

Assessment Tool for Prehospital Emergency Curriculum in Eastern Europe

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Objective: To assess effectiveness in improving patient outcomes of a new prehospital emergency care training curriculum paired with a quality assessment tool for prehospital care providers in Eastern Europe.

Introduction: A first responder curriculum that includes a mechanism for documenting clinical data and prompting critical interventions is planned for 14 EMS training centers in the CIS for 2001. Measuring effectiveness is critical for quality improvement and securing ongoing approval from the project stakeholders as well as support for similar projects in other parts of the world.

Methods: A dual phase evaluation process is proposed. In the first phase (precurriculum), prospective students will identify patients with an acute illness or injury most likely to benefit from field interventions with a standardized, validated case severity scale (CSS). The CSS categorizes patients on their initial level of severity and their interval status change upon arrival at the emergency department. The second phase (postcurriculum) would combine the CSS with a structured patient encounter data collection (quality assessment) tool, which would document clinical data and serve as a prompt for critical interventions. A cohort will be followed prospectively for 12 months to evaluate changes in CSS based on clinical interventions. Observed interventions will be controlled for a given locale's resources and prehospital infrastructure. The curriculum and quality assessment tool will be implemented in staggered intervals throughout the each center's jurisdiction allowing for comparisons between pre- and postcurriculum cohorts.

Conclusion: A combination severity scale and quality assessment instrument may be useful in measuring patient outcomes, and in addition, have universal applications for improving and reinforcing the performance of prehospital providers.

Key words: assessment; case severity scale; curriculum; emergency medical services; evaluation; prehospital; quality

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The Perceived Usefulness of the Hospital Emergency Incident Command System and an Assessment Tool for Hospital Disaster Response Capabilities and Needs in Hospital Disaster Planning in Turkey

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Objective: To determine the perceived usefulness of the Hospital Emergency Incident Command System (HEICS) and an assessment tool for hospital disaster response capabilities and needs in hospital disaster planning in Turkey.

Methods: During the conference, Turkish medical profes-

sionals and hospital staff members were introduced to HEICS via lectures, interactive discussions, and a tabletop disaster drill. They also were taught capabilities and needs assessment tool for hospital disaster response, modified from the Community Medical Disaster Planning and Evaluation Guide, via lectures and interactive hospital disaster planning sessions. At the conclusion of the conference, Turkish participants were surveyed regarding their attitudes about the usefulness of HEICS and this assessment tool for disaster planning in their hospitals. Descriptive statistics are used to present the results of this post-conference survey.

Results: Thirty-three Turkish medical professionals and hospital staff members participated in the survey. 31% of those responding reported that they had previous experience in hospital disaster planning; 100% stated that they intended to participate in hospital disaster planning in the future; and 43% of those responding stated that their hospitals already have a disaster plan. Of those whose hospitals have disaster plans, 54% reported that their hospitals already utilize some other type of command and control system in its disaster plan, and 46% reported that their hospitals previously used some other type of capabilities and needs assessment tool in hospital disaster planning. All of those responding, felt that HEICS would be useful in their hospital disaster response and planning, and 97% of those responding believed that the hospital disaster response capabilities and needs assessment tool they were taught in the conference would be useful for future disaster planning in their hospitals.

Conclusion: With disasters occurring more frequently and with greater impact around the world, an international search is under way for useful and appropriate strategies for hospital disaster planning. Concepts about HEICS and an assessment tool for hospital disaster response capabilities and needs can be taught to medical professionals and hospital staff in a developing country with relative ease. The vast majority of participants in this Turkish conference on hospital disaster planning felt that HEICS and the assessment tool they were taught would be useful in their future hospital disaster planning.

Key words: command; control; disaster; education; hospitals; incident command system; planning; training

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Japan Disaster Relief Medical Team Activity for the El Salvador Earthquake in 2001

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Members of the Japanese Disaster Relief Medical Team were dispatched to the Republic of El Salvador in order to conduct relief activities for people affected by the earth-