

therapists, two categories for occupational therapists, and five categories for speech therapists.

**Conclusion:** This study examined what kind of support can be provided using telemedicine to prevent Disuse syndrome and Disaster-related deaths. Common support by rehabilitation professionals included instruction in exercises and prevention of economy class syndrome. It was suggested that speech therapists could provide oral swallowing exercises and support for those with dysphagia. However, the handling of communication devices by the elderly, and the interaction of medical personnel were cited as problems. In response to these issues, there was a possibility to support the victims by collaborating with remote and local medical professionals.

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### Cultural Competence in Academia

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**Introduction:** Teaching and becoming culturally competent are concepts that have and continue to evolve partly due to the language being used such as culturally competent, culturally sensitive, and cultural humility. With such an influx of ethnically diverse populations, nurses need to become competent in the care of patients from many cultural backgrounds. Faculty must first be culturally competent to provide this pedagogy for nursing students. This paper explores and analyzes the cultural competence of Baccalaureate Nursing Faculty in the United States.

**Method:** This study was conducted using a quantitative, descriptive approach among baccalaureate nursing faculty. The Multicultural Awareness, Knowledge, and Skills Survey (MAKSS) tool was used for this study. The survey was sent to 70 randomly selected baccalaureate nursing program Deans and/or Associate Deans listed on a public web site. The sample was purposely chosen to represent at least one program from each of the 50 states across the United States.

**Results:** Ninety-four responses were received. Of the 94 responses, 37 surveys were incomplete, leaving a sample size of 57. An analysis was completed on the 57 completed surveys. Limitations include the length of the survey (60 questions) as the authors found that some participants did not answer all the questions. Although faculty rated themselves high regarding being able to identify cultural biases, faculty highlighted the need for more education on culture.

**Conclusion:** Faculty appear to be culturally aware and recognize the need for more education to achieve a culturally competent skill set. With the increase in the influx of immigrants from all over the world, the population of the United States is changing. Cultural competence needs to be included in curricula to ensure that patients are advocated for and respected.

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### Starting Points for Promoting Disaster Resilience in Home Nursing Care in Germany—A Participatory Development Process

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**Introduction:** In Germany, more than 3.3 million people in need of long-term care are receiving home care. Although not all of them use professional home care providers, their services are essential especially to those who need skilled nursing care and medical-technical assistance in addition to everyday support—such as approximately 30,000 people who receive home mechanical ventilation. Little is known about the disaster resilience of home care infrastructures and ways to strengthen them. A research consortium called AUPIK, funded by the German Federal Ministry of Education and Research from 2020–2023, sought to close this gap.

**Method:** A participatory process was initiated as part of the AUPIK project based on results of a multi-perspective empirical baseline analysis which resulted in a first draft text about measures to promote disaster resilience in home care. 37 representatives of home nursing care providers and community health-care services, professional boards, scientific and education institutions participated in a web-based survey on the draft text, followed by two digital group discussions. Finally, the gradually revised, condensed and consented starting points were published and distributed.

**Results:** Eight starting points were defined. Among others, there is an urgent need to strengthen risk awareness and resource management among home care providers, to promote individual disaster competence and preparedness among all parties involved and, not least, to strengthen community-based networking initiatives between home care providers, emergency and disaster organizations and local authorities. Institutions or persons who should take responsibility for implementation at different levels are addressed directly.

**Conclusion:** The final version of the starting points represents a consensus on urgently needed initiatives to promote disaster resilience in home nursing care in Germany. The participatory development process should support commitment on the part of all stakeholders and thus promote effective implementation of disaster resilience initiatives in home nursing care.

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### An e-learning Course Effect on Swedish Ambulance Commanders' Decision-making in Simulated Road Tunnel incidents—Preliminary findings

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**Introduction:** Road tunnel systems are becoming increasingly complex. Regardless of incident, the confined nature of the road tunnel impairs responding emergency services accessibility, with a risk for delay in treatment of time-sensitive injuries such as pneumothorax or internal hemorrhage. Consequently, the need for rapid decision-making by the emergency services commanders is increased. However, in Sweden ambulance commanders lack experience and training in managing road tunnel incidents. This may further delay the medical response.

The aim is to investigate if the ambulance commander decision-making in simulated road tunnel incidents may be improved by a specific road tunnel incident e-learning course. **Method:** A web-based intervention study was performed with 20 participants; 10 participants in the intervention and control group, respectively. The control group received a pre-recorded general lecture on incident management. The intervention group received a specific road tunnel incident e-learning course, consisting of five interactive modules with learning materials (e.g. road tunnel structures, collaboration and safety). All participants participated in web-based simulations of major road tunnel incidents at one and six months post-intervention. In these simulations, participants acted as ambulance commanders and decided on the best course of action in 15 dissimilar and multiple choice-based management decisions. For each decision, time and choice of decision were recorded as outcome measurements.

**Results:** Preliminary analysis from the one-month follow up simulation indicates that none of the participants decided to enter the road tunnel system at the early stage of the incident. The motivation for the participants decision-making was not clear.

**Conclusion:** The cautiousness to enter the road tunnel system will impair the emergency medical services response, including delaying vital medical care. Further research into the reasoning behind this decision is needed and identified causes may be further addressed in updated educational materials and collaborative discussions.

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### Disaster Training—How Much Educational Impact Does it Really Have?

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**Introduction:** In Singapore, disaster training and preparation are taken seriously. Many exercises and training sessions have been planned and run yearly with the hope of being able to respond effectively to an emergent disaster. This presentation aims to evaluate the effectiveness of our training programs to determine if the learner participants are equipped to manage disasters when they happen based on their learning objectives.

**Method:** The disaster training programs that Singapore General Hospital participates in, both nationally and internally, were analyzed based on Bloom's taxonomy for educational objectives. At the lowest level, the learner demonstrates the ability to remember the facts that he learned, followed by understanding the concepts, applying the information, analyzing the learning undertaken, evaluating his performance, and creating new methods to learn or train to improve his performance.

**Results:** Based on the analysis of the various exercises and training sessions, most learning objectives are pegged to the remembering to application levels (90%) while very few participants, especially the instructors and evaluators (<10%) may achieve learning objectives of being able to analyze and evaluate the training sessions. As disaster training involves multiple inter-professional teams there is also a risk of rapidly diminishing retention of knowledge and skills over time because of the high turnover of manpower especially from residents and medical officers who are attached to the departments for a few months.

**Conclusion:** There is room for more targeted disaster training aimed at more participants and with learning objectives determined at the higher level of Bloom's taxonomy, at least to achieve the ability to analyze and evaluate one's performance for improvement. Creating opportunities for more participants to be able to do that would be a challenge.

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### Lodgers, Boarders, Trolley Patients; A Growing Challenge in Emergency Departments (ED). Zero Tolerance for Trolleys or Zero Tolerance for Zero Trolleys; A Crude Examination of Progressive Capacity Issues in an Irish Emergency Department.

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**Introduction:** The Health Information and Quality Authority (HIQA) Tallaght Report of 2012 found care of lodged admitted patients on ED trolleys was undermined in terms of quality and safety. HIQA advised the practice of lodging in ED adjacent hospital corridors should be discontinued entirely. This message was reiterated during the pandemic. Some lodged patients may spend the total duration of their admission on an ED trolley. ED has 15 Adult rooms, seven pediatric rooms, two minor injury rooms, one procedure room and two resus bays. The aim was to calculate the annual number of days when no admitted patients were lodged on trolleys in ED.

**Method:** A descriptive study using data available from nationally issued reports on patients allocated to trolleys to the ED of Wexford General Hospital from January 2019–September