

and implementation research for better outputs for regions and countries.

Conclusion: WHO Health EDRM RN will continue its unique function as the platform of global experts and stakeholders to produce, disseminate, and apply knowledge. Participation and engagement by more and broader experts are expected.

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Using Personal Learning Goals for Participants in Collaborative an International Health Partnership Project: Experiences from the Region Östergötland Model

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Introduction: International health partnerships have often been characterized by wealthier countries or organizations pushing resources and money into projects in countries with different needs. This can be new technologies, building facilities, and/or training personnel. Often this has been assessed in the amount of money spent. In recent years more focus has been put on synergy effects in involved organizations. Hence the change from aid to partnerships. A previous study focused on the subjective perception of the workforce regarding clinical skills, management skills, communication & teamwork, etc. (Jones et al., 2013). This paper focuses on defining learning goals and using a model by Patzauer (2022) as a complement to traditional partnership evaluation measures.

Method: Seven team members from a health partnership participated in a project for implementing ambulance service treatment guidelines through training of the partner's ambulance personnel and instructors. The training took place during one week in the partnership country. All Swedish participants were nurses actively working as ambulance personnel or had previously worked in ambulances. Before the training week the participants answered a questionnaire with open questions about their personal learning goals and expectations for the training week. At the end of the week, after having trained ambulance personnel, they answered another questionnaire with open questions addressing what they had learned.

Results: Analysis of the responses showed that the participants expected to acquire both personal and clinical skills. Afterwards, they had improved language skills, self-efficacy, and becoming better instructors.

Conclusion: The model of using learning goals as an integral part of evaluating health care partnerships provides knowledge that is useful both in terms of assessing the project, and also as input to participants' managers showing clinical and

organizational benefits. Including personal learning goals as a part of partnership projects' evaluation, provide useful knowledge about benefits and experiences that improves the organizations.

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Our Trial of Disaster Victim Identification Training in Chiba, Japan

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Introduction: Internationally, Disaster Victim Identification (DVI) activities are conducted under the International Criminal Police Organization system for handling a large number of bodies during disasters. However, the police have taken the initiative and commissioned clinicians and dentists to estimate the cause of death and identify the deceased, under a unique system in Japan. In this presentation, we examine the problems in the current DVI activities in Japan through DVI training.

Method: We held DVI training sessions three times in preparation for the occurrence of a large-scale disaster in Chiba Prefecture with Chiba Prefectural Police, Chiba Medical Association, Chiba Dental Association, local government staff in Chiba, and forensic staff in other institutions. We conducted desktop trainings using paper dolls, under a simulation of an aircraft disaster, and a natural disaster such as flooding and landslides caused by typhoon damage in the third session. After the training, participants reflected on their activities through a questionnaire.

Results: In accordance with the conventional method, the police officers numbered the bodies, photographed and checked their personal belongings, followed by the estimation of the cause of death with a doctor, the preparation of documents. Subsequently, dentists collected postmortem findings and matched with antemortem data. On the other hand, police officers and local government staff interviewed the bereaved family members under simulations. In the post-survey, participants were generally satisfied with the training, but some said that it was difficult to understand the activities of other professions.

Conclusion: In Japan, where there are no DVI teams, this training was a good opportunity for all the job categories involved in DVI activities to meet each other. While the activities conducted by each profession helped to improve skills, the collaboration among professions was poor. We would like to improve the quality of DVI activities by introducing a team system for collaboration among multiple professions.

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