**Supplementary/Additional Information - Appendix I**

**Table 2: Data Extraction[[1]](#footnote-1)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Ref** | **Country** | **PHCP Type** | **Disaster Type** | **Methods** | **Aim** |
| **Rurality** | **PPRR Stage** |
| 56 | Australia | GP | All-hazards | Position statement | To state the position of the ACCRM & RDAA regarding the role of the rural GP in disaster response. |
| Rural | Response |
| 31 | Australia | GP | Natural | Perspective article | To outline impact of key fireground stressors on firefighter health, plus practical advice for GPs. |
| Rural | Preparedness Response |
| 43 | USA | DOCNURS | Industrial(ski lift) | Case report:staff andpatients | To describe a disaster in a remote mountain location, and review how it was effectively managed. |
| Remote | Response |
| 47 | Australia | GP | Pandemic(influenza) | Qualitative: semi-structured interviews | To explore GPs’ perceptions of their preparedness for an influenza pandemic, changes to their practice, and ethical justifications for planned actions. |
| Rural | Preparedness |
| 66 | USA | DENT | Bioterrorism | Analytical cross-sectional survey | To compare New England (not exposed) and Oregon (exposed) dental professionals regarding bioterrorism preparedness/management. |
| Rural | Preparedness |
| 28 | Australia | GP | All-hazards | Perspective article | To describe how GPs provide a flexible response to the changed needs of the disaster-affected population. |
| Rural | All-stages |
| 51 | Canada | NURS | Pandemic(influenza) | Qualitative:semi-structured interviews | To retrospectively examine the barriers encountered by 3 geographically remote First Nation communities during the 2009 H1N1 pandemic response, to identify culturally appropriate improvements. |
| Remote | Response |
| 61 | USA | DENT | Bioterrorism | Qualitative:workshop report | Workshop surrounding the integration of bioterrorism education into the dental school curriculum. |
| Rural | Preparedness |
| 32 | USA | NPNURSOTSW | Natural (flood/snow)Terrorism | Qualitative: exploratory study, phone interviews | To describe the range of local Veterans Health Administration policies regarding the role of home-based programs in disaster preparedness and identify training opportunities. |
| Rural | Preparedness |

**Table 3: Data Extraction (cont.) 1.1**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Ref** | **Country** | **PHCP Type** | **Disaster Type** | **Methods** | **Aim** |
| **Rurality** | **PPRR Stage** |
| 63 | Australia | GP | Pandemic(influenza) | Analytical cross-sectional study  | To review the guidelines for geographic representativeness applied to sentinel influenza surveillance. |
| Rural | Preparedness |
| 57 | England | PHCPDOCNURS | All-hazards | Qualitative:structured interviews | To assess the quality of emergency planning in north-west England, and the planned response to a major incident. |
| Rural | Preparedness |
| 39 | USA | PSYCH | Natural(flood) | Qualitative:structured interviews | To examine whether the 1993 U.S Midwest floods increased depression symptoms and diagnoses, and the variables within disaster-psychopathology. |
| Rural | Recovery |
| 45 | Canada | DOC NURS | Industrial (ski lift) | Perspective article | To describe how a major incident was managed through the implementation of a prepared disaster plan. |
| Rural | Response |
| 58 | Australia | GP | Pandemic(influenza) | Perspective article | To describe Australia’s strategies in preparing for a potential influenza pandemic. |
| Rural Remote | Preparedness Response |
| 38 | Australia | SW | Natural  | Qualitative:focus group discussions  | To examine natural disaster risk perceptions, levels of preparedness and capacity to respond, in the context of disaster preparedness in vulnerable groups. |
| Rural | PreparednessRecovery |
| 62 | USA | DOC | Bioterrorism | Qualitative:postal survey | To assess non-urban physician’s prior experience, confidence, and training needs for chemical, biologic, radiologic, nuclear and explosive cases. |
| Rural | Preparedness |
| 11 | USA | DOCNURS | Industrial (chlorine) | Qualitative:semi-structured interviews | To explore health care provider’s perspectives on the long-term effects of the Graniteville disaster on community health care and wellbeing. |
| Rural | Recovery |
| 37 | USA | DOCNURSSW | All-hazards | Perspective article: policy analysis | To describe how existing practice, policy and research frameworks for the underserved may serve as models for improvement in disrupted communities. |
| Rural | Response |
| 60 | USA | DOC | All-hazards | Perspective article: editorial | To describe the role of the Wisconsin Emergency Assistance Volunteer Registry in a disaster. |
| Rural | Response |
| 33 | USA | PHCP | Natural | Analytical cross-sectional study | To empirically examine sociodemographic, motivation and barrier variables as predictors of levels of emergency preparedness. |
| Rural | Preparedness |
| 44 | Canada | NURS | Natural | Qualitative: mixed-methods | To discuss the disaster roles and experiences of rural nurses in Canada for future nursing education and practice. |
| RuralRemote | Response |

**Table 4: Data Extraction (cont.) 1.2**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Ref** | **Country** | **PHCP Type** | **Disaster Type** | **Methods** | **Aim** |
| **Rurality** | **PPRR Stage** |
| 48 | USA | NURS | Natural (flood) | Perspective article: case study | To describe a case study in order to benefit other aged care agencies with lessons learned. |
| Rural | Response |
| 49 | Canada | DOC | Pandemic(influenza) | Perspective article | To describe the pandemic planning process for physicians and health authority staff in order to mount a well-organized response to a major emergency. |
| Remote | Preparedness Response |
| 59 | Australia | GP | Pandemic | Perspective article | To discuss the role of general practices in preparing for an influenza pandemic. |
| RuralRemote | Preparedness Response |
| 67 | USA | PHARM | Natural | Perspective article | To discuss the disaster relief role of pharmacists during a hurricane.  |
| Remote | Response |
| 53 | Canada | DOC | Pandemic | Perspective article | To discuss prevention, detection, crisis management and post-crisis follow-up in the case of a Norwalk virus epidemic. |
| Rural | Response |
| 65 | Canada | DOC | Pandemic (pertussis) | Analytical cross-sectional study | A descriptive retrospective review discussing the characteristics and response to a 2014 pertussis outbreak in a remote area. |
| Remote | Response |
| 40 | USA | GPPSYCH | Industrial (oil spill) | Perspective article | To describe an integrated behavioral health initiative in Louisiana parishes affected by the Deepwater Horizon oil spill. |
| Rural | Response |
| 30 | Australia | GP | Natural | Qualitative:descriptive survey | To determine the knowledge and recommendations of rural GPs regarding climate change and the preparedness of rural health services. |
| RuralRemote | Preparedness |
| 52 | Australia | GP | Natural (fire) | Perspective article | To describe the impact of bushfires, the GP’s role in an emergency response, and recommendations for future planning. |
| Rural | Response |
| 42 | USA | DOCNURS | All-hazards | Qualitative: survey | To identify the current status of emergency/disaster preparedness education/training of rural health care providers and identify gaps. |
| Rural | Preparedness Response |
| 50 | USA | DOCNURS | Pandemic | Perspective article | To examine the strength, capability, and preparedness of key components of PHC in the case of an influenza pandemic. |
| Rural | Preparedness Response |
| 36 | Australia | GP | Natural | Perspective article | To explore how GPs can identify and respond to the drought related mental health needs of farming residents. |
| RuralRemote | Response |
| 64 | Australia | GPNURS | Pandemic(influenza) | Qualitative:postal survey | To assess the views, needs and intended behavior of GPs and practice nurses regarding pandemic influenza. |
| Rural | Response |
| 41 | USA | PHARM | Pandemic(influenza) | Perspective article | To assist pharmacists in advocating for immunizations and enhance uptake rates for pandemic preparedness. |
| Rural | Response |

**Table 5: Data Extraction (cont.) 1.3**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Ref** | **Country** | **PHCP Type** | **Disaster Type** | **Methods** | **Aim** |
| **Rurality** | **PPRR Stage** |
| 54 | Australia | GP | All-hazards | Perspective article | To discuss the role of GPs and the effect of a major trauma disaster in rural and semi-rural Australia. |
| RuralRemote | Response |
| 55 | Australia | GP | All-hazards | Perspective article | To consider the limitations of the current retrieval system for major trauma and discuss potential improvements with GPs. |
| Rural | Response |
| 46 | Australia | GP | All-hazards | Qualitative:survey | To assess the preparedness of GPs to respond to a local disaster (major trauma). |
| Rural | Response |
| 68 | USA | PHCP | Bioterrorism | Literature review | To educate rural PHCPs in the importance mental health services after bioterrorism. |
| Rural | Recovery |
| 34 | USA | NURSSWOT | All-hazards | Qualitative:interviews | To discuss disaster preparedness, policy and procedures for veteran home-based patients. |
| Rural | Preparedness |
| 29 | US | PHCP | Natural | Perspective article | To describe effects of climate change and discuss ways for PHCPs to make a difference. |
| Rural | PreparednessResponse |

**Appendix II**

**Table 6: JBI Critical Appraisal: Checklist for Text and Opinion Papers**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **31** | **56** | **69** | **28** | **70** | **45** | **58** | **37** |
| 1. Is the source of the opinion clearly identified? | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| 2. Does the source of opinion have standing in the field of expertise? | Yes | Yes | No | Yes | Unclear | Unclear | Yes | Yes |
| 3. Are the interests of the relevant population the central focus of the opinion? | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| 4. Is the stated position the result of an analytical process, and is there logic in the opinion expressed? | Yes | Yes | No | Yes | Unclear | Yes | Yes | Yes |
| 5. Is there reference to the extant literature? | Yes | No | No | Yes | Yes | No | Yes | Yes |
| 6. Is any incongruence with the literature/sources logically defended?  | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Overall appraisal | Include | Include | Exclude | Include | Exclude | Include | Include | Include |

**Table 7: JBI Critical Appraisal: Checklist for Text and Opinion Papers (cont.) 1.1**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **67** | **53** | **60** | **48** | **49** | **59** | **40** | **52** |
| 1. Is the source of the opinion clearly identified? | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| 2. Does the source of opinion have standing in the field of expertise? | Yes | Yes | Yes | Unclear | Yes | Unclear | Yes | Yes |
| 3. Are the interests of the relevant population the central focus of the opinion? | Yes | Yes | Yes | Yes | Yes | Yes | No | Yes |
| 4. Is the stated position the result of an analytical process, and is there logic in the opinion expressed? | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| 5. Is there reference to the extant literature? | Yes | Yes | No | No | Yes | Yes | Yes | No |
| 6. Is any incongruence with the literature/sources logically defended?  | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Overall appraisal | Include | Include | Include | Include | Include | Include | Include | Include |
|  |  |  |
|  | **41** | **54** | **55** | **68** | **50** | **36** | **71** | **29** |
| 1. Is the source of the opinion clearly identified? | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| 2. Does the source of opinion have standing in the field of expertise? | Yes | Yes | Yes | Unclear | Yes | Yes | No | Unclear |
| 3. Are the interests of the relevant population the central focus of the opinion? | No | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| 4. Is the stated position the result of an analytical process, and is there logic in the opinion expressed? | Yes | Yes | Yes | Yes | Yes | Yes | No | Yes |
| 5. Is there reference to the extant literature? | Yes | Yes | Yes | Yes | Yes | Yes | No | Yes |
| 6. Is any incongruence with the literature/sources logically defended?  | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Overall appraisal | Include | Include | Include | Include | Include | Include | Exclude | Include |

**Table 8: JBI Critical Appraisal: Checklist for Qualitative Research**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **72** | **73** | **47** | **51** | **61** |
| 1. Is there congruity between the stated philosophical perspective and the research methodology? | Yes | Yes | Yes | Yes | Yes |
| 2. Is there congruity between the research methodology and the research question or objectives? | Yes | Yes | Yes | Yes | Yes |
| 3. Is there congruity between the research methodology and the methods used to collect data? | Yes | Yes | Yes | Yes | Yes |
| 4. Is there congruity between the research methodology and the representation and analysis of data? | No | Yes | Yes | Yes | Unclear |
| 5. Is there congruity between the research methodology and the interpretation of results? | Yes | Yes | Yes | Yes | Yes |
| 6. Is there a statement locating the researcher culturally or theoretically? | Yes | Yes | No | Yes | Yes |
| 7. Is the influence of the researcher on the research, and vice- versa, addressed? | No | Yes | No | Yes | No |
| 8. Are participants, and their voices, adequately represented? | Yes | Yes | Yes | Yes | Yes |
| 9. Is the research ethical according to current criteria or, for recent studies, and is there evidence of ethical approval by an appropriate body? | Yes | Yes | Yes | Yes | Yes |
| 10. Do the conclusions drawn in the research report flow from the analysis, or interpretation, of the data? | Yes | Yes | Yes | Yes | Yes |
| Overall appraisal | Exclude | Exclude | Include | Include | Include |
|  |
|  | **32** | **57** | **39** | **38** | **62** |
| 1. Is there congruity between the stated philosophical perspective and the research methodology? | Yes | Yes | Yes | Yes | Yes |
| 2. Is there congruity between the research methodology and the research question or objectives? | Yes | Yes | Yes | Yes | Yes |
| 3. Is there congruity between the research methodology and the methods used to collect data? | Yes | Yes | Yes | Yes | Yes |
| 4. Is there congruity between the research methodology and the representation and analysis of data? | Yes | Yes | Yes | Yes | Yes |
| 5. Is there congruity between the research methodology and the interpretation of results? | Yes | Yes | Yes | Yes | Yes |
| 6. Is there a statement locating the researcher culturally or theoretically? | No | Yes | Yes | No | Yes |
| 7. Is the influence of the researcher on the research, and vice- versa, addressed? | Yes | Yes | Yes | Unclear | Yes |
| 8. Are participants, and their voices, adequately represented? | Yes | Yes | Yes | Yes | Yes |
| 9. Is the research ethical according to current criteria or, for recent studies, and is there evidence of ethical approval by an appropriate body? | Yes | Yes | Yes | Yes | Yes |
| 10. Do the conclusions drawn in the research report flow from the analysis, or interpretation, of the data? | Yes | Yes | Yes | Yes | Yes |
| Overall appraisal | Include | Include | Include | Include | Include |

**Table 9: JBI Critical Appraisal: Checklist for Qualitative Research (cont.)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **11** | **44** | **24** | **30** | **42** |
| 1. Is there congruity between the stated philosophical perspective and the research methodology? | Yes | Yes | Yes | Yes | Yes |
| 2. Is there congruity between the research methodology and the research question or objectives? | Yes | Yes | Yes | Yes | Yes |
| 3. Is there congruity between the research methodology and the methods used to collect data? | Yes | Yes | Yes | Yes | Yes |
| 4. Is there congruity between the research methodology and the representation and analysis of data? | Yes | Yes | Unclear | Yes | Yes |
| 5. Is there congruity between the research methodology and the interpretation of results? | Yes | Yes | Unclear | Yes | Yes |
| 6. Is there a statement locating the researcher culturally or theoretically? | No | No | Yes | No | Yes |
| 7. Is the influence of the researcher on the research, and vice- versa, addressed? | Yes | Unclear | No | Unclear | Unclear |
| 8. Are participants, and their voices, adequately represented? | Yes | Yes | Yes | Yes | Yes |
| 9. Is the research ethical according to current criteria or, for recent studies, and is there evidence of ethical approval by an appropriate body? | Yes | Yes | Yes | Yes | Yes |
| 10. Do the conclusions drawn in the research report flow from the analysis, or interpretation, of the data? | Yes | Yes | Yes | Yes | Yes |
| Overall appraisal | Include | Include | Exclude | Include | Include |
|  |
|  | **64** | **46** | **34** |
| 1. Is there congruity between the stated philosophical perspective and the research methodology? | Yes | Yes | Yes |
| 2. Is there congruity between the research methodology and the research question or objectives? | Yes | Yes | Yes |
| 3. Is there congruity between the research methodology and the methods used to collect data? | Yes | No | Yes |
| 4. Is there congruity between the research methodology and the representation and analysis of data? | Yes | No | Yes |
| 5. Is there congruity between the research methodology and the interpretation of results? | Yes | Yes | Yes |
| 6. Is there a statement locating the researcher culturally or theoretically? | Yes | Yes | Yes |
| 7. Is the influence of the researcher on the research, and vice- versa, addressed? | Yes | No | No |
| 8. Are participants, and their voices, adequately represented? | Yes | Yes | Yes |
| 9. Is the research ethical according to current criteria or, for recent studies, and is there evidence of ethical approval by an appropriate body? | Yes | Yes | Yes |
| 10. Do the conclusions drawn in the research report flow from the analysis, or interpretation, of the data? | Yes | Yes | Yes |
| Overall appraisal | Include | Include | Include |

**Table 10: JBI Critical Appraisal: Checklist for Case Reports**

|  |  |
| --- | --- |
|  | **43** |
| 1. Were patient’s demographic characteristics clearly described? | Yes |
| 2. Was the patient’s history clearly described and presented as a timeline? | Yes |
| 3. Was the current clinical condition of the patient on presentation clearly described? | Yes |
| 4. Were diagnostic tests or assessment methods and the results clearly described? | Yes |
| 5. Was the intervention(s) or treatment procedure(s) clearly described? | Yes |
| 6. Was the post-intervention clinical condition clearly described?  | Yes |
| 7. Were adverse events (harms) or unanticipated events identified and described? | Yes |
| 8. Does the case report provide takeaway lessons? | Yes |
| Overall appraisal | Include |

**Table 11: JBI Critical Appraisal: Checklist for Analytical Cross Sectional Studies**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **66** | **63** | **33** | **65** |
| 1. Were the criteria for inclusion in the sample clearly defined? | Yes | Yes | Yes | Yes |
| 2. Were the study subjects and the setting described in detail? | Yes | Yes | Yes | Yes |
| 3. Was the exposure measured in a valid and reliable way? | Yes | Yes | Yes | No |
| 4. Were objective, standard criteria used for measurement of the condition? | Yes | Yes | Yes | Yes |
| 5. Were confounding factors identified? | Yes | Yes | Yes | Yes |
| 6. Were strategies to deal with confounding factors stated? | No | Yes | Yes | No |
| 7. Were the outcomes measured in a valid and reliable way? | Yes | Yes | Yes | Yes |
| 8. Was appropriate statistical analysis used? | Yes | Yes | Yes | Yes |
| Overall appraisal | Include | Include | Include | Include |

1. Abbreviations:ACCRM = Australian College of Rural & Remote Medicine**,** RDAA = Rural Doctors Association of Australia, PHCP = primary health care professionals**,** PPRR = prevention/preparedness/response/recovery, GP = general practitioners, DOC = doctors/physicians, SW = social workers, NURS = nurses, OT = occupational therapists, NP = nursing practitioners, DENT = dentists, PSYCH = psychologists, PHARM = pharmacists. [↑](#footnote-ref-1)