

Methods: This presentation is derived from research focussing on ED overcrowding, including the author's PhD on defining ED attendance appropriateness, which utilized a Mixed Method research approach incorporating Delphi survey methodology and analysis of qualitative free text responses, as well as subsequent systematic literature reviews and ethical analysis of identified core issues. An international perspective is presented, with the use of a New Zealand health system exemplar.

Results: There are specific risks associated with current responses to patient redirection – these include clinical, professional, legal and ethical risks. These risks are disproportionately spread across the key stakeholders in this process (patients, medical staff, managers), with limited recognition of these risks.

Conclusion: There is insufficient research and audit follow-up associated with the introduction of many overcrowding mitigation processes. Tendencies exist to focus on a 'quick fix', a highly visible responses to manage primary care patients, which may not be the best use of resources.

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The Lack of Supra-Specialty/Specialty of Emergency Medicine in Greece: The Necessity, The Steps, The Problems, and the Delays

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Study/Objective: The reasons of necessity and the lack of Emergency Medicine Specialty in Greece.

Background: Emergency Medicine is a relatively new specialty that constantly develops all around the world. The World Health Organization (WHO) encourages governments to support the development of health services related to Emergency Care, and acknowledging the continuously increasing burden of trauma and other emergency cases. Patient visits to the Emergency Care Units are rising, mostly due to the complications of chronic diseases presented by the growing geriatric population.

Methods: We extensively reviewed the Medline-Pubmed electronic databases from 2005–2015, as well as published data in government Greek and international websites related to Emergency Medicine. In addition, we conducted online research using a small questionnaire addressed to the Greek doctors regarding their opinion about Emergency Medicine and the emergency departments. Data are included. Keywords: "Emergency Medicine Specialty;" "Emergency Departments;" "development;" "prehospital emergency medicine;" "emergency health care;" "Greece."

Results: The European Society of Emergency Medicine (EUSEM) has made special efforts to establish the specialty of Emergency Medicine (EM) in Europe, and a joint training program. Specialty or subspecialty of EM have not officially

been established, although Greece is officially represented in EUSEM since 2007 by the Hellenic Society of Emergency Medicine. Training in EM is inadequate and not well organized. Recent economic crisis with subsequent frequent government changes, the lack of support from other specialties, and the cutbacks concerning health expenses have hindered the continuation of the efforts towards the recognition of the specialty.

Conclusion: Our data indicates that Greek doctors strongly support the establishment of the specialty in EM. Under these unfavorable conditions, we should continue the efforts of establishing the specialty, through integrated and documented suggestions, aiming to achieve the provision of high-quality and efficient emergency care to the patients. Improving public health is a priority of any organized society.

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Turning the Heat Up on Admissions: The Impact of Extreme Heat Events on Hospital Admissions

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Study/Objective: This study aimed to investigate the impact of extreme heat events on the admissions to the Royal Hobart Hospital (RHH), Tasmania for the period January 2003 to December 2010. The objective of this study was to determine if extreme heat events lead to an increase in hospital admissions.

Background: Extreme heat events are increasing in frequency and duration and cause more deaths in Australia than any other extreme weather event. The total economic cost of extreme weather events in Australia each year is estimated at \$6.3 billion with this figure expected to double by 2030. Extreme heat increases the number of presentations to emergency departments and the mortality and morbidity rates. Emergency departments across Australia have experienced a steady increase in presentations over the years with spikes occurring during disaster events. In 2012–2013, Tasmania had the largest percentage increase in emergency department presentations of all the Australian states; there were 147,064 presentations equating to a 3.8% increase on the previous year. This increase in public hospital emergency department presentations across Australia has led to overcrowding of emergency departments.

Methods: Non-identifiable RHH emergency department data and climate data from the Australian Bureau of Meteorology were obtained for the period 2003–2010. Statistical analysis was conducted using the computer statistical software 'R' with a Distributed Lag Nonlinear Model (DLNM) package used to fit a quasi-Poisson generalized linear regression model.

Results: The Relative Risk (RR) of admission to RHH during 2003–2010 was significant when temperatures exceeded 24°C (75.2 F). The peak effect was noted one day after an extreme heat event ($P < .05$) with a lag effect lasting 12 days. These results highlight the significant impact extreme heat events have on hospital admissions.