



Medical Advisory Service

Occupational and Environmental Medicine, Public Health, and Toxicology Consultants

Emergency Management

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The occupational medicine service is in a favorable position to assist employers on issues of emergency management and disaster planning. Occupational physicians have special training on chemical, biological, physical and psychological hazards in the workplace that translate readily to emergency management.

The occupational medicine service has had a traditional role in disaster planning. The response to certain emergencies depends on effective the occupational medicine service planning, such as pandemic management.

This aspect of occupational health is based on a management model (adapted from a model promulgated by Alcan in 2002) called the "Value Pyramid", which suggests that any organization that creates wealth and adds value necessarily rests on a foundation required to assure its security. That security may take the form of managing financial risk, protecting the reputation (or brand) of the company, ensuring good relations with stakeholders, preventing catastrophic events, and, at an extreme, measures to ensure the survival of the enterprise through protecting its leaders, key employees with technical skills, workforce, and assets and with planning for business continuity.

There has been a great deal of interest over the last decade in the role that the occupational medicine service services have played in ensuring the security of an organization under threat and supporting business continuity in times of crisis. The occupational medicine service is not and never will be in a position to rescue the entire corporation in the event of catastrophe. However, there are many ways that the occupational medicine service can contribute, such as participation in disaster planning, and doing so engages the occupational medicine service in critical functions that can also help it do its day-to-day work and that add value.

The Table lists some of the ways by which the occupational medicine service can assist in a true emergency.

The most critical part of the infrastructure of any enterprise is the people who work in that enterprise, particularly those with experience and those who occupy key production jobs. Workforce protection is therefore a critical part of infrastructure protection.

Disaster planning has traditionally been one of the core functions of the medical or the occupational medicine service department and of occupational physicians in corporate settings. The physician has usually assumed responsibility within the organization for planning the medical response to emergencies, identifying facilities and resources for dealing with serious injuries and mass casualties and providing health protection for key personnel if required.

The occupational medicine service should be prepared to participate in planning for emergencies and will make recommendations for management. The occupational medicine service obviously cannot take over responsibility for disaster planning and emergency management from a business unit but will assist it when possible.



Table: The Occupational Medicine Service and Emergency Management.

- Fitness for duty evaluations for first responders (security, firefighters).
- Managing personal protective equipment training and fit testing.
- Continuity of business following a catastrophic event.
- Instant connectivity to resources for assistance in a health-related emergency (e.g. immunization campaigns. (Better to settle liability issues in advance.)
- Surveillance of the workforce and the early detection of an outbreak (for example, for healthcare facilities as an indicator of H1N1 impact during an outbreak).
- Integration of emergency response with public health agencies.
- Surge capacity in the event of a local event requiring mobilization of all available medical resources.
- Input into vaccination programs and other protective measures.
- Determining acceptable to return to work or to re-enter a facility that has been contaminated or damaged.
- Assisting executive personnel with medical problems (e.g. diabetes) during an emergency.
- Survival and medical support of key personnel during a catastrophic event (for example, during evacuation of financial institutions from Manhattan to temporary quarters in New Jersey following 9-11).
- Continuity of business following a catastrophic event.
- Fatality and forensic investigation.