



# Global Junior Challenge

Projects to share the future

Publicata su *Global Junior Challenge* (<http://2017.gjc.it>)

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## Paese, Città/Regione

**Paese:**

Peru

**Città:**

LIMA

## Organizzazione

**Nome dell'ente o associazione:**

UPCH IMT AVH

**Contesto dell'ente o dell'associazione che presenta il progetto:**

University

**Specify:**

Awards such as GJC etc

## Sito Web

<http://imtavh.cayetano.edu.pe/en/research/groups/telesalud-research-group.html>

## Legge sulla privacy

Consenso al trattamento dei dati personali

**Acconsenti al trattamento dei dati personali?:**

**Autorizzo la FMD al trattamento dei miei dati personali.**

## Tipo di progetto

Educazione fino ai 29 anni

## Descrizione del progetto

**Description Frase (max. 500 characters):**

Disaster response to mass-casualty incidents represents one of the greatest challenges to a

community's emergency response system. Rescuers, field medical personnel, and regional emergency departments and hospitals must often provide care to large numbers of casualties in a setting of limited resources, inadequate communication, misinformation, damaged infrastructure, and great personal risk.

**Project Summary (max. 2000 characters):**

Last year, Peru and other countries around the Pacific Ocean have been affected by the phenomenon known as El Nino [1], a rise in sea temperatures that increases evaporation and brings about heavy rains. In 1998 floods in Peru were also linked to El Nino, which was particularly strong that year.

Telehealth in Peru is becoming a reality, as in other countries in the region and the world, favoring access to health services at all levels of care, providing technological benefits, allowing a coordinated and immediate response of care, establishing a quick and accurate diagnosis in case of an emergency.

That is why, from MINSA (Ministry of Health of Peru), under the direction of the General Directorate of Telehealth has begun with telecapacitations at the national level. Focusing efforts on training health personnel in the regions affected by the Coastal Child.

In order to confront health emergencies due to the rains and floods in our country, the Health, Referral and Emergency Department of the Ministry of Health has been conducting telecapacitations nationwide.

The use of educational technology to make a difference provides integrity correctly in the hospitals using the corresponding application in different areas. Specialists are working to train health personnel in areas affected by disasters.

Tele-trainings for health personnel at the national level will continue and priority specialties are: infectious diseases, mental health, chronic diseases, telehealth and electronic clinical records.

Primary care is the doorway into the Peruvian public health system. On that level of care, personal health have a main role. As such, they can benefit from telehealth initiatives that bring them closer to specialists of other levels of care. We created with Ministry of Health in all in Peru a novel system (telecapacitations) using information and communication technology (ICT) to respond to a sudden shortage, and tested the system to determine whether it would compensate for a shortage after ?Niño Costero?.

After introducing the system to train health personnel, the probability of learning in emergencies when there are no specialists increased. Therefore, the system of telecapacitations is helping considerably and also to create the telehealth units in their hospitals, health centers, medical posts among others.

## **Da quando è funzionante il vostro progetto?**

2016-01-01 00:00:00

## **Obiettivi ed elementi di innovazione**

Telecapacitations is the system necessary for the personal of health without the specialist in disasters zone. After introducing the system, probability of personal of health increased. This the system may contribute to improvement in the ability to respond to sudden excessive patient needs in multiple emergency.

## **Risultati**

**Describe the results achieved by your project How do you measure (parameters) these. (max. 2000 characters):**

Each week we have different issues for personal health. In different regions are create the Telehealth Unit effectively. The Telecapacitations was designed to improve the response for the emergencies and contact very fast with the specialists. The ICT help us for the disasters and very fast attention for the patients and education. The network social (facebook, twitter, messenger), help them for the food and accommodation..

**How many users interact with your project monthly and what are the preferred forms of interaction? (max. 500 characters):**

In particular, next-generation wireless Internet and geolocation technologies may have the greatest impact on improving communications, information management, and overall disaster response and emergency medical care.

ICT to promote the reduction of poverty and increase social inclusion in developing countries.

## **Sostenibilità**

**What is the full duration of your project (from beginning to end)?:**

Da 1 a 3 anni

**What is the approximate total budget for your project (in Euro)?:**

Meno di 10.000 Euro

**What is the source of funding for your project?:**

Altro

**Il progetto è economicamente autosufficiente?:**

No

## **Trasferibilità**

## Has your project been replicated/adapted elsewhere?:

Sì

## Where? By whom?:

PERU AND MINISTRY OF HEALTH

## What lessons can others learn from your project? (max. 1500 characters):

These technologies have applications in terms of enhancing mass-casualty field care, provider safety, field incident command, resource management, informatics support, and regional emergency department and hospital care of disaster victims.

## Are you available to help others to start or work on similar projects?:

Sì


## Informazioni aggiuntive


### Future plans and wish list (max. 750 characters):


On september we have the Hackaton in Health with 5 areas priorities. After Hackaton we will create more applications to help thousands persons in the take care of the health.(


<https://www.youtube.com/watch?v=y3T1bK8zwyA>)


### Allegati:


 [gjcengform\\_2017-2\\_peru.doc](#) [2]


 [veyl6757.mp4](#) [3]


 [etss2692.mp4](#) [4]


 [17458253\\_10154619974928720\\_4293925627602212143\\_n.jpg](#) [5]


 [17499327\\_10154619964858720\\_771455911208245711\\_n.jpg](#) [6]


 [17854749\\_10154666384703720\\_7494658512435151372\\_o.jpg](#) [7]

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 [21151334\\_10155093413868720\\_8359103316970476775\\_n.jpg](#) [9]

 [17309880\\_1909450659266392\\_3254570696071060896\\_n.jpg](#) [10]

 [19884308\\_10154938382403720\\_4261694542356629882\\_n.jpg](#) [11]

 [17523381\\_10154637887573720\\_245498321884068618\\_n.jpg](#) [12]

[medical care](#) [13] [ICT](#) [14] [inclusion](#) [15] [accessibility](#) [16]

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del 26/04/2007.

[Privacy Policy](#)

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**URL di origine:** <http://2017.gjc.it/it/progetti/emergency-medical-care-during-disasters-using-information-technology>

### Collegamenti

[1] <http://www.bbc.co.uk/weather/features/35802609>

[2] [http://2017.gjc.it/sites/default/files/gjcengform\\_2017-2\\_peru.doc](http://2017.gjc.it/sites/default/files/gjcengform_2017-2_peru.doc)

[3] <http://2017.gjc.it/sites/default/files/veyl6757.mp4>

[4] <http://2017.gjc.it/sites/default/files/etss2692.mp4>

[5] [http://2017.gjc.it/sites/default/files/17458253\\_10154619974928720\\_4293925627602212143\\_n.jpg](http://2017.gjc.it/sites/default/files/17458253_10154619974928720_4293925627602212143_n.jpg)

[6] [http://2017.gjc.it/sites/default/files/17499327\\_10154619964858720\\_771455911208245711\\_n.jpg](http://2017.gjc.it/sites/default/files/17499327_10154619964858720_771455911208245711_n.jpg)

- [7] [http://2017.gjc.it/sites/default/files/17854749\\_10154666384703720\\_7494658512435151372\\_o.jpg](http://2017.gjc.it/sites/default/files/17854749_10154666384703720_7494658512435151372_o.jpg)
- [8] [http://2017.gjc.it/sites/default/files/4\\_2.jpg](http://2017.gjc.it/sites/default/files/4_2.jpg)
- [9] [http://2017.gjc.it/sites/default/files/21151334\\_10155093413868720\\_8359103316970476775\\_n.jpg](http://2017.gjc.it/sites/default/files/21151334_10155093413868720_8359103316970476775_n.jpg)
- [10] [http://2017.gjc.it/sites/default/files/17309880\\_1909450659266392\\_3254570696071060896\\_n.jpg](http://2017.gjc.it/sites/default/files/17309880_1909450659266392_3254570696071060896_n.jpg)
- [11] [http://2017.gjc.it/sites/default/files/19884308\\_10154938382403720\\_4261694542356629882\\_n.jpg](http://2017.gjc.it/sites/default/files/19884308_10154938382403720_4261694542356629882_n.jpg)
- [12] [http://2017.gjc.it/sites/default/files/17523381\\_10154637887573720\\_245498321884068618\\_n.jpg](http://2017.gjc.it/sites/default/files/17523381_10154637887573720_245498321884068618_n.jpg)
- [13] <http://2017.gjc.it/it/keywords-separate-commas/medical-care>
- [14] <http://2017.gjc.it/it/category/parole-chiave-separate-da-virgole/ict>
- [15] <http://2017.gjc.it/it/category/keywords-separate-with-commas/inclusion>
- [16] <http://2017.gjc.it/it/keywords-separate-commas/accessibility>