

more simulation-based medical educators, and also equipping standard simulation facilities in Ghana.

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### Paramedic Disaster Health Management Competencies: A Scoping Review

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**Study/Objective:** This scoping review aims to identify, categorize and explore the existing range of paramedic disaster health management competencies that have been developed internationally. The objective of the study is to assist EMS agencies to develop core competencies specific to their own environments, in order to standardize teaching in the area of paramedic disaster health management response.

**Background:** Paramedics play an essential role in all phases of disaster health management. Previous research has identified potential gaps in content and challenges to the sustainability of knowledge, acquired through occasional disaster response training by paramedics. For paramedics to respond competently, they must be equipped with the necessary skills to provide comprehensive care to the populations affected by disasters. Despite this, the literature shows that education and training for disaster response is variable, and that an evidence based study specifically designed to outline sets of core competencies for Australian paramedics has never been undertaken.

**Methods:** A systematic scoping review will be conducted using the Joanna Briggs Institute (JBI) methodology. The review will use information from four databases: PubMed, MEDLINE, ScienceDirect, and Scopus. Keywords, inclusion and exclusion criteria will be identified as strategies to use in this review.

**Results:** will be extracted, mapped, and categorized from appropriate studies. The identified core competencies will be sorted into common domains such as communication, operations, planning, logistics, incident command systems and ethics. A descriptive analysis of the results will then be undertaken.

**Conclusion:** Further research is needed to develop core competencies specific to Australian paramedics, in order to standardize teaching in the area of disaster health management response. This study will assist agencies from all jurisdictions in evaluating or creating disaster curricula, that adequately prepares and maintains paramedics for an effective all hazards disaster response.

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### National Standards for Higher Education Programs in Disaster Management in Australia

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**Study/Objective:** The aim of this project was to develop a framework for higher education programs in emergency and disaster management for Australia.

**Background:** The development of such standards is of considerable value to Australia as it may contribute to national policy cohesion and also to capability development. The Generic Emergency and Disaster Management Standards define the scope and the domain in order to assist higher education institutions to develop programs that provide a relatively consistent and sound intellectual basis for the expertise required.

**Methods:** The Generic Emergency and Disaster Management Standards were developed through a mixed qualitative research approach involving a systematic literature review, mapping of current course content, focus groups of experts and consultation with industry representatives.

**Results:** The standards consist of three main domains. The knowledge domain included governance and policy frameworks, theoretical and conceptual basis for practice, and contemporary disaster management, skills and application. The skills domain included leadership, communication, and collaboration. Finally professional practice together with critical thinking is considered the means by which the knowledge and skills are applied.

**Conclusion:** These standards are intended to provide a consistent and sound intellectual basis to assist higher education institutions to develop disaster and emergency management courses. While the focus is necessarily on the Australian context, it is recognized that University programs in Australia provide education to international students, and the methods used in developing these standards draw considerably from international sources, and thus they are likely to be of broader applicability. Additional mechanisms for the monitoring and ongoing development of these standards are required.

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### The Evaluation of the Trauma and Resuscitation Course in Çanakkale 112 Emergency Medical Services, Turkey

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**Study/Objective:** The aim of this study is to evaluate the Trauma and Resuscitation Course (TRC) for nurses, technicians, and paramedics, carried out by Çanakkale Emergency Medical Services (ÇEMS) between January 1, 2014 to December 31, 2014.

**Background:** The TRC in Turkey has been carried out by the Association of National Trauma and Emergency Surgery

since 1997. The target group of the TRC consists of doctors and health care professionals. The primary aim of the TRC is to provide a standard training and enhance the quality of service. The certificates, which is valid for five years, have been given to the professionals who have succeeded in the theoretical and practical exams.

**Methods:** The authors have conducted an epidemiologic-descriptive method in this study. In the scope of the study, 90 professionals were called for four different courses, and 82 of them attended the theoretical and practical training. The gathered data were evaluated by making frequency distributions.

**Results:** In all, 63.4% ( $f = 52$ ) of the participants consisted of women and 73.1% ( $f = 60$ ) are high school graduates. The practice skills of the participants were classified under the eight titles. Respectively mean score of them; the Mean Score (MS) of providing advanced airway (intubation) is 18.9/20; MS of establishing vascular access and intraosseous attempt is 9.9/10; MS of stabilizing the neck and vertebra is 19.8/20; MS of the centric extraction device (CED) is 9.9/10; MS of the traction splint is 9.7/10; MS of the vacuum stretcher is 9.3/10; normal stretcher is 9.5/10, and combination stretcher is 9.8/10. The general mean score of the theoretical exam is 83.6, practicing mean score is 96.9, and the general success average is 90.2.

**Conclusion:** The TRC scores of the CEMS personnel have been found to be quite high.

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### No Cost Solutions to Performance-Based Disaster Medical Education

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**Study/Objective:** High-quality clinical disaster medicine requires medical teams working in chaotic environments. Many disaster education providers fail to adequately assess disaster performance during training, often concerned with the cost and complexity of such assessments. We created a competency-based, 5-hour Emergency Preparedness Training (EPT) curriculum with low-fidelity training tools and easy to reproduce skill assessments to improve trainee knowledge, confidence, and disaster medicine skills.

**Background:** High-quality clinical disaster medicine requires medical teams working in chaotic environments. Many disaster education providers fail to adequately assess disaster performance during training, often concerned with the cost and complexity of such assessments.

**Methods:** Diverse groups of medical university students, health care professionals, and community members were enrolled between 2011 and 2014. The course consisted of an online questionnaire, didactic lectures, small group exercises, and two live, multi-patient, mass-casualty incident (MCI) scenarios.

**Results:** All 708 participants completed the course. They were trained over three years, including 49.9% physicians, 31.9% medical students, 7.2% nurses, and 11% various other health care professionals. All 100% of the participants completed the pretest and 71.9% completed the posttest, with average correct answers increasing from 39% to 60%. Trainees met 73% and 96% of performance objectives during small group exercises and 68.5% and 61.1% during the two MCI scenarios. Both overall knowledge and confidence with clinical disasters improved from 33/100 to 74/100 (overall knowledge), and 33/100 to 77/100 (overall confidence). 91.5% of trainees highly recommended the course. Average cost of training was less than US \$100 per course.

**Conclusion:** Simple EPT design elements can improve trainee knowledge, confidence, and disaster medicine skills at a very low cost. This unique EPT curriculum may help educators with limited resources implement performance-based medical team training effectively and efficiently.

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### Legal Accountability of International Emergency Medical Teams In Disasters

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**Study/Objective:** This research maps and explores existing legal systems that, within a disaster context, may be applied to hold International Emergency Medical Teams accountable for medical errors.

**Background:** International Emergency Medical Teams (IEMT) provide clinical care to populations affected by disasters. However, while well intended, their work may result in harm to a patient. To date the medical legal accountability of IEMTs has not been systematically assessed.

**Methods:** This study is a narrative literature review. An initial search in Google and other search engines was performed. Legal documents, guidelines and grey literature referring to legal accountability of IEMTs were selected. Results were organized in two categories: international legal system and national legal system.

**Results:** IEMTs are deployed by different relief agencies, including governmental or non-governmental organizations, which are subjects to separate legal systems, for instance, of their own countries or international laws. No international laws related to disasters provide for mechanisms of IEMT's legal accountability. However, there are non-disaster international legal systems applicable to certain types of relief agencies deploying IEMTs - for instance, regional human rights systems. No database provides for a list of national legislations relevant to IEMTs, nevertheless the research confirmed that national disaster or non-disaster laws could be applied. There is no record of any legal case against an IETM decided in favor of a patient.

**Conclusion:**

- There is no specific legal system designed for enforcing legal accountability of IEMTs.