obstacles that hinder the effectiveness of STMMs, while also recognizing the added value these missions provide to local healthcare systems.

Conclusion: Regular STMMs, such as MoHope III, can enhance healthcare delivery in low-resource settings, but face numerous challenges that must be addressed for sustained impact. Recommendations include improving infrastructure, ensuring better financial support, and fostering local staff training. This study contributes valuable insights into the complexities of implementing effective STMMs in similar contexts, contributing to the broader discourse on the efficacy and sustainability of short-term medical missions.

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EMT Warehousing Solutions in the Pacific Island Countries and Areas: Addressing System and Infrastructure Challenges to Enable Emergency Deployments

Pierre-Yves Beauchemin¹, Jeff Brian Delali De Souza¹, Erin Noste², Anthony Trevor Cook², Sharin Vile³,

Garry Geregana Nou MD⁴, Siosifa Sifa⁵, Sabrina Angela Tayo² 1. WHO, Suva, Fiji

- 2. WHO, Manila, Philippines
- 3. Gov Vanuatu, Port Vila, Vanuatu
- 4. WHO, Port Moresby, Papua New Guinea
- 5. Gov Tonga, Nuku'alofa, Tonga

Background/Introduction: Emergency deployment readiness relies on fit-for-purpose warehousing management, a capability that is often under-resourced. Since 2017, WHO has collaborated with 13 Pacific Island Countries (PICs) to establish national Emergency Medical Teams (EMTs). Warehousing EMT supplies can be a challenge due to inadequate storage facilities leading to storing EMT cache in multiple locations, suboptimal tracking, and maintenance.

Objectives: To describe an agile EMT warehousing strategy in the Pacific for rapid mobilization for health emergency response.

Method/Description: WHO has worked with colleagues in PICs on national EMT cache storage, tracking, and maintenance. The warehousing system needed to match available storage solutions in hot, humid climates. An inventory management system was designed for ease of use for national EMT logisticians with small support staff.

Results/Outcomes: WHO logisticians created a two-fold solution for national EMT warehousing: an EMT-focused stock report system and a semi-mobile storage solution. The system automates stock tracking with regular warehousing features while also offering deployment history tracking with a threecolor tier coding system of stock readiness for deployment. Complementing the stock tracking is a shipping container, refitted into a modular storage room, which provides a secure, relocatable solution.

Conclusion: Effective EMT warehousing is central to rapid and quality deployments. Continued work is necessary to

improve EMT warehousing in PICs and explore its applicability to other low—and middle-income country EMTs. Solutions must be tailored to local contexts, and resources allocated to ensure efficiency and sustainability. The experience in the Pacific with innovative warehousing solutions can be adapted by other national EMTs in low-resource settings.

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The Role of Information Management and Minimum Data Set in Disaster Response

Jiro Oba MD, PhD¹[®], Yoshiki Toyokuni PhD¹, Yuichi Koido MD, PhD¹, Tatsuhiko Kubo MD, PhD²

- 1. MHLW Japan DMAT Secretariat, Tachikawa, Tokyo, Japan
- 2. Graduate School of Biomedical and Health Sciences(Medicine), Minami-Ku, Hiroshima, Japan

Background/Introduction: This study explores the role of Information Management (IM) in disaster management, through the use of the Minimum Data Set (MDS). The International Search and Rescue Advisory Group (INSARAG) Asia-Pacific Regional Earthquake Response Exercise (ERE) and the Project for Strengthening the ASEAN Regional Capacity on Disaster Health Management (ARCH Project) have provided platforms for such exploration. As an exercise controller, my involvement has focused on supporting the EMTCC from the IM perspective.

Objectives: The primary objective was to evaluate the effectiveness of IM, through MDS, in supporting EMTCC during disaster response exercises and actual disaster scenarios.

Method/Description: Participation in regional collaboration drills and real-world disaster scenarios provided insights into IM practices. Key activities included supporting EMTCC during exercises, assisting the Moldovan government and WHO regional office affected by the 2022 Russian invasion of Ukraine, and collaborating with WHO's regional office (EMRO) for Palestinian support in 2023. IM support involved data collection, situation analysis, and the ongoing provision of off-site support for MDS implementation.

Results/Outcomes: The exercises and real-world engagements demonstrated significant growth in national EMTs' capabilities and highlighted the critical role of IM. The MDS-supported IM processes effectively facilitated data collection and analysis, enhancing coordination and decision-making.

Conclusion: Ongoing training and support for EMTCC through IM are vital for effective disaster response. The study underscores the importance of structured IM in improving disaster management and the operational readiness of EMTs. Future efforts should continue to focus on refining IM practices and enhancing data management capabilities to ensure robust responses to health emergencies.

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