An Adaptation of the PICE System as a Template for Disaster Planning: An Exercise in Facilitating Integrative Consultation

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Disaster planning, whether for business, hospital, or community, is most effective when members of the organization are aware and familiar with the necessary details of the disaster plan itself. Oftentimes, however, a plan is written by an individual or small group and distributed for use with little or no consultation with the personnel who will be affected most directly by such an event.

In order to address this deficiency, a process of consultation was designed that uses an adaptation of the PICE disaster classification system as a template for disaster planning. This template permits any institution or organization to simplify the disaster planning process by conducting small group sessions focussed on a few basic questions. The groups are assisted by facilitators, who then integrate the information into the template.

The benefits of this system include bestowing upon personnel a feeling of empowerment and ownership, while heightening awareness of the disaster plan; thus, increasing the likelihood of the plan's effectiveness.

Keywords: consultation; disaster; institution; PICE System; plan-

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Training Medical Personnel for Disaster Medicine in Japan

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Field Exercise for Mass Casualty Care underwent a complete metamorphosis after the Great Hanshin-Awaji Earthquake in 1995. Before that time, the exercise was stripped of all of its contents with an attitude that a large disaster had no bearing on Japan. It showed a marked tendency toward the annual exercise held in an emergency day of September, especially carried out disaster drills organized by local governments and evacuation exercises in the use of medical facilities.

After the bitter experiences of the earthquake, the Government felt the necessity of preparedness for disasters, and set out to reform the preparedness system under the leadership of the Ministries of Health and Welfare (MHW), and Home Affairs. The MHW nominated six base hospitals in prefectures, and gave each the role of the center hospitals for emergency medicine. Therefore, medical education and training to the disasters has been held in prefectures and is progressing practically in the contents of a drill. Recently, education and training in Japan has become proficient on mass casualty care, and many improvements over the international level. In the future, nurseries of specialists in advanced manageable medical administration in disaster relief operations and the diffusion of training into the civil defense are necessary.

Keywords: disaster; Japan; medicine; personnel; training

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