

## Final Objectives 2022-23

### Disaster Preparedness & Response Committee

Chair: Angela P. Cornelius, MD, FACEP

Board Liaison: Gabor D. Kelen, MD, FACEP

Staff Liaison: Pat Elmes, EMT-P

1. Develop a plan for a disaster registry, including collaboration of other groups such as Trauma, Epidemiology, Public Health, EMS, and Nursing. Develop the items to be included in the registry such as the collection and sharing of disaster data.
2. Analyze vaccine and other medication distribution during COVID to identify pitfalls, obstacles, best practices, and shortcomings and develop an information paper or other resources.
3. Identify potential threats to healthcare infrastructure from Cyber-attacks and develop solutions to mitigate.
4. Collaborate with the Health Information Technology Committee to develop an online or app-based resource for disaster plan development including National Incident Management Systems (NIMS) basics and disaster expert networking. (Disaster Preparedness & Response is the lead committee.)
5. Continue to identify new and existing national and international organizations active in disaster medical preparedness and response to assure appropriate liaisons and channels of communication with ACEP to seek opportunities to increase collaboration and unification of resources.
6. Solicit nominations for the Disaster Medical Sciences Award and recommend a recipient to the Board of Directors.
7. Continue to collaborate with fellowship directors to update the list/database of all disaster fellowships and the similarities or differences. Continue to develop a Disaster Medicine board certification or added qualification in disaster medicine and preparedness and standardized job descriptions and career resources for graduating fellows.
8. Serve as a resource to the Education Committee to explore online and other EMS, disaster, and other related training for emergency physicians. (Education is the lead committee.)
9. Review the following policies per the Policy Sunset Review Process:
  - Health Care System Surge Capacity Recognition, Preparedness, and Response
  - Hospital Disaster Physician Privileging
  - Unsolicited Medical Personnel Volunteering at Disaster Scenes

*Determine by December 15 if the policy should be reaffirmed, revised, rescinded, or sunsetted. Submit any proposed revisions to the Board for approval by the end of the committee year.*
10. Investigate burnout and mental health prevalence and successful programs in disaster response by healthcare workers and consider developing an information paper or other resources on best practices.
11. Review the draft policy statement “Disaster Telehealth” developed by the Telehealth Task Force, determine if any revisions are needed, and provide a recommendation to the Board.