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Article in The American journal of emergency medicine - September 2020
DOI: 10.1016/j.ajem.2020.09.068

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PII: S0735-6757(20)30863-9
DOI: https://doi.org/10.1016/j.ajem.2020.09.068
Reference: YAJEM 159438


Received date: 8 September 2020
Revised date: 15 September 2020
Accepted date: 25 September 2020


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The Gap of Knowledge and Skill – One reason for unsuccessful management of Mass Casualty Incidents and Disasters

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Despite several reports confirming the requirements for a successful management of disasters and major incidents (MIDs), the available literature indicates vulnerabilities in both structural and non-structural parts of healthcare systems (1-2). The former includes the need for alternative medical facilities, and related critical infrastructure and the latter presence of qualified staff (3-4). Effective preparedness to respond to any emergency requires a well-planned and integrated effort by all personnel, who, equipped with the needed expertise and skills, can deal with crisis. However, not all specialists are trained for this, and some do not have the necessary knowledge and experience. Therefore, a set of clear, concise and precise training standards has been drawn up, that can be used to equip health care professionals with the necessary skills [4-5].

Most of studies evaluating the effectiveness of training programs related to MIDs emphasize on the importance of the organizational competence of employees, as well as their individual skills and collaborative abilities. In these programs, leaders are supposed to demonstrate leadership, as well as, conflict diagnosis, and management skills [6-8]. An important part of a training is evaluation, which normally takes place immediately after the completion of the session, as well as periodically, at a later stage, and measures the performance and competences, either by observational methods or quantitatively by measuring performance indicators [4, 9]. Although both the training and the test play important roles in the process of knowledge and skills acquisition and evaluation of the trained response effectiveness, they only measure and stimulate the current state of knowledge and skills of health care workers, and fail to increase the future ability of collective response to crisis, since no further education is offered to the whole group but in particular to the weakest in the group [10].

A chain is as strong as the weakest link [10]. Staff who are confident in their own high level of competence, are more likely to react effectively and more often in real crisis [11-12]. However, the outcome of MIDs’ management does not only rely on an individual performance but the whole team, with various functions and abilities. Therefore, prior to any training, it is worth to define the goals and competences that need to be developed, and at the same time evaluate the gap in knowledge that exists among all participants, from diverse disciplines and with varying backgrounds. Otherwise, it is difficult to determine the content and methodology of the proposed training. Well formulated competences constitute the basis for building effective and targeted training. The teaching and training of competences is based on widely integrated medical and non-medical education, and the number of competence profiles for health care professionals may vary depending on the profession being trained [1]. In particular, the basic competencies in training concerning MIDs should include the recognition of potential critical events, implementing actions, understanding institutional plans for crisis situations and demonstrating skills and knowledge required to perform particular tasks, and the ability to collaborate [13-14].

It is then logical to assume that trainings for MIDs management should be periodic, with particular emphasis on the members of the health care staff with the shortest length of service, and poorest knowledge of MID management. It should be tailored towards specific medical professions (nurses, doctors, paramedics), but also other employees within the specific hospital [1]. Furthermore, besides personal knowledge and skills, a minimum set of knowledge should be mandatory to all staff in order to standardize the basic knowledge need. Such knowledge can be consisted of items that
enable each staff to be familiar with the standard operating procedures, the persons responsible for directing actions, the appropriate logistic resources in the workplace, and their role in the response chain. The provision of training should be mandatory, as should the participation of employees (verified by the employer). All training courses for MID management should be subject to ongoing, not only periodic, evaluation, in order to assess the training requirements in this respect.

These steps not only enable identification of the gaps in the management system and the weakest link, they also adjust individual ability to concert with other individuals in the team and consequently increase the ability and capability of the crisis management.

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