



SUMMARY REPORT

Workshop on
"Safety of Medical Infrastructures"
11-13 Mar 07
Gorgan, Iran



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1. Title of the Workshop

Name: Workshop on “Safety of Medical Infrastructures”

2. Organization of the Workshop

Organizers:

1. United Nation Development Program, Iran
2. Management and Planning Organization of Iran
3. Ministry of Health and Medical Education of Iran
4. Golestan Province-Governor Office, Strengthening Capacities for Disaster Risk Management in Iran

Technical Assistant provided by:

1. Asian Disaster Preparedness Center (ADPC)

Contact persons:

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Sara Ahrari (Project Manager). Email: sahrari@adpc.net

Established in 1986, ADPC is a leading regional resource center dedicated to disaster reduction. ADPC works with governments, NGOs and communities of the Asia and Pacific regions to strengthen their capacities in disaster preparedness, mitigation and response through training, technical assistance, regional program management, country project demonstration, information sharing and research.

2. National Society for Earthquake Technology-Nepal

Contact person:

Ramesh Guragain (Director of Earthquake Engineering and Research Division): Email:

rguragain@nset.org.np

Programme Development & Supervision by:

United Nation Development Programme

Dr. Victoria Kianpour Atabaki (Program Analyst)

Energy, Environment and Disaster Management Cluster

Email: Victoria.kianpour@undp.org

3. Location of the Workshop

Health Worker Education Center, 1st Golbarg Ave., South Motahari St., Karimi Sq., Gorgan, Iran

4. Starting date and duration of the Workshop

The workshop took place from 11 to 13 March 2007.

5. Workshop participants

The total number of the participants in the course was 36. There were 3 female participants and 33 male participants.

The training course participants were from different government and non government organizations from the health and other relevant sectors, from Gourgan, Kerman and national level. The representative of the “ Natural Disaster Research Center of Iran” was also present during the workshop. The list of Participants is provided in the Annex III of this report.

6. Workshop Introduction

In the aftermath of the Bam earthquake, there has been a renewed commitment on behalf of various Government and UN agencies in Iran to intensify efforts towards securing Iran against future disaster risks. The Government-UNDP Five-year National Joint Programme is the flag-ship programme of UN/UNDP in Iran for reducing disaster risks. The programme objectives are aligned with the broad outcomes identified by the UNDAF/UNDP Country Programme for the Islamic Republic of Iran (2005-2009) in the area of disaster risk management. The latter’s emphasis on building strong disaster risk management capacities, especially through garnering community awareness and participation; enhancing coordination mechanisms amongst stakeholders at the local and national levels; and developing systems for effective disaster risk management at all levels to develop a strategy for reducing disaster risk in Iran.

Effective and efficient disaster risk management needs multi-disciplinary and multi-sectorial approaches which are not only limited to ensuring structures, but approaches, in which effective, efficient and result-oriented integration; cooperation and coordination with wide range of actors and stakeholders are prerequisites. Communication, networking and facilitation skills are also necessary skills for managers and experts that enable them to get optimum results of integration and partnership with various actors, partners, stakeholders and beneficiaries of the programme at horizontal and vertical levels. Without appropriate communication/facilitation skills, partnership, integration and participation, cannot be achieved.

To support achieving the programme outcomes, UNDP has contracted the Asian Disaster Preparedness Center (ADPC) to develop and conduct the workshops to strengthen National and Regional Capacities and to improve the knowledge networking in the area of Urban Earthquake Disaster Risk Management in the Central and Southwest Asian region, as well as developing in participants advanced skills in facilitation, communication and networking for integrated and participatory disaster risk management with actors, partners, clients, stakeholders and beneficiaries.

Since it is of vital importance that the medical facilities continue to be functional after disasters, the “Safety of Medical Infrastructures Workshopt” was developed as part of these series of workshops and conducted in Gourgan city for participants from both Kerman & Gourgan as well as national level actors.

7. Implementation of the Workshop

7.1 Conduct of the Workshop

Four different Modules have been considered for this workshop:

Module 1: Overview

Session 1: Disaster and Terminology/EQ basics

Session 2: EQ and performance of hospitals in the past (Case Studies)

Module 2: Structural Safety of Hospitals

Session 3: Expected performance of medical infrastructure

Session 4: Increasing the structural safety of building through proper arrangement of medical facilities (i.e. transfer of heavy equipment to ground floor)

Session 5: Assessment & retrofitting

Session 6: Case Studies

Module 3: Non-Structural Safety

Session 7: Components (equipment, parapets, lifelines etc) and different type of risks (Life loss, property loss, function loss)

Session 8: Systems (electricity, water, etc) and back up systems, contingency

Session 9: 10 simple ways of improving non-structural safety

Session 10: Case studies

Module 4: Emergency Response Plan

Session 11: Creation of plan (allocation of space for better and safe performance, check list etc.)

Session 12: Creation of plan (Roles & responsibilities, prioritizations of casualties)

Session 13: Need of special training (MFR, to create special skills and implement the plan)

Session 14: Case studies

Annex I contains descriptions of all the Modules and their objectives (as planned). Annex II contains the Workshop schedule as planned. In summary, the Workshop was implemented as follows:

11/03/07 – First day of the Workshop: Opening Ceremony, Overview and Structural Safety of Hospitals

The opening ceremony featured Dr. Semnani from Health Sector in Golestan Province and Dr. Panahi from Emergency Management Centre of Ministry of Health and Medical Education.



Fig 1. Inauguration ceremony



Fig 2. Presentation on basics of earthquake

A presentation on the basics of earthquake and how it affects buildings during seismic activities marked the first technical presentation of the workshop. This was followed by a presentation on structural component of buildings that will affect the integrity of the hospital after an earthquake. In relation with this module a simple assessment checklist that was developed for by Mr. Teddy Boen was introduced to the participants in order for them to quickly evaluate the structure after a major earthquake.

This checklist is intended for hospital authorities to have a tool for decision making to prevent unnecessary evacuation of the hospital immediately after an earthquake. This was highly appreciated by the participants but there is still need for additional sessions to practice applying the tool and adapt it if needed to suit their actual context.

12/03/07 – Second day of the Workshop: Risk Non-Structural Safety/Emergency Response

The second day started with the presentations on the non-structural component of buildings. Examples in actual hospitals were shown to the participants in video and still pictures to depict how these elements behave during an earthquake and the dangers it posed to both patients and hospital staff alike. Upon participants' requests, Mr. Boen also delivered an additional presentation on fire safety. The concept was reinforced by an actual case study in Nepal presented by NSET. The experience in Nepal in which with limited resources available, the impact of their work made a difference in making hospitals safe and at the same time raise awareness of hospital staff to promote a culture of safety in healthcare facilities.

The last activity of the day was a field visit in one of the major hospital in Gorgan province. The group visited the newly constructed hospital building and the old wing. This was an eye opener for the participants because they were able to appreciate what had been discussed during the plenary session and recognize how to check the deficiencies. Mr. Boen also gave an on the spot recommendations on how to redeem the deficiencies that were identified in the hospital structure.



Fig 3. Field visit

13/03/07 –Third day of the Workshop: Emergency Response Plan (cont.)

The third and the last day of the workshop started with the presentation on emergency response planning for the hospital and how to go about the planning process using the participatory approach. In this session, it was also stressed the normative role of the national MoH to have a national policy and guidelines on hospital emergency planning. This initiated an open discussion about the subject because of the absence of such policy and guidelines. Unfortunately the representatives from the national MoH already left the workshop the day before because this

would be a good opportunity to advocate on the role of the national ministry in emergency planning and to discuss with the sub national level (provincial) the steps to initiate the planning process. The second part of the presentation was on the different components of a hospital emergency response plan and the different strategies on how to respond effectively if disaster strikes. It was also stressed that the plan should be multi-hazard in nature and not just focusing on one, in their case earthquake. The last session was a presentation on how to test and evaluate the plan through post disaster reviews and the development of exercises/drills. The participants from Kerman had to leave the workshop in the middle of this day since their return ticket for 13:00 hr. The facilitators tried to point out the important issues for them, and cover most of the sessions in the morning.

A detailed version of the program can be found in the Annex II.

7.2 Daily schedule

The workshop was schedule from 09:00hrs to 17:00hr with morning and afternoon coffee breaks of 30 minutes. Based on the participants request as of the 2nd day it was conducted from 08:30 to 16:30hr.

7.3 Resource persons

From ADPC

Mr. Teddy Boen

Consultant

Teddy Boen is a structural consulting engineer and has his own office. He possesses an Ir. degree (equivalent to MSc.) in civil engineering from the Bandung Institute of Technology 1961 and he went to Japan in 1962 to study earthquake engineering.

He was the first Indonesian engineer who studied earthquake engineering and upon his return he introduced earthquake resistant structural analysis in Indonesia. The first Indonesian seismic code was his thesis during his study in Japan. He was the co-founder of the Indonesian Society for Civil and Structural Engineers and he was the founder of the Indonesian Association for Earthquake Engineers. Apart from engineered buildings/constructions, he also puts a lot of efforts to the non engineered constructions, documented and studied earthquake damages in Indonesia for the past 30 years. Recently he started “to engineer non-engineered buildings” and retrofitted school buildings accordingly. Since 2000, he pioneered the rehabilitation of school and other buildings damaged by earthquakes in Indonesia. on-engineered buildings” and retrofitted school buildings accordingly. Apart from his practice, he had 35 years of lecturing experience before retiring in 1998, at several Universities and currently he is a senior advisor of WSSI (World Seismic Safety Initiative) and is associated with several International organizations such as ADPC, GHI, EQTAP etc and serves/had served as

adviser/consultant to numerous projects funded by USAID, UNCRD, ADB and World Bank. From 2000 he is involved in TOT of primary school teachers concerning preparedness for earthquake disasters. He was also involved in TOT of SMK teachers regarding earthquake resistant school buildings. After the Bengkulu earthquake, June 4, 2000, he retrofitted many school buildings. He also assist DIKNAS in preparing prototype of school building structures for Indonesia. He is still active in teaching for the HOPE (Hospital Preparedness for Emergencies) course and EVRC (Earthquake Vulnerability Reduction for Cities) course in the Philipines, Nepal, Bangladesh, India, Pakistan, Afghanistan and Indonesia. He is the recipient of the UNESCO/GADR (Global Alliance Disaster Reduction) medal for 2005 in recognition of his professional contributions to disaster reduction and life long achievements in earthquake engineering. He was assigned as consultant by numerous NGOs, world organizations for earthquake resistant non-engineering construction in Aceh and provide trainings for housing facilitators. He published several posters for the purpose. After the Yogya May 27, 2006 earthquake, he was also assigned and provides training to facilitators as well as information dissemination covering 14 districts. He has published numerous papers, manuals related to earthquake resistant design during various workshops, seminars, as well as journals.

Mr. Frederick John B. Abo, RN,

Technical Manager

Public Health in Emergencies

John is currently the Technical Manager of the Public Health in Emergencies Team (PHE) of ADPC and is responsible in providing inputs in the health and emergency response capacity building programs of ADPC. He joined ADPC as a Training Manager under the Program for Enhancement of Emergency Response (PEER) wherein he has extensive experience in conducting training courses on Medical First Responder (MFR) and Collapsed Structure Search & Rescue (CSSR) in South and South East Asia countries.

A registered nurse and a Paramedic by profession, John has an extensive experience in Pre Hospital Emergency Care in Manila, Philippines having worked as a mobile intensive care unit nurse in the private EMS company Lifeline Arrows Medical Specialist and as the head of Emergency Preparedness and Response Division of the Metro Manila Development Authority (MMDA) - Directorate for Special Operations Metro Rescue.

Ms. Sara Ahrari

Project Manager

Urban Disaster Risk Management (UDRM)

Sara joined ADPC in January 2007. She is managing Iran project in partnership with UNDP, intended to strengthen capacities for Disaster Risk Management (DRM) in Iran. Before joining ADPC, Sara worked for different INGOs and UN organizations in their emergency response programs and rehabilitation/reconstruction projects after major natural disasters (earthquake and Tsunami) in Iran, Pakistan and Indonesia. She has also led several Civil Engineering projects in different consultant companies in Iran. She has obtained her master degree from Carleton University, Ottawa/Canada. In her master's thesis she focused on studying the significance of using uniform hazard spectra (UHS) in the design of bridges, and in particular the soil amplification effects and the ductility demand of bridges.

From NSET

Mr. Ramesh Guragain

Director, Earthquake Engineering, Research and Training Division

Mr. Ramesh Guragain, a Nepalese national is graduated from the University of Tokyo, Japan on earthquake engineering. He has been working in the field of earthquake risk management for the last eight years. He is working as Director, Earthquake Engineering, Research and Training Division of National Society for Earthquake Technology-Nepal (NSET). He is an author of about 30 papers in international conferences and journals. He has an intensive experience in the field of earthquake risk assessment of medical infrastructures. A publication of Mr. Guragain on Seismic Vulnerability Assessment of Hospitals has been published by World Health Organization, the South East Asia Regional Office (WHO/SEARO) as a regional publication and is being used in the region. Mr. Guragain is one of the facilitator in the medical infrastructure safety workshop.

Mr. Narayan Prasad Marasini

Civil engineer

Mr. Narayan Marasini a Nepalese citizen is a graduate in civil engineering. He is working as civil engineer at National Society for Earthquake Technology-Nepal (NSET). He has been involved in community based development programs in Nepal. He had worked in several projects as a project coordinator to mobilize the community in the development programs. His main field of interest is community mobilization for earthquake risk management activities. He has involved in the Trainings on Reconstruction of Earthquake affected areas on Kashmir and NWFP since the immediate aftermath of Kashmir Earthquake 2005. The training activities in Pakistan is being implemented by NSET with UN- HABITAT Pakistan and Earthquake Rehabilitation and Reconstruction Authority (ERRA) of government of Pakistan.

He is a certified instructor on Hospital Emergency Preparedness (HOPE) course under the Programme for Enhancement on Emergency Response (PEER), which is being implemented in 5 Asian countries Nepal, India, Bangladesh, Philippines and Indonesia by National Society for Earthquake Technology-Nepal (NSET).

7.4 The purpose of the workshop

The purpose of the workshop was to provide training and guidance on:

- Demonstration of Specific Earthquake Mitigation Activities

7.5 The learning objectives of the workshop

The following learning objectives were considered for this workshop:

- Develop the local level projects for safety of medical structures in the earthquake risk

8. Evaluation of the Workshop

In order to assess the impact of the training workshop an evaluation was conducted by staff of “Strengthening Capacities for Disaster Risk Management (DRM) Project in Golestan Province” (by asking the course participants to fill in a questionnaire). From the results shared by ADPC it can be noticed that the workshop has been a successful and innovative one.

Some of the positive points that were listed in the questionnaires:

- The objectives of the workshop were clear.
- Good translation system
- Well planned workshop

Some of the points/topics the participants indicated which might get more attention in a future course were:

- The workshop room was small

- Some participants would use their mobile phones during workshop
- Need for more group work and practical sessions
- Some of the presentation were too long

Annex IV contains the breakdown of responses per item of the evaluation questionnaire. Overall the participants valued the workshop content very positively.

9. Conclusions and recommendations

This workshop was the fourth activity considered in the contract between UNDP Iran and ADPC. Although the overall the workshop had a good impact, there is still room for much improvement. The following recommendation could be considered for future workshops:

- Hiring a professional simultaneous translator for this workshop had made a big difference. As a result the sessions would finish in their due time and there was no need to cut them short.
- The workshop venue also needs to be selected more carefully, allowing space for group work, discussions and facilitation.
- Some of the presentations should be revised to be more interactive and less lecture type presentations.
- The field visit should have a more structured agenda with objectives so that participants will be properly guided and get the most out of the activity.
- A workshop leader or coordinator should be assigned to properly manage all workshop activities and summarize all discussions at the end of each day.

Annex I: Workshop Topics and Objectives

Module 1 Overview

This module consisted of the following sessions:

1. Disaster and terminology/ EQ basics
2. EQ and performance of hospitals in the past (Case Studies)

Learning Objectives Module 1

After this module, the participant were expected to be able to:

- Define the common terms used in Disaster
- Explain the basic concepts related to earthquake
- Understand the performance of hospitals during the earthquake in the past
- Identify the causes of loss of hospital function
- List the factors to be considered in the evaluation of hospitals.

Module 2 Structural Safety of Hospitals

This module consisted of the following sessions:

3. Expected performance of medical infrastructure
4. Increasing the structural safety of building through proper arrangement of medical facilities (i.e. transfer of heavy equipment to ground floor)
5. Assessment & retrofitting
6. Case Studies

Learning Objectives Module 2

After this module, the participant were expected to be able to:

- Identify the performance objectives of structural components.
- Examine the elements of a structural vulnerability analysis.
- Discuss factors affecting the seismic performance of buildings.
- Identify the measures to reduce or eliminate earthquake hazards
- Assess the earthquake vulnerability of the hospitals and health centers in their cities
- Identify retrofitting methods require to reduce or eliminate earthquake vulnerability of medical infrastructures to ensure their safety

Module 3 Non-Structural Safety

This module consisted of the following sessions:

7. Components (equipment, parapets, lifelines etc) and different type of risks (Life loss, property loss, function loss)
8. Systems (electricity, water, etc) and back up systems, contingency
9. 10 simple ways of improving non-structural safety
10. Case studies

Learning Objectives Module 3

After this module, the participant were expected to be able to:

- Identify the causes of non-structural component damage in earthquakes.
- Evaluate the risks of non-structural component damage.
- Identify measures to reduce non-structural component vulnerability to earthquakes.
- Act on the need for hospitals to survey non-structural component to identify vulnerability levels.

Module 4 Emergency Response Plan

This module consisted of the following sessions:

11. Creation of plan (allocation of space for better and safe performance, check list etc.)
12. Creation of plan (Roles & responsibilities, prioritizations of casualties)
13. Need of special training (MFR, to create special skills and implement the plan)
14. Case studies

Learning Objectives Module 4

After this module, the participant were expected to be able to

- Explain the process of hospital emergency planning
- List the steps of developing a hospital disaster plan
- Differentiate between a planning process and a plan
- List planning considerations of a hospital preparedness plan.
- Outline hospital emergency plan elements.
- Understand the ongoing nature of the planning process.
- Know the different approaches taken up by other countries for their hospital earthquake response plan

Annex II: Workshop Schedule
Safety of Medical Infrastructure Workshop, Gourgan
11-13 March 2007

<u>Day 1</u>		
Time	Description	Responsibility
Module 1 Overview		
09:00-9:30	Opening Ceremony	Ministry of Health
09:30-09:45	The importance of Health structures earthquake resistance in disaster management	Dr. Panahi, Ministry of Health
09:45-10:00	Workshop Overview	Ramesh-NSET
10:00-10:30	Participants' Introduction, Participants Expectation, Ground Rules	Sara Ahrari-ADPC
10:30-10:45	Tea Break	
10:45-12:00	Earthquake basics	Teddy Boen-ADPC
12:00-13:00	Lunch	
Module 2 Structural Safety		
13:00-14:30	Structural component of healthcare facilities	Teddy Boen-ADPC
14:30-14:45	Tea Break	
14:45-17:00	Exercise on Structural Components	Teddy Boen-ADPC
<u>Day 2</u>		
Module 3 Non-structural Safety		
09:00-09:15	Evaluation of Day 1 by Group 1	Group 1
09:15-11:00	Non structural safety	Teddy Boen-ADPC
11:00-11:15	Tea Break	
11:15-12:00	Simple ways of non structural mitigation	Narayan-NSET
12:00-13:00	Case study on structural and non-structural vulnerability assessment of hospitals in Nepal	Ramesh -NSET
13:00-14:00	Lunch Break	
Module 4 Emergency Response Planning		
14:00-14:30	Plans & Case Studies of medical infrastructure reinforcement in I.R. Iran	MOHME
14:30-18:00	Site Visit	

Module 3: Hospital Emergency Preparedness		
<i>Day 3</i>		
0800-08:30	Evaluation of 2 nd day by Group 2	Group 2
08:30-09:30	Emergency Response planning process	John -ADPC
09:30-10:30	Emergency response plan	John -ADPC
10:30-10:45	Tea break	
10:45-12:00	Capacity development and special training needs	John -ADPC
12:00-13:00	Lunch Break	
13:00-15:00	Special considerations in planning	John -ADPC
15:00-15:15	Tea break	
15:15-16:00	Case study: Indonesia experience on hospital preparedness	Teddy Boen-ADPC
16:00-17:00	Next steps	Workshop team

Annex III: List of Participants

Urban Earthquake Risk Management Workshop, Gorgan

	Name of the Participant	Organization
1.	Dr. Hassan Rahimzade	Red Crescent
2.	Dr. Mehrdad Ashaari	Department of Health
3.	Dr. Alireza Khaje Nouri	5 Azar Health Training Center, Golestan Province
4.	Dr. Massoud Moghadari	Medical University, Kerman
5.	Dr. Hadi Saboori	Social Insurance Organization, Kerman
6.	Mr. Ani	Kerman Governor Office
7.	Dr. Farzad Panahi	Emergency Management Centre , MOHME
8.	Dr. Reza Dehghanpour	Emergency Management Centre , MOHME
9.	Mr. Aziz Nourizadeh	Emergency Management Centre , MOHME
10.	Mr. Ali Masibi	Technical Office, Golestan Medical University
11.	Dr. Amir Momeni	National Emergency Unit
12.	Dr. Abdullahi	National Emergency Unit
13.	Ms. Behnaz Abolshams	National Emergency Unit
14.	Mr. Shahram Davarnia	Tehran Natural Disaster Research center
15.	Dr. Mohammadali Zanganeh	Golestan MOH
16.	Dr. Mohammad Reza Rahimi	Hakim Jorjani Hospital
17.	Dr. Riyahi	Medical University
18.	Dr. Colonel Haji Esmailian	Military troops No. 30, Gorgan
19.	Dr. Ebrahim Naeemi	Gorgan Red Crescent
20.	Dr. Heravi	Gorgan Red Crescent
21.	Dr. Khodadad Izad	Taleghani Hospital, Gorgan
22.	Ms. Zahra Oshkoo	Engineering Association of Golestan
23.	Dr. Babak Soltani	Golestan Social Insurance Organization
24.	Dr. Naser Safar	Gorgan Medical University
25.	Mr. Asghar Heydarian Fard	Housing and Urban Development Organization
26.	Ms. Azadeh Hassani	National Emergency Unit
27.	Dr. Estiri	Red Crescent
28.	Mr. Ahmad Nazari	Golestan MOH

29. Mr. Soofi
Secretariat of Response unit, Gorgan
Governor Office
30. Mr. Janfeshan
Head of Technical Office, Golestan
Governor Office
31. Mr. Mirakbari
Technical Assistant, Project Office-
Governor Office, Gorgan
32. Mr. Khooshbayan
Technical Assistant, Project Office-
Governor Office, Gorgan
33. Mr. Payandan
Technical Assistant, Project Office-
Governor Office, Gorgan
34. Mr. Dashtizadeh
Technical Assistant, Project Office-
Governor Office, Gorgan
35. Mr. Rabi narayan Gouda
IUNV-UNDP
36. Mr. Ardeshir Sayah
UNDP

Annex IV: Participant Workshop Evaluation Report

1. Overall, how do you evaluate this Workshop ?
 - a. Very Useful : **46.6%**
 - b. Useful : **53.4%**
 - c. Not Useful : **0%**
2. How do you evaluate this workshop with regard to be innovative and presenting new material ?
 - a. Very good : **20%**
 - b. Good : **80%**
 - c. Average : **0%**
 - d. Bad : **0%**
3. How do you evaluate the objective considered for each session ?
 - a. Relevant : **66.6%**
 - b. Clear : **33.4%**
 - c. Not realistic : **0%**
4. How successful do you evaluate the workshop in being able to achieve these objectives ?
 - a. Very successful : **6.7%**
 - b. Successful : **86.6%**
 - c. Somehow successful : **6.7%**
 - d. Not successful : **0%**
5. How successful were the presenters in presenting different sessions :
 - a. Very successful : **26.7%**
 - b. Successful : **66.6%**
 - c. Somehow successful : **6.7%**
 - d. Not successful : **0%**
6. What were the strong points of the workshop in your opinion ?
 - Having clear objectives
 - Good translation system
 - Well planned workshop
7. What were the weak points of the workshop in your opinion ?
 - The workshop room was small
 - Participants were talking on their mobile phones inside the workshop
 - Long presentations
 - Lack of enough practical sessions and group work
8. Which of the presented topics were more attractive for you ?
 - Participation of the actors from Kerman, Gourgane and Tehran
 - Useful information about retrofitting of structures
 - Discussions on Hospital Managements
 - Presentation of the check lists
9. Which of the presented topics were less attractive for you and needs modification in your opinion?

- The overlaps of some subjects in the presentations from different presentors
- All the material were practical and needs the planning for implementation and coordination among different sectors. Implementing the training material could be very effective.

10. Other suggestions ?

- Repeating these workshops along with site visits and reporting on the progress of activities could be useful.