

The South African Military Health Service developed a simple color-coded layout system to assist unskilled personnel to establish a high security bio-safety isolation facility to isolate Viral Hemorrhagic Fever patients under operational circumstances, using tented accommodations or existing buildings.

The developed training package is a self-paced, interactive, computer package to train personnel in the different Viral Hemorrhagic Fevers, the establishment of an isolation facility, and basic procedures to run an isolation facility.

Basic principles are taught on how to set up safe facilities, as well as how to operate these facilities with minimally skilled personnel.

**Keywords:** hazards; infectious disease; isolation facilities; nuclear, biological, chemical; training; viral hemorrhagic fever

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## Free Papers Theme 15: Education-1 Triage, etc.

### Triage System Development in the Palestinian Territories

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**Introduction:** Health facilities in the Palestinian Territories face substantial emergency medical care needs, and emergency department (ED) development and clinical training opportunities are non-existent. Currently, there is no organization responsible for ED development and clinical accountability. West Bank and Gaza Strip hospitals encounter a significant number of casualties and general emergency patients, but have no formal training in mass-casualty triage or standard emergency department triage. This has led to a culture within government EDs in which practitioners are overworked, understaffed, and under constant anxiety and stress for their own safety and security. Emergency departments are overcrowded, disorganized, and function on a first-come, first-serve basis, instead of by order of severity.

**Objectives:** This study aimed to develop and train ED physicians and nurses in a validated, five-level, triage system using a severity index acuity scale.

**Methods:** Forty-eight physicians and nurses undertook a one-week, emergency and disaster training course, emphasizing mass-casualty triage and hospital triage system development. Participants were introduced to a five-level triage system and the severity acuity index scale during this training. This was followed by a one-week training course six months later on triage, triage system development, and charting. Sixteen trainers from five key regional Palestinian hospitals participated.

**Results:** Fifteen of 16 participants successfully passed the written and practical triage training course. Implementation of this triage system has led to the following new innova-

tions in each of the five hospitals: (1) formation of fully equipped triage rooms and 12-hour, assigned triage-trained nurses; (2) establishment of a standardized triage chart and triage policy and protocol agreed upon by the ED medical directors and nursing directors; (3) empowerment of senior qualified nurses; and (4) developed a basis for ongoing continuous quality improvement (CQI). In three months, a follow-up evaluation will assess the validity and reliability of this system using the severity index tool. Triage validity will be evaluated by examining the correlation between triage acuity score and hospital admissions, location of admission, number of ED resources utilized, and patient and provider satisfaction. Triage reliability will be evaluated by assessing paired nurse inter-rater agreement using the assigned triage scores.

**Conclusion:** In a conflict setting, developing and implementing a five-level triage system with an acuity index builds ED capacity through improved human resources and patient care management.

**Keywords:** assessment; development; emergency department; implementation; triage

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### Israeli-Polish Cooperation Program for Disaster Preparedness

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Since October 2002, the Israeli-Polish cooperation program has trained 380 professionals. Among them were 200 medical providers (doctors, nurses, paramedics, and the majority from management), 100 fire and rescue officers, and approximately 80 people from the police forces, the army, and crisis management.

The Israeli-Polish cooperation program established a universal training program adopting international experience (particularly Israeli) to local needs, which are limited.

Nearly 80% of incidents in Poland are related to road traffic crashes (mostly involving buses). According to data from the last five years, almost 90% of crashes occurred in rural areas far from hospitals. These cases require special consideration.

The Israeli-Polish cooperation program also developed special training programs such as decision-making in emergency medicine and a special police-training program related to mass-casualty incidents (MCIs).

The Israeli-Polish cooperation also created local procedures. The Polish Emergency Medicine system adopted a tag system for triage, published a manual for MCI management, and developed drills and evaluations for them.

**Keywords:** disaster; education; emergency medicine; Israeli-Polish cooperation; mass-casualty incident (MCI); preparedness

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