

the medicine was not a pharmacy item or was not used in a large enough quantity to allow rotation.

Discussion: The equivalent of four times the technician's wage was saved over 12 months. This illustrates striking cost savings gained by efficient, timely rotations and the cost benefits of employing a technician.

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Discovering Best Practice Establishing Evacuation Centers for Vulnerable Populations: Findings from Australia and Japan

Dr. Mayumi Kako¹, Dr. Malinda Steenkamp¹,
Dr. Benjamin Ryan², Dr. Paul Arbon¹, Mr. Yosuke Takada³

1. Flinders University, Adelaide, Australia
2. Daniel K. Inouye Asia Pacific Center for Security Studies, Honolulu, United States
3. Okayama University, Okayama, Japan

Introduction: Potentially vulnerable population groups in disasters include the elderly and frail, people who are isolated, and those with chronic diseases, including mental health conditions or mobility issues. The disasters such as the Queensland flood and Great East Japan Disaster in 2011, affected regions of Australia and Japan. This study is followed by two pilot studies in both countries after the disasters. While both countries have different evacuation center procedures for evacuees, the issues regarding the role and responsibility across governments involving planning, setup, and management of evacuation centers demonstrate similarities and differences.

Aim: This paper will report the preliminary findings of a pilot study undertaken with local government officials and humanitarian agencies in Australia and Japan concerning their involvement in planning for, setting up, and managing evacuation centers for vulnerable populations in recent natural disasters. The objective is to illuminate the similarities and differences that officials and agencies faced, and to highlight the resolutions and lessons learned in the preparation of evacuation centers through this event.

Methods: This is the final stage of the study. After completing an analysis of both phases, a comparative framework to highlight similarities and differences was developed.

Results: Each government's role in relation to the establishment of evacuation centers is legally defined in both countries. However, the degree of involvement and communication with non-governmental organizations from the planning cycle to the recovery cycle demonstrates different expectations across governments.

Discussion: While the role of governments is clearly established in both countries based on the legal frameworks, the planning, set-up, and management of evacuation center differs.

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Does Medical Presence Decrease the Perceived Risk of Substance-Related Harm at Music Festivals?

Dr. Matthew Brendan Munn¹, Dr. Melissa Sydney White²,
Dr. Alison Hutton³, Dr. Sheila Turris¹, Haddon Tabb⁴,
Dr. Adam Lund¹, Dr. Jamie Ransie⁴

1. UBC Emergency Medicine, Vancouver, Canada
2. UBC Southern Medical Program, Kelowna, Canada
3. University of Newcastle, Australia
4. UBC Mass Gathering Medicine Interest Group, Canada
5. Menzies Health Institute, Griffith University, Gold Coast, Australia

Introduction: The use of recreational substances is a contributor to the risk of morbidity and mortality at music festivals. One of the aims of onsite medical services is to mitigate substance-related harms. It is known that attendees' perceptions of risk can shape their planned substance use; however, it is unclear how attendees perceive the presence of onsite medical services in evaluating the risk associated with substance use at music festivals.

Methods: A questionnaire was administered to a random sample of attendees entering a multi-day electronic dance music festival.

Results: There were 630 attendees approached and 587 attendees completed the 19 item questionnaire. Many confirmed their intent to use alcohol (48%, n=280), cannabis (78%, n=453), and recreational substances other than alcohol and cannabis (93%, n=541) while attending the festival. The majority (60%, n=343) stated they would still have attended the event if there were no onsite medical services available. Some attendees agreed that the absence of medical services would have reduced their intended use of alcohol (30%, n=174) and recreational substances other than alcohol and cannabis (46%, n=266).

Discussion: In the context of a music festival, plans for recreational substance use appear to be substantially altered by attendees' knowledge about the presence or absence of onsite medical services. This contradicts our initial hypothesis that medical services are independent of planned substance use and serve solely to reduce any associated harms. Additional exploration and characterization of this phenomenon at various events would further clarify the understanding of perceived risks surrounding substance use and the presence of onsite medical services.

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The Effect of Emergency Department Expansion on Emergency Department Patient Flow

Prof. Min Joung Kim¹, Prof. Joon Min Park²

1. Department of Emergency Medicine, Yonsei University College of Medicine, Seoul, South Korea
2. Department of Emergency Medicine, Inje University Ilsan Paik Hospital, Goyang, South Korea

Introduction: Overcrowding in the emergency department (ED) has been a global problem for a long time, but it is still not resolved.

Aim: To determine if an ED expansion would be effective in resolving overcrowding.

Methods: This was a retrospective study comparing two 10-month periods before (September 2015 to June 2016) and after (September 2017 to June 2018) the ED expansion in an urban tertiary hospital. The existing ED consisted of 45 beds in the adult area and eight beds in the pediatric area. After the construction, the number of beds was not increased, but a fast track