

TOWARD A PEDIATRIC DISASTER HEALTH CORE CURRICULUM

To the Editor

Significant progress has been made in understanding the health needs of children in the event of a disaster. Through the efforts of the National Commission on Children and Disasters (NCCD), the American Academy of Pediatrics Disaster Preparedness Advisory Committee,¹ and others, the field of disaster health has moved steadily toward considering the unique vulnerabilities of children when planning for response and recovery. As noted in the NCCD final report, however, a critical gap remains in the development of pediatric core competencies, curricula, and training for health care providers who will care for children in a disaster.² The National Center for Disaster Medicine and Public Health (NCDMPH), in collaboration with key partners, is responding to this need.

To begin developing pediatric disaster health core curricula, the NCDMPH convened stakeholders at a 2011 Pediatric Disaster Preparedness Curriculum Development Conference.³ A planning committee developed the following conference objectives:

- To initiate the development of the infrastructure and methodology needed to create a competency-based pediatric disaster preparedness training program;
- To demonstrate this approach by developing prioritized, role-specific education and training recommendations for select health care roles; and
- To demonstrate the capabilities of a public-private consortium for development of a disaster preparedness education and training program.

In meeting these objectives, expert stakeholder participants identified many of the health care provider roles requiring additional competency, the priority of their training, and 20 preliminary curriculum topic recommendations, which included 173 subtopics.

The NCDMPH's long-term vision is to support the creation of a competency-based, core pediatric curriculum using these topics. Three of these topics have been given priority for initial development based on recommendations of a federal panel:

- Tracking and reunification of pediatric disaster victims;
- Overview of radiation exposure in children; and
- Psychosocial impacts of disasters on children.

The use of a federal panel allowed consensus feedback in compliance with statutes.⁴ The panel confirmed that the topics (1) should resonate with a fairly broad audience of providers/responders, (2) could be part of a larger course, (3) should strike a balance between low probability-high acuity

and low acuity-high probability issues, and (4) the learning objects should fill current learning gaps.

Content for adult learning in disaster health can be packaged into learning objects,⁵ or "chunks" of content that can be used and combined by educators based on their needs. The initial learning objects in the pilot phase will be available to disaster health professionals and educators via the NCDMPH Web site to use through distance learning or in-person format. These initial learning resources will focus on key content that can be completed by learners in a one-to four-hour time frame, will include interactive components, and can be easily updated to maintain currency of the content. The learning objects will be designed to encourage learner engagement with the content, promoting opportunities for meaningful learning and subsequent retention.⁶

The NCDMPH will work with a subject matter expert in each of the three topics to develop the objectives and content of the learning object. A review process is built into the project in alignment with the NCDMPH's commitment to continuous learning improvement. While the federal panel will serve as a review team, periodic updates to the NCDMPH Web site will be posted to keep the field informed of the progress and to seek feedback.

The NCDMPH recognizes the critical need for core curricula across the spectrum of populations affected by disasters and is working with its federal, academic, association, and nonprofit partners to develop core competency recommendations for the disaster medicine and public health field.⁷ The NCDMPH is proud to take these initial steps toward establishing a competency-based pediatric disaster preparedness education and training curriculum.

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