Japan Disaster Relief Medical Mission Operating System - Key Achievement and Lessons Learned

Tatsuhiko Kubo MD, PhD.
Japan Disaster Relief, Chiyoda-Ku, Tokyo, Japan

Background/Introduction: In 2015, the Japan Disaster Relief (JDR) Medical Team developed the JDR Medical Mission Operating System (MOS), a comprehensive EMT Information Communication Tool (ICT). This system was utilized during the 2019 Mozambique Cyclone and the 2023 Türkiye Earthquake.
Objectives: To report key achievements and lessons learned from implementing the JDR-MOS.
Method/Description: The review involved analyzing training materials and mission reports.
Results/Outcomes: The MOS implementation significantly enhanced reporting capabilities to the EMTCC and JDR headquarters in Tokyo. The MOS contributed to the development of Japan's national EMT standard reporting template J-SPEED, and the WHO EMT Minimum Data Set (MDS). Challenges included training team members who work in hospitals all over Japan, also securing resources for periodic system updates. Some team members preferred paper-based operations, believing they saved time and potentially allowed for more patients to be treated. Paper template also were regarded to facilitate quick information sharing compared to digital screens.
Conclusion: The introduction of ICT through the MOS substantially improved reporting capabilities but faced technical challenges in training, maintenance, and information sharing compared to paper-based systems. The benefits of ICT can be maximized through collaborative development and implementation of EMT ICT standards. This can be applied either nationally and internationally. Based on these achievements and lessons learned, JDR is now upgrading MOS to a next-generation strategic ICT system.

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Innovative Online Toolbox for AUSMAT and EMTs: Enhancing Information Sharing and Operational Transparency

Abigail Trewin MPH, BSHc(para), Amiel Grigg, Rhiannon Wake BSN, Pookie Vajrathorn BSN, Michelle Fielding BSN
National Critical Care and Trauma Response Centre, Darwin, Northern Territory, Australia

Background/Introduction: Addressing the evolving demands of global emergency medical operations necessitates tools that enhance information sharing, learning, and operational transparency among Emergency Medical Teams (EMTs). AUSMAT (Australian Medical Assistance Teams) identified a critical gap in accessible, comprehensive resources to support these needs across various EMT deployments worldwide.
Objectives: The primary objective was to support AUSMAT team members in remaining current and up-to-date while facilitating efficient information sharing. This toolbox, accessible to any user, integrates information in a collaborative platform.
Method/Description: An innovative online toolbox was developed through collaboration with experienced AUSMAT personnel. This toolbox, accessible to any user, integrates information in a collaborative platform. It aims to demonstrate EMT principles by providing AUSMAT's operating documents, technical information on logistics (including technical video's), plans, and resources. Additionally, the toolbox incorporates the lessons AUSMAT has identified and implemented and content on specialist skill areas.
Results/Outcomes: Initial evaluations through Team Member training demonstrate that the toolbox significantly enhances team knowledge, transfer of critical information, and operational transparency. It offers a unique resource for teams regionally entering the EMT initiative or strengthening current practices or technical capability.
Conclusion: The pilot of the AUSMAT Toolbox proposes that online sharing of classification evidence supports greater Team Member understanding and offers a unique opportunity to develop a community of practice globally, utilizing a broader platform that all teams can contribute to.

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Designing an EMT Cache for Extreme Cold Weather in Mongolia

Khongor Dejidgunchin[1], Bund-Ochir Khishigsaikhan[2], Khosbayar Battugs[3], Odkhuu Togmid[4], Sean Casey[5], Jan-Erik Larsen[5], Misheel Enkhdalai[5], Gerelmaa Danzan[6], Nomin-Erdene Tsogtgerel[6], Dulamragchaa Buyanbaatar[6]
1. National Emergency Management Agency, Ulaanbaatar, Mongolia
2. Ministry of Health, Ulaanbaatar, Mongolia
3. First Central Hospital, Ulaanbaatar, Mongolia
4. Ministry of Defense, Ulaanbaatar, Mongolia
5. WHO Regional Office for the Western Pacific, Manila, Philippines
6. World Health Organization Representative Office for Mongolia, Ulaanbaatar, Mongolia

Background/Introduction: Emergency Medical Team (EMT) cache is the collection of items and equipment that enable an EMT to remain operational and self-sufficient during deployment. Providing quality care to affected populations and ensuring that WHO standards are upheld is of primary concern. Cache design needs to be specific to context. With extreme winter conditions in Mongolia with temperatures below -30°C from November to February, special attention had to be taken into consideration when designing the EMT cache.
Objectives: Design cache content for EMT type 1 fixed to respond to disasters fit for extreme cold weather conditions. Mongolia regularly experiences these events, an extreme cold-season disaster where heavy snow and ice cover lead to reduced accessibility of health services, and high livestock mortality.
Method/Description: Specialized items including insulated tents, sleeping bags, heated flooring, air heaters, insulated water

conduits are some of the items necessary to prevent freezing and prevent equipment damage from exposure to extreme cold.

Consultation was done with cold climate EMT experts, the Mongolian Ministry of Health, the National Emergency Management Agency, and the Ministry of Defense.

Results/Outcomes: The Mongolia EMT cache was successfully designed and procured by the WHO. Under the ownership of the Ministry of Health, all cache items were delivered to the National health sector warehouse in Ulaanbaatar.

EMT equipment adapted to cold climate is significantly more costly and bulkier, requiring adapted logistics for successful deployment.

Conclusion: Through a consultative process and strategic design, the Mongolia EMT cache is now ready for deployment during the harsh winter season in Mongolia.

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WHO Guidance on Research Methods for Health Emergency and Disaster Risk Management: A Tool to Build and Use Evidence to Protect Health and Strengthen EMTs

Ryoma Kayano MD, PhD[1], *Jonathan Abrahams MPH*[2], *Mike Clarke PhD*[3], *Virginia Murray*[4], *Makiko Kato MacDermot MSc*[1]

1. WHO Centre for Health Development, Kobe, Hyogo, Japan
2. Monash University Disaster Resilience Initiative, Monash University Accident Research Centre, Melbourne, Victoria, Australia
3. Queens' University Belfast, Belfast, United Kingdom
4. UK Health Security Agency, London, United Kingdom

Background/Introduction: Emergencies and disasters are causing devastating impacts on populations around the world. Protecting health from emergencies and climate change and strengthening health systems are goals in the WHO's thirteenth and fourteenth Global Program of Work (GPW 13 and GPW 14).

Objectives: Robust scientific evidence is needed to inform effective policies and practices across emergency prevention, preparedness, response, and recovery. However, the conduct of the reliable research to produce this evidence has proven challenging before, during, and after emergencies and disasters.

Method/Description: To help meet these challenges, WHO established the Thematic Platform for Health Emergency and Disaster Risk Management Research Network (Health EDRM RN) in 2018, aiming to facilitate research collaboration and promote knowledge transfer including for EMTs. In 2021, the WHO Center for Health Development, the Health EDRM RN secretariat, led the development of the WHO Guidance on Research Methods for Health EDRM in a collaborative effort involving 164 experts from 30 countries.

Results/Outcomes: The WHO Guidance on Research Methods for Health EDRM was expanded in 2022 with a chapter on research in the context of COVID-19 and in 2023 with a supplementary suite of online learning materials for education and training globally.

Conclusion: An executive summary for policy makers and program managers has recently been developed to enhance dissemination and strengthen research capacity building to advance health EDRM. Further collaboration is underway with regions and countries, academics, practitioners, and the public to generate new scientific evidence to protect health from the risks associated with all types of emergencies and disasters.

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WHO Initiatives to Promote and Accelerate Research on Health Emergency and Disaster Risk Management (Health EDRM)

Ryoma Kayano MD, PhD[1], *Virginia Murray MD*[2], *Tanja Schmidt*[3], *Donald A Donahue*[4], *Paul Barach MD, MPH*[5], *Jehan Al-Badri MD*[6], *Bella Donna*[7], *Tatsuhiko Kubo MD, PhD*[8], *Jussi Sane PhD*[3], *Mike Clarke PhD*[9], *Qudsia Huda MD*[10], *Makiko Kato MacDermot MSc*[1], *Jonathan Abrahams MPH*[11]

1. WHO Centre for Health Development, Kobe, Hyogo, Japan
2. UK Health Security Agency, London, United Kingdom
3. WHO Regional Office for Europe, Copenhagen, Denmark
4. University of Maryland, Baltimore, Maryland, United States
5. Thomas Jefferson University, Philadelphia, Pennsylvania, United States
6. WHO Regional Office for the Eastern Mediterranean, Cairo, Egypt
7. Universitas Gadjah Mada, Yogyakarta, Indonesia
8. Hiroshima University, Hiroshima, Japan
9. Queens' University, Belfast, United Kingdom
10. WHO Headquarters, Geneva, Switzerland
11. Monash University Disaster Resilience Initiative, Monash University Accident Research Centre, Melbourne, Australia

Background/Introduction: Disasters and emergencies cause devastating impacts on communities, infrastructure, economies, and health. Protecting health from emergencies and disasters are the goals in the WHO's thirteenth and fourteenth General Program of Work (GPW 13 and GPW 14).

Objectives: Build robust scientific evidence and support, facilitate, and celebrate reliable research to for informed decision-making and effective policy and practice.

Method/Description: WHO established a global expert network in 2018, "WHO Thematic Platform for Health EDRM Research Network (Health EDRM RN)". The WHO Centre for Health Development (WHO Kobe Centre (WKC)), the secretariat of the Health EDRM RN, facilitates international collaboration for better knowledge generation, synthesis, and dissemination.

In 2021, in collaboration with 164 experts from WHO HQ, all Regional Offices, and 30 countries, WHO Guidance on Research Methods for Health EDRM (the Guidance) was developed, which provides concrete guidance on how to plan, conduct and report Health EDRM research.