

# ASPR TRACIE Technical Assistance Request

**Requestor:**

**Requestor Phone:**

**Requestor Email:** \_\_\_\_\_

**Request Receipt Date (by ASPR TRACIE):** 25 September 2015

**Type of TA Request:** Standard

## Request:

██████████ requested resources related to pediatric skilled nursing facilities (nursing homes) and emergency/ disaster preparedness.

## Response:

The ASPR TRACIE team reached out to our Subject Matter Expert Cadre members with expertise in the pediatrics and long-term care fields. The team also conducted research for materials using various databases such as the National Library of Medicine's Disaster Lit and PubMed to gather the tools, guidance documents, and other resources listed below.

As noted by ██████████, the number of resources specifically related to pediatric skilled nursing facilities and emergency/ disaster preparedness are limited. The resources below are not necessarily focused on pediatric skilled nursing facilities as those resources were hard to come by. However, many of the recommendations for long-term care facilities (serving adult and pediatric patients) also apply to pediatric-specific long-term care facilities.

## I. Tools, and Templates

American Academy of Pediatrics. (2013). [Pediatric Preparedness Resource Kit](#).

This kit allows for pediatricians, public health leaders, and other pediatric care providers to assess what is already happening in their community or state, and help determine what needs to be done before an emergency or disaster. The kit promotes collaborative discussions and decision making about pediatric preparedness planning.

American Academy of Pediatrics. (2013). [Preparedness Checklist for Pediatric Practices](#).

This checklist offers steps that pediatricians or their practice staff can take to improve office preparedness. It includes tips for advanced preparedness planning that can mitigate risk, protect records and office files, ensure the practice remains financially stable, and help support the health of children in the community.

## II. Education and Training

Centers for Disease Control and Prevention. (2015). [Addressing Preparedness Challenges for Children in Public Health Emergencies](#).

This webinar includes a session of Grand Rounds in which the speakers discuss strategies to address the unique vulnerabilities of children in every stage of emergency planning. Presenters also highlight the strong progress that has been made in pediatric disaster readiness, as well as the collaboration that is still needed between public health professionals and pediatric care providers to improve the outcomes for children during emergencies.

Dodgen, D., Anderson, M., Edgerton, E., et al. (2013). [Pediatric Preparedness for Healthcare Coalitions](#). U.S. Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response.

This 90-minute webinar provides an introduction to healthcare system preparedness for children, and shares a national perspective on preparedness for children in disasters. Perspectives on creating a multi-state coalition for pediatric surge and experiences from New York City Pediatric Disaster Coalition operational pediatric disaster planning are also included.

Hansen, C., Dodgen, D., Levine, C., et al. (2014). [Pediatric Preparedness for Healthcare Coalitions: Part II](#). U.S. Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response.

This 90-minute webinar reviews resources, strategies, and partnerships used by medical planners and healthcare coalitions to strengthen pediatric components of their jurisdiction's healthcare preparedness capabilities. Included are lessons learned from the response to Superstorm Sandy and the Alaska Shield/Hale Borealis exercise.

Hinton, C.F., Griese, S.E., Anderson, M.R., et al. (2015). [Addressing Preparedness Challenges for Children in Public Health Emergencies](#). *Centers for Disease Control and Prevention. Morbidity and Mortality Weekly Report*. 64(35);972-974.

This report is based on Grand Rounds presentations at the Centers for Disease Control and Prevention. It addresses the roles of community-level pediatricians and state and local public health, regional coalitions, and the government related to children and public health emergencies.

### III. Evaluation and Studies

Cefalu, C. (2006). [Disaster Preparedness for Long Term Care Facilities](#). *Annals of Long Term Care*. 14 (9).

This article summarizes the lessons learned from Hurricane Katrina's impact on 120 of Louisiana's 300 nursing homes including: patient tracking, resident identification and medical records, family notification, agreements with evacuation shelters and evacuation triage, transportation options, emergency equipment, supplies and bus kits, staffing specifics, and patient care suggestions (e.g., behavioral health). Recommendations are made for both evacuating long-term care facilities and for those receiving evacuees from an impacted area.

Kanter, R. K., and Moran, J. R. (2007). [Pediatric Hospital and Intensive Care Unit Capacity in Regional Disasters: Expanding Capacity by Altering Standards of Care](#). (Abstract only.) *Pediatrics* 119(1): 94-100.

The authors conducted a Monte Carlo simulation study to determine the probability that specified numbers of children could be accommodated for pediatric intensive care unit (PICU) and non-ICU hospital care in a disaster by a set of strategies involving altered standards of care. Results indicated that extending resources by hypothetical alterations of standards of care would usually satisfy targets for hospital surge capacity, but ICU capacity would remain inadequate for large disasters.

#### IV. Guidance Documents

Loyola University Medical Center, and Illinois Emergency Medical Services for Children. (2005). [Pediatric Disaster Preparedness Guidelines](#).

This document was prepared by a multidisciplinary work group as a resource in disaster planning to address the needs of children in any care setting including acute care hospitals, EMS, and community agencies serving children. This resource addresses the following: pediatric supplies, medication guidance, training resources, specific concerns for children with special health care needs in both community and institutional settings, staffing levels for pediatric patients, mental health needs, legal concerns, and security issues.

U.S. Department of Health and Human Services, Agency for Healthcare Research and Quality. (2006). [Integrating Terrorism and Disaster Preparedness into Your Pediatric Practice](#).

This resource provides guidance on pediatric preparedness planning that is focused on office-based pediatricians, hospitals, and other healthcare facilities.

#### V. Healthcare Facility Evacuations

*(Note: The resources found in this section are specific to evacuation and were compiled for a previous technical assistance request).*

Baldwin, S., Robinson, A., Barlow, P., and Fargason, C.A. (2006). [Moving Hospitalized Children All Over the Southeast: Interstate Transfer of Pediatric Patients during Hurricane Katrina](#). *Pediatrics* 117: s416-420.

This article highlights the unique issues associated with the flooding and the subsequent need to evacuate neonates from New Orleans hospitals after Hurricane Katrina.

Barkemeyer, B. (2006). [The University Hospital NICU in the Midst of Hurricane Katrina: Caring for Children without Power or Water](#). *Pediatrics* 117(5): s369-374.

The author of this report, a neonatologist, discusses steps taken by the hospital's level 3 neonatal intensive care unit (NICU) before, during, and after Hurricane Katrina. He highlights lessons learned about evacuation from a hospital, patient, and staff perspective.

Espiritu, M. (n.d.). [The Vertical Evacuation of a Neonatal ICU During a Disaster, Lessons Learned at NYULMC during Hurricane Sandy](#). NYC Pediatric Disaster Coalition, and NYU Langone Medical Center. (Accessed 10/1/2015.)

This PowerPoint presentation provides lessons learned and overall experiences related to the vertical evacuation of the neonatal intensive care unit (NICU) within NYU Langone Medical Center during Hurricane Sandy.

Espiritu, M., Patil, U., Cruz, H., et al. (2014). [Evacuation of a Neonatal Intensive Care Unit in a Disaster: Lessons from Hurricane Sandy](#). (Abstract only.) Pediatrics 134(6).

The authors of this study describe the challenges faced and lessons learned during the power outage and vertical evacuation of 21 neonates from the New York University Langone Medical Center during Hurricane Sandy. They identify several elements that are important to the functioning of a neonatal intensive care unit (NICU) in a disaster or to an evacuation that may be incorporated into future NICU-focused disaster planning. These include a clear command structure, backups (personnel, communication, medical information, and equipment), establishing situational awareness, regional coordination, and flexibility as well as special attention to families and to the availability of neonatal transport resources.

Ginsberg, H.G. (2006). [Sweating it out in a Level III Regional NICU: Disaster Preparation and Lessons Learned at the Ochsner Foundation Hospital](#). Pediatrics 117: s375-380.

The author of this article highlights the challenges and lessons learned associated with evacuating neonates from the New Orleans hospital after Hurricane Katrina.

Orlando, S., Bernard, M.L., and Mathews, P. (2008). [Neonatal Nursing Care Issues Following a Natural Disaster: Lessons Learned from the Katrina Experience](#). (Abstract only.) Journal of Perinatal & Neonatal Nursing 22(2): 147-53.

The authors of this article address nursing care issues and lessons learned from the events that unfolded in the New Orleans area neonatal units during and after Hurricane Katrina. They also provide guidance in support of disaster education for neonatal nurses.

Perrin, K. (2006). [Closing and Reopening of a Children's Hospital during a Disaster](#). Pediatrics 117(5): s381-385.

The author of this article discusses steps taken by a children's hospital before, during, and after Hurricane Katrina, to include the evacuation of patients. He also provides lessons learned.

## VI. Legal Authorities

Centers for Medicare and Medicaid Services. (2015). [State Operations Manual: Appendix PP - Guidance to Surveyors for Long Term Care Facilities.](#)

This document provides legal authorities for long-term care facilities and guidance to surveyors.

Massachusetts Department of Public Health. (2014). [Licensing of Long Term Care Facilities.](#)

This document provides legal authorities for the licensing of long-term care facilities in Massachusetts.

Mississippi State Department of Health. (2013). [Minimum Standards of Operation of Pediatric Skilled Nursing Facilities.](#)

This document provides a list of legal authorities related to the minimum standards of operation of pediatric skilled nursing facilities in Mississippi.

## VII. Websites

The following websites are dedicated to providing tools, links, and guidance related to general pediatric disaster preparedness and response and skilled nursing facilities.

American Academy of Pediatrics. [Children and Disasters.](#)

Centers for Disease Control and Prevention. [Caring for Children in a Disaster.](#)

Centers for Disease Control and Prevention, Office of Public Health Preparedness and Response. [Pediatric Offices and Hospitals.](#)

Florida Department of Health. [Children's Disaster Preparedness.](#)

Florida Department of Health. [Long Term Care Emergency Preparedness.](#)

U.S. Department of Health and Human Services. [Health Resources on Children in Disasters and Emergencies.](#)