possible natural disaster and public health emergencies supports the need to incorporate bioterrorism preparedness and response material into the curricula for every health professional school in the United States. It is clear that a main barrier to healthcare preparedness is a lack of coordination across the spectrum of public health and healthcare communities and disciplines. In order to assure a unified and coordinated approach to preparedness, benchmarks and standards must be consistent across healthcare disciplines and public health. The most basic level is education.

To date, the focus of bioterrorism preparedness and response training has been on the education of the existing healthcare workforce. With the realization that the entire healthcare workforce will need to become more educated regarding terrorism and emergency preparedness, and an understanding that this must be a constant effort, recent attention has focused on the healthcare student. Students' needs differ from those of practitioners, and it is incorrect to assume that continuing education is directly applicable to student education. There is a fundamental difference between educational competencies and occupational competencies between students and practitioners. It also is important to recognize that to assure proper preparedness, there must be a clear connection between departments of public health and all other healthcare entities. To this end, public health students were included in the creation of competencies and have shown that non-clinical practitioners can, and indeed, must be included in this process.

A process is described and a list of emergency preparedness core competencies for healthcare professions and their applicability to medical, dental, nursing, and public health students is presented. While this set of competencies was designed using these disciplines, they easily may be adapted to other healthcare disciplines. The only variations would be in the assignment of proficiency levels and the decision of whether the clinical competencies are appropriate. The core competencies that are presented have been divided into the following four categories, which represent broad subject areas and the separation of the competencies related to direct patient care: (1) emergency management principles; (2) terrorism and public health emergency preparedness; (3) public health surveillance and response; and (4) patient care for disasters, terrorism and public heath emergencies.

Keywords: education; emergency; health care; preparedness; professionals; students

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Do We Need an Emergency Medical Training Center of Excellence?

J. Stana Czech Republic

There is a manifest need for emergency medical training services in Eastern Europe and the former Soviet Union. The process of accession into the European Union has generated significant improvements in the healthcare systems of the countries commonly referred to as the "East European Eight" (Czech Republic, Estonia, Hungary,

Latvia, Lithuania, Poland, Slovak Republic, and Slovenia).

However, these countries must continue to work together to further improve their healthcare systems. For this purpose, every year, the project of the Rallye Rejviz attracts an increasing number of emergency medical service professionals to Zlate Hory—a small Czechoslovakian town near the Polish border. Building on existing experience, this study aims to bring international emergency teams together in the non-threatening environment of the Jeseniky Mountains in the Czech Republic to compare performances and exchange information about techniques and approaches, while building friendships and opportunities for cross-border cooperation. During the eight consecutive years of the Rallye Rejviz project, the concept of an International Center of Excellence, which would serve members from around the world, was developed. Several indicators suggest the Center would be beneficial and widely supported, including: (1) the successful eight-year tradition of the Rallye Rejviz (RR) with annual events, such as RR, Rescue Jesenik Conference, and the Helpers Trophy for children; (http://www.rallye-rejviz.cz/) (2) skilled experts on the Advisory Board of the RR, with existing background in the RR Sports Club and cooperating subjects; (3) an existing location (The Bohema Resort http://www.bohema-zlatehory.cz/); (4) very good strategic and geographic position of the place; (5) the support of the Olomouc region; and (6) the support of important scientific and business subjects.

The target clientele of the proposed facility would include doctors, nurses, paramedics, health care administrators, and medical school students and faculty seeking training in state-of-the art emergency medical training practices and procedures. Participation in the program would not only augment the professional skills of those individuals, but also encourage the dissemination of emergency medical training-related knowledge to colleagues at their home institutions. The Center will also serve as a training ground for first-aid education of Fire Brigade, local military assets, and volunteer groups like the International Red Cross and other relief agencies. The quiet location in beautiful nature with a big potential of sports and free time activities is a guarantee of good results of rehabilitation and recondition of the attendants.

Keywords: Czech Republic; emergency medical services; International Center of Excellence; Rallye Rejviz, training Prehosp Disast Med 2005;20(2):s20

Emergency Medical Services Education and Challenges in Iceland

H. Svavarsdottir Iceland

The objective is to give an overview of the education and continuing education for the emergency medical technicians (EMTs) in Iceland. Topics will include how education is structured and made accessible for those who live in rural and remote areas. The challenges facing the future of the emergency medical services (EMS) education also will be made explicit.