

important part in lessening human vulnerability to climate-related disasters through promotion of “healthy people, healthy homes and healthy, disaster resilience communities.” (Srinivasan 2003)

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(A140) Core Competencies for Emergency Preparedness Education for Health Profession Schools

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Background: The possibility of natural disasters and public health emergencies coupled with the possibility of terrorism clearly support the need to incorporate emergency preparedness and response material into the curricula for every health professional school in the nation.

Discussion: To date, the focus has been on the education of the existing healthcare workforce. Students’ needs differ from those of practitioners in that there is a fundamental difference between educational competencies and occupational competencies. It is also important to recognize that to assure proper preparedness there must be a clear connection between departments of public health and all other healthcare entities. To this end we included public health students in the creation of competencies and have shown that non-clinical practitioners can, and indeed must, be included in this process.

Observations: We describe a process and present a list of emergency preparedness core competencies for health care professions and their applicability to Medical, Dental, Nursing and Public Health students. While we have designed this set of competencies using these disciplines, they may be easily adapted to other healthcare disciplines. The only variations would be in the assignment of proficiency levels and the decision of whether or not clinical competencies are appropriate. The core competencies have been divided into the following four categories which represent broad subject areas and the separation of the competencies related to direct patient care:

- Emergency Management Principles
- Terrorism and Public Health Emergency Preparedness
- Public Health Surveillance and Response
- Patient Care for Disasters, Terrorism and Public Health Emergencies.

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(A141) Contingency Planning for Veterinary Public Health Emergencies

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In the cycle of dealing with emergencies one can distinguish four periods, that is planning, diagnosing, responding and recovering. Contingency planning is a prerequisite for emergency management in general. The principles of this planning, for Veterinary Public Health (VPH), does not differ from other cases. However, here will be seen from the point of view of VPH. VPH emergencies include zoonotic diseases and food safety aspects. Emergencies in VPH appear suddenly or expand gradually.

Need to define responsibilities for proclaiming an emergency by rating the severity and ranking the situation in steps before deciding that an emergency is in place. One can suggest that surveillance is significant in relation to zoonotic diseases. In food safety, preventative Food Safety Management Systems, in which crisis management and consequent possible product recall actions are part of it, serve the same purpose. In both activities VPH is related with other professionals, a reality expressed, also, in government administrations with different services and/or agencies. Therefore, partnerships and interoperability between veterinarians and physicians on the one hand and other food professionals on the other should be established, for the purpose of efficiently serving the general public. These actions should be developed, as appropriate, in business, region or country level. In order to effectively mobilise the appropriate personnel training and simulation exercises should be part of preparedness. In preparedness, planning for early warning and early reaction should be considered as part of the overall contingency planning. In the various steps in dealing with emergencies the key tool for decision making is risk analysis, served through its three components, that is risk assessment, risk management and risk communication. This last one is very important in relation to communicating with the general public, so that a balanced informing will allow for general public diligent actions without panic.

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(A142) Gold-Medal Performance: “Operational Readiness Assessments” for High-Risk Workplaces

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This presentation will demonstrate that the use of an “Operational Readiness Assessment” was successful in identifying high-performance strategies for frontline-responders, namely surgeons, air traffic controllers, police, and world-class athletes. This research-based approach confirms that best performers in high-risk situations prepare similarly to elite athlete, specifically relating to their emphasis on mental readiness. A framework (Orlick’s “Model of Excellence”) developed by researchers who worked with Olympic athletes has a proven replication within very different high-risk disciplines. Both quantitative and qualitative analysis of mental readiness was provided based on in-depth interviews with exceptional professionals regarding their best and less-than-best performances. These findings were assessed to determine the presence of common success elements, including: (1) commitment; (2) confidence; (3) mental preparedness; (4) focus/refocus; and (5) seeking and accepting feedback. This refined assessment tool combines the methodological rigour of academic research with a highly readable and practical analysis of specific techniques that increase effectiveness. Challenges were defined from a frontline-perspective. The balance between technical, physical, and mental readiness were compared. Success skills, performance blocks and influencing factors for optimal performance were detailed. Ten practical recommendations are discussed relating how preparedness of frontline-operations strengthens performance, productivity, and morale. An “Operational Readiness Assessment” is a powerful tool with proven value in hospital, paramilitary, corporate, and industrial settings in which there is a need to be well