2008 ANNUAL REPORT

Forum on Medical and Public Health Preparedness for Catastrophic Events

INSTITUTE OF MEDICINE
OF THE NATIONAL ACADEMIES
The Forum on Medical and Public Health Preparedness for Catastrophic Events (the Forum) has been a wonderful experience for the diverse group of public and private participants. Representatives and leaders from local, state, and federal government, as well as leaders of professional and business associations, have found a sanctuary to address issues that necessitate the calm and reasoned dialogue that has prospered in the forum. The unifying principle for the entire group is that all are stakeholders and key decision makers in medical and public health preparedness. The many dilemmas facing the medical and public health preparedness community have been the focus and priority of the Forum. The issues are complex and require consideration from a diverse set of perspectives, yet they must be addressed before substantial progress in preparedness efforts can be made. The Forum is making every effort to facilitate the necessary dialogues to advance the cause. In our first year we have addressed numerous issues—some superficially, but others in great depth as the group has sought clarity of vision as to the definition of our task and the best framework within which we can operate most effectively.

The Forum undertook a range of initiatives in 2008 to explore important issues in preparedness. These included regular Forum meetings and a workshop that focused on dispensing medical countermeasures. The objective of the workshop was to review a range of solutions to provide medical countermeasures rapidly to large numbers of people to protect them before or during a public health emergency. Two specific highlights of the discussion, the importance of addressing the liability concerns of the business sector and the value of utilizing the U.S. Postal Service for countermeasures dispensing, have since been developed into federal policy. The Forum examined a range of other key issues through working groups, which made it possible to foster ongoing conversations among stakeholders.

The concept of medical and public health preparedness is timeless. The issues will not change with a new administration, but the priorities and focus will evolve. Our discussions have prepared the Forum membership for a thoughtful political and public health transition. Among the new initiatives under development for 2009 are a workshop on medical surge capacity and a series of four regional meetings devoted to exploring situational standards of care.

These regional meetings, as well as the Forum meetings that will occur in 2009, will address the core questions of our members and society. We have set the following long-term priorities for the Forum:

- Enabling a Culture Shift: Individual, Community, and Family Preparedness
- Developing a Framework of Medical and Health Emergency Management
- Ensuring Financial Sustainability for Preparedness Efforts
- Developing Informatics for Public Health Emergencies and Disaster Medical Response

We will address these critical questions with enthusiasm and creativity, incorporating the diverse values of a committed group of stakeholders to advance our knowledge and performance of medical and public health preparedness.

Lewis Goldfrank
Chair
FORUM MEETINGS

The Forum met in January, May, and October to foster communication among Forum members, focus on particular issues of interest to the group, and plan future workshops and events. The meetings focused on continuing the dialogue among Forum members concerning national preparedness for catastrophic health events. Some of the topics discussed at Forum meetings include public–private distribution and dispensing of medical countermeasures; “standards of care” that be may be associated with a mass-casualty event; identifying strategies to improve sustainable support of preparedness activities; building community resilience through public–private collaboration; a proposal by the National Library of Medicine to establish a central portal that would contain all the critical literature (grey and peer-reviewed) necessary for ensuring effective preparedness and response for all primary threats; and fostering relationships with the media to ensure that information is disseminated to the public in the most effective manner possible. The Forum also received briefings on federal activities. Forum working groups, which explored a variety of specific issues in greater detail, reported back to the larger group and encouraged discussion of their findings and recommendations.

WORKSHOPS

Dispensing Medical Countermeasures

The delivery of medical countermeasures during a public health emergency has been identified as one of the major challenges facing the medical and public health community. In March 2008, the Forum held a workshop to engage a broad community from the public and private sectors to discuss innovative strategies to improve the dispensing of medical countermeasures. Presentations and discussions focused on a variety of relevant topics such as model frameworks, potential public–private partnerships, workforce requirements, security, and legal liability. A summary of the workshop, titled “Dispensing Medical Countermeasures for Public Health Emergencies,” was released in August and is available on the Forum’s website.
Dispensing Medical Countermeasures
The Forum also convenes several working groups that participate in regular conference calls to discuss in greater detail issues related to a particular topic, as well as to advise on and organize upcoming events and activities.

Culture Shift Working Group
The Culture Shift working group was created in order to organize a series of Forum activities that will help facilitate the development of a broad culture of preparedness at the individual, family, and community levels.

Framework Working Group
The Framework working group was established to continue the dialogue around creating a framework/doctrine for public health preparedness. This group aims to begin to identify the underlying principles/doctrines that frame medical and health emergency management, as well as to determine shared objectives and how to reach those common goals.

Financing Preparedness Working Group
The Financing Preparedness working group considers a broad range of issues related to ensuring sustainable financing for medical and public health preparedness efforts. Some topics currently under discussion include how to use resources strategically, identifying innovative financial models, funding criteria, and strategies to enable coordinated funding across agencies.

Health IT Working Group
The Health IT working group focuses on identifying opportunities for the use of information technology (including e-health and telehealth strategies) during a public health emergency, as well as the interoperability requirements necessary to prepare, respond, and recover from a catastrophic event. This working group is also responsible for working with the National Library of Medicine in the development of a central portal.

Medical Countermeasures Working Group
The Medical Countermeasures working group focuses on ongoing efforts to identify ways to improve the dispensing of medical countermeasures. Some of the themes relevant to this group include prepositioning of medical countermeasures, Point of Distribution (POD) sites, education, communication, and liability, among others.

Mass Casualty Care Working Group
The Mass Casualty Care working group was established to explore issues related to mass-casualty care. Specific relevant topics include standards of care, ethical allocation of resources during an event, state and local considerations, establishing regional health networks, legal and regulatory issues, and palliative care, among others.
MEMBERS (DECEMBER 2008)

Lewis R. Goldfrank (Chair)
New York University School of Medicine, New York, New York

Damon T. Arnold
Association of State and Territorial Health Officials, Arlington, Virginia

Joseph C. Becker
American Red Cross, Washington, District of Columbia

Georges C. Benjamin
American Public Health Association, Washington, District of Columbia

Richard E. Besser
Centers for Disease Control and Prevention, Atlanta, Georgia

Robert G. Darling
Uniformed Services University, Bethesda, Maryland

Lawrence Deyton
Department of Veterans Affairs, Washington, District of Columbia

Jeffrey S. Duchin
Seattle & King County and University of Washington, Seattle, Washington

Ellen P. Embrey
Office of Assistant Secretary of Defense for Health Affairs, Department of Defense, Washington, District of Columbia

Lynn R. Goldman
Johns Hopkins Bloomberg School of Public Health, Baltimore, Maryland

Jack Herrmann
National Association of County and City Health Officials, Washington, District of Columbia

Keith Holtermann

James J. James
American Medical Association, Chicago, Illinois

Jerry Johnston
National Association of Emergency Medical Technicians, Mt. Pleasant, Iowa

Robert Kadlec
White House Homeland Security Council, Washington, District of Columbia

Lynne Kidder
Business Executives for National Security, Washington, District of Columbia

Jon R. Krohmer
Office of Health Affairs, Department of Homeland Security, Washington, District of Columbia

Michael G. Kurilla
National Institute of Allergy and Infectious Diseases, Bethesda, Maryland

Jayne Lux
National Business Group on Health, Washington, District of Columbia

Anthony Macintyre
American College of Emergency Physicians, Boston, Massachusetts

Angela McGowan
Robert Wood Foundation, Princeton, New Jersey

Margaret M. McMahon
Emergency Nurses Association, Williamstown, New Jersey

Erin Mullen
Pharmaceutical Researchers and Manufacturers of America, Washington, District of Columbia

Tara O'Toole
Center for Biosecurity of the University of Pittsburgh Medical Center, Baltimore, Maryland

Gerald Parker
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Cheryl A. Peterson
American Nurses Association, Silver Spring, Maryland

Sally Phillips
Agency for Healthcare Research and Quality, Rockville, Maryland

Steven J. Phillips
National Library of Medicine, United States Department of Health and Human Services, Bethesda, Maryland

Phillip Schneider
National Association of Chain Drug Stores Foundation, Alexandria, Virginia

Roslyne Schulman
American Hospital Association, Washington, District of Columbia

Margaret VanAmringe
The Joint Commission, Washington, District of Columbia

Theresa L. Wiegmann
AABB (formerly at the American Association of Blood Banks), Bethesda, Maryland
INITIATIVES FOR 2009

WORKSHOPS

Surge Capacity Workshop (June 2009)
In response to a request from ASPR, the Forum will convene a workshop to explore and describe potential strategies to improve medical surge capacity in the United States. The strategies will include activities for the Department of Health and Human Services (HHS) Division of National Healthcare Preparedness Programs (NHPP). Speakers and participants will discuss the following topics among others, including specific discussion of the role of the NHPP in facilitating each of these efforts: (1) definitions of medical surge that are applicable to local, state, tribal governments, and federal government entities; (2) the capability and tools available to local, state, tribal governments, and federal government to assess the current status of preparedness to conduct medical surge operations; and (3) determine the appropriate levels of infrastructure (e.g., workforce, information systems, laboratories, etc.) needed to ensure adequate preparedness, and strategies to assist local, state, tribal governments, and federal government entities in improving the infrastructure.

In addition, the Forum will collaborate with the IOM's Board on Health Care Services (HCS) to help HCS organize two additional workshops: Emergency Care Enterprise Recommendations and Regional Emergency Care Systems (see tasks below).

Developing a Framework for Medical and Health Emergency Management (Proposed for Fall 2009)
This proposed workshop would aim to further the dialogue around creating a framework/doctrine for public health preparedness. It would potentially focus on identifying the common principles, practices, and terminology relevant to health and medical personnel for emergency mitigation, preparedness, response, and recovery. Methods for achieving broad agreement on the definition of preparedness across diverse stakeholders would also be discussed. In addition, participants would be asked to consider how to achieve common goals, as well as to identify the varying roles and responsibilities of EMS, public health, and the health care system.

Jack Herrmann and Lynn Goldman (Forum Members)
Standards of Care Regional Meetings
The Forum will host a series of regional meetings to help inform and improve the dialogue with local community leaders about how they can improve their personal and community preparedness. The first four meetings will be organized by a planning committee on the topic of “situational standards of care.” They will focus on (1) exploring local efforts to establish situational standards of care in order to save as many lives as possible in the event of a mass-casualty event; (2) identifying lessons learned and best practices, including the creation of local partnerships and agreements; and (3) identifying what planning, guidance, and tools are needed at the federal, state, and regional level in order to support local efforts to establish situational standards of care. The goal is to fully engage local community leaders (government and NGO), practitioners/providers, and the local press in the conversation. A single summary of the four regional meetings will be published.

2009 WORKSHOPS TO BE PERFORMED IN COLLABORATION WITH THE IOM’S BOARD ON HEALTH CARE SERVICES

Emergency Care Enterprise Recommendations (Performed jointly with the IOM’s Board on Health Care Services)
The Forum, in collaboration with the IOM’s Board on Health Care Services, will convene a workshop to explore and describe potential strategies for the implementation of “overarching” recommendations from the Institute of Medicine’s “Future of Emergency Care” series. The strategies will include activities for the federal government’s new Emergency Care Enterprise. The workshop will feature invited presentations and discussions focused on the following topics as they relate to adult, geriatric, and pediatric emergency care: (1) systems and clinical research priorities for emergency care systems, for example, issues related to research involving human subjects in the emergency care environment and potential solutions to barriers; (2) parameters for emergency care system categorization, building on those delineated in the “Future of Emergency Care” series; (3) efficiency and effectiveness metrics for emergency medical care; and (4) quantifiable parameters that allow for defining and measuring emergency department overcrowding.

Regional Emergency Care Systems Recommendations (Performed jointly with the IOM’s Board on Health Care Services)
The Forum, in collaboration with the IOM’s Board on Health Care Services, will convene a workshop to explore and describe potential strategies for developing regionalized, accountable emergency care systems. The workshop will feature invited presentations and discussions focused on the following topics: (1) evidence-based advantages and disadvantages of regionalized emergency care across a variety of critical care areas including, for instance, trauma, cardiac, stroke, burn, pediatric, psychiatric, and others; (2) the role of state EMS lead agencies in helping to ensure contiguous regional emergency care coverage and in designating/regulating regions; (3) the legal and regulatory frameworks that may be necessary to support regionalized, emergency care systems, including potential regional governance structures; (4) potential financial strategies to fund the initial regional care system and support its sustained infrastructure; (5) potential models that could support inter-state coordination of regional emergency care systems, including the advantages and disadvantages of each; and (6) available data sources and quality improvement tools that could be used to monitor and to improve regional system performance, for example the National EMS Information System, and others.

For more information about upcoming workshops and events, including registration, please visit www.iom.edu/medprepforum
Sponsoring members include federal agencies, state and local associations, health professional associations, and private-sector business associations.

AABB (formerly the American Association of Blood Banks)
Agency for Healthcare Research and Quality
American College of Emergency Physicians
American Hospital Association
American Medical Association
American Nurses Association
Association of State and Territorial Health Officials
Department of Defense
Department of Health and Human Services,
Centers for Disease Control and Prevention
Department of Health and Human Services,
Office of the Assistant Secretary for Preparedness and Response
Department of Homeland Security, Office of Health Affairs
Department of Veterans Affairs
Emergency Nurses Association
National Association of Chain Drug Stores Foundation
National Association of County and City Health Officials
National Association of Emergency Medical Technicians
National Institutes of Health, National Institute of Allergy and Infectious Diseases
National Institutes of Health, National Library of Medicine
Pharmaceutical Research and Manufacturers of America
The Robert Wood Johnson Foundation

Industry 11%
Nonprofit 26%
Federal 63%