Disaster Preparedness & Response Committee

1. Identify national and international organizations active in disaster medical preparedness and response to assure appropriate liaisons, channels of communication with ACEP, and seek opportunities for collaboration and member participation.

*Outcome:* The workgroup identified international organizations and meeting and conference dates as potential opportunities for networking and collaboration. The group also identified potential ACEP members as regular contributors and resources to international organizations involved in disaster response.

2. Identify subject matter experts to serve as ongoing resources to address disaster issues and communicable/infectious diseases. Develop a list of topics and current resources available for disaster response. Create new resources as needed.

*Outcome:* The workgroup created a list of Subject Matter Experts (SMEs) and their topics. Potential SMEs were contacted to verify their potential participation. The Disaster Medicine Section also assisted in identifying and documenting additional ACEP members to serve as SMEs. The workgroup continues to review the identified resources available and consider next steps to pursue.

3. Explore grant funding opportunities, such as technologies, regarding development of a disaster simulator, a mass casualty incident software program, game for emergency physicians on disaster preparedness, and research and training on pediatrics or burn care.

*Outcome:* The workgroup prepared information on the available technologies and instructional design strategies matching technologies to disaster medicine learning objectives, examples of current commercial disaster medicine simulation and e-learning technologies, and develop recommendations for additional ACEP efforts, including partnering with other organizations and recommendations for specific grants or federal funding. The information will be made available on the ACEP website when completed.

4. Collaborate with stakeholders, including federal and state government agencies, other medical and disaster preparedness organizations, and various private vendors to develop a methodology to extract data regarding disaster related injuries and illness for use in planning for response and research. Explore collaboration with the National Institute of Health Office of Emergency Care Research (NIH-OECR). Work with the Research Committee as needed and incorporate directives from Amended Resolution 20(13) Disaster Research.

*Outcome:* The workgroup continues to work on identifying federal and state government agencies and disaster organizations and the types and availability of disaster related data and funding for research. ACEP continues to explore potential areas for collaboration with the National Institutes of Health/Office of Emergency Care Research.

5. Explore additional expanded roles between emergency physicians and local/regional disaster emergency management planning through health care coalitions and local Emergency Operations Centers with focus on building products for use by the grassroots membership such as small, multi casualty incident management, crisis management, how to use incident command, and rapid triage.

*Outcome:* The workgroup developed information indicating tiered physician involvement in disasters, developing a policy on the role of Freestanding EDs in disasters, and a Job Aid/Reference Tool to outline responsibilities between Emergency Operation Centers to hospitals and other relationships.

6. Implement the Disaster Medical Sciences Award.

*Outcome:* Nominations were collected and Andrew Bern, MD, FACEP, was approved by the Board in April 2016 as this year’s recipient. The award will be presented at the Disaster Medicine Section meeting at ACEP16.
7. Review and revise the disaster preparedness competencies for emergency physicians and research their current adoption by fellowships.

*Outcome:* The workgroup developed a Disaster Medicine Competencies summary listing articles and manuscripts regarding competencies to date. The final document will be distributed to disaster fellowships and residency directors for consideration of adoption.

8. Monitor the national disaster medicine environment for federal regulations, new guidelines, standards, and technologies that potentially significantly impact disaster medicine and provide recommendations to the Board as needed.

*Outcome:* The workgroup identified House Bill 865 regarding limited liability for personnel who volunteer for disaster response. ACEP supports the bill and is monitoring its progress along with the Senate version.

9. Revise the following policy statements as part of the policy sunset review process:
   - Personal Protective Equipment Guidelines for Health Care Facility Staff (work with the Disaster Section)
   - Disaster Data Collection

*Outcome:* The Board approved the revised policy statements “Personal Protective Equipment Guidelines for Health Care Facility Staff” and “Disaster Data Collection” in June 2016. The committee also revised the policy statement “Unsolicited Medical Personnel Volunteering at Disaster Scenes,” a joint policy with the National Association of EMS Physicians. The Board provided direction for further policy development. The work will continue in 2016-17.

10. Provide input to the Education Committee as needed regarding online disaster training for emergency physicians. (Education is the lead committee.)

*Outcome:* A workgroup was assigned to evaluate course summaries of previously presented disaster medicine/emergency management topics, personal experiences of the educational sessions, and provide recommendations for topics best suited to benefit most emergency physicians. Their recommendations were presented to the Education Committee’s EMS Education Subcommittee. Additionally, the workgroup plans to determine which of the previously established disaster medicine/emergency preparedness competencies would be helpful to most emergency physicians, determine existing courses (local and national) to recommend, and identify any gaps in current educational programs for future course development.