Annotation of Bibliography

Jahre, M., Pazirandeh, A., & Van Wassenhove, L. (2016). *Defining logistics preparedness: A framework and research agenda*.Journal of Humanitarian Logistics and Supply Chain Management, 6(3), 372-398. doi:10.1108/JHLSCM-04-2016-0012

This paper gives you a general aspect of what has been done worldwide to increase operations during a disaster and how much funds and efforts were given to help in preparedness and to maintain resources. The paper also discussed the absence of enough researches that focus on logistic preparedness. Therefore, my research on this topic will be appreciated and considered a significant step to discuss the challenges and obstacles to the development of logistics planning This study focus on how organizations can prepare their readiness for disasters, and logistics preparedness can commit operations. Finally, the authors suggested what type of research topics are needed to ensure the continuity of improvements for logistics preparedness.

Yi, W., & Özdamar, L. (2007). A dynamic logistics coordination model for evacuation and support in disaster response activities.*European Journal of Operational Research, 179*(3), 1177-1193. doi:10.1016/j.ejor.2005.03.077

This paper defines some of the integrated location-distribution models for logistic operations during disasters. These models will be helpful in clarifying what should the hospital do during a disaster and what is expected from them not only in the hospitals but also in the scene of the crisis. Sometimes we find a shortage of healthcare personnel. One of the solutions, emergency centers are needed to treat injured survivors. Reconstructing temporary emergency centers and choosing the proper personnel to work there will help to boost the survivor rate. The paper proposes an integrated location-routing model which will help in coordinating logistics support and also in escalating response supply level. With additional medical centers and fast response, and successful logistic support, we can improve the efficiency of preparedness to disasters.

Mahdaviazad, H., & Abdolahifar, G. R. (2013). Assessing hospital disaster preparedness in Shiraz, Iran 2011: Teaching versus private hospitals. United States: American Journal of Disaster Medicine, 8(1):65-73. doi:10.5055/ajdm.2013.0112

This paper evaluates the hospital's disaster preparedness specifically in Shiraz, Iran. Because hospitals are usually responsible for medical care supplies, the author tested around 30 hospital preparedness using a standardized checklist. Preparedness was intermediate among most of the hospital components and significantly restricted and not developed in each of surge capacity and operation room and human resources. These components are critical and required for disasters. Many critical injuries that need urgent surgery to start.

Al-Shareef, A. S., Alsulimani, L. K., Bojan, H. M., Masri, T. M., Grimes, J. O., Molloy, M. S., & Ciottone, G. R. (2017). Evaluation of hospitals' disaster preparedness plans in the holy city of makkah (mecca): A cross-sectional observation study.Prehospital and Disaster Medicine, 32(1), 33-45. doi:10.1017/S1049023X16001229

This paper focuses on Makkah city, the holy city where a mass gathering event (Hajj) take place annually. Study analysts have done a questionnaire survey to 17 hospitals in Makkah City to assess the disaster planning and efficiency of workers training and knowledge. The result was limited supply, for only one day although 70% of hospitals had disaster-training programs for health care workers. However, Makkah was exposed to many disasters during the last decade. So, we should improve most of the plans of hospital emergency operations. The result will be hospital can handle the injured patients during a disaster and provide the needed equipment.

Bajow, N. A., AlAssaf, W. I., & Cluntun, A. A. (2018). Course in prehospital major incidents management for health care providers in saudi arabia.*Prehospital and Disaster Medicine, 33*(6), 587-595. doi:10.1017/S1049023X18000791

This paper explains why health care providers are very poor in dealing with a disaster. According to the author, the health care workers need to take courses and get enough training to get involved in disaster management plans. Nidaa, Wajdaan, and Ameera evaluated the courses about prehospital major incident management given by the hospital to professionals. Additionally, the researchers provided a course to the medical providers that would prepare them to work in disasters. We could learn from the result of the courses if they would raise preparedness.