

**Methods:** A new public health system model was developed and validated based on the four health system framework functions: (1) stewardship; (2) resource generation; (3) financing; and (4) provision of services, as determined in the World Health Report 2000, as well as essential public health functions.

**Results:** The model includes: (1) roles and performance standards required from the public health system in developing and executing a contingency plan to combat infectious disease epidemics; and (2) a checklist that examines and evaluates whether the contingency plan is feasible in face of the essential public health functions.

**Conclusions:** A framework to evaluate public health system performance and structure is needed to identify strengths, weaknesses, and gaps, as well as how to create a platform to upgrade infrastructure in order to cope with current challenges.

**Keywords:** epidemic; pandemic preparedness; preparedness; public health; public health system

*Prehosp Disast Med 2009;24(2):s6–s7*

### Assessing Shelter Operations Using a Standard Form: Results of the Centers for Disease Control and Prevention Environmental Health Shelter Assessment Workgroup

*Miguel Cruz; Mark Miller; Nisha Kapil; Martin Kalis*  
US Centers for Disease Control and Prevention, Atlanta, Georgia  
USA

Every year, disasters directly or indirectly affect millions of people in the United States. Large-scale disasters will displace many people from their homes and will force them, either temporarily or permanently, to alter their way of living. The most vulnerable among them may find themselves housed in a shelter. During a disaster, the role of environmental health officials includes monitoring conditions that could impact people's physical, mental, or social well-being. To ensure that residents' basic human needs are identified quickly and are met without delay, shelter assessments are essential. To assist in such assessments, the Centers for Disease Control and Prevention (CDC), in a joint effort with several environmental health partners, developed a tool for evaluating shelters during disasters. In this presentation, the importance of environmental health shelter assessments and the importance of collecting shelter information in a standard way will be highlighted.

**Keywords:** Centers for Disease Control and Prevention; displaced persons; large-scale disasters; public health; shelter operations

*Prehosp Disast Med 2009;24(2):s7*

### Medication Preparedness and Awareness for Chronic Disease Sufferers during Disasters

*Lidia Mayner; Paul Arbon*

Flinders University, Adelaide, South Australia Australia

**Introduction:** Many are affected by chronic diseases and depend on medication to attain and maintain a good quality of life. The medication required by some may be specific and not the generic brands readily available from pharmacies. The most globally listed chronic diseases include cardiovascular problems, cancer, mental health problems, diabetes

mellitus, and chronic respiratory diseases, all being major causes of death. Depression and diabetes have reached epidemic significance. In Australia, there is significant property destruction from bush fires and cyclones. Post-disaster situations significantly will impact on those people with chronic illnesses who have not adequately prepared for continuation of their medication.

**Methods:** The information was obtained from extensive literature searches, phone calls to state emergency services (SES), and government offices involved in health protection in Australia.

**Results:** Information obtained from the SES indicated that in cases of evacuation, advice given to evacuees is to pack photographs and personal items and leave the premises. It is assumed by emergency personnel that people automatically will pack their medication and medical details. Evacuees without necessary medication, such as in the case of diabetics, only will be attended to urgently if they develop hypoglycaemic shock. Otherwise, medication is a low priority in disaster situations in Australia, this being reflected in that the medical stockpile for emergency situations does not include medication for chronic diseases.

**Conclusions:** Medication preparedness should be addressed by introducing self-care and self-management programs for medication management for chronic disease sufferers in disaster-prone areas.

**Keywords:** chronic disease; evacuation; medication; preparedness; public health

*Prehosp Disast Med 2009;24(2):s7*

### Preparing Personnel for Deployment

*Caroline Whittaker*

University of Glamorgan, Pontypridd, UK

The World Health Organization's (WHO) Global Plan of Action on Workers' Health 2008–2017 and the International Labour Force Promotional Framework for Occupational Safety and Health (2006) aims to promote and protect the health of the workforce. This includes support for the development and provision of occupational health. Fit and healthy employees produce high-quality work, cope well with pressure and change, and will work with the organization to meet its goals. This is particularly important in relation to the nature and demands in disaster relief workers engaged on overseas deployments. The risks to the health and safety of aid workers (given the adverse environment in which they may work) are high; therefore, employers have an additional responsibility to protect their staff. In support of the WHO, the United Kingdom's "Health, Work and Wellbeing" strategy makes employers responsible for maintaining the health of their employees to ensure they are not placed in situations that may adversely effect their health and well-being. The aim of this presentation is to present (based on a risk-assessment approach) the pre- and post-deployments occupational health assessment of aid workers deployed on overseas engagements, understand and appreciate the pre-employment steps that assist in preparing field volunteers, and reflect on the responsibilities of agencies to ensure the health, safety, and security of field volunteers while employed.

**Keywords:** aid; deployment; plan, psychosocial; public health

*Prehosp Disast Med 2009;22(4):s7*