

OVERVIEW OF RECOMMENDATIONS

SEPTEMBER 2020 · A FRAMEWORK FOR ASSESSING MORBIDITY AND MORTALITY AFTER LARGE-SCALE DISASTERS

APPROACHES FOR ASSESSMENT: COUNTS AND ESTIMATES

Recommendation 2-1: Adopt and Support the Use of a Uniform Framework for Assessing Disaster-Related Mortality and Morbidity

The Department of Health and Human Services and the Department of Homeland Security, including the Office of the Assistant Secretary for Preparedness and Response, the Centers for Disease Control and Prevention, the Centers for Medicare & Medicaid Services, and the Federal Emergency Management Agency, should adopt and support the use of a uniform framework for assessing disaster related mortality and morbidity before, during, and after a disaster by state, local, tribal, and territorial entities; public health agencies; and death investigation and registration systems.

Recommendation 2-2: Report Both Individual Counts and Population Estimates

Both individual counts and population estimates should be used as accepted standards for reporting by state, local, tribal, and territorial entities and supported by the federal agencies as indicators of mortality and morbidity to determine the impact of disasters over time.

OPERATIONALIZE UNIFORM SYSTEMS, TOOLS, AND PRACTICES FOR ASSESSING INDIVIDUAL-LEVEL MORTALITY

Recommendation 3-1: Strengthen Existing Systems to Improve Individual-Level Mortality Data Quality

The Centers for Disease Control and Prevention, through the National Center for Health Statistics, should lead an enterprise-wide initiative to strengthen existing death registration systems to improve the quality of disaster-related mortality data at state, local, tribal, and territorial levels.

Recommendation 3-2: Standardize Data Collection and Reporting of Individual-Level Reported Disaster-Related Mortality

The National Center for Health Statistics, working with the states, should update the Model State Vital Statistics Act to drive uniformity of data collection and recording with respect to disaster-related mortality.

STANDARDS FOR DEFINING AND COLLECTING MORBIDITY DATA

Recommendation 3-3: Develop a Set of Standards for Morbidity Data Collection

The Centers of Disease Control and Prevention, in collaboration with the Centers for Medicare & Medicaid Services, the Council of State and Territorial Epidemiologists, and the National Association of County & City Health Officials should establish and promulgate national standards for the collection of disaster-related morbidities before, during, and after disasters.

ANALYTICAL METHODS FOR POPULATION ESTIMATES

Recommendation 4-1: Fund and Conduct Research on Analytical Methods for Population Estimates

The Centers for Disease Control and Prevention, the National Institutes of Health, and the National Science Foundation should establish a national research program to advance analytical methods for conducting population-level estimates of mortality and morbidity related to disasters.

ANALYTICAL METHODS FOR POPULATION ESTIMATES (CONTINUED)

Recommendation 4-2: Enhance Capacity to Collect and Analyze Population Estimates for Mortality and Morbidity

The Department of Health and Human Services, together with state, local, tribal, and territorial agencies, should proactively develop partnerships to enhance the capacity to collect and analyze population-level disaster-related morbidity and mortality information.

ACCESS TO AND USE OF MORTALITY AND MORBIDITY DATA

Recommendation 4-3: Facilitate Access to and Use of Actionable Mortality and Morbidity Data by State, Local, Tribal, and Territorial (SLTT) Entities

- The Department of Health and Human Services should work with the Centers for Disease Control and Prevention, the Federal Emergency Management Agency, the Office of the Assistant Secretary for Preparedness and Response, and other federal agencies to facilitate access to essential mortality and morbidity data to SLTT entities and academic research institutions throughout the disaster cycle. These data should be provided proactively and in a manner that is actionable for situational awareness and disaster response at a state and local level.
- Additionally, state and federal agencies should fund the development and testing of analytical tools and work collaboratively with local entities to use mortality and morbidity data in meaningful ways.

PROFESSIONAL TRAINING AND SUPPORT

Recommendation 3-4: Strengthen the Capacity of the Medicolegal Death Investigation System to Assess Disaster-Related Mortality

The Centers for Disease Control and Prevention, in collaboration with state agencies and professional associations, should strengthen the value, capacity, and capability of the medicolegal death investigation system to improve investigation, training, data development and collection, and case management.

Recommendation 3-5: Strengthen the Role of the Medicolegal Death Investigation and State Death Registration Systems in the Disaster Management Enterprise

State, local, tribal, and territorial public health and emergency management departments should integrate the professionals and agencies from the medicolegal death investigation and death registration systems in all aspects of preparedness and planning.

To read the full report, please visit
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