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Study/Objective: This was descriptive, cross-sectional research conducted in the Latin American Center for Disaster Medicine (CLAMED) in the period from March 2010 to October 2013. The objective that was developed: Designing a strategy for the improvement of nurses in helping to raise their professional skills in disaster.

Background: Some of the most serious consequences of disasters are often: the impact it has on populations with increased morbidity and mortality, deterioration of environmental hygiene, the risk of epidemics, damage to health infrastructure, inaccessibility to services, and involvement in the development of health programs. Thus, the higher the vulnerability, there will be an increased risk of the occurrence of disasters and the exponential association of the frequency and intensity of threats. As such, governments and health systems in many countries should focus their efforts on preparing health professionals, as well as for the prevention and mitigation of disasters.

Methods: The research, supported in different areas of knowledge, made possible the construction of its theoretical framework, relying on documentary analysis, system approach, modeling, and historical and logical thought. From the research process, the level of knowledge of nurses on disaster risk reduction was diagnosed, and in that sense, a strategy that asks for consideration was prepared.

Results: It was found that 66.6% had not received readying on the issue Health and Disasters. It was evident that general disasters and organization of prehospital and hospital care in disaster situations were the issues that most impacted the level of knowledge, behaving 24.6% and 18.1%, respectively. They were diagnosed as having an insufficient level of knowledge for disaster risk reduction.

Conclusion: A strategy for nurses in Health and Disasters showing a harmonious configuration in the system, given the close link between the different organizational forms of post-graduate training in Cuba, was designed.

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Evaluation on the Myth Evaluations of Nursing Students on Elders in Cases of Disasters and Emergencies

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Study/Objective: This study aims to examine some factors that affect the myth evaluation of students studying at the Nursing Department of a university, on elders in cases of disasters and emergencies.

Background: Even though there are many evidence-based studies on disasters, there are many mis-informations (myths) about its medical and social outcomes. Myth evaluations constitute one of the first steps of helping the elderly population.

Methods: The cross-sectional epidemiological study has been conducted on the students of Çanakkale Onsekiz Mart University, Department of Nursery. The data of the research has been collected by means of a survey that had been composed by the authors. Within the survey, some questions of a survey study used in a research about elders by the UN Office for Disaster Risk Reduction (UNISDR), and the myth questions from the book *International Disaster Nursing* (Editors: Robert Povers & Elaine Daily, 2010). In the research, the elder vulnerability index, elder valence index and elder myth index have been generated. In the further analysis of the data, the logistic regression method where the elder myth index in dichotomous structure, was included as a dependent variable, has been used.

Results: In all, 80,4% of the 377 students participating in the study are women, 56,0% of them are junior class students, 93,6% of them are living with both their parents, and 38,5% of them have experienced disasters. In the group where the average (SS) age is 19,89 (1,7), the average points of the participants are 2,97 (1,07) for the elder myth index, 30,94 (6,19) for the vulnerability index, and 6,41 (1,73) for the valence index. According to the logistic regression result, the junior classes are ranking 2,11 (GA: 1,06 – 4,23, p < 0,05) times above the elder disaster myth index average.

Conclusion: Myth evaluations of the students about the elder individuals in case of emergencies and disasters should be improved.

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Development and Effect of a Multi-Modality Disaster

Training Program for Hospital Nurses

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Study/Objective: To develop a multi-modality disaster training program for hospital nurses, and to investigate the effect of the program.

Background: Despite the importance and perception of nurses in disaster crisis, a standardized program to develop competencies is still lacking in Korea. There are few programs focusing on the prehospital aspect of disaster, but none exist that focus on nurses left in the hospital to care for victims transported from the scene. Since disaster response requires multiple aspects of competencies, such as triaging, incident command, life-saving procedures, teamwork, communication, and leadership, it is important to develop a multi-modality training program that is best suitable for the content to be trained.

Methods: The educational intervention consisted of a 3-day workshop (see Table below) for a selected 24 emergency nurses. Pre- and post-surveys were conducted to evaluate the differences in perception of disaster nursing. Disaster Preparedness

Questionnaire for Nurses (DPQ-N) was used to assess the competencies of the nurses. All pre-to-post differences within subjects were analyzed with paired tests. The statistical level of significance was set at 0.05.

Results: Pre- and post-survey differences for interest in disaster nursing, expectation of disaster training, and importance in emergency nursing were 6.7 to 8.1, 7.1 to 8.9, and 8.0 to 8.8, respectively. Results for DPQ-N pre- and post-intervention for basic concepts, planning, patient care, psychological issues, special hazards, epidemiology, communication, personal preparedness, and ethics were 2.1 to 3.6, 2.2 to 3.6, 3.4 to 3.9, 2.9 to 3.6, 2.0 to 3.7, 2.3 to 3.4, 2.1 to 3.6, 3.1 to 3.6, and 2.9 to 3.7, respectively. All results were statistically significant.

Conclusion: A multi-modality disaster training program for hospital nurses positively affected perception and performances of the nurses.

Content	Modality
Triage	Table-top, Virtual
Incident Command	Table-top
Life Saving Procedures	Part-task mannequin
Surge Capacity	Table-top
Special Hazards	Scenario-based mannequin

Table 1. Content and Modality Matching of the Training Program.

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Emergency Nurse Knowledge of Emergency Preparedness: An Education Gap Analysis

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Study/Objective: This project assessed gaps in emergency nurses' knowledge of Emergency Preparedness and preferred methods of acquiring the necessary education.

Background: The New Jersey Emergency Nurses Association (NJENA) Emergency Preparedness Committee was established to assist emergency nurses with preparing for disasters. The 2014 survey was to discern specific educational needs of emergency nurses. The 2016 study was to determine how and where emergency nurses obtain emergency preparedness education professionally and personally.

Methods: Survey tools were developed by committee members active in emergency nursing or education. The 2014 tool identified the following areas for study: Emergency Department specific plans; Decontamination Procedures; Active Shooter Procedures; Disaster Triage; CBRNE Events; Incident Command Principles; and Documentation During a Disaster. The 2016 tool assessed where emergency nurses receive emergency preparedness education and their preferences to receive this education (online, in class, or combination). The surveys were distributed to convenience

samples of emergency nurses attending the NJENA Emergency Care Conference in 2014 and 2016.

Results: The 2014 gap analysis indicated respondents received ED-specific annual education on Active Shooter, Haz-Mat, and Mass-Casualty incidents; however, 44% indicated they didn't feel adequately prepared by their institution. Less than one-half of the respondents were able to correctly identify the elements of the START triage system and only 50% selected the correct triage category in presented scenarios. The 2016 survey indicated the majority of emergency nurses access health care/hospital emergency preparedness education on their facility's website, while using United States federal government websites personal EP information. Forty-seven percent of respondents preferred self-paced online courses with 38% preferring an instructor led class.

Conclusion: This project highlights areas identified as gaps in Emergency Nurses disaster preparedness and preferred methods of receiving the necessary education. The NJENA Emergency Preparedness committee is formulating plans to develop training sessions on the identified gaps in emergency preparedness.

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Primary Health Care Team Response to Floods in Brazilian Rural Areas

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Study/Objective: To describe the practice undertaken by Primary Health Care (PHC) teams to rural populations, flood-related, health-related problems after a disaster in Southern Brazil.

Background: Brazil is greatly affected by climate change and natural disasters such as storms and floods. This type of disaster enhances the demand for health services in PHC. Developing clear facility preparedness plans, with the identification of specific job descriptions, is recommended. During the winter of 2014, a flood in Southern Brazil affected rural populations with significant impact on their health and living status.

Methods: A qualitative, descriptive, exploratory study was developed. Flanagan's critical incident technique was adopted. Twenty primary health care nurses from 10 municipalities were interviewed. Data analysis allowed the construction of a hierarchy of categories about health problems identified and actions taken by PHC teams during and after the flood.

Results: The effects on health status described were: deaths, injuries, psychosocial and behavioral disorders, hypertension, leptospirosis, vector-borne diseases, diarrhea, and skin infections as described in the literature. Other problems were related to lack of medication, shelter situation, and vulnerable populations, such as older adults and pregnant women. PHC practice involved actions to supply medication, assessment of the flooded area, with visits before and after the disaster to warn people and provide help, meetings for response planning, immunization, education and prevention of waterborne diseases, psychological