The purpose of the study was to demonstrate that we could improve disaster preparedness of families with PN-dependent children utilizing individualized family education and distribution of personalized disaster survival toolkits” Toor et al (2018).

Abstract:

OBJECTIVES: Disruption in the care of special healthcare needs children may lead to life-threatening situations or preventable secondary conditions. California averages more than one hundred earthquakes per week. Subsequent power outages, damage to utility systems, and road damage after an earthquake can have grave consequences for families with parenteral nutrition (PN)-dependent children. The purpose of the study was to demonstrate that we could improve disaster preparedness of families with PN-dependent children utilizing individualized family education and distribution of personalized disaster survival toolkits.

METHODS: We administered a baseline survey to assess disaster preparedness of our families with PN-dependent children followed by individualized disaster survival toolkit distribution and education. We followed up with these families with phone call surveys at two and four months. A generalized estimating equation with both logistic and linear regression was used to analyze data over the follow-up period.

RESULTS: We found statistically significant improvements in developing a family emergency plan ($p < 0.0001$), having a basic emergency supply kit ($p < 0.0001$), having a completed emergency information form from the child’s provider ($p < 0.0001$), and the confidence level or readiness for a disaster ($p < 0.0001$). All participants had extra batteries for PN infusion pumps. Having alternative power sources, like a generator, did not significantly change over time.

CONCLUSIONS: Individualized disaster education helped families with PN-dependent children not only to prepare for a possible earthquake, but also to feel more confident in their ability to handle a natural disaster.
Reference: