The Role of the Academic Medical Center When Disaster Hits

Homes underwater after flooding in Louisiana. Buildings buried under rubble after an earthquake in Italy. You may see similar images on television and think: Shouldn’t Johns Hopkins, with all its resources, be doing something? It’s human nature to want to help. However, “helping” may not always be helpful. It may actually be detrimental to the cause and place personnel at undue risk. At Johns Hopkins Medicine, we have a long-standing multidisciplinary response team and a system in place to determine whether or not sending a response team following a disaster is appropriate.

The Johns Hopkins Go Team

The Johns Hopkins Go Team, which is part of the Johns Hopkins Office of Critical Event Preparedness and Response (CEPAR), is a multidisciplinary medical team that can rapidly deploy to areas of crisis following a natural or man-made disaster. The team comprises about 200 health care workers from disciplines across Johns Hopkins Medicine. Team members undergo specialized training to allow them to activate and be effective response agents during specific times of need.

In the event of a disaster, the Go Team would be prepared to respond quickly if Johns Hopkins receives a specific request from a state or federal agency or other official entity, and the approval from Johns Hopkins Medicine leadership and CEPAR. These requests might be issued in the case of events that completely overwhelm the health care resources of the region or after a major disaster that affects one of our national or international Johns Hopkins affiliates. For example, in the wake of hurricanes Katrina and Rita in 2005, Johns Hopkins responded to the U.S. government’s request to field a full field hospital in Meridian, Mississippi, as well as a Louisiana state request for smaller units in Jefferson Parish, where our team delivered medical services in a school for a month. In 2010, the Go Team deployed to Haiti as requested by the U.S. Department of Defense. If the Go Team is deployed, CEPAR would ensure that the environment is safe, security is assured, an emergency exit plan is in place, and provisions for food and housing are available. Depending on issues associated with arriving in the disaster zone (i.e., airports or ports are unusable), it can take days to physically get a team to the
affected area. This, in turn, means that most of the acute injuries, such as wounds, are often already treated. Responders often provide care for subacute injuries (i.e., infections from already treated wounds, respiratory concerns or diarrheal illnesses due to water system issues) or chronic illnesses (i.e., patients in need of medication for existing conditions, like diabetes).

**What Isn’t Helpful**

Traveling as an individual (or group) of well-meaning health providers to an area impacted by a disaster without a formal request is not recommended and could be dangerous. Disaster zones are typically unsafe, and individuals who decide to travel to these locations could put themselves at risk. Most importantly, errant volunteers strain already scarce resources (i.e., volunteers need to be housed and fed). Individuals who are acting outside of their role with Johns Hopkins could also be at risk of losing coverage for malpractice, liability and disability insurance.

Unless specifically requested by a reliable relief organization, CEPAR recommends that individuals not send clothing or supplies to a disaster area via local drives. These items often don’t meet the needs of people in the affected area and require volunteers on-site to sort through them, potentially displacing them from another much-needed effort.

**What Is Helpful**

These days, the first medical response to disasters is from highly trained team of personnel of disaster medical assistance teams (DMATs). These teams are federal assets but state-based. Maryland has such a team, and CEPAR plays a major role in its DMAT leadership.

What can individuals do to help after a disaster?

Sending monetary donations to a reputable nonprofit disaster response organization, such as United Way or the American Red Cross, is the best way to help after a disaster. Officials will be able to use the financial resources in the most appropriate manner so they are used for what the area specifically needs.

For more information on the Go Team, please visit the [Go Team webpage](#).