


Training For Patient Mobilization In Disaster Management: Safe And Efficient Transfer Techniques At The Sirajussa'adah Limo Islamic Boarding School, Depok

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Article Info	ABSTRACT
Keywords: Patient Mobilization, Disaster Management, Transfer Techniques,	In the wake of disasters, the efficient and safe mobilization of patients is a critical component of disaster management. This article explores the role of community service counseling in enhancing patient mobilization during such emergencies. Community service programs play a pivotal role in educating and training volunteers, healthcare professionals, and first responders on best practices for safely transferring patients to and from chairs, beds, long spine boards, and crutches. By focusing on the unique challenges presented by disaster scenarios, this counseling initiative aims to improve the preparedness of communities and healthcare systems. The program emphasizes the importance of proper techniques, coordination, and communication to minimize the risks associated with patient transfers in high-stress environments. Through case studies and practical examples, this article demonstrates how targeted counseling and training can significantly reduce injuries and improve outcomes during disaster response efforts. Ultimately, this work underscores the necessity of integrating community-based education into broader disaster management strategies to ensure that patient mobilization is handled with the utmost care and efficiency. The primary target of this community service activity is the students at Sirajussa'adah Limo Islamic Boarding School in Depok. The training methods, including lectures, discussions, simulations, and role-playing, are designed to teach patient mobilization techniques. The intended outcome is that students will be capable of providing immediate assistance with patient mobilization in the community, potentially reducing medical expenses for individuals and their families, thereby contributing to economic resilience."
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INTRODUCTION

Indonesia's geographic position along the Pacific Ring of Fire makes it one of the most disaster-prone countries in the world, with frequent occurrences of earthquakes, volcanic eruptions, tsunamis, floods, and landslides (BNPB, 2020). These natural disasters, often striking with little warning, can result in mass casualties and widespread displacement,

underscoring the critical need for robust disaster management strategies (Gunawan & Surjan, 2018).

In this context, the effective mobilization of patients becomes a crucial element that directly impacts the outcomes of emergency response efforts (Smith & Patel, 2019). Disasters, whether natural or man-made, often lead to large numbers of casualties and displaced individuals, necessitating swift and safe transfers of patients to appropriate medical facilities or shelters (WHO, 2021). The complexity of these situations is compounded by the urgency and unpredictability of disasters, making it imperative that those involved in patient care are well-prepared and equipped with the necessary skills and knowledge (Smith & Patel, 2019).

One of the most significant challenges during disaster response in Indonesia is the safe and efficient mobilization of patients who may be critically injured, immobilized, or otherwise vulnerable (Gunawan & Surjan, 2018). Proper techniques for moving patients to and from chairs, beds, long spine boards, or crutches are essential to prevent further injury and to ensure that medical interventions can be delivered without delay (Smith & Patel, 2019). However, these techniques require specialized training and knowledge, which may not always be available in the immediate aftermath of a disaster (WHO, 2021).

This is where community service counseling becomes an invaluable resource (WHO, 2021). By providing targeted education and training to volunteers, healthcare workers, and first responders, community service initiatives can enhance the preparedness of communities to handle patient mobilization effectively during disasters (Smith & Patel, 2019). These programs focus on imparting practical skills and best practices, ensuring that all participants are capable of performing patient transfers safely and efficiently under the most challenging conditions (WHO, 2021).

In this article, we explore the role of community service counseling in disaster management within Indonesia's unique disaster-prone landscape, specifically focusing on patient mobilization. We will examine the key techniques taught in these programs, discuss the challenges faced during implementation, and highlight the benefits of integrating such counseling into broader disaster preparedness strategies (Smith & Patel, 2019). Through this analysis, we aim to demonstrate the critical importance of community-based education in improving patient care and overall disaster response efforts in Indonesia (Gunawan & Surjan, 2018).

METHOD

Identification of the Problem

Effectively addressing the challenges of patient mobilization during disasters requires a comprehensive identification of the problem. The first step involves assessing the current knowledge of the community regarding patient mobilization techniques and disaster management. This can be achieved through surveys or focus group discussions that gauge the community's understanding and readiness (Jones & Patel, 2022). Next, it is crucial to identify the specific vulnerabilities within the boarding school community. Factors such as the

age and health status of the students must be evaluated to determine the necessity for training in patient mobilization during emergencies (Taylor & Nguyen, 2023).

Finally, gathering input from key stakeholders is vital. Involving school administrators, health professionals, and community leaders will help highlight critical issues related to patient safety and effective mobilization strategies. By engaging these individuals, the community can develop a well-rounded approach to enhance its disaster preparedness and response capabilities (Martinez et al., 2021).

Development of Achievement Concepts and Indicators

Establishing clear concepts related to patient mobilization is essential for the success of the training program. The focus should be on techniques for safe transfers to chairs, beds, long spine boards, and crutches. By clearly defining these concepts, participants will gain a solid foundation for effective mobilization practices (Hawkins et al., 2020).

In addition to concept development, defining success indicators is crucial for measuring the effectiveness of the counseling program. Specific indicators may include an increase in knowledge of patient mobilization techniques among participants, an improvement in their ability to execute safe transfers, positive feedback regarding the training experience, and an enhanced readiness to respond during a disaster. By setting these measurable indicators, the program can effectively track progress and outcomes, ensuring that participants are well-equipped to handle patient mobilization in emergency situations (Smith & Johnson, 2021).

Activity Planning Stages

The planning of activities for the patient mobilization training program involves several crucial stages. First, curriculum development is essential to create a comprehensive framework that encompasses theoretical knowledge, practical techniques, and case studies related to patient mobilization in disaster scenarios. This structured approach ensures that participants receive a well-rounded education that prepares them for real-world applications (Williams & Foster, 2020). Next, resource allocation plays a vital role in the success of the training program. It is important to identify and allocate necessary resources, including training materials, equipment for practice (such as crutches and spine boards), and suitable venues for conducting training sessions. Proper resource management ensures that participants have the tools they need to effectively learn and practice the skills being taught (Anderson & Kim, 2021).

Finally, scheduling training sessions requires careful planning to accommodate the availability of participants. Organizing a series of workshops and sessions that ensure maximum attendance and engagement is crucial for the program's effectiveness. This strategic scheduling allows for a more interactive learning environment, fostering better knowledge retention and skill development (Brown et al., 2022).

Activity Implementation Stages

Training Delivery: The training sessions will be conducted using a combination of lectures, hands-on demonstrations, and practical exercises to reinforce learning. This multifaceted approach is essential for catering to different learning styles and enhancing retention of information (Mayer, 2009). Additionally, integrating Islamic teachings on caring for others will

add relevance and depth to the training, aligning the objectives with the participants' values and beliefs (Sulaiman & Foziah, 2019).

Role-Playing and Simulations: To provide participants with practical experience, role-playing and simulation exercises will be employed to practice patient mobilization techniques in realistic disaster scenarios. Engaging in these activities allows participants to apply their knowledge in a safe environment, thereby boosting their confidence and preparedness for real-life situations (Holt & Dwyer, 2019). The use of debriefing sessions following each simulation will further enhance learning by encouraging participants to reflect on their experiences and identify areas for improvement (Fanning & Gaba, 2007).

Community Engagement: To promote a collaborative approach to disaster preparedness, local healthcare professionals will be invited to assist in training sessions. This engagement not only enriches the training experience with expert knowledge but also fosters a sense of community involvement and support (Levine, 2014). By encouraging participation from the broader community, the training program can build a network of resources and support that enhances disaster readiness for all.

Monitoring and Evaluation Stages

Ongoing Assessment: To ensure participants are grasping the training content, formative assessments will be implemented throughout the training sessions. This may include quizzes, feedback forms, and direct observations of participants' skills in patient mobilization. Research indicates that formative assessments are crucial in providing immediate feedback, enabling both instructors and participants to identify areas of strength and those requiring further development (Black & William, 1998).

Post-Training Evaluation: After the training program, follow-up assessments will be conducted to evaluate knowledge retention and the practical skills of participants in mobilizing patients safely during a disaster. Such evaluations are essential for measuring the long-term impact of training initiatives and ensuring that participants are prepared to apply their skills in real-life scenarios (Kirkpatrick, 1996).

Feedback Mechanism: A robust feedback mechanism will be established to allow participants to share their experiences regarding the training. This will include insights into what aspects they found most useful and suggestions for improvement. Gathering participant feedback is a critical component of program evaluation, as it provides valuable data to refine and enhance future training sessions (Dillman et al., 2014).

Report and Share Findings: Finally, the outcomes of the training program will be documented, highlighting both achievements and areas that require attention. These findings will be shared with key stakeholders, including the school administration and community leaders, to promote transparency and foster continued support for the initiative. Reporting on program outcomes is essential for demonstrating accountability and fostering community engagement in disaster preparedness efforts (Baker et al., 2015).

By adhering to this structured method, the training program can effectively educate the Islamic boarding school community about patient mobilization techniques in disaster management, ensuring that participants are well-prepared to respond to emergencies.

RESULT

The community service activity involved 25 students from both high school and vocational levels, including 16 girls and 9 boys. The monitoring process utilized achievement indicators specific to the community service activities, while the evaluation focused on the level of indicator achievement. Surveys were distributed before and after the activities, and students were required to redemonstrate the safe mobilization of patients using spinal boards, assist in moving disaster victims to chairs, and correctly bandage and relocate fracture victims using long spinal boards or chairs. The evaluation revealed a positive trend in participants' comprehension post-training, highlighting their engagement in knowledge sharing and role play. Specifically, 2 students (8%) showed insufficient understanding, 5 students (20%) had sufficient knowledge, and 18 students (72%) demonstrated good knowledge of safe mobilization techniques.

Discussion

The results indicate that the community service activity was largely successful in enhancing students' understanding and skills related to patient mobilization in disaster scenarios. The significant increase in knowledge and the ability to perform practical tasks suggest that the training effectively addressed the learning objectives. The high percentage (72%) of students demonstrating good knowledge indicates that the training was well-received and that the students were able to internalize and apply the material presented. The 8% of students with insufficient understanding may highlight areas where the training could be improved, such as providing additional support or alternative instructional methods to cater to different learning needs.

The positive trend observed in the students' comprehension aligns with the intended outcomes of the community service activity, emphasizing the importance of combining theoretical knowledge with practical application. The ability to redemonstrate techniques such as the use of spinal boards indicates that students not only retained the information but were also capable of applying it in a controlled setting, which is crucial in disaster management situations where patient mobilization is critical.

CONCLUSION

The community service activity effectively improved students' understanding of patient mobilization techniques in disaster management, with 72% of participants demonstrating good knowledge and skills. The combination of pre- and post-surveys, practical assessments, and feedback highlights the effectiveness of the training program. However, the presence of students with insufficient understanding suggests the need for further refinement of the training approach to ensure that all participants reach a satisfactory level of competency. Overall, the activity successfully contributed to preparing students to respond effectively in real-life disaster scenarios, ensuring they are equipped with the necessary skills for patient mobilization.

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