Planning for Complexity: Building Response and Recovery Capacity by Learning from the Experiences of Special Populations

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What’s Our “Why?”

- Build the capacity of health and related systems (including the degree to which Title V maternal and child health programs are visible and actively engaged) across jurisdictions to deliver evidence-based and equity-centered emergency responses.

- Influence processes (planning and training, policy development, program implementation, funding and resource allocation, partnership prioritization, etc.) to ensure that the unique, complex needs of women, children, and families are elevated in emergency preparedness, response, recovery, and mitigation activities.
### Outreach to Achieve Equity & Diversity

- Intentional recruitment strategy
- Personal outreach to cultivate new voices at the table
- Genuine diverse representation to guide the work in an authentic way
- Who are key partners in Planning - Response - Recovery
- How do families know “where” to go

<table>
<thead>
<tr>
<th>Role</th>
<th>Description</th>
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<tbody>
<tr>
<td>MCH/CYSHCN Directors</td>
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<tr>
<td>MCH Practitioners</td>
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<tr>
<td>Family Leaders</td>
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<td>Community Organizations</td>
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Anthology!
BUILDING RESILIENCE FROM LIVED EXPERIENCE

NAME
Cassandra Sines

SUMMARY
In this brief written narrative, a number of children with special health care needs faced significant challenges and risks during the COVID-19 pandemic.

KEY WORDS
Children with special health care needs, COVID-19 pandemic, resilience

SYSTEMIC FACTORS ADDRESSED
Healthcare access, education, social support

LOCATION
Kansas

BUILDING RESILIENCE FROM LIVED EXPERIENCE

NAME
Louisiana Department of Health
(Cheryl Harris, Jans Malbrouk, Nguyen Huynh)

SUMMARY
In this brief written narrative, Louisiana Title V leaders discuss how Hurricane Ida 2021 impacted the state’s newborn screening program – including efforts to implement their continuity of operations plan with limited communication capacity and how they made modifications to address new challenges as they arose.

KEY WORDS
Systemic leadership and communication, Newborn screening, Continuity of operations, Staff support, Infrastructure and interoperability

SYSTEMIC FACTORS ADDRESSED
Poverty, Communication access, Health care access, Population mobility

LOCATION
Louisiana

EMERGENCY TYPE(S)
Natural Disaster or Severe Weather

MAJOR TAKEAWAYS

FOR INDIVIDUALS AND FAMILIES
Even during an emergency, you should plan for the time critical services and resources you need. These are people, providers, or agencies that you rely on. You do not have time to wait for a list of providers to be made available.

FOR HEALTH AND RELATED SYSTEMS
Every emergency situation is different but having a plan of care and resources it at strategic times with staff and community partners is key. For example, hospitals make it easier to mobilize and communicate with the most urgent responsibilities.

FOR COMMUNITIES
Investment in systems (e.g., web-based platforms for data management and reporting) can help ensure the best possible coordination of resources deployed by severe weather and other acute events involving health and human services, etc.
How to Interact with This Resource

1. Under “Explore the stories”, you will find a collection of stories featuring a video or written narrative (with optional audio component) that will each take no longer than 10-15 minutes to review.

2. Using the brief description, choose which stories you would like to explore further. Click on the hyperlink to “View this story” and a new page will open up select the stories you want to access.

3. Navigate through the individual contributor pages to access the story (either in written or video format). Each story includes accessibility features, such as text-to-speech, on-screen captions, and full transcripts.

4. View/download the one-page snapshot which briefly summarizes major takeaways for individuals and families, health and related systems, and communities. As you explore, consider your spheres of influences and how you can be a catalyst for moving from intention to action.

5. Share these stories with decision-makers, work them into tabletop exercises or other staff trainings, or use them to start a dialogue with colleagues from your jurisdiction’s Public Health Emergency Preparedness and Response (PHEP) program.
AMCHP
ASSOCIATION OF MATERNAL & CHILD HEALTH PROGRAMS

Increasing Public Health Preparedness Capability among MCH Programs
Let’s hear from you…

► Where do you see yourself in this scenario?
► Knowing your current infrastructure, how can you go from Good to Great?
► Pulling from your COVID-19 experience whereby you were asked to participate in activities/planning that were new to you, how did you elevate the MCH population?
► What are you proud of in terms of your contributions to assure MCH populations were considered in your states’ approach?
Prepare a 'departing' emergency kit:

- Change of clothes and personal hygiene supplies
- *Medications (Medicaid will only cover one month)
- food and water (canned goods? Bars? Vitamins?)
- Cash and credit cards
- Identification for all individuals
- Important documents (policies, family records, bank and credit card accounts, inventory or video of valuables)
- First aid supplies, compass, whistle
- Flashlight: battery, solar or hand crank
- Weather radio, masks, manual can opener, utensils
- Disposable dishes, matches, lighter (or candles)
- Chargers/extra batteries, plastic bags
Prepare a 'stay in place' emergency kit:

- food and water
- how will you heat the food? (liquid cooking chafers + bracket)
- Flashlights or candles/lighter
- Battery-operated radio
- clothing and bedding appropriate for weather
- chopped firewood
- First aid supplies
- *Medications
- Gas-operated generator
Disability related items to consider:

- *second pair of glasses, hearing aids (batteries?)
- battery charger for wheelchairs + manual wheelchair
- Records of durable medical equipment (serial #s, etc)
- copies of prescriptions
- Medical alert bracelets
- list of allergies, list of physicians/specialists
- *Extra oxygen, insulin, catheters, medical supplies, etc
- laminated personal communication sheet
- List of contact info for 'circle of support' team members
- Know location of accessible shelters
Share Your Story

Let’s take the next 5 to 10 mins to share our stories with others in the room.
Call to Action!

As an individual, what steps can you take to center the human experience in PHEP?

As a person with positional influence, what can you do to center the human experience in PHEP?
Call to Action!

- Check out the Anthology and share the stories with your network!
- Share your story. We want to hear from you!

PHEP@amchp.org