Conceptualizing a Tribal Public Health Jurisdictional Risk Assessment Tool

Presenters:

Claire Grant
Washington State Department of Health

Kathleen Moloney
University of Washington

Evan Mix *University of Washington*

Additional Project Leads:

Nicole Errett (UW)
Amber McPherson (WA DOH)
Heleen Dewey (WA DOH)



Agenda

• **Background:** Overview of the development of the H²azaRDS Tool, which aims to support WA local health jurisdictions' public health emergency preparedness planning

Using the H²azaRDS Tool

- How H²azaRDS models disaster risk, vulnerability, and resilience
- What inputs are required from tool users
- Sample results and limitations

Discussion

- Would a tool like this be useful to Tribes?
- What would need to be changed, added, etc.?



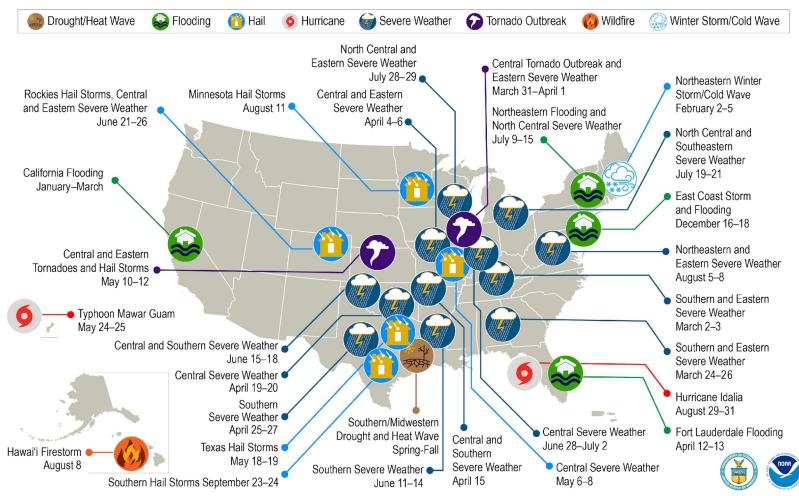
Today's Goals

- Summarize the H²azaRDS tool
- Discuss how a data-driven risk assessment tool for Tribes could look
- Consider who might use such a tool and for what
- Explore the feasibility of building a Tribespecific tool



BACKGROUND

U.S. 2023 Billion-Dollar Weather and Climate Disasters



How should local public health officials prioritize preparedness efforts for future disasters?

- Local jurisdictions face many hazards and have limited resources
- Local jurisdictions lack a standardized process to assess public health risk from disasters
- Data can help allocate resources strategically, but it is costly to collect and time-consuming to interpret at scale



Project Origins

Idea: The Washington State Department of Health (WA DOH) asked the University of Washington Center for Disaster Resilient Communities (CDRC) to build a tool to support local health jurisdictions' public health emergency preparedness planning

Funding: CDC Public Health Emergency Preparedness (PHEP) funding, administered by WA DOH

Health & Hazards Risk Decision Support ("H2azaRDS") Tool

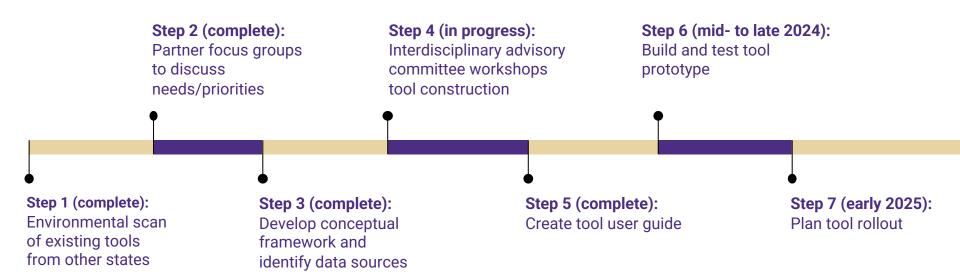


H²azaRDS Project Goals

- Develop a web-based tool that local health officials can use to assess public health risk from disasters and identify risk drivers
- Allows local jurisdictions statewide to conduct locally tailored risk assessments using a consistent methodology and the best data available
- Tool is developed by the CDRC and maintained by WA DOH to minimize burden on local jurisdictions

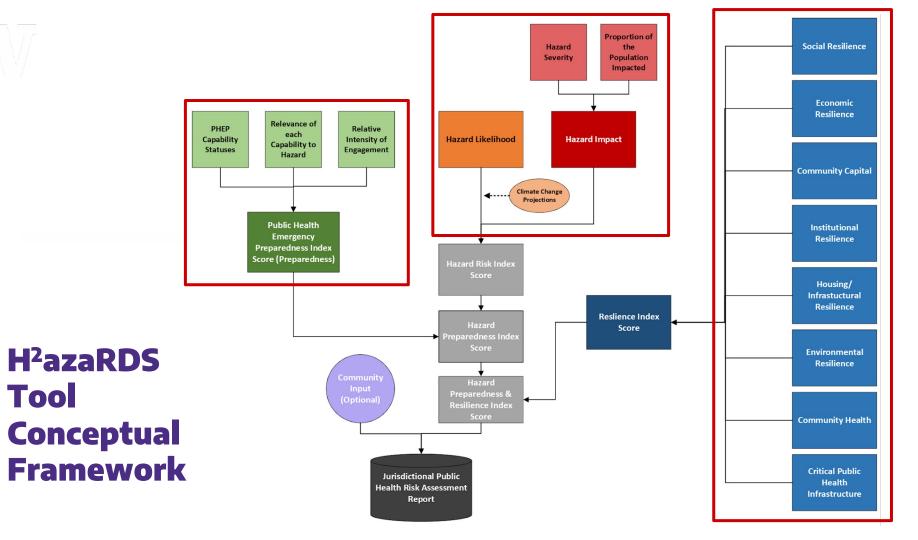


Project Timeline





USING THE H²azaRDS TOOL



User Inputs Required for Tool Use

- Local Hazard Information:
 - Select hazards relevant to the local jurisdiction
 - Rank hazards' relative probability
 - Estimate potential hazard severity
 - Estimate the proportion of the population impacted by each hazard

 Relative Intensity of Engagement: the intensity of response each hazard will necessitate from the local health jurisdiction using the tool

User Inputs Required for Tool Use (Cont.)

PHEP Capability
 Operational
 Readiness:

The local health jurisdiction's ability to perform each of the 15 CDC Public Health Emergency Preparedness (PHEP) capabilities

- 1. Community Preparedness
- 2. Community Recovery
- 3. Emergency Operations Coordination
- 4. Emergency Public Information and Warning
- 5. Fatality Management
- 6. Information Sharing
- 7. Mass Care
- 8. Medical Countermeasure Dispensing
- 9. Medical Materiel Management and Distribution
- 10. Medical Surge
- 11. Non-Pharmaceutical Interventions
- 12. Public Health Laboratory Testing
- 13. Public Health Surveillance and Epidemiological Investigation
- 14. Responder Safety and Health
- 15. Volunteer Management



Image source: US Centers for Disease Control & Prevention

Data Pre-populated in the Tool

• Community Resilience:

- ~100 individual variables from datasets collected by the US Census Bureau, EPA, CDC and numerous other sources
- Used to estimate pre-disaster, community-level characteristics that may impact hazard resilience

Relevance of each PHEP Capability to Hazard:
 Data which measures the relevance of each CDC
 PHEP capability to local health jurisdictions' ability to respond to and recover from a potential hazard

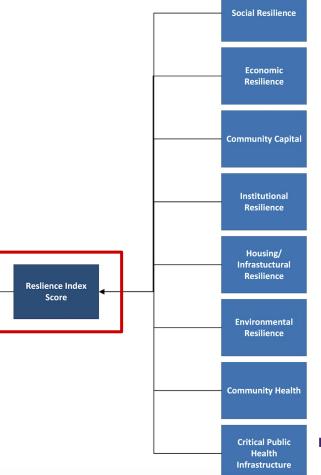
Tool Results Overview

- The tool will produce a report that presents and explains 5
 different index scores
- These scores are based on previously compiled data and user inputs; some scores are calculated separately for each hazard, while others are calculated as overall scores
- Results are presented with customizable, interactive visualizations to identify the domains contributing most to risk for each hazard and overall



Resilience Index Score

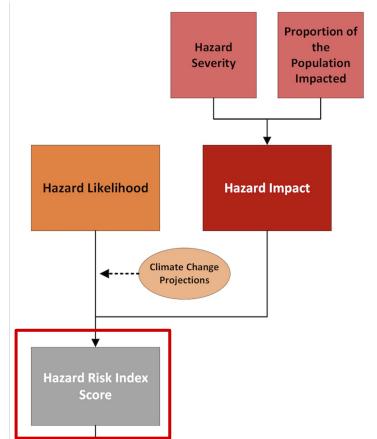
- Measures overall resilience to hazards
- A function of social resilience, economic resilience, community capital, institutional resilience, housing/infrastructure resilience, environmental resilience, community health, and critical health infrastructure
- The tool provides one overall resilience index score





Hazard Risk Index Score

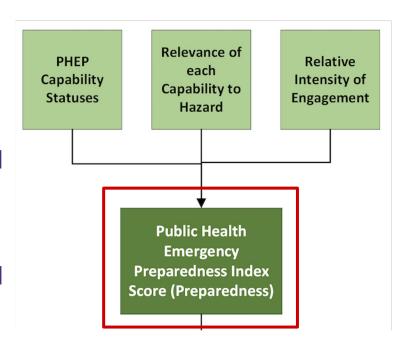
- Measures the potential risk a hazard poses
- A function of hazard exposure, potential severity, and relative likelihood of occurrence
- A separate hazard risk index score is provided for each hazard





PHEP Index Score

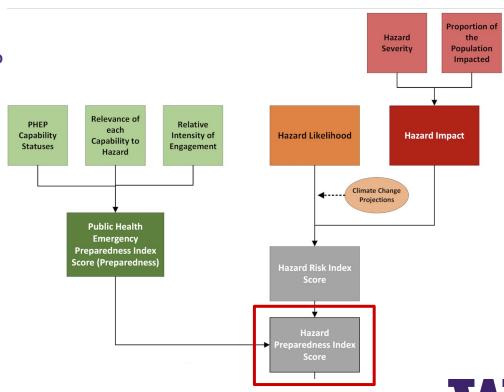
- Measures public health emergency preparedness in the local health jurisdiction
- A function of status of each CDC-defined PHEP capability, the relevance of each PHEP capability to each hazard considered, and the relative expected intensity of engagement for each hazard considered
- A separate PHEP index score is provided for each hazard





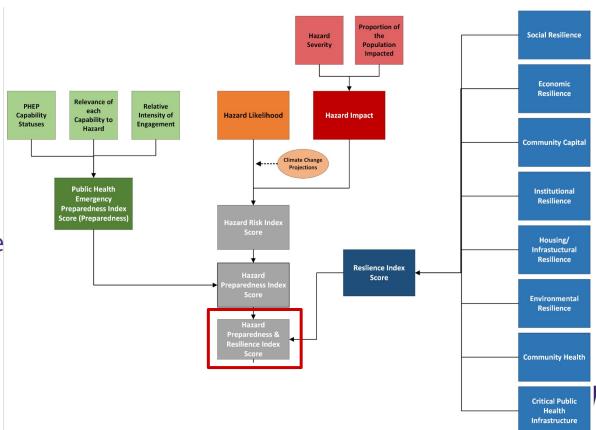
Hazard Preparedness Index Score

- Measures the extent to which the jurisdiction's current PHEP capabilities align with its risk from each hazard
- Combines the hazard risk index score and PHEP index score for each hazard
- A separate hazard preparedness index score is provided for each hazard



Hazard Preparedness and Resilience Index Score

- Overall score measuring the jurisdiction's state of readiness for hazards
- Combines the resilience index score, hazard risk index score and PHEP index score
- A separate score is provided for each hazard



Limitations of the Tool

User-ranked inputs

- Increases user workload
- Ranking hazard likelihood measures only perceived relative likelihood, not actual likelihood of occurrence

Relevance of PHEP capabilities

CDC PHEP capabilities
may not be relevant for
those not funded by CDC
and/or who conceptualize
public health emergency
preparedness differently

Census data accuracy

 Census data has historically undercounted members of tribal nations & lacks the desired accuracy



DISCUSSION QUESTIONS

Discussion Question 1

Would Tribes benefit from a data-driven assessment tool like this one?

Consider:

- Relevance to specific needs of different Tribes
- Desire/ability to access and use
- Is a consistent, uniform approach like this desirable?



Discussion Question 2

Would a Tribe-oriented tool **need to be different?** If so, how?

Consider:

- Accessibility issues
- Unique concepts/domains to include in the model
- Data availability/reliability
- Data sovereignty concerns



QUESTIONS OR COMMENTS?

Kathleen Moloney (kmoloney@uw.edu) Evan Mix (emix@uw.edu)