very small communities and are separated by great distances. As a result, small changes in the absentee rate for nurses can have a significant impact on the operation of these hospitals. This paper will argue that policy changes in other sectors, such as education, can impact on societal activities such as childcare, volunteer emergency service work, and hospital staffing, in ways that may not be anticipated unless the impact on all Basic Societal Functions are considered by policymakers.

(A110) A Survey of Health Professions Students Attitudes towards and Knowledge of Emergency Preparedness

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Introduction: The possibility of natural disasters and public health emergencies coupled with the possibility of terrorism support the need to incorporate emergency preparedness into the curricula for every health professional school. Methods: A survey methodology was employed to assess both attitudes towards and knowledge of emergency preparedness amongst health professions students which included the schools of medicine, nursing, dentistry and public health. The survey was piloted to graduating students and then administered prior to institution of a preparedness curriculum and then repeated as an annual survey.

Results: The survey found that 51.8% had been present at a disaster as non-responder while only 12.1% had ever been present as a responder. With regard to baseline class room exposure over 50% reported no exposure to such key concepts as incident command, triage, all-hazards planning, surge and aspects of terrorism. In addition at baseline most students felt they had no competency in emergency preparedness. As an example only 10% of students felt competent with personal protective equipment. While exposure both as a responder and student was low, 82.5% of students felt that emergency preparedness should be a mandatory topic in their education. Lastly, with a minimal curriculum change students showed statistically significant increases on knowledge testing.

Conclusions: While exposure was low for emergency preparedness topics and most did not recognize how information they had been taught might be applicable to emergency preparedness, there was a strong desire for additional training. In addition simple curricular adjustments can lead to significant improvements in knowledge.

(A111) Role, Resources, and Clinical and Educational Backgrounds of Nurses Who Participated in the Prehospital Response to the 2009 Bushfires in Victoria, Australia

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The bushfires of February 2009 in Victoria, Australia resulted in the deaths of 173 people and caused injuries to 414. Furthermore, > 2,030 houses and 3,500 structures were destroyed. The role and experience of nurses in this environment are not well understood, and little is known about the clinical and educational background of nurses in this setting. This presentation will provide an overview of the bushfires and report on two research projects. The aims of these projects were to explore participant demographics and various aspects of nursing activities in the prehospital environment. These projects used volunteer nursing members of St John Ambulance Australia who responded to the Victorian fires. The first project used a retrospective, descriptive postal survey, and the second was descriptive and exploratory, using semi-structured interviews as a means of data collection. The survey highlighted that nurses had varying clinical and educational backgrounds. Males were overrepresented when compared to the national average of nurses. Most participants had taken disaster-related education, however, this varied in type and duration. Similarly, most had participated in training or mock disasters; however this usually was not related to bushfire emergencies. The qualitative findings identified two main themes having expansive roles and being prepared. These highlighted that nurses maintained a variety of roles, such as clinicians, emotional supporters, coordinators and problem solvers, and they were well prepared for these roles. This research provided insight into the characteristics and level of preparedness of nurses who responded to the 2009 Victorian bushfires in the prehospital environment. Additionally, it highlights the need for more structured education and training for nurse that is aligned with their role and deployment environment.

(A112) Development of Model Medical Care Protocols for Alternate Care Sites during Pandemics and Public Health Emergencies

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Introduction: Developing alternative systems to deliver emergency health services during a pandemic or public health emergency is essential to preserving the operation of acute care hospitals and the overall health care infrastructure. Alternate care sites which can serve as areas for primary screening and triage or short-term medical treatment, can assist in diverting non-acute patients from hospital emergency departments and manage non-life threatening illnesses in a systematic and efficient manner. Maintaining consistent standards of care in these settings is essential to a uniform approach to the medical management of a public health emergency.

Methods: Subject matter experts in emergency and disaster medicine, public health, pediatrics, and various other medical specialties were convened at regular intervals over an 18-month period. Through a consensus-based process this working group created a universal standard of care along with model clinical protocols to manage patients in an out-of-hospital setting using medical and non-medical personnel.

Results: These protocols were designed to allow the mild to moderately ill patient to be managed in a non-acute care