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Results: Students consistently stated that this experiential learning was eye-opening and provided them with more insights than had they just read about it in a textbook. Since this exercise, the School of Nursing was invited to participate in disaster drills within the community, thus providing additional experiential learning opportunities for the students and enhancing communication and collaboration through partnerships.

Conclusions: Partnerships between schools of nursing and healthcare agencies provide excellent avenues to address disaster preparedness and emergency response training for nursing students and agency staff members.

Keywords: community health; disaster; nursing; preparedness; risk assessment

Prehosp Disaster Med

Israeli Trauma Mass-Casualty Nursing Course G. Hyams; M. Michaelson; M. Peretz; D. Alboar; V. Veksler, B. Adini; 3 D. Laor, A. Blumenfeld; Z. Rapaport

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Introduction: Israel is one of the few countries that has had almost 60 years to prepare deal with a variety of mass-casualty situations (MCSs).

The importance of professional training of the nursing staff became especially meaningful after recent conflicts, including the Second Lebanon War and Gaza conflict. Facing this reality, it became important to expand and promote the knowledge of the nurses who treat the injured patients in the emergency department. Under the grant of The American Physicians Fellowship (APF), the first Trauma and Mass Casualty Nursing Course was developed. Methods: The course was established as a joint effort Emergency Division of the Israeli Ministry of Health, the Israeli Trauma Society, and the Teaching Center for Trauma, Emergency and MCS at the Rambam Health Care Campus. A total of 25 nurses from 16 hospitals participated. The main subjects were treating injured patients during peacetime and during MCSs, and preparedness for MCSs. The course included lectures and simulation drills for expanding the cognitive knowledge and psychomotor skills. Participants in the first course were trained to be the instructors.

Results: The average grade for the lectures and simulations was 4.55 (out of 5), for the knowledge gained, 4.34 (out of 5), and for the organization, 4.77 (out of 5). Participants stressed the importance of the course, as well as the knowledge and practical skills gained.

Conclusions: Professional knowledge is the base for optimal functioning. The Israeli Trauma Mass-Casualty Nursing Course is the first course for training nursing teams and providing knowledge and practical strategies for treating the injured patient during peacetime and MCSs. Keywords: education; Israel; mass-casualty incident; nurse; training;

trauma Prehosp Disast Med Methods of Teaching Medical and Non-Medical Personnel to Provide First Aid during Disasters G.G Roshchin; V.O. Krylyuk Ukraine

Introduction: This study examined first aid training. Methods: Three hundred twenty non-medical students who passed training at the Ukrainian Scientific and Practical Center for first aid and disaster medicine were studied. The teaching lasted for 48 hours. Students were placed into two groups. The first was made up of 120 students who were taught using the standard methods of teaching. The second group, which was made up of 200 students, was taught using algorithms and practical skills and worked with mankins and moulaged volunteers. The second group also trained at a morgue and the emergency department of Kiev City Hospital. Each group was evaluated with tests at the beginning and end of the training.

Results: Participants in the first group correctly answered an average of 76% of the test questions before training, and 84% after training was complete. The second group averaged 74% and 95% respectively. At the end, the speed of implementation of manipulations in the second group was 45 seconds less than the first group. During implementations of practical manipulations of a neck collar and bandages, the first group experienced 48 errors, wile the second group experienced only 12.

Conclusions: Moulaging methods, emergency department experience, and algorithms for providing medical care are instrumental for the education and training of the theoretical and practical skills.

Keywords: disasters; education and training; first aid; medical personnel; non-medical personnel

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Disaster Risk Reduction in the Western Pacific Region: Strengthening Health System Preparedness for Public Health Emergencies through Safer Health Facilities Arturo Pesigan, MD; Lester Sam Geroy, MD, MPH World Health Organization, Regional Office for the Western Pacific (WHO/WPRO), Philppines

Background: Countries in Asia and the Pacific are most affected by disasters due to natural hazards. Nine of the top 10 countries with the highest number of disaster-related deaths in 2008 were in Asia. Recent events have shown the occurrence of hydro-meteorological, geophysical, climatological, biological, and human-generated hazards in the region. Apart from economic losses, deaths, and injuries, natural hazards affect the healthcare system through infrastructure damages and functional disruption.

Methods: The World Health Organization Regional Office for the Western Pacific (WHO/WPRO), with support from the European Commission Humanitarian Aid Department (ECHO) launched the Regional Roll-Out of the International Strategy for Disaster Reduction (ISDR) Campaign on Hospitals Safe from Disasters by strengthening health systems preparedness for emergencies through safer hospitals and health facilities. The campaign has five key result areas: (1) assessment of hospital vulnerability; (2) tools and guidelines for disaster management planning; (3) enhance-