President and Congress

NCCD Final Report



NCCD: Overarching Findings

Children = 25% of the population, but...

- Placed into broad categories: “at-risk”
“vulnerable”
or “special needs” populations; annexes
- Unique needs unaddressed or misunderstood
- Homeland Security Grant \$\$: training, exercising, equipment intended for able-bodied adults
- Recovery \$\$: rebuilding infrastructure, not lives

NCCD Core Planning Principles

Integrate children across all phases of disasters


- Designate a lead agency and individual for coordinating children's needs
- Build on existing capabilities and requirements
- Adopt 'whole community' approach: Feds, states, locals, non-profits, private sector, parents and even children
- Encourage relationship building and cooperation *prior* to disasters
- Require accountability: institute goals and progress monitoring measures

NCCD: Evacuation and Tracking

- Contracts with private entities should ensure evacuation and transportation needs of children, including access and functional needs
- Evacuee and patient tracking systems include data relevant to identifying children
- Agencies must have legal and technological capabilities to share information

NCCCD: Mass Care Shelter Operations & Supplies

- National Standards and Indicators for Children in Mass Care Emergency Shelters
 - Children sheltered with families or caregivers
 - Designate area for families away from general population
 - Mechanism to address unaccompanied minors
 - Temporary respite care for children
- Shelter Supply List for Infants and Toddlers
 - Identifies basic supplies necessary to sustain and support 10 infants and children <4 years of age for a 24 hour period
 - Formula, baby food, diapers, feeding bottles, cribs, portable playpens



NCCD: Child Physical Health and Trauma

- Build pediatric medical capabilities of response teams through specific training, supplies and personnel
- Provide pediatric disaster clinical training for health care professionals who may treat children during an emergency
- Ensure hospital Emergency Departments provide effective care for children
- Expedite recovery of pediatric health and mental health care delivery systems in disaster-affected areas



NCCD: Mental and Behavioral Health

- Integrate mental and behavioral health for children into emergency plans
- Enhance pediatric disaster mental and behavioral health training for professionals and paraprofessionals
- Support long-term disaster-related mental health treatment for children



NCCD: Education

- Improve the preparedness of schools and school districts
- Enhance the ability of school personnel to support children recovering from a disaster
- Know federal resources available to reopen and restore the learning environment in a timely manner



NCCD: Child Care Disaster Preparedness

- Require disaster planning capabilities for child care providers
- Improve capacity to provide child care services in the immediate aftermath of and recovery from a disaster
 - FEMA reimburse state and local governments and private nonprofit organizations for child care provided in shelters or stand-alone facilities during the emergency sheltering period
 - HHS guidance for comprehensive statewide child care disaster plans
 - Save the Children/NACCRA guidance for child care providers



STATE ADVOCACY AND CHANGE:

Annual Report Card on Children and Emergency Preparedness

2012 Report Card - FLORIDA

- (1) K-12 School Plan for Multiple Disasters
- (2) Child Care- Family/Child Reunification Plan
- (3) Child Care – Evacuation and Relocation Site
- (4) Child Care- Plan Includes Children w/ Special Needs

*From: 2011 *Save the Children*, National Report Card on Protecting Children in Disasters

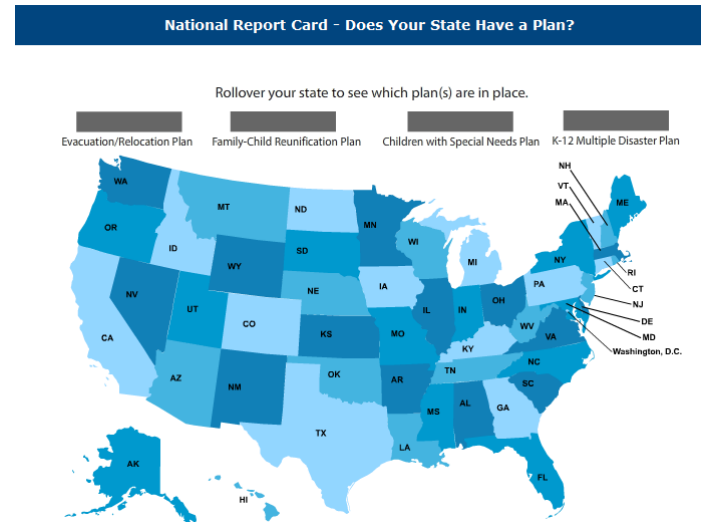
FL – Recommendation

Promote “guidance” consistent with existing regulations (as other states has done)

Include in that guidance provisions related to (1) relocation and (2) children with special needs

EXAMPLE OF California:

1. Statewide Child Care Program, California Department of Social Services.
 - CA has incorporated best practices for reunification and children with disabilities into their **policy manual**.





PREPAREDNESS: Changing the Way Communities Plan to Protect Children in Disasters

Resilient and Ready Communities Initiative

- **Save the Children**
 - National, State and Local focus on children in emergencies
- **Background**
 - Piloted in Tulsa, OK from 2007 - 2008
 - 2010 and 2011 sites
- **Purpose**
 - Disaster Resilient Communities for Children
 - Integrate national best practices into communities



Resilient and Ready Communities Initiative

- **Assessment**
 - Engage community agencies, organizations & stakeholders to assess child-focused readiness
- **Capacity Building Measures**
 - Strengthen community capacity to address the needs of children and focus on sustainability
- **Training and Implementation**
 - Address the emergency readiness and resilience of children, caregivers and emergency professionals



Planning Considerations

Planning Considerations

- During an emergency pregnant women and children require special provisions to ensure safety and well-being
- Children with special needs are at high risk for injury
- Children experiencing an incident that produces casualties and/or widespread damage may develop serious physical, emotional or psychological issues requiring specialized medical and mental health attention
- It is anticipated that many families will not be prepared to meet their basic needs in the 72 hours after a disaster. Primary and support agencies must coordinate essential items and services to children for at least the first 72 hours.

Planning Considerations

- The restoration of basic infrastructure (e.g. child care services, in-school programs, before- and after-school programs, camps) may take days, weeks, or months to re-open. Ongoing assistance may be required to fill gaps normally provided by child-focused infrastructure.
- Some families may require temporary shelter for an extended period of time.
- Children and families will be anxious to identify the location and status of family, friends and loved ones.
- Hazards may cause the separation of children from their family, resulting in high risks for children
- Individuals that pose threats to children will be present



Processes & Procedures



Preparedness

- Identify the extent to which children are included in emergency plans
- Identify gaps, strengths, capabilities and current resources.
- Create a comprehensive plan to address gaps, such as:
 - Evacuation, Mass Care, Physical and Mental Health, Long-Term Recovery, Exercises
- Provide training to planners, emergency responders and caregivers on children in emergencies
- Coordinate child-focused stockpiles



Response

- Coordinate the provision of, and access to, resources and/or services to meet the needs of children, pregnant women, and breastfeeding mothers
- Material resources and response measures will be taken to meet survival needs, address the protection needs of children, and create environments to foster child safety and well-being
- Upon activation of shelters, children's issues will be identified and addressed
- Coordinate the registration and tracking of children and pregnant women entering the sheltering system

Essential Elements of Information

- The ages of children affected
- Locations of affected children
- Transportation needs
- Food, medical, functional and access, and mental health needs
- Information on supporting children (for parents, caregivers, teachers, and children themselves)
- Partner organizations / agencies actively providing resources and/or services for children
- Status of the child care community / Availability of child care services for employees



Successful Community Planning

Policy Change and Practice State of Connecticut

Translating National Standards and Best Practices to Reality at the Local Level.



Governor of Connecticut Signing Emergency Preparedness Bill (SB 983) Championed by Save the Children

Advisory Council and Policy Change

- Moved CT from an “F” to an “A”

Child Care Preparedness Training

- Trained more than 350 providers (7,000 children)



Building Community Capacity *The Gulf Coast*

*Fostering life long partnerships –
Beginning,
Building,
Sustaining.*



Community Meeting – New Orleans

- Initiated dialogue and strengthened networks around child-focused issues

TA & Trainings - Coastal Mississippi

- **Partnerships** with the American Red Cross leverages resources and expands reach



Training and Implementation Houston, Texas

*Impacting Children,
Caregivers and
Communities through
training and
implementations.*



Resilient and Ready Workshop

- More than 1,000 children in 2011

Child-Friendly Space Training

- Training with Texas State Guard





MASSACHUSETTS:

Strengths, Gaps and Opportunities





Massachusetts

- Pediatric Medical Group
- In-depth analysis of Massachusetts medical gaps/successes of Children in Disasters
- Low Cost/No Cost Opportunities



- Multidisciplinary approach

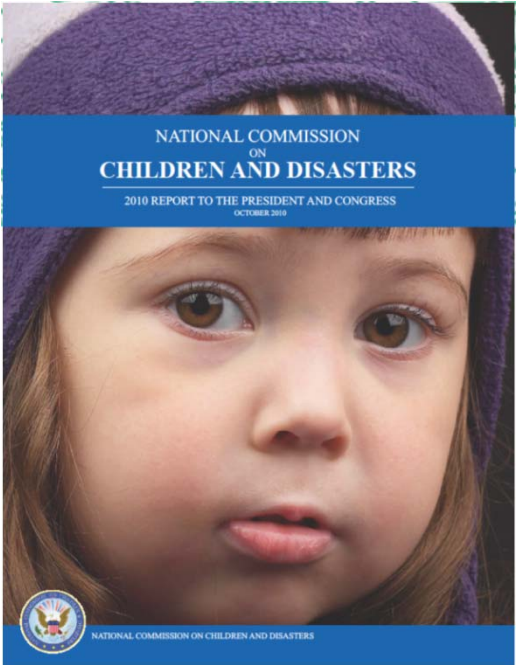
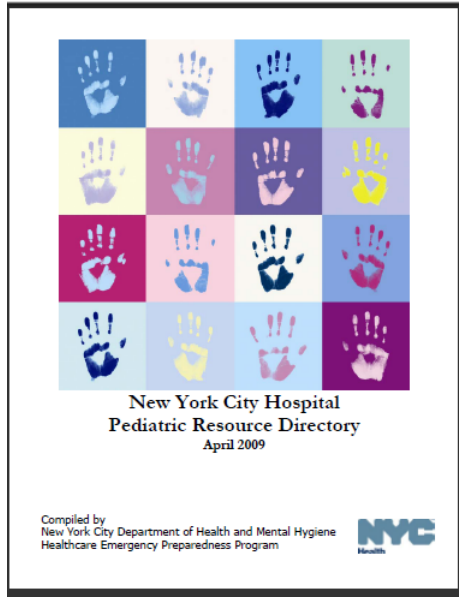


Harvard School of Public Health





- STATE
- PREHOSPITAL
- HOSPITAL



Massachusetts

STATE:

- State, regional and local plans for pediatric surge (including transport)
- Inventory of pediatric health care specialists
- Stockpile with pediatric countermeasures
- Children included in MA emergency operations base plans
- Mapping and inventory of pediatric resources in the state. GIS location of children
- Critical care Transport: altered standards of care



Massachusetts

PREHOSPITAL

- Followed EMSC requirements – most were in place
- Gaps:
 - off-line medical direction
 - No pediatric designation
 - Pediatric education not required
 - MCI plan to include children
 - EMS pediatric triage
 - EMS tracking and reunification capabilities
 - Regional pediatric coordinator



Massachusetts



HOSPITALS

- Major gap- State capabilities for pediatric medical care for disasters as well as day to day care unknown
- Areas to explore: pediatric ICU/floor beds; hospital pediatric subspecialty capabilities; tracking and reunification



Massachusetts

- Purposed final recommendations
 - Regulatory
 - Cost
 - Current Capacity/Resources
 - Operational



Massachusetts

TOP 4 RECOMENDATIONS

- Mechanism to request and share Medical Records/Identification (for reunification and medical care)
- Mandating pediatrics education for prehospital providers
- Conduct a gap analysis of pediatric capabilities for each hospital
- Regional pediatric coordinator/expert



Florida – Next Steps

✓ **Emergency Managers**

- ✓ Designate individual as children's needs coordinator
- ✓ Provide staff with briefings on children's unique needs and how they can protect and support children in their role

Upcoming Webinars/Training:

- ✓ Children's Preparedness: State Resources (summer 2012)
- ✓ Community Resilience (summer 2012)
- ✓ Children's Preparedness workshop (fall 2012)

Child Focused Community Approach

Emergency Planning and Training

- ✓ Include needs of children across emergency planning, training and exercises
- ✓ Designate individual as children's needs coordinator
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Steps Forward

- **Make it a priority** to improve emergency planning/response to meet the needs of children
- Review and share national guidance and best practice documents – *resource list*

Conclusions

- Children are small but they can present their own big issues in disaster preparedness

“children are not small adults”

- Community resiliency and children’s health are interrelated
- Children and families need advocates at all levels of disaster planning – national, state, regional and local
- Planning should be local, family-centered, and all-hazards based





Questions and Discussion

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- ***A list of resources will be emailed to all that registered!***

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