s162 Poster Presentations

maximum variation sampling. Key-informant interviews (n=42) and focus group discussions (n=27) were conducted across five districts in Sierra Leone. Data were analyzed and coded inductively by a team of researchers, using Thematic Content Analysis using NVivo (k=0.80 or above for interrater reliability).

Results: Participants described stressors, coping and support on four levels: individual, family, community, and society. On the individual level, theft and spoiled belongings were leading sources of stress while faith and spirituality were main sources of coping and support. On the familial level, lack of financial resources and inability to work emerged as primary stressors, while engaging with family was a main source of support. On the community level, social exclusion emerged as a prominent stressor and community reintegration as a source of support. On the societal level, participants' lack of governmental support and termination of support from NGOs emerged as stressors, and provision of formal material assistance as a source of support. Conclusion: In a widespread public health crisis, understanding people's perceptions of the most salient stressors and sources of support can inform future responses. In this study, participants experienced stressors and support across multiple levels of the social ecology, such as grief and faith, household financial pressure and kinship care, and formal material resources for survivors. Results also showed the importance of community-led initiatives that addressed material needs, as well as social acceptance and social support.

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Prehospital Nursing Volunteer's Personality Traits: A Motivational Perspective

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Introduction: The aim of this cross-sectional, descriptive study was to determine the personality traits and motivation of nursing volunteers and their effects on pre-hospitalization emergency care.

Method: Participants were 133 pre-hospital nursing volunteers from Taiwan. This study was performed using self-administered basic demographic information, Eysenck Personality Questionnaire-Revised Short (EPQ-RS), and Volunteer Motivation Scale with Chinese Volunteers (VMS-C). The statistical analysis was performed by SPSS 23.0. The data collections were analyzed by nonparametric statistics, correlation coefficient, covariance analysis, and one-way ANOVA analysis multiple regression analysis.

Results: Our findings showed that having social desirability and extraversion personality had a positive impact on the attitudes of volunteers in terms of the provision of pre-hospital care. The first identified regulation was highlighted in the motivation scale; intrinsic motivation was secondarily emphasized. Pearson correlation coefficient revealed years of service in volunteering

seniority, age, gender and nursing seniority were correlated. On the contrary, the job department and six municipalities were negatively correlated. Equivalence with the other relation, participants' attending hours per month in volunteering and gender were positively related. Inverse correlations were found in age and nursing seniority. Extraversion personality and involvement in specific municipalities were positively correlated.

Conclusion: Emergency Medical Services (EMS) has been developed in Taiwan for more than 20 years and must improve the quality of EMS. These results may be used to improve the quality of the pre-hospital care system and encourage nursing staff to join the system. Nursing volunteers in pre-hospital care are a particularly valuable resource, and satisfy a pivotal role early in the process of pre-hospital care. It is recommended that we provide a good interpersonal environment to maintain the good will of the dedicated, experienced, enthusiastic volunteers in Taiwan.

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Japan DAMT COVID-19 response. The Temporary Medical Facility for Hospitalization Waiting and Doctor Home Response System in Sapporo City, Hokkaido

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Introduction: In Japan, the response to COVID-19 has been a disaster response. In May 2021, the number of patients requiring hospitalization increased rapidly in Sapporo City, Hokkaido. Almost all medical institutions and clinics were overcrowded, and patients were forced to wait at home. Sapporo City requested a response from the Japan Disaster Medical Assistance Team (DMAT).

Method: DMAT collaborated with the Sapporo City Public Health Center to set up a patient waiting station (The Temporary Medical Facility for Hospitalization Waiting) utilizing an unused hotel. DMAT placed the patient under medical care, provided oxygen therapy and other procedures, and coordinated hospitalization referrals. DMAT also organized a doctor home response system for patients who need emergency hospitalization and those who have returned home from The Hospital Waiting Stations.

Results: 64% of the patients were admitted to hospitals, 27% back to their homes, 9% were sent to residential care facilities, and 1% were sent to welfare facilities. The doctor home response system was able to redirect 52% of patients requiring emergency hospitalization.

Conclusion: For the rapidly increasing number of patients with COVID-19, DMAT established a temporary medical facility and home visit system and was able to minimize the number of preventable deaths.

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