

quarantine hotels, recruiting retired medical staff to provide medical care, in order to preserve hospitals' medical capabilities. In an augmented quarantine hotel at Caesar Park Hotel Taipei, the complexity of COVID quarantine, quarantine status of the residents, and hotel staff working with medical staff has made the original emergency response plan inappropriate. Henceforth, a series of modifications were made to ensure the emergency response readiness of Caesar Park Hotel Taipei.

Method: The enhancements of emergency response capability of the augmented quarantine hotel at the Caesar Park Hotel Taipei, were made in accordance with the following list: 1. Revise evacuation plan, 2. Setup emergency equipment cart, 3. Modify emergency response procedure, 4. Update staff training and resident notice, 5. Routine stock count of medical supplies and emergency equipment.

Results: The enhanced emergency response plan has ensured the safety of all personnel, plans were made in accordance with the COVID-19 quarantine status, and the staff has a clear perception of their duty with a picture of the overall emergency response plan.

Conclusion: The enhanced emergency response plan was completed and under implementation in June 2021, and at the end of that month there was a fire that took four lives with 22 injured at a quarantine hotel in Changhua County. A review of the enhanced emergency response plan was made by the staff and corresponding hospital; many problems that happened at the Chunghua County quarantine hotel fire had already been considered or prevented in the enhanced emergency response plan. Such a method for building an enhanced emergency response plan has the potential to be implemented in more locations, and possibly in different scenarios.

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Exploring Advanced Nursing Practice in Australian Disasters: A Scoping Review

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Introduction: As the largest body of health professionals, nurses are looked upon during a disaster for leadership, clinical assistance, and support during these events. Nurses are at the forefront of managing disasters in their communities, yet their complex role as advanced nurse practitioners, clinicians, managers, and leaders is not always fully understood and/or recognized. The aim of this paper is to explore the level of Advanced Nursing Practice (ANP) in Australia that takes place in a disaster

Method: This scoping review was guided by Arksey and O'Malley's framework. The review searched five relevant databases. A scoping review design was chosen as the authors expected that evidence in the field would be produced using a wide variety of methodologies.

Results: Nurses work long hours during a disaster with hospitals and nurses becoming the center of events and the "go to" place during a disaster. During disasters nurses often have little sleep, have limited time to meet their individual/personal needs, and frequently put others needs before themselves. Nurses mentioned in these studies were reported to have worked while they were worried for themselves and their families. These nurses reported feeling capable and reported that all their experience and skills came to the fore during these challenging situations.

Conclusion: During disasters, most nurses are found to be flexible and adaptable, with many taking on a variety of roles. Nurses are quick to find solutions with problem-solving keys and their ability to respond to disasters "just what you do." The nurses in these studies demonstrated fundamental expertise and had the agility to pivot when the occasion demanded. As a result of this study, it is evident, and not surprising, that these Australian nurses work beyond conventional limits during a disaster.

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