

Introduction: There is no universal agreement on what competence in disaster medicine is, nor what competences and personal attributes that add value in a medical disaster situation. Some studies suggest that not only technical skills are needed, but also non-technical skills. However, little is known about the actual demands and skills needed to manage a medical disaster situation. Therefore, this scoping review aimed to identify core competencies required for the disaster medicine response.

Method: A scoping review using the Arksey & O'Malley framework (1) was used. Structured searches in the databases PubMed, CINAHL full plus, Web of Science, PsychInfo and Scopus was conducted. Thereafter, data was structured and analyzed. Inclusion criteria were (1) original papers published in English during the last ten years, (2) covering any aspect of competence or skills needed to respond to a disaster situation. (3) Both qualitative and quantitative studies were included. Exclusion criteria were (1) reviews, editorial texts or similar, (2) papers focusing on the care of single patients.

(1) Arksey H, O'Malley L. Scoping Studies: Towards a methodological framework. *Int. J. Social Research Methodology*. 2005;8(1):19-32.

Results: To be presented at the congress.

Conclusion: To be presented at the congress.

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Train the Trainer for Implementing Treatment Guidelines

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Introduction: A collaborative project between Sweden and Kosovo with the aim to develop treatment guidelines for the ambulance services was undertaken. Firstly, relevant guidelines were identified, then translated, and processed to fit with the Kosovan ambulance service system. The next step was to train instructors in becoming proficient in training colleagues to use the guidelines. A train the trainer approach was chosen as it can be seen as grounded in Kolb's experiential learning theory and Crossan et al. organizational learning theory. Those theories describe how individuals learn and how organizations develop.

Method: This implementation project supported training of local instructors to become proficient in training colleagues in 13 selected treatment guidelines for the ambulance services using scenario training. Initially, Kosovar instructors received directions from Swedish instructors then they observed the Swedish instructors. After this, they took more responsibility for the training. Seven Swedish instructors instructed eight Kosovar instructors for a week where about 100 Kosovan

doctors and nurses were trained in patient assessment and treatment guidelines. The trainees were divided into four parallel groups of 4-5 participants with one Kosovar instructor supported by a Swedish instructor.

Results: After the training week, eight instructors from two different ambulance service centers achieved proficiency in training colleagues in using treatment guidelines. Each Kosovar instructor was involved in 30 training occasions.

Conclusion: The training resulted in the involved Kosovar ambulance service centers being able to train new colleagues in providing standardized patient assessment and treatment using treatment guidelines. In addition, the trained Kosovar instructors will be able to contribute to the development of new guidelines and revision of established guidelines.

Applying a train the trainer approach, theoretically grounded in learning theories, provides a sound basis to achieve systematic change for improving patient safety. Here, the knowledge distribution among practitioners is improved in an inexpensive manner.

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Efforts at our Emergency Department as a Designated Medical Institution for the Tokyo 2020 Games: How We Prepared for it during COVID-19 Pandemic

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Introduction: The Tokyo 2020 Games were held without spectators in the fifth wave of the COVID-19 pandemic after one-year postponement. From all over the world, approximately 11,000 Olympians and 4,400 Paralympians participated in the games. As one of the designated medical institutions, Tokyo Medical and Dental University Hospital provided emergency medical care for the personnel referred by medical staff at the venues or the Olympic Village clinics. On the other hand, it played a central role in treatment and care for COVID-19 patients in the Tokyo metropolitan area. The aim of this study was to review the emergency medical care system of the hospital as a designated hospital for the Tokyo 2020 Games and discuss the measures for future large-scale international events.

Method: A retrospective analysis of persons involved in the Games who visited our emergency department by request was conducted. COVID-19 patients who were admitted were also analyzed. The study period was from July 13 to August 11 for the Olympics and from August 17 to September 11 for the Paralympics, respectively in 2021. The data was derived from electronic health records from the hospital.

Results: The total number of ED visits was 38 during the period. One patient was hospitalized, and another patient was transferred. Twenty-one (55%) were athletes, seven (18%) were staff members, and ten (26%) were others. The reason for the visit was medical disease in 23 (61%) and surgical