

Training in Disaster Management: Enhancing Post-Graduate Clinical Preparedness through a Novel Curriculum

K.A. Martens,¹ S. Haydar,² M. Cicero,³ M. Rothman,³ C. Balm,³ J. Paturas,¹ J. Arnold⁴

1. Yale Center EPDR, New Haven, Connecticut, USA
2. USA
3. Yale School of Medicine, New Haven, Connecticut, USA
4. Santa Clara Valley Medical Center, San Jose, California USA

Background: Disaster medicine is not a standard component of residency training programs in the United States. During recent disasters, the need for training physicians and hospital personnel in disaster management vulnerable and healthy populations has become apparent.

Hypothesis: Didactic education increase the knowledge of medical practitioners in disaster preparedness, response, and recovery.

Methods: Three separate, complimentary courses were developed as a disaster management curriculum. These courses were: (1) Emergency Disaster Medical Management (EDMM); (2) Small Victims, Big Challenges: Paediatric Disaster Preparedness, Response and Recovery (SVBC); and (3) Geriatric Assessment, Treatment and Recovery in Disasters (GATRD). Each course was reviewed and conducted by subject matter experts (SME). Participants included medical students and post-graduate residents in emergency medicine, pediatrics, or internal medicine. A pre-/post-test consisting of 15 questions for each subject area was developed by disaster medicine SMEs/NDLS instructors and validated by an evaluation expert.

Results: Evaluation outcomes demonstrated an increased knowledge of disaster medicine among trainees. Participants in the EDMM course demonstrated a 56% increase in scores between pre-and post-course examinations with a confidence interval (CI) of 90% (two standard deviations), while SVBC course participants demonstrated a 61% increase in scores. Standard statistical evaluation methods were employed to ensure that the increase in scores is significant and not due to random fluctuation.

Conclusions: This disaster management curriculum improves preparedness, response and recovery knowledge among post-graduate medical resident trainees. This curriculum may be utilized for increasing disaster medicine competency and credentialing and hospital surge capacity capability. Future plans include multi-center implementation to establish national and international applicability of this model.

Keywords: curriculum; disaster management; education; preparedness; recovery; response

Prehosp Disast Med 2007;22(2):s7

Session 3: Credentialling 1

Chairs: Geer Seynaeve; P. Hustinx

Workshop Using Action Cards to Enhance Disaster Preparedness among Hospital Staff

T.T. Takeda,¹ H. Suzuki,² T. Hatada,² K. Ishikura,² M. Sakurai,² Y. Omori²

1. Mie University Hospital, Tsu-City, Mie, Japan
2. The Cancer Institute Hospital of the Japanese Foundation for Cancer Research, Koto-Ku, Tokyo, Japan

Background: The Cancer Institute Hospital was relocated in 2005 to the Tokyo Bay Area, which was designated as a disaster reduction park by the Japanese Government. Since ordinary Japanese hospital staff members generally do not have military backgrounds, and because the hospital specializes in cancer care and research, development of disaster preparedness is extremely challenging. Providing a ready-made disaster manual is not sufficient to promote preparedness. Repeated drills could be useful, but have not been realistic.

Methods: In order to implement a disaster preparedness system in the hospital, workshops have been concluded for hospital executives, who in the case of a disaster will become members of the Control Center. According to a scenario (e.g., ferry fire, earthquake) given by a facilitator, the participants were encouraged as a team to discuss and to fill in their responses on a template, which represented an action card at each step of the scenario. A disaster manual was consulted and scrutinized during the discussions. After the workshop, a questionnaire survey was distributed on the perceptions of and attitudes toward disasters among the participants.

Results: The survey indicated that each participant could identify his/her own role as well as the roles of their colleagues through discussions. Writing action cards in their own words promoted active participation among the members. As a result, the disaster manual was revised and updated.

Conclusions: A workshop on disaster preparedness utilizing action cards was a practical and useful introduction to disaster response for non-specialists in disaster medicine.

Keywords: action cards; disaster preparedness; hospital; staff; workshop
Prehosp Disast Med 2007;22(2):s7

Are Healthcare Professionals Prepared for a Disaster with Regard to Their Knowledge, Attitudes, and Behaviors Toward Patients with Burn Injuries?

M.H. Haberal,¹ O. Basaran,² A. Kut,² E. Kesik,² M. Haberal²

1. Baskent University, Ankara, Turkey
2. Turkey

Introduction: In all countries, burn care activities are dependent on legislation, attitudes of the general public and healthcare professionals, and levels of organization and coordination of burn units. The aim of this study was to assess the knowledge, attitudes, and behaviors of healthcare professionals as they relate to burn injuries.

Methods: A 26-item questionnaire was developed and administered.