Poster Presentations s153

mass casualty incidents. This mirrors previous studies in Singapore relating to attitudes and knowledge of laypersons to CPR and AED.

More research and intervention is needed into the attitudes and willingness of members of public and mass casualty incidents.

Prehosp. Disaster Med. 2023;38(Suppl. S1):s152–s153 doi:10.1017/S1049023X23003989

Under Pressure-TrolleyGar, a Metric Reflecting a Hospital System at Crisis-Capacity

Maria Conradie¹, Marco Śmit¹, Rochelle Janse van Rensburg¹, Sayed Taqvi¹, Brendan Orsmond¹, Robin Andrews¹, Andrea van der Vegte^{1,2}, Aishleigh Dowle¹, Bryce Wickham¹, Darshini Vythilingam¹, Fahd Fayyaz³, Keith Kennedy¹, Phillip Jordaan¹, Ria Abraham¹, Yuni Neduchelyn¹, Thomas Kelly¹, Michael Molloy^{1,4,5}

- 1. Wexford General Hospital, Wexford, Ireland
- 2. University of South Wales, Caerleon, United Kingdom
- 3. University Hospital Wales, Cardiff, United Kingdom
- 4. School of Medicine, UCD, Dublin, Ireland
- Beth Israel Deaconess Medical Center Fellowship in Disaster Medicine, Boston, USA

Introduction: Health service capacity has been an issue in Ireland since the 1980s swinging cuts. Government reports from 2003 have consistently identified a requirement for 3,000-5,000 extra beds on top of the current approximately 10,500 capacity. Acute hospital bed capacity issues have escalated, the formal system of recording "over capacity" patients or "patients on trolleys" has developed. A "Trolleygar" reports issues from the Health Service Executive (HSE) three times daily. This count is an underestimate as patients temporarily housed in day care units, surgical, or medical assessment units, discharge lounges and other clinical areas which have a bed space are not counted in this overcapacity measure. This study's aim is to calculate the annual number of days on which no patients were lodged on trolleys in Wexford General Hospital. Method: Descriptive study using anonymized freely available data from the national HSE Trolley GAR reports on trolley patients in Wexford General Hospital from January 2019 until September 2022. A Golden Zero trolley day was stated as a day on which there were no reported trolley-patients at the three time points, Silver Zero trolley day when two of the time periods recorded no trolleys and a Bronze Zero Trolley day when one period recorded a zero trolley count.

Results: Data was collected on 1,369 days, with 90 days excluded due to missing data sets. There were 162 Golden days recorded (12.67% of total days). The year 2020 recorded the highest number of Golden days at 28.69% (105 days), followed by 2021 with 11.23% (41 days). During 2019 there were 3.84% (14 days) Golden days and 2022 had the lowest number (January-September) with 0.73% (2 days).

Conclusion: Despite a zero-tolerance policy, Golden days are disappearing rapidly, capacity is urgently required with post-pandemic ED attendance surges worldwide. True recording

of overcapacity patients is required for appropriate capacity modeling.

Prehosp. Disaster Med. 2023;38(Suppl. S1):s153

doi:10.1017/S1049023X23003990

Supporting the Emergency Management Pipeline: How Institutions of Higher Education can Increase the Emergency Management Career Goal for Students to Enhance Disaster Preparedness and Response Globally

Judith Kenary

Anna Maria College, Paxton, USA

Introduction: The local, national, and global disasters have increased the demand for Emergency Management professionals. Institutions of higher education can play a key role to support and respond to this demand. One institution of higher education responding to this demand is Anna Maria College (AMC). AMC is a four-year, independent, Catholic institution accredited by the New England Commission of Higher Education, which was formerly known as the New England Association of Schools and Colleges. Established in 1946 by the Sisters of Saint Anne, the College was founded to increase access to quality education, educational innovation, and respect for service to others through development of the total human being. AMC offers exceptional professional programs at all degree levels, especially in community-oriented professions, propelling students to lives of civic, spiritual, and personal consequence. Based on the number of public safety majors and their networks, an area of interest has become how the college could contribute and respond to the demand for emergency managers. Method: These search resources were used: Chronicle, HigherEd jobs, Indeed, GoogleScholar Emergency Management majors curriculum, with searches from 2012 onward. Keywords used included emergency management jobs, higher education emergency management curriculum, public safety and community networking, disaster, and emergency preparedness, and filling the emergency management pipeline. **Results:** Data collection and analysis planned for completion by February 2023.

Conclusion: Higher education can support the pipeline to narrow the gap and respond to the demands for trained and educated community members in disaster and emergency preparedness. Higher education responses include strategies such as, creative emergency management curriculum and community networking.

Prehosp. Disaster Med. 2023;38(Suppl. S1):s153 doi:10.1017/S1049023X23004004

Docimological Analysis of Written Acute Medicine Examinations at a Medicine School

Hanene GHazali MD^{1,2}, Naouel Ben Salah MD^{3,2}, Ines Chermiti MD^{1,2}, Amira Bakir MD¹, Amel Ben Garfa MD¹,

Rahma Dhokar MD¹, Amira Tagougui MD¹, Sami Souissi MD^{1,2}

 Emergency Department, Regional Hospital of Ben Arous, Yasminette, Tunisia

