

to the experience were used as sources of data from August to November 2014. Data was analyzed using thematic analysis.

Results: After the disaster was communicated to hospital management, medical and nursing teams were recruited. A list of willing health professionals wasn't available, making the access to and organization of human health resources dependent on professionals' willingness to attend. The proportion of the disaster caused a national outcry. This community concern was reflected in the positive response of health professionals who volunteered to come to work. They were however challenged with severe conditions, which demanded a very high level of response and care during the admission of patients. This very intense situation and workload impacted negatively on a number of health professionals who had volunteered to respond.

Conclusion: Although health professionals and hospital management staff were able to mobilize and adapt to this sudden external demand, the identified impacts on health professionals indicated the need for better preparation. As a legacy, a structured plan for the hospital was developed using internationally recommended procedures to disaster preparation and response.

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What Should an African Health Workforce Know About Disasters? Proposed Competencies for Strengthening Public Health Disaster Risk Management Education in the African Region

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Study/Objective: The objective of the article is to provide information and opportunities which could be used to improve health Disaster Resilience Management (DRM) training in Africa.

Background: As part of efforts to implement the human resources capacity building component of the African Regional Strategy on disaster risk management for the health sector, the World Health Organization, Regional Office for Africa (WHO/AFRO) in collaboration with selected African public health training institutions, developed core competencies and

training curricula for training African health workers, on public health disaster risk management. This article will describe the methods used to develop the competencies, and present the competencies and training curricula which were identified.

Methods: A curriculum development process was implemented through a consultative, multi-stage process involving a team of African emergency public health academicians and practitioners. In-depth reviews of the existing emergency public health training programs in the Region, and the skills and knowledge required to implement regional strategy were conducted. Core competencies required by African health workers to effectively engage in DRM were identified.

Results: Fourteen core competencies and 45 sub-competencies/training units grouped into five thematic areas were identified, namely 1) introduction to DRM; 2) operational effectiveness; 3) effective leadership; 4) preparedness and risk reduction; 5) emergency response and recovery were defined as the skills and knowledge that African health care workers should possess in order to be able to effectively engage in health DRM. Three levels of training courses were proposed, to suit the needs of various categories of African health care workers.

Conclusion: In adopting these competencies, African member states should ensure that they are adapted to the local contexts, and the resulting training courses should be as practical and field-based as possible. We recommend urgent finalization of the learning materials for the courses, and establishment of a system for monitoring and evaluating the quality and impact of public health DRM training programs, trainees and trainers in Africa.

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A Survey on Career Development Plan among Healthcare Workers in Komfo Anokye Teaching Hospital (KATH)

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Study/Objective: To assess knowledge, attitude and perceptions of healthcare workers on their career development plan.

Background: Healthcare systems worldwide are adversely impacted by the growing and changing health needs of the population. Absence of clarity of career pathways, will create distortions in orders of service for many health professionals, and will result in stagnation in career advancement of staff and loss of significant number of health workers to other competing institutions.

Methods: A cross sectional study was conducted in March-April 2015 at Komfo Anokye Teaching Hospital (KATH). Clinical health workers were interviewed on their knowledge, attitude, and perceptions on career development plans. A stratified sampling technique was used to recruit 142 clinical health workers into the study.

Results: It revealed high literacy levels (n = 102, 71.9%) of respondents who had at least attained tertiary education as their highest form of formal education. Majority of respondents