

Course Transcript for July 18, 2012, Day 1

Information Roles in Disaster Management
Instructor: Robin Featherstone, MLIS

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Presenter: Robin Featherstone

I began studying library roles in disasters and disaster information in 2006. I took that research and built it into some of the courses that are part of the Medical Library Association's Disaster Information Specialization Program. We are going to talk more about the specialization program in a minute. For some housekeeping I want to draw your attention to Debra Cavanaugh from MLA and Siobhan Champ-Blackwell from the Disaster Information Management Research Center at the National Library of Medicine. They will be able to answer some of the questions that will come up during the call. The best way to communicate during the call is through the chat window. Because we have over 50 people registered for this course, it's an experiment and it will be too many people to cut in with your phone. If you have a pressing question you would like for me to answer please ask it using the chat window.

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Presenter: Robin Featherstone

[ACTIVITY]

Let's start with our first activity which I hope you received. It would have been through an e-mail that you were asked to complete about the hazards checklist activity; you were asked to identify the three most likely hazards to impact your community. I also would like you to think of this exercise as the optimist/pessimist test. If you check every single box on the checklist you know where you fall.

One of the things I find reassuring about disaster management activities is the knowledge that once I know about a hazard, there's something that I can do about it. So what I'm asking you to do is to introduce yourselves and to get a sense of who is here on the call. Use your chat box to share where you are from. We already see your name when it comes up, and the three hazards that you identified. For example, I'm from Montreal, Quebec, and the three hazards that I've identified for my region are active shooter. Unfortunately, our city has had more active shooters than any place in North America. We've had three at major schools, so we're always concerned about that at McGill. We are in Quebec, so snowstorms are a hazard. It gets very cold in the winter and very hot in the summer. We are in the middle of a heat wave right now ... so things to know about

Montreal. And bridges we have are a hazard. We are on an island, and some of the busiest bridges in the country come on to the island of Montreal, and all of them are about ready to collapse. We know about those and it is going to take a few billion dollars to fix the problem. Those are the three for my region. I see lots of people listing tornadoes, hurricanes, and a few people listing earthquakes.

Those are really the big three that most regions are either worried about or have a lot of risk management activities in place to control. I want you to remember the hazards that you identified as we will participate in a tabletop exercise on Day 2 that relates to your chosen hazard.

This is a very interesting exercise. I gave this checklist to two librarians that I work with at McGill. It was to get a sense of how long it takes to do the exercise. They live in the same region and one of them had checked every single box and the other had checked maybe two things. I think she did three because we figured out at the end that the three things were actually the same. So, it is a little bit of a construct validity test. It doesn't matter if you're an optimist or pessimist; you'll probably get the big three for your region.

It looks like almost everybody has participated and added their hazards. I hope that gives us all a chance to see who is on the call, what some of the hazards are that are going to be in your minds when we conduct the webinar today and during some of the exercises later on.

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Presenter: Robin Featherstone

Here is the agenda for these two classes. This workshop was originally a three-hour, in-class workshop and I think it is too long for a webinar. I think an hour top for a webinar is fair, so that's what I'm aiming for today. You should be out of here in an hour. In day one today we are going to be focusing on the role of disaster information specialists and I will tell you a little bit more about the program that this course is a part of. We are going to talk about disaster management as a field, identify who we would be working with as disaster information specialists, what role information plays in disaster management activities, and learn a little bit more about the patronage group we serve. Your homework for this evening will be to read an article and then reflect on some of the outreach activities that you could provide as a disaster information specialist.

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Presenter: Robin Featherstone

The program through the Medical Library Association is funded by the National Library of Medicine. All of the courses and activities earn MLA continuing education credit and can be used

towards AHIP. To get the credentials to be a DI specialist, you do need to pay \$50. The courses are free for students. Anyone can participate; it isn't the intention that this program is only for librarians, and in fact there are many individuals in the disaster workforce who might really benefit from these classes. I've given you the URL for the website on MLA, on mla.net.org and I hope you will look it up and see some of the other classes that are there.

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Presenter: Robin Featherstone

All the classes are either in person or online, but every class is going to be available online including this one, so if you have to step out and come back you can always watch the recording later. There are five basic-level courses; the one you are taking is number three on the list. "Disaster Health Information Sources: The Basics" is another one that I teach. It really focuses on the information sources and where to find disaster information. The advanced level courses are here; there are also new classes under development. The Regional Medical Library also has funding available for course developers. So if you're interested in developing a course because you have a specific area of knowledge you'd like to share, definitely consider it. I can say it's been a really positive opportunity. I've reached and talk to people across the U.S. and Canada so it has been really wonderful.

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Presenter: Robin Featherstone

Key elements of being a disaster information specialist include providing disaster-related library information services as part of the ongoing job function, and possessing the knowledge to support disaster management activities. The DI specialist may participate in efforts to plan for and recover from disasters affecting library buildings and collections. But it's not the main role and continuity of operations will not be the focus of today's class. I think everybody upfront thinks disasters and libraries, and they think about flooding in the library, getting disaster classes, working with conservation groups, but this is about a different aspect. It's more about the liaison or the outreach model of the librarian assisting the disaster workforce. To make that clear, we do more than protect library collections and maintain library operations, although those are important functions of a DI specialist as well.

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Presenter: Robin Featherstone

To assist with your efforts to learn more about continuity of library operations during a disaster, I recommend the National Network of the Libraries of Medicine Emergency and Preparedness

toolkit. There is an excellent manual by Deborah Halsted which is to be released in a new addition. These two guides will get you going if your primary focus is continuity of operations.

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Presenter: Robin Featherstone

To assist in gaining the credentials of a DI specialist, the objectives of the class are to help you understand better the disaster workforce and the patterns of information used and to identify professional roles that librarians could play or other information specialist. The objectives for today are in black and the ones that we're going to be addressing tomorrow are how to articulate the roles libraries have traditionally played and to recognize the valuable roles that they have played.

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Presenter: Robin Featherstone

Just to make sure that we start on the same page there are many definitions of disaster-related concepts. Some basic ones include the following: a disaster being this disruption of the functioning of society and the key element of which the effect exceeds the ability of the affected society to cope using only its own resources. A related term include emergency, which is the situation that's out of control and requires immediate attention. An event has the potential to affect human beings and their environment, or also the realization of the hazards. You can see how these three terms are related and an event can escalate into an emergency and an emergency into a disaster. If you're interested in other definitions, there's a very good glossary put out by the World Association for Disaster and Emergency Medicine. Their acronym is WADEM and I've given you the URL on this slide.

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Once a hazard or event becomes a disaster, it can be categorized in numerous ways; natural, public health emergency, unintentional, intentional, man-made, etc. For the purpose of today's workshop, we will consider two broad types under which most disasters can be classified and that's natural and man-made. The European Commission on Humanitarian Aid in Civil Protection defines disaster types into these two categories. Some disasters cannot be so easily categorized like floods, forest fires, and avalanches, but you can see how a natural hazard can turn into a disaster as a result of the man-made intervention like a lit cigarette discarded on the floor of a dry forest. It is also important to remember that many disasters produced cascade effects that lead to

situations that may fall into both categories. For example, a naturally occurring tsunami caused a nuclear accident in Japan in 2011. Finally, the term all hazards preparedness is commonly used in the field of disaster medicine and emergency management. There is recognition that many of the actions that we take to prepare ourselves can be effective in any kind of disaster. Remember the term “all hazards preparedness.”

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Presenter: Robin Featherstone

All experts agree that disaster management has distinct phases. How many phases or stages depend on whom you ask. For the purpose of today's workshop we are going to discuss the simplest three-stage model. For the workshop exercises I will ask you to reflect on the different information needs of the planning, response, and recovery phases. A key point here is that people think about disasters and they immediately think about response. Which is really the shortest phase by a lot, and in fact I was doing incident command system training last week and our instructor kept harping at us that for every day of response you have 40 days of recovery. So it's much more likely as a DI specialist that you're going to be involved with the recovery and the planning stages of a disaster and maybe less so in the response phases, unless you are actually an information officer and recognized within a disaster plan in an organization.

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Now that we have a shared understanding of disasters and the stages of disaster management who are the individuals who plan for, respond to, and aid in the recovery from disasters. In the Emergency Support Function six and eight, these are individuals who are involved in mass care emergency assistance, disaster housing and human services, and part of the disaster health workforce. We will focus on this because I think there are a lot of medical librarians on this call, hospital librarians. These individuals are either licensed physicians or they are trained; they're the community emergency response teams. They're paid or volunteer; they're permanent or just “as needed;” and they play a defined role in the all hazards preparedness, response, and recovery.

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The licensed and credentialed health professionals, as defined by the Emergency System for Advance Registration, are volunteer health professionals eligible to register ahead of a disaster to say they are available to be deployed. We have nurses, advanced practice nurses, nurse

practitioner, midwives, LPNs, and every kind of registered nurse or other nurse. Behavioral health professionals are included, as are marriage and family therapists, such as mental health, substance abuse social workers, psychologists, etc. We also have EMTs, or emergency medical technicians, and paramedics. Veterinarian, I was surprised when I learned that humans aren't the only beings on the planet to be affected by a disaster. Also dentists are eligible and pharmacists. We have physicians and physician assistants, emergency physicians, and other first responders. We will talk about the concept of a first responder who is the person in the field which might probably a fireman or a hazmat person—who is the first on the scene. Then you have the first responder who is usually an emergency physician or emergency nurse in a hospital or health care setting is the first one to receive an influx of patients. You also have radiologists and a host of other individuals.

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The additional licensed or training professionals include trained community volunteers. You think of the Red Cross, for example. We also have firefighters, which includes hazardous materials responders and hazmat responders. With emergency managers we will talk about their needs in particular as a group that requires information assistance and that works really well with information specialists. There are military and civilian humanitarian assistance workers. As librarians we fall into this category: library staff, and other information specialist. For support staff, you think of your administrative and support staff and many different groups like social work assistants or disaster medical assistance teams or disaster mortuary teams. The clergy is also very involved; you will see them during the response phase in particular. And I mentioned briefly the support staff but also the disaster mortuary team members as well as the medical examiners, coroners, forensics, pathologist, and forensic and anthropologist, etc. Other additional licensed or trained professionals would include toxicologist, public health workers, and health profession and allied health students. So it's a really broad group and that's the takeaway message from this. It is so much broader than you would think getting into the field of disaster information and you really can serve everybody from consumers to the kinds of physicians we are used to working with as medical librarians.

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Presenter: Robin Featherstone

An important document was recently published by the Journal of Disaster Medicine and Public Health Preparedness. After many years of consultation, disaster medicine experts defined a core set of competencies for professionals in the field of disaster medicine and public health. In thinking about the support function of a librarian, it's important to recognize that a core competency is related to effective communication; to communicate effectively with others in a disaster and public health emergency and include a set of competencies to identify authoritative

sources of information and to identify strategies for sharing information. So it sounds right up our alley, doesn't it? I felt really elated when I saw these competencies and saw that there were information elements a part of them.

[ACTIVITY]

So, before I move onto the next section of the course, I'm going to stop for a minute and see how we are all doing and administer a short three-question quiz.

And I see some people figured out how to check the boxes, hopefully it works.

Okay, I see the voting has slowed down. So we will talk first about the question: What is a situation that's out of control and requires immediate attention? I see we broadcast the results now. So some of you had said a disaster, and the core element of a disaster is that it is beyond the capacity of the community to respond. It requires outside assistance which isn't part of that definition. So the people who answered D, an emergency, were correct. The individuals that said an event or hazard, those two definitions, those items are things that have the potential to escalate at the very early stages.

So, the second question: What are two categories of disasters? I see that almost everyone got this correct; they're natural and man-made. The final question: What does disaster information specialist do? It is really interesting. It is actually two that it is D, disaster information specialist provides information services to disaster workers, but they also will be involved with protecting library collections and maintaining operations. So the answer is actually E because it is A, B and D. Hopefully that gets everybody back on task and give us an opportunity to review the materials from earlier in the presentation. And if I can ask, Siobhan bring us back to the PowerPoint.

Thank you. We are there. It just took a second.

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Presenter: Robin Featherstone

Given the breadth of the disaster workforce, you can imagine the disaster health literature is fairly complex or at least there is a lot of it. This content is covered more exhaustively in the class "Disaster Health Information Sources: The Basics." I want to give you a quick overview about information and roles. Imagine this triangle represents the body of the disaster health information and it can be split into two parts. The top part of the pyramid would be the peer-reviewed, scholarly literature. The bottom part of the pyramid would be grey literature. In this instance, a lot more grey literature sources are valuable and useful for disaster information. I indicated some of the sources of the peer-reviewed, scholarly literature. If you don't know about Cochrane Evidence Aid Project, then it's worth investigating. They are trying to aim for that high-level of Cochrane standard of gold evidence for disaster information and emergency management information. Of course, there's a lot of content in PubMed; the HazLit database has been around for a very long

time; and it also contains a lot of peer-reviewed information. Then you've got the massive world of agencies and their surveillance tools, and other websites from trusted organizations like the ECDC, the WHO, PAHO, and FEMA. You end up looking for a lot of agency reports and government documents if you're working as a disaster information specialist.

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In addition to becoming experts on sources of disaster information, librarians can assist members of the disaster workforce in the use of social media to access and share evidence. Right now, social media in disasters is a hot topic. For some, librarians' knowledge of Twitter and other information sharing tools may provide an avenue for working with emergency responders. In addition, librarians' ability to monitor information sources and provide alerting services has proven invaluable to health care administrators in a disaster.

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Let's look at how the disaster workforce uses information. In a study conducted by Barbara Folb, she observed that previous training influences the methods used to locate information. I can definitely confirm this from this point: information was seen as a decision-making tool. Observable information was really seen on the same plane or being much higher in value than the literature or case reports or case series. I was in this training last week and our instructor kept emphasizing the need to assess the situation, to walk around the event, to learn everything you can by what you can observe so that is the source information for them. Synthesized and brief information summaries were desired, and this totally reminds me of working with physicians. They all love up-to-date and they don't want to look for individual studies and PubMed clinical queries. Emergency managers use published information in conjunction with what they perceive in their environment and what they learn from talking to people. Social work networks for that reason were an important source of information, and the disaster workforce highly values relationships built upon face-to-face interactions. So, get to know your emergency responders ahead of time. It is really the take-home message there.

Trusted information sources like the CDC. There was a report, it's in the citation for the references at the end of the presentation for NLM that was prepared by Murray Turoff and asked about the preferred source of information. Almost all the emergency responders polled said they like the CDC. They go back to the same agencies and same websites over and over again.

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The kind of information found useful by the disaster workforce included case studies, or peer organizations often referred to as lessons learned documents, standards of practice, and clearly presented procedural information. I'm really interested right now in this idea of an evidence hierarchy for emergency management and disaster medicine. We are not going to get the systematic reviews of randomized controlled trials like we have in medicine. So what's the best thing we can do in disaster medicine? The article I'm going to have you read for your homework tonight—if you haven't read it already—talks about this and disaster planning. It identifies case studies and case series as the highest level of evidence that's currently available. Another important information need was identified as legal or regulatory information. In addition, they were seeking funding opportunities. I was just talking to our emergency measures officer at McGill yesterday, and he asked what was available. He was complaining a little bit about the lack of funding for his department, and I said, “Well, when we want to get a project done, we usually apply for a grant.” He said he's never done it before and had no idea how to go about doing it. So, we talked about the community of science, funding opportunities, and databases, and he got so excited because somebody was going to help him find these funding opportunities. We have a lot of great ideas, but they are hindered the same way as we are by budgets.

Risk assessments identifying local hazards and data on vulnerable populations in the region were also sought. You can see how something like mapping information and GIS data would be very valuable. Current information about emerging hazards and potential threats to the community are things that are continually monitored. Related to monitoring current information, news sources were an important information source. We cannot stress enough that the local news agencies are often the ones reporting first. You can see why Twitter is so useful for emergency responders as a result. They are a vital source for on-the-ground information.

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Presenter: Robin Featherstone

I thought this was very interesting. As a librarian, I often assume that either librarians really aren't on the radar of emergency managers, or if we are, they think we catalog books and that's about it. The National Library of Medicine commissioned research on the information needs of emergency managers and the following are suggestions emergency managers had for librarian contributions to disaster management activities. So when I read things like creating and maintaining taxonomies or serving as a clearinghouse of knowledge or telemedicine, identifying information, methods of delivering specific content, it's clear that emergency managers are interested in leveraging librarian skills to organize, identify, and deliver the disaster information.

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In addition, emergency managers are looking for librarians to synthesize and deliver information in just-in-time situations, also to work with information officers to select and prepare information to be disseminated to the public, to discover new methods for interpreting data for available evidence, and to participate in international collaborations. These are also potential roles that emergency managers see for librarians.

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Presenter: Robin Featherstone

I wanted to talk about some recommendations for librarians that have been made by researchers evaluating the success of information service provisions to the disaster workforce. These are really essential take-home messages. Become part of the network. Be that go-to person in the face-to-face interaction that emergency managers and members of the disaster workforce know to call. Be part of the trusted organization. We noted the CDC is the go-to place. Working with the CDC or being a representative of them or in other government agencies—it could be just within your region—will be a really effective way to get your foot in the door. Get involved in pre-career training if these emergency managers and disaster specialists are calling on the information enforcement that they learned about in their training programs. We should really be looking at disaster medicine programs, emergency management training programs, and a master's degree program, and doing the same kind of liaison work that we do in medicine. I'm sure there are librarians that are already doing this and it's often in addition to a number of other duties. Think about teaching fundamental information literacy skills to this group. That's something that we take to like ducks to water. Another set of recommendations include being part of an institutional disaster plan. This is pertinent if you are a hospital librarian. Specify the role of the library and the librarians so that you can respond when needed. Say what you are able to do, what resources you give up or you can assist and making available. Be prepared to utilize CERT alerts and other current awareness tools like RSS, Twitter, and e-mail list. Monitoring information is just the best way to prove your value. Know your audiences and find out what technologies they are using to access the information you are sharing. One of the take-home messages from a research project that I conducted was that the hospital incident command team was using BlackBerries. Any information that went out to them had to be formatted for a BlackBerry and easily read on a small screen which had no capacity to support tables or these kinds of things. You want to maximize your efforts to make them as effective as possible.

[DISCUSSION]

Before I describe your homework exercise I'm going to give you another short quiz to see how you are doing.

Before you do that you actually have a very interesting question in the chat box.

Okay.

How does one approach the Director of Emergency Management?

I think that depends on your personal style Lori. I can really only speak about this anecdotally because I haven't researched it, although we will talk about some strategies the hospital librarians use tomorrow when we talk about the librarian role. But I started by writing e-mails about wanting to be on the committee. I have this knowledge and I'd like to assist. This is within my university so it would be University Safety. Someone was asking to please repeat the question which is how does one approach the Director of Emergency Management. And I assume you mean somebody in the role of emergency officer or even an Incident Commander. As opposed to the Director of an emergency management educational department which I think would be a little bit different to work with faculty members. I just kept at it but I kept writing e-mails, but then I was told no. I couldn't sit on this committee, but I could meet with the Director of University Safety. When I went to meet her, she was very confused. She thought I was asking for a job, and I explained that no, I had a job but I had something I wanted to offer the University Safety. I described the kinds of training programs, the learning services, and kinds of liaison duties that were actually part of my job as a liaison librarian to medicine in a large med school. She got so excited and she immediately had questions for me. She wanted me to start monitoring information on this topic and it just started from there. She connected me with people in her department to set up training and it was just about meeting the right individual and having the champion. But I think the squeaky wheel gets the grease so don't be afraid to sell your skills.

Does that answer your question?

That's great.

[ACTIVITY]

Let's go with the quiz. I'm going to give you a few moments to answer these three questions.

The voting has gone down so let's talk about the first question. We will broadcast the results. Disaster preparedness professionals revisit trusted websites for information- You all got this correct. That's absolutely true. The second question: The best way to introduce yourself to members of the disaster workforce is to offer your services during the response activities? Most of you got this correct. The answer is false. During the response activities, it is a bad time to be handing out business cards. You want these people to know about you ahead of time, probably

during the planning phases or if meant during the recovery efforts related to a previous disaster that's happened in your community. Then the final question: there are many more peer-reviewed sources than grey literature sources at disaster health information and most of you got this correct as well but that there are more government reports, PowerPoint presentations, training materials, and conference proceedings than there are peer-reviewed sources of information. So, you have to prepare to look far to find disaster information.

We can go back to the presentation now. I'm going to talk a little bit about your homework activity. We are almost there.

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Presenter: Robin Featherstone

I'm asking you to read Erik Auf der Helde's article "The Importance of Evidence-based Disaster Planning." Even if you don't enjoy the exercise, I think it is a worthwhile article to read because he describes the kind of disaster information that's out there and gives you a really good overview of the field and the kind of language that we understand of evidence-based medicine, translated into the field of disaster planning. Erik took all these common assumptions about hospitals planning for disasters, and he actually looked at case studies and evidence from the literature. He proved the opposite or proved something different was likely to happen in a large-scale event or disaster. He makes specific recommendations at the end of the article about interventions that hospitals or health care organizations can take to mitigate or help plan for disasters. What I'm asking you to do is to identify services, and when I say services, I don't mean just handing out blankets or handing out water and food like, the kinds of things anybody can do, but these are professional services that you could provide for these different interventions. Tomorrow we'll begin the class by sharing one of your interventions and if you have some brilliant brainchild idea. It's a wonderful opportunity to apply for some grant funding. NLM has a really big grant right now that I would love to go for so, think about putting or operationalizing one of these ideas here.

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Presenter: Robin Featherstone

Some of the references for today's class I'm just going to point out are: The Barbara Folb presentation about information needs of disaster response professionals is available as a broadcast. You can watch a video and actually every presentation from the Disaster Information Outreach Symposium is available. If you do watch these presentations, you're eligible for a course credit through the Disaster Information Specialization Program. It's a wonderful opportunity there. I would also highly recommend the Walsh Core Competencies article not just because it gives you a better idea of what the disaster workforce is really being asked to do and what they

are being asked to learn how to do, but if you are at all involved with medical education, just the way they came up with these core competencies and the methodology is really interesting.

The Turoff article is fabulous. It's really a huge report; it's hundreds of pages long. The executive summary is what I recommend, prepared for the National Library of Medicine. It's all about the information needs of emergency preparedness and management professionals.

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Presenter: Robin Featherstone

The presentation slides and course materials are on mlanet.org and the program information is at mlanet.org/education/dis. The server gets overloaded if too many people try to access the course materials at the same time.

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Presenter: Robin Featherstone

[DISCUSSION]

I'm happy to answer questions if anybody would like to ask them. Otherwise, I wish you happy reading and I look forward to hearing about the interventions that you've identified in tomorrow's class. We will be here at the same time, same place.