

**National Consensus Panel on Emergency Preparedness for
Racially and Ethnically Diverse Communities
(OMH-NMAC-5-06)**

Final Report

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ABSTRACT

Goals and Objectives: The National Consensus Panel on Emergency Preparedness and Cultural Diversity (NCP) was established with the purpose of “providing guidance to national, state, and local agencies and organizations on the development of effective strategies to advance emergency preparedness and eliminate disparities for racial and ethnic communities across all stages of an emergency event”.

To this end, the primary objectives of the NCP were to:

- (1) Develop a national consensus statement to raise the awareness of the critical need and urgency of integrating culturally diverse communities into emergency preparedness and to provide cohesion around priorities for achieving this;
- (2) Develop guiding principles to provide key players and organizations at all levels with direction on how to effectively integrate diverse communities into preparedness planning and action; and
- (3) Develop specific and actionable guidance for operationalizing recommendations in the consensus statement and guiding principles and offer information on what would consist of promising and best practices.

Project Activities: To achieve the NCP’s goal and objectives, the following activities were undertaken: creation of the NCP, comprised of 34 leading national, state and local public and private organizations representing a breadth of fields and disciplines; convening of the First NCP Meeting in September 2007 to develop consensus around core priorities for integrating diversity into preparedness; development of consensus statement and guiding principles based on findings

from first meeting; dissemination of statement and principles through formal press release and other channels; translation of statement into Spanish; convening of Second NCP Meeting in October 2008 to develop consensus around specific action steps for operationalizing recommendations in the statement and principles; and development of final actionable and operational guidance.

Results and Outcomes: The NCP's work offers to the field for the first time a cohesive set of priorities, guidance and specific strategies for integrating the needs of racially and ethnically diverse communities in emergency preparedness programs, plans and actions. These recommendations are provided in the form of a National Consensus Statement, Guiding Principles, numerous presentations, meeting proceedings and a final guidance document (which is still in development through an extension grant) including specific and actionable information. This work has been recognized across the nation and leading agencies such as the American Public Health Association have identified its uniqueness in offering critically needed directions on how best to include, prepare and respond to racially and ethnically diverse communities in an emergency event.

PROJECT NARRATIVE

A. PURPOSE OF PROJECT

The National Consensus Panel on Emergency Preparedness and Cultural Diversity (NCP) was established with the mission of “providing guidance to national, state, and local agencies and organizations on the development of effective strategies to advance emergency preparedness and eliminate disparities for racial and ethnic communities across all stages of an emergency event”.

The creation of the Panel was based on the recognition that effective implementation of emergency preparedness strategies and actions, from planning through execution, will require the involvement and commitment of all residents, including the growing numbers of racially and ethnically diverse communities across the nation. Prior to this Panel, and as evidenced by the tragedy surrounding Hurricane Katrina, no concerted effort had occurred at the national level to explicitly understand and incorporate the unique needs of racial/ethnic minorities in preparedness programs and policies. Furthermore, no effort had been made to provide cohesion around key priorities and objectives for achieving this.

B. GOALS/OBJECTIVES/ACTIVITIES

The goal of this project was to bring together a diverse group of individuals and organizations from across the nation to share practices and lessons learned as well as to formulate and recommend related strategies, programs and policies to advance preparedness for diverse communities. To this end, the primary objectives of the NCP were to:

- (4) *Develop a national consensus statement on integrating cultural diversity with public health emergency preparedness.* The purpose of developing a consensus statement was to raise the awareness of the critical need and urgency of integrating

diverse communities into preparedness as well as to provide cohesion around priorities and core objectives for achieving this. This objective was fully met with the drafting and formal release of a National Consensus Statement on Emergency Preparedness and Cultural Diversity on June 11, 2008.

(5) Develop guiding principles to provide key players and organizations at all levels with direction on how to effectively integrate diverse communities into preparedness planning and action. This objective was fully met with the drafting and formal release of guiding principles on June 11, 2008.

(6) Develop sector-specific recommendations on effectively incorporating needs of diverse communities in preparedness and provide specific guidance on what would consist of promising and best practices. We are well on our way to achieving this objective. The Second NCP meeting focused on this objective and panel members along with Drexel Project Staff are in the process of developing a guidance report with these specific recommendations under an extension grant from the HHS Office of Minority Health (HHS/OMH).

C. PROGRAM PLAN

Phase 1: November 2006 – June 2008

Phase 1 of the project was initiated on November 1, 2006, focusing on objectives (1) and (2). The following narrative describes the activities and tasks that were successfully completed in meeting stated objectives.

Field and Literature Review. Beginning in November 2006, staff at CHE conducted a comprehensive review of literature, research, programs and policies addressing emergency preparedness for culturally diverse communities. Findings from the review were compiled in summary documents to serve as background materials for the First NCP Meeting. The review and findings covered such topics as emergency risk communication, building community partnerships, drills/exercises, and measurement/evaluation—all in the context of preparedness for minorities. See *Appendix A* for a list of Panel Members.

Identifying and Formally Inviting Panel Members. Between March and July 2007, we worked with the leadership at HHS/OMH to identify key individuals and experts at leading national, state and local organizations to serve on the Panel. Our intent was to include representatives from a range of sectors including homeland security and emergency management (e.g., DHS, FEMA and Red Cross); public health and prevention (e.g., CDC, APHA); experts in addressing racial and ethnic disparities in health care, cultural competence and language assistance; and other key sectors. Thirty-four agencies were selected to form the NCP. Summaries of their work related to preparedness and diversity as well as individual expertise were compiled and included as part of meeting materials.

Convening the First NCP Meeting. The First NCP Meeting convened on September 10-11, 2007 in Washington, D.C. with the purpose of developing consensus around priorities and broad guidance for integrating diversity issues into preparedness. The Nominal Group Technique (NGT), a structured small group decision-making methodology which combines qualitative and quantitative processes, was used to drive the consensus-making process. Day 1 of the meeting

was largely devoted to NGT exercises and Day 2 focused on presenting findings and reaching a general consensus (see *Appendix B* for the Agenda).

Findings from the NGT exercises revealed almost unanimous consensus among Panel Members that the full, active engagement and involvement of racially/ethnically diverse communities is fundamental to any emergency preparedness and management strategy. In this context, Panel members collectively identified the following action/process priorities for integrating and engaging diverse communities: identifying and locating diverse populations within a community and assessing their needs, challenges, barriers and opportunities; building sustainable partnerships between public health/emergency agencies and community-based organizations (CBOs); tailoring risk communication to meet distinctive language, culture, literacy and trust related needs of diverse populations; developing drills and exercises that incorporate specific scenarios around diverse communities and application of cultural competence principles; coordinating resources between public health/emergency agencies and CBOs/diverse communities; and developing policies and funding mechanisms to drive plans and actions for integrating diversity into preparedness. These findings formed the foundation of the National Consensus Statement and Guiding Principles.

Developing the National Consensus Statement and Guiding Principles. Following the first meeting and between October 2007 and March 2008, we worked with Panel Members to draft, review, revise and finalize the National Consensus Statement and Guiding Principles (see *Appendix C* for final Statement and Guiding Principles). April and May 2008 were focused on obtaining formal endorsement of the statement by all Panel Members as well as the various HHS

agencies (e.g., Office of Minority Health (OMH), Office of Civil Rights (OCR), Office of the Assistant Secretary for Preparedness and Response (ASPR), and others).

Press Release and Dissemination of National Consensus Statement and Guiding Principles.

Between April and June 2008, we worked with Burness Communications on developing a press release and planning other press/media related activities to promote and disseminate the Statement and Guiding Principles. On June 11, 2008, a formal press release was issued (see *Appendix D*), with several public and private organizations picking up on the release and featuring it in their newsletters, blogs and websites (e.g., American Hospital Association, Association of Schools of Public Health, Asian/Pacific Islander American Health Forum, Families USA, Robert Wood Johnson Foundation and others). To date, we have been working with our Panel Members to continue to disseminate the statement to their constituents and partners, including providing translations of the statement. We have also presented the NCP's work at numerous international, national, regional and local meetings.

Phase 2: June 2008 – December 2008

Phase 2 of the project focused on objective (3). The following narrative describes the activities and tasks that were successfully completed in meeting the stated objective.

Translating and Vetting Spanish Version of the National Consensus Statement. Immediately following the release of the consensus statement, there was interest in translating it to Spanish. Drexel Project Staff worked with Emergency Community Health Outreach, a Minnesota-based organization with expertise in translating emergency messages for various racial/ethnic

communities, to translate the statement into Spanish. The translated version was then reviewed multiple times and vetted by Hispanic/Latino representatives on the NCP, including the National Council of Raza and HHS/OMH's team to ensure its cultural and linguistic appropriateness. The final version is included in *Appendix E*.

Preparation and Background Work for Second Meeting. Between August and October 2008, Project Staff were involved in a number of activities to prepare for the second convening of the NCP. This involved identifying and finalizing a meeting venue in California, travel logistics, follow-up with NCP members to ensure their continued participation, and preparation of meeting materials including an agenda, presentations and other background resources.

Second NCP Meeting. The Panel convened for a second time on October 16-17, 2008 in Los Angeles, CA to develop specific and actionable steps to guide organizations and agencies in operationalizing recommendations identified in the statement and principles. A series of NGT and group discussion exercises were carried out to facilitate the group in developing specific and operational strategies for each principle. Recommendations focused on the following themes and principles: need and asset assessment; community partnership and building trust; risk communication; training and education; capacity building to support culturally and linguistically appropriate services; measurement and evaluation; coordination of information, roles and responsibilities; and funding and program development.

Examples of operational guidance identified by the Panel include: ensuring efforts are “ground level up”, with active involvement and engagement of community leaders and representatives

across planning, implementation and evaluation (e.g., creating community advisory groups or inviting community representatives to serve on emergency planning committees); and coordinating efforts across the different sectors and players, ensuring that broader social and economic needs and circumstances of communities are identified and fully integrated. These and other related and specific guidance are intended to be first steps toward guiding organizations on coordinating and implementing key priorities identified in the National Consensus Statement and Guiding Principles.

Synthesizing findings from the Second Meeting and conducting a review of literature to supplement major findings. Following the second meeting, Project Staff worked to synthesize findings from each NGT and group discussion activity to distill major and common themes and begin to develop a guidance document with specific and operational recommendations. Project Staff also reviewed major publications and reports to supplement the panel’s recommendations as well as identify additional content areas.

Developing a guidance document with specific and operational recommendations. Project Staff and NCP members are currently in the process of drafting a guidance document to operationalize recommendations in guiding principles 1-8. This work falls under the extension grant received from HHS/OMH (through a cooperative agreement with NMAC).

D. EVALUATION

Evaluation Activities & Major Outcomes/Results

Project deliverables were largely used to measure attainment of project goals and objectives.

The following section outlines major deliverables/outcomes by objective.

Objectives 1 & 2: Develop a national consensus statement and related guiding principles.

- Deliverables/Outcomes:
 - Creation of a National Consensus Panel on Emergency Preparedness and Cultural Diversity, comprised of 34 leading national, state and local public and private organizations representing a range of disciplines including public health, emergency management, health care, cultural competence and diverse communities. See *Appendix A*.
 - Convening of First Panel Meeting in September 2008 in Washington, DC to develop consensus around core priorities for integrating diversity into preparedness. See *Appendix B*.
 - Development of the National Consensus Statement (English and Spanish versions) to raise awareness around the critical importance of meeting the preparedness and response needs of diverse communities and core priorities for achieving this. See *Appendix C* for English version and *Appendix E* for Spanish version.
 - Development of Guiding Principles to provide guidance to a broad audience on core priorities for integrating diverse communities into preparedness. See *Appendix C*.
 - Formal Press Release to facilitate the widespread dissemination of the consensus statement and principles. See *Appendix D*.

Objective 3: Develop specific guidance and recommendations on best practices.

- Deliverables/Outcomes:
 - Convening of Second Panel Meeting in October 2008 in Los Angeles, CA to develop specific and actionable guidance on operationalizing recommendations in the consensus statement and principles.
 - Development of Nominal Group Technique/Meeting Proceedings summarizing NCP's recommendations on specific and actionable steps for operationalizing key priorities identified in the statement and principles. See *Appendix F*.
 - Draft Guidance Document (still a work in progress through an extension grant from HHS/OMH)

In addition, quarterly progress reports requested by HHS/OMH were used to monitor progress in meeting stated objectives and report and overcome any programmatic problems. These quarterly reports are included in *Appendix G*.

Changes to the Project

We had originally anticipated convening the First National Consensus Panel Meeting in June 2007, which would have afforded us the opportunity to complete our work by the end of the originally proposed project period (i.e., February 28, 2008). However, several Panel Members were not available to meet during the summer of 2007. (Please note that our National Consensus Panel is comprised of high-level executives—e.g., CEOs, Presidents, Directors and Health Commissioners— representing 34 leading national, state and local public and private agencies.) The first meeting was therefore scheduled for September 2007 to ensure maximum attendance

participation, and engagement. Due to this change in schedule, all project related activities including the release of the National Consensus Statement and Guiding Principles were delayed by 3-4 months. In addition, the Second National Consensus Panel Meeting was pushed to October 16-17, 2008 for the same reasons as the first meeting. We therefore requested and received a no-cost extension until December 31, 2008 to complete all proposed activities and meeting project objectives.

E. RESULTS AND OUTCOMES

Implications of Results

Creation of a National Consensus Panel. Discussions with Panel members as well as those on the frontlines (in particular, first responders, community-based organizations and volunteer groups we interviewed in California for a related project) and others attest to the value of the Panel's work and confirm its critical role in providing cohesion around priorities, and core objectives for effectively incorporating diversity issues into preparedness. Discussions have also revealed the value of an advisory body representing a breadth of perspectives, knowledge and expertise to guide the range of sectors and players in emergency preparedness to integrate, adapt and apply recommendations around diversity into their programs, plans and policies. In describing the value of the Panel and its efforts, the Executive Director of the American Public Health Association (APHA), Georges Benjamin, stated: "The fact that the government and those of us on the frontlines could come together over this issue cannot be overstated. Never before has such a varied and well-respected group of agencies and organizations spoken with a single unified voice on the needs of racial/ethnic minorities in preparedness plans and actions."

Government bodies, such as the Federal Emergency Management Agency (FEMA) and the Centers for Disease Control and Prevention's (CDC), have recognized the value of the Panel and have featured them on their websites and preparedness materials. Others within HHS, including the Assistant Secretary for Preparedness and Response (ASPR) and the Office for Civil Rights (OCR) confirm the importance of this work and have indicated interest in advancing related initiatives. Non-federal agencies have built on the success of the Panel, leading to an expansion of its scope and application. Most notably, the California Endowment has provided new support for the Panel and its staff to assist in creating the first state-wide review and related recommendations on the preparedness/response/recovery status, challenges and opportunities for diverse communities and agencies in California. The panel has also received national media attention and has been featured on the CBS Radio Network. Finally, there has been growing interest in this work among regional and national conferences and meetings on public health and emergency management. For example, for a third year in a row, the National Emergency Management Summit has invited Drexel to present on the Panel's recommendations. Drexel project staff has also received invitations to feature their work in an encyclopedia on disaster relief.

National Consensus Statement and Guiding Principles. The National Consensus Statement and Guiding Principles developed by the NCP offer for the first time a cohesive set of priorities and strategies for incorporating diverse communities in preparedness plans and programs. The National Consensus Statement confirms that the active involvement and full engagement of racially and ethnically diverse communities is fundamental to any emergency preparedness strategy. The statement calls for a need to coordinate planning, roles and responsibilities and to

develop coherent guidance for all critical participants in public and private sectors to meet requirements for these communities across emergency preparedness. The consensus statement is also available in Spanish to inform and assist agencies/organizations representing and/or responding to Spanish-speaking communities on preparedness priorities.

In addition to the statement, the Panel issued a set of eight principles to provide guidance to a broad set of audiences (e.g., public health agencies, emergency management agencies, response and relief organizations, policymakers and community-based organizations) on integrating diverse communities into critical areas of preparedness such as risk communication, community engagement, training and education, measurement and evaluation, and program development. Such guidance is novel in the field, and offers for the first time, direction on issues related to culture, race/ethnicity, language and trust that must be addressed in emergency preparedness.

Operational Strategies for Integrating Diverse Communities in Preparedness. While this phase of work is still underway, findings from the Second National Consensus Panel Meeting offer specific strategies that organizations can take under each guiding principle to effectively prepare and respond to the unique needs of diverse communities. Such comprehensive guidance explicitly addressing the needs of racial/ethnic communities and offering practical and operational strategies for reaching them in emergency preparedness and response does not exist to date. Thus this guidance will fill a major void in the field and assist agencies/organizations in improving and tailoring their programs and services to the cultural and linguistic needs of communities, thereby ultimately reducing racial/ethnic disparities in the context of emergencies. See *Appendix F* for a summary of the proceedings from the second meeting. Preliminary

compilation of this information was also presented at NACCHO's Public Health Preparedness Summit in February 2009 and accepted for presentation at various scientific meetings such as UCLA's Public Health and Disaster Conference and the 2009 Annual APHA Meeting.

Factors that facilitated or inhibited the convening of the consensus panel

A factor that largely facilitated the convening of the consensus panel was a common mission, goals and objectives shared by all representative organizations. All panel agencies recognized the critical importance and need to improve preparedness and response actions for diverse communities, particularly post-Hurricane Katrina but also in the wake of numerous more recent disasters—e.g., San Diego Wildfires, Hurricane Ike, and the H1N1 (Swine) Influenza. This became especially evident in the approval process for the National Consensus Statement, as nearly all agencies indicated their formal written support. Another factor that facilitated the work of the panel included a lead agency (i.e., Drexel) coordinating communication, meetings and assignments to strategically utilize expertise and time of the panel, while maximizing engagement and feedback.

A factor that was somewhat challenging was coordinating the schedules of all panel members as the panel includes very high-level individuals at leading national, state and local agencies (e.g., Presidents, CEOs, Executive Directors and Health Commissioners) as well as public health and emergency management professionals who perform fieldwork on a regular basis. Persistent follow-ups through various communication channels—e.g., phone, e-mail and mail—as well as different formats—e.g., mass e-mails, personalized e-mails and personalized follow-up calls—were important to ensuring all members of the panel were informed and engaged in the work.

Future Directions

Recognizing its value and achievements to date, the vision for the National Consensus Panel as it moves forward is to become the preeminent resource for public health and emergency management organizations on integrating racially and ethnically diverse individuals and their communities into initiatives aimed at improving programs and policies for mitigation, preparedness, response and recovery. To this end, and over the next couple of years, Drexel Project Staff will explore opportunities to undertake the following:

- ***Integrate Consensus panel recommendations and guiding principles into the operations of national, state and local public and private agencies planning for and responding to emergencies.*** The next phase of work requires taking the Panel's recommendations to the level of operationalizing them within organizations. Organizations representing different sectors (e.g., public health, emergency management, hospital and health care, community-based) and at different levels (i.e., national, state and local) have varying needs, roles and responsibilities in emergency preparedness, mitigation, response and recovery. Thus it will be important to work with Panel member organizations to begin to understand and map how the guidance and recommendations can be applied to their specific and unique needs and organizational structures. This work might be carried out by forming sector-specific workgroups from within the Panel to chart how different sectors would use the recommendations to improve the cultural and linguistic competence of emergency preparedness operations and what challenges/barriers they might encounter.

- ***Work with diverse local communities and their representative organizations to understand their emergency preparedness needs and to discuss how the Panel’s recommendations can be applied to their unique circumstances.*** Our research and Consensus Panel work has reinforced the need to engage diverse communities in preparedness planning and implementation to effectively meet their needs in the event of an emergency. To this end, we suggest the need to understand community needs through co-educational forums across 3-5 communities that represent different diversity dynamics (e.g., a very racially/ethnically diverse urban city or a rural community with low-income migrant, LEP workers) to: understand major needs of local communities in the context of emergency preparedness; learn from local representatives preparedness barriers and challenges within their communities; and share and discuss community tools and strategies, existing as well as those developed by the panel (e.g., consensus statement, principles and diversity preparedness website) that can be integrated into local preparedness efforts for diverse communities.
- ***Work with Panel organizations representing racial/ethnic communities to develop a set of objectives for engaging them in interpretation and application of priorities identified in the National Consensus Statement and Guiding Principles to communities of concern.*** There is a need to transform the NCP’s policy work into practice and this can be achieved by engaging communities. There is an opportunity to draw on panel expertise, especially among those representing racial/ethnic communities (e.g., National Council of La Raza and the Asian/Pacific Islander

American Health Forum) to have them assist in interpreting Panel recommendations in the context of their communities' needs and circumstances and to have them provide direction on application. In particular, these organizations and their constituents can help in addressing questions around feasibility, practicality and adaptability of recommendations to communities.

F. DISSEMINATION AND UTILIZATION OF RESULTS

Dissemination

The NCP's work has been disseminated and shared with the field at large through various channels. First, the National Consensus Statement and Guiding Principles were formally released through a press release developed by Burness Communications (see *Appendix D*). The press release was picked up by national media (e.g., The Osgood File, CBS Radio Network) as well as various agencies and their websites and newsletters (e.g., Association of Schools of Public Health, American Public Health Association, American Hospital Association, Asian/Pacific Islander American Health Forum, CDC Public Health Law, Robert Wood Johnson Foundation, Harvard, Washington State Public Health Preparedness Department, Michigan Department of Community Health and many others).

The statement and principles were also posted on the online National Resource Center on Advancing Emergency Preparedness for Culturally Diverse Communities (www.diversitypreparedness.org) as well as disseminated through listservs such as CLAS-talk and the Diversity Preparedness list as well as through e-mails to Panel members and their partner agencies.

The Panel's work has also been presented at numerous international, national, regional, state and local meetings (see *Appendix H*) such as:

- National Emergency Management Summit, 2007, 2008, 2009
- New Jersey Office of Emergency Management Special Needs Advisory Panel, 2008
- Pennsylvania Department of Health's Public Health Training Session, 2008
- NACCHO Public Health Preparedness Summit, 2009
- UCLA Conference on Public Health and Disasters, 2009 (invited for presentation, but meeting was cancelled due to H1N1 (swine) influenza outbreak in April).
- 16th World Congress on Disaster and Emergency Medicine, Victoria, Canada, 2009
- Conference on Community Preparedness: The Power of Citizen Corps, 2009
- Annual APHA Meeting, 2009 (accepted for presentation)
- OMH National Leadership Summit, 2009

We are also currently working with the National Council of La Raza to disseminate the Spanish version of the consensus statement (see *Appendix E*) to Spanish-speaking constituents.

Utilization of Panel's Recommendations

The Panel's recommendations in the form of the National Consensus Statement and Guiding Principles offer for the first time a cohesive set of priorities and broad strategies that agencies should consider and incorporate in their plans, programs and activities for preparing and responding to diverse communities in emergencies. Similar to the National CLAS Standards, the

consensus statement and principles are intended to provide guidance on a range of issues pertaining to racially/ethnically diverse communities that can easily be integrated into preparedness and response actions—e.g., building trust between public health/emergency management agencies and communities, vetting translated materials for cultural and linguistic appropriateness, incorporating scenarios around limited English proficiency, immigrant status and racial/ethnic minorities into tabletop exercises and drills, engaging and eliciting community feedback in program development, and others.

Our presentations summarizing the Panel’s efforts and recommendations also offer valuable information to individuals and agencies, particularly on what issues to consider in effectively addressing and meeting the needs of minorities in times of emergencies. Also, while operational guidance is still in development, preliminary recommendations are available through our presentations and can provide additional and more specific direction to agencies.

G. RECOMMENDATIONS/LESSONS LEARNED

The following section offers a few recommendations for OMH and others undertaking similar consensus-making and policy development projects:

- (1) ***Recognizing the importance of ensuring that multiple stakeholders are represented at the table, including communities of concern.*** The NCP initiative was very successful in this way, as it brought together agencies representing a range of sectors and disciplines at all levels—e.g., public health, emergency management, hospital and health care, risk communication, and cultural competence—as well as major communities of concern—e.g., African American, Hispanic/Latino, Asian/Pacific Islander, American Indian/Native

American, and Arab American. Bringing multiple stakeholders together offered the opportunity to engage in a constructive dialogue to identify common goals and interests as well as reach consensus on significant issues—i.e., priorities and strategies for integrating diverse communities into preparedness planning and implementation.

(2) ***Ensuring all voices are heard throughout the consensus making process.*** A challenge to working in such a large group is that certain individuals/agencies are more outspoken than others and thus not all voices are represented in discussions. To address this potential issue, we utilized the Nominal Group Technique (NGT), a structured small group decision-making methodology which combines qualitative and quantitative processes to drive consensus, at both panel meetings. The NGT's brainstorming and round-robin activities offered each participant the equal opportunity to share their expertise, unique perspectives, and ideas with the group, limiting domination by a select few outspoken individuals and maximizing the number of distinct recommendations that were generated. The quantitative aspect of NGT—i.e., ranking of recommendations by most to least important by each individual—provided a systematic, yet simple and fair approach to reaching consensus and drawing common ground among the group. Following the first meeting, we followed up with individual panel members by phone to find out if they and their agency were in agreement with the consensus statement and principles developed by the group. This proved to be quite an iterative and cumbersome process, yet a valuable one as in the end we were able to ensure that all parties approved the content produced by the group.

(3) ***Maintaining some flexibility in terms of timeline and participation.*** Again, realizing the sheer size of the group, it was important for us to allow for flexibility in our timeline. While the First Panel Meeting was initially planned for the summer, we realized that many participants were not available until Fall. For this reason, we moved the first meeting to Fall, pushing most of our other project activities back by 3-4 months. This was important however for ensuring maximum participation and engagement in the first meeting (i.e., of the 34 organizations invited, 33 participated).

At the same time, it should be recognized that you cannot expect everyone to participate at all times. There will be some meetings where representation will be low. For example, in follow-up group conference calls, not all original individuals were able to participate due to other priorities or being out in the field. When this was the case, we were sure to keep panel members informed and engaged by sending out detailed e-mails about the objectives of the call as well as meeting notes. Furthermore, for individuals unable to participate we would request another representative from the organization to participate to ensure continuity.

APPENDICES

Appendix A. National Consensus Panel Members

Appendix B. First NCP Meeting Agenda

Appendix C. National Consensus Statement and Guiding Principles

Appendix D. Formal Press Release on National Consensus Statement and Principles

Appendix E. Spanish Version of National Consensus Statement

Note: Appendices A through D are also available on the Drexel University School of Public Health's website at

http://publichealth.drexel.edu/che/Current_Projects/National_Consensus_Panel_on_Emergency_Preparedness_and_Cultural_Diversity/69/.