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NON-COMPETITIVE

Incorporating Essential Pediatric Considerations into Every Hospital's Disaster Policies

Children account for an estimated 20% of annual emergency department (ED) visits with the majority being treated in EDs that see fewer than 15 pediatric patients a day. They have unique anatomic, physiologic, behavioral, developmental, and psychosocial needs that differ from adults. In disaster scenarios or public health emergencies, these unique needs often result in specific vulnerabilities that contribute to children being more severely affected by these events. Disaster policies and preparedness must therefore specifically consider and plan for this unique and vulnerable population. Yet, only 47% of EDs reported having disaster plans that address children.

Our diverse workgroup of national pediatric disaster preparedness experts created this checklist to both highlight vital pediatric specific disaster preparedness considerations that should be included all hospital's disaster polices and to assist healthcare facilities in incorporating them into existing or future disaster plans. The checklist consists of 11 domains, from building surge capacity to family tracking to evacuation to legal considerations.

Pediatrc-specific considerations within each domain are presented in a three category progressive system (Foundation, Intermediate and Advanced), enabling the tailoring of recommendations based on approximate hospital pediatric volume and inpatient capabilities. Each domain also includes robust and hands-on resources to facilitate hospitals implementing the considerations.

The checklist is currently one of the most accessed pages on the EIIC's website and will serve as the foundation structure for the EIIC's planned overhaul of our online pediatric disaster preparedness resource library and upcoming pediatric disaster-focused quality improvement collaboratives.

Presentation Theme: A useful, widely-applicable and comprehensive checklist addressing a unique and vulnerable population in disaster preparedness and management. This project reflects a consensus statement of leading pediatric disaster preparedness experts from across the country drawing on their extensive experience, practice and research in the field.

Collaborators, Advisor(s) and Department(s) that assisted with this research: This project was the work of the Disaster Domain Committee within the Emergency Medical Services for Children (EMSC) Innovation and Improvement Center (EIIC). The team includes: Michelle Moegling, BSN, RN, CPN; Dina Dornack, MSN, RN; Carl Eriksson, MD, MPH; Michael Dingeldein, MD; Hilary Hewes, MD; Deanna Dahl-Grove, MD; Brent Kaziny, MD, MA; Sarita Chung, MD.