improve students’ knowledge, risk perception, awareness, and attitudes towards preparedness. Further work is required to determine the frequency of re-education required and appropriate age groups for educational interventions.

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Learning Lessons during Recovery from Disasters
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Introduction: The Fort McMurray Alberta wildfire was one of Canada’s largest natural disasters in history, burning 589,995 hectares of land until being controlled on July 5, 2016. In responding to the fire, Alberta Health Services (AHS) prompted a province-wide coordinated response. Through a combination of pre-emptive strategies and responsive activities, the AHS response has been considered a success. Underlying the successful response is the collective experiences and contextual knowledge of AHS staff members acquired from past events. While the frequency and severity of risks associated with extreme weather and climate change are increasing worldwide, there is a persistent knowledge gap in the evidence-base informing public health emergency preparedness. It is imperative that lessons learned from past events inform future preparedness activities. Learning lessons is a systematic implementation process that can be used to inform future responses and best practices that are transferable to similar situations.

Aim: To describe strategies employed and challenges encountered during recovery after the Alberta wildfires.

Methods: A single-case study approach was employed to understand the AHS method to “learning lessons,” and the process involved in translating lessons into actionable goals. Semi-structured interviews with senior leaders (n=11) were conducted and internal documents were obtained.

Results: The analysis revealed a strategic learning process, including debriefs, staff surveys, interviews, and member validity checking. The implementation process used to translate the lessons identified included a project management framework, evaluation techniques, and the utilization of tacit and explicit knowledge. Key challenges for implementation involve clarification of processes, leadership commitment, resource and time constraints, staff turn-over, and measuring outcomes.

Discussion: Translating the lessons from the Alberta wildfires is crucial for enhancing preparedness, and exploratory research in this area can contribute to building a program of research in evaluation during disaster recovery.

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Preparedness for a Severe Rainfall: The Importance of a Timeline
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Introduction: In August 2018, Kerala, India witnessed its worst flood in over a century. With the support of the national health mission, Operation Navajeelan, a public-private partnership between the district health administration and local hospitals was established in Kozhikode to provide medical aid to flood victims. This study identifies prerequisites, describes challenges, and depicts the epidemiology of patients seen in these camps.

Aim: 1. Identify prerequisites and medical needs/challenges faced by medical relief camps in a flood-affected region
2. Formulate protocols to avoid duplication of services
3. Prepare an ideal PPP emergency medical camp model

Methods: A control center with drugs and a logistics unit was set up at the district administration to monitor and supervise various camps. A mobile medical documentation format was created to record the details of each camp. Cases of patients seen at these camps were compiled and later analyzed. The medical officer sent reports from each camp to the control center each day to specify the daily difficulties faced by each camp. Mobile ICUs were kept on standby to respond in the event of emergent circumstances or surge demands. Transfer protocol and treatment guidelines were formulated and standardized.

Results: Over two weeks, approximately 40,000 patients were seen in 280 medical camps. Major medical issues included exacerbation of chronic illnesses due to loss of medications (18,490), acute respiratory infections (7,451), psychiatric illnesses (5,327), trauma (3,736), skin infection (792), tropical fever (498), acute gastroenteritis (394), and ACS (17). Of the cases of fever, 137 people had leptospirosis. Major challenges included a lack of training in disaster management and failure of documentation systems.

Discussion: A well-organized control center, improved training in disaster medicine, and reliable documentation systems are crucial for coordinating medical camps in disaster areas. Public-private partnerships offer a model for providing medical relief in disaster settings.

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“Operation:Navajeelan”: Novel PPP Model Flood Relief Camp
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Introduction: For recent years, we often hear the words, “never experienced before” on a weather forecast in Japan.

Aim: To evaluate our response to “Heisei 30-year July heavy rain” in the Hyogo Emergency Medical Operations Center.

Methods: Review our actions taken and exchanges of views with local government representatives in a time-related manner compared with public announcements of evacuation/sheltering warning.

Results: A specialized warning of heavy rain was announced at 10:50 PM on Friday by the local meteorological observatory.