Policy Snapshot

Lessons Learned from Previous Disasters and Outbreaks: Access to Disaster Sites

With experience activating for more than **60 disasters and infectious disease outbreaks since 2006**, it is clear that many similar challenges occur during a response.

The following policies will improve the ability for both public and private sectors to strengthen communities' resilience and protect access to healthcare during a crisis.

ACCESS TO DISASTER SITES

As 92% of the critical healthcare infrastructure is owned by the private sector, it is important to ensure that private sector personnel have access to disaster sites to contribute to response and recovery efforts.
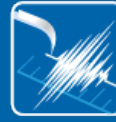
However, after disasters – when personnel and supplies are most urgently needed – is also the time when the private sector encounters the most difficulty accessing facilities and providing services. Facilitating private sector access to disaster sites has been a major preparedness and response challenge for decades due to a lack of coordination, limited understanding of the urgency of the issue and an unclear understanding of what healthcare supply chains require to operate. Government agencies at the federal, state and local levels, and their private sector partners, have increasingly begun to recognize the critical nature of this issue and are working to create solutions that ensure safety and security, while fostering flexibility to allow key organizations access.

HCR POLICY POSITION

Bolster state and local private sector disaster programs to ensure the access of critical personnel to resume deliveries of healthcare supplies (e.g., prescription medicines and other durable medical equipment) and essential services.

Several methods exist to enable critical private sector personnel access to disaster sites:

- ✓ **Formal programs run by state or local authorities**
- ✓ **Official programs operated by a third party – like CEAS or ER-ITN**
- ✓ **Emergency declarations with language on access**
- ✓ **Letters of entry written by companies or government officials**

While many aspects of everyday life are disrupted during and after a disaster, continued access to healthcare services cannot be one of them. Healthcare facilities such as hospitals, long-term care facilities, and dialysis centers, among others, require sustained operations in order to serve patients.
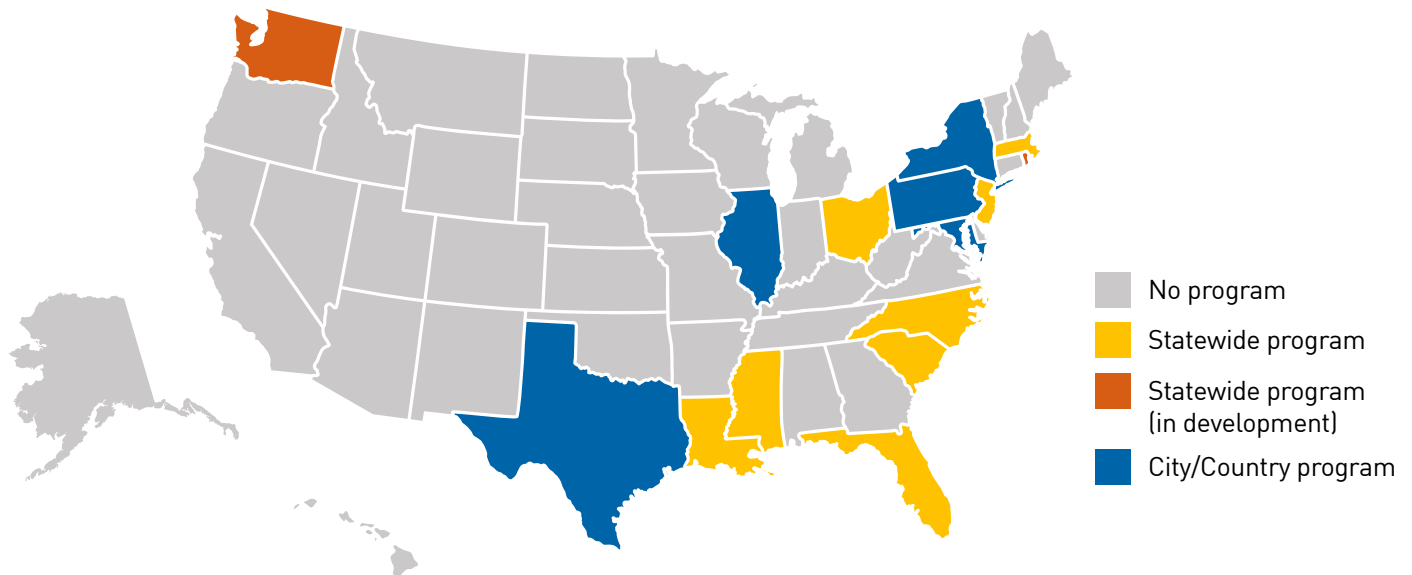
When an emergency response process begins, local police, state troopers, or the National Guard move quickly to secure the area and restrict access to ensure safety. Law enforcement and emergency responders control and limit access into disaster areas to ensure safety during an active response operation and mitigate dangerous and unsafe conditions that pose a threat to safety, such as protecting an area from crime or looting.

As a result, we see another impact of the disaster: healthcare workers and delivery trucks cannot easily access healthcare facilities, potentially leaving patients without the care or medicines they need.

Restricting access is required in order to protect communities and begin to establish stability in the immediate aftermath of a crisis. Law enforcement or other local authorities managing the response must balance safety and security with the need to validate the identity and role of each person requesting access in order to grant entry only to those who truly require it.

Unfortunately, restricting access to disaster sites can hinder a community's response and recovery process by preventing vital personnel and deliveries access into the areas that need it the most.

CURRENT ACCESS AND CREDENTIALING PROGRAMS

Legend:
- No program
- Statewide program
- Statewide program (in development)
- City/Country program

References
Critical Infrastructure Protection: Progress Coordinating Government and Private Sector Efforts Varies by Sectors' Characteristics (http://www.gao.gov/assets/260/252603.pdf, accessed September 2016)
Charting A Path Forward on Crisis Reentry For the Emergency Service Sector: Report of the Emergency Services Sector Coordinating Council (https://www.sheriffs.org/sites/default/files/uploads/documents/ESSCC%20Report.pdf, accessed September 2016)
Healthcare Ready report: Access Denied: Delivery of Critical Healthcare Products and Personnel to Disaster Sites (https://www.healthcareready.org/programs/disaster-access, accessed September 2016)