



ASPR

NACCD Funding Strategies Report

Dr. Scott Needle, NACCD Chair

May 1, 2018 NACCD Public Teleconference

Introduction

- The National Advisory Committee on Children and Disasters (NACCD) was established to provide:
 - Expert advice and consultation on the medical and public health needs of children related to all-hazards emergencies
 - Input on preparedness activities
 - Input on medical and public health grants and cooperative agreements

Task and Methods

The NACCD recognized a need to analyze funding and preparedness:

- Purpose of analysis – to understand and prioritize pediatric preparedness, funding streams, and specific activities that would be most beneficial to children
- Identify existing funding streams
- Strengthen pediatric preparedness in face of limited resources
- Challenge to develop an assessment of pediatric return on investment (ROI) in relation to disaster planning

Task and Methods (cont'd)

- Working Group Formation - Funding Strategies
 - Sarita Chung, MD FAAP
 - Scott Needle, MD FAAP
 - Anne Zajicek, MD, Pharm.D, FAAP
- Main question at the forefront:
 - What could the ASPR and the HHS Secretary do and/or influence to strengthen pediatric disaster readiness funding and funding effectiveness?

Subject Matter Experts

- Jeremy Bartlett, Pfizer
- Tim Bushnell, NIOSH
- Dan Dodgen, ASPR, OPP
- Richard Gorman, NIH
- Stephane Hallegatte, World Bank
- Melissa Harvey, HPP
- Jack Herrmann, ASPR, OPP
- Richard Korsmeyer, Pfizer
- Steve Krug, NPRSB
- Greg Margolis, ASPR (formerly)
- Clark Nardinelli, FDA
- Robert Ottenhoff, Center for Disaster Philanthropy
- Sarah Park, NACCD
- LCDR Erica Radden, FDA
- Julie Schafer, BARDA
- Virginia Simmons, ASPR, AMCG
- Judy Skaggs, Pfizer
- Charles Thompson, Pfizer

Key Findings

1. There is a demonstrable economic benefit to investing in children before, during and after disasters
2. Pediatric disaster preparedness can be incentivized through a variety of mechanisms
3. It is unclear how much funding is devoted to pediatric disaster preparedness and response, and it is difficult to locate pediatric-specific funding opportunity announcements (FOAs)

Best Practices

1. Continue to develop and leverage partnerships between government and nongovernmental organizations
2. Continue to prioritize MCM projects that have dual-use or are otherwise economically lucrative to pharmaceutical companies in developing SNS MCMs (with pediatric focus)
3. Ensure a dedicated funding stream for pediatric needs

Future Research Needs

- Create a dedicated and pre-established fund and infrastructure reserved for pediatric research in disasters
- Conduct research on the effectiveness, cost-effectiveness and ROI on various pediatric disaster preparedness measures to maximize preparedness value, given limited funding resources

Recommendations Summary

Implementation Recommendations

1. Evaluate how much funding from ASPR and HHS has been used toward pediatric goals and objectives in the past 5-10 years
2. Require Public Health Emergency Preparedness (PHEP) cooperative agreement and Hospital Preparedness Program (HPP) grantees to report progress on specific pediatric preparedness metrics annually
3. Change HPP grant terms to longer than one year
4. Develop metrics and analyses of cost effectiveness that include long-term quality-adjusted life years (QALY), lifetime productivity and other alternative criteria that promote investment in children

Recommendations Summary (cont'd)

Funding Recommendations

1. Fund the HHS Public Health Emergency Fund to allow rapid response to new threats, and particularly pediatric-focused response, without depending on Congressional appropriation for every new event or threat
2. Increase funding for existing preparedness programs to strengthen everyday preparedness and resiliency and reverse funding cuts from the past decade

Recommendations Summary (cont'd)

Research Recommendations

1. Create a dedicated and pre-established fund and infrastructure reserved for pediatric research in disasters
2. Conduct research on the effectiveness, cost-effectiveness and return on investment on various pediatric disaster preparedness measures in order to maximize preparedness value, given limited funding resources

Recommendations Summary (cont'd)

Other Recommendations

1. Improve the ability of potential grantees and contractors to locate pediatric disaster funding opportunity announcements by standardizing language in these FOAs

Thank you' s

- Former National Advisory Committees (NAC) staff:
 - CAPT Charlotte Spires
 - CDR Jyl Woolfolk
 - CDR Evelyn Seel
 - Mr. Justin Willard
- Current NAC Staff:
 - CDR Jonathan White
 - Dr. Maxine Kellman
 - Ms. Belinda Green
 - Ms. Sarah Verbofsky

Questions?