

Pan American Health Organization



Regional Office of the World Health Organization

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Report on progress on safer and greener hospitals programs and the revised Hospital Safety Index



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Policy Commitments at Global and Regional Levels

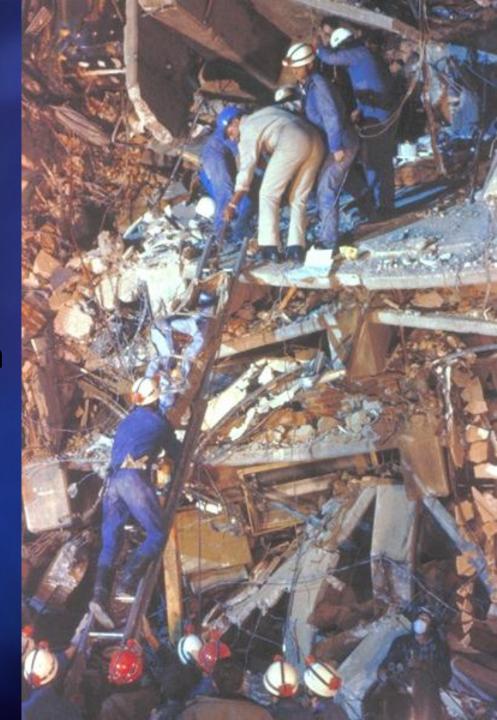
In 1976 after a series of disasters (70, 72, 76), the Ministers of Health in the Americas established the Emergency Preparedness and Disaster Relief Program.



The trigger

The 1985 Mexico earthquake showed that having well prepared hospitals was not enough to cope with disasters.

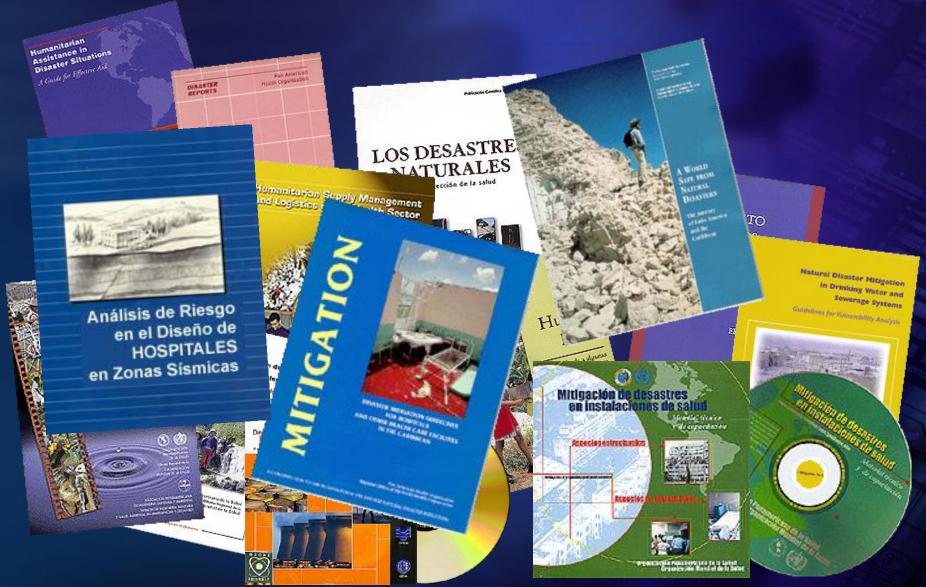
The ministers of health decided to implement hospital mitigation measures to prevent infrastructure collapse.



Long way from preparedness to mitigation

- From 1985 to 2003, many initiatives were implemented to reduce the vulnerability of health facilities:
 - ✓ International Course on Planning, Design and Construction of Hospitals in Seismic Zones (1989)
 - ✓ Technical publications on mitigation in health facilities: structural, non-structural and functional. (1990)
 - ✓ International Conference on Vulnerability Reduction in Health Facilities (1996)
 - ✓ Hospitals Vulnerability Studies in more than a dozen countries. (1997-1998)
 - ✓ PAHO/WHO Collaborating Center (1995-2003)
 - ✓ Disaster Mitigation Advisory Group (DiMAG) (2003)

Scientific Publications



The problem

- More than 67% of the nearly 18,000 hospitals in Latin America and the Caribbean are located in high risk areas.
- Hospitals are a huge investment and represent close to 70% of the Ministries of Health budget.
- Consequence: 45 million people without proper health care and more than 9 billion dollars in direct costs.

From

Vulnerability Reduction in Health Facilities

to

Safe Hospitals

Regional Meeting

Hospitals in Disasters: Handle with Care

El Salvador, 8-10 July 2003

















Washington, D.C., USA, 27 September-1 October 2004

Adopt "Hospitals Safe from Disasters" as a national risk reduction policy, set the goal that all new hospitals are built with a level of protection that better guarantees their remaining functional in disaster situations,

and implement appropriate mitigation measures to retrofit existing health facilities, particularly those providing primary care.



World Conference on Disaster Reduction 18-22 January 2005, Kobe, Hyogo, Japan

"Integrate disaster reduction planning in the health sector; Promote the goal of Safe Hospitals to ensure that all new hospitals are built with a level of protection that better guarantees their remaining functional in disaster situations,

and implement appropriate mitigation measures to reinforce existing health facilities, particularly those providing primary care."

Hyogo Framework for Action 2005–2015:

Building the Resilience of Nations
and Communities to Disasters

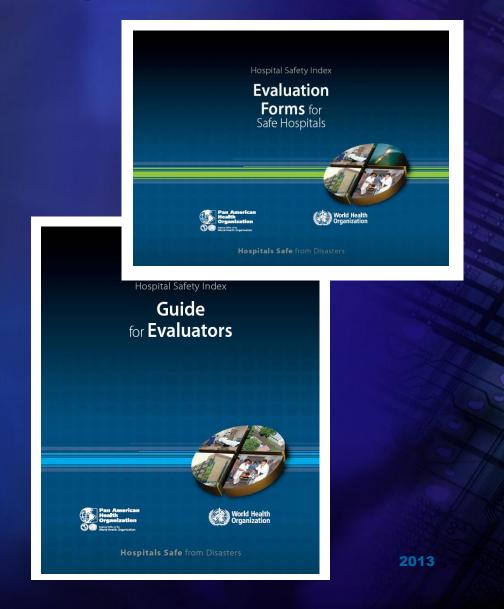
Levels of Protection

- Life Protection (patients, health personnel and visitors)
- Investment Protection (equipment, supplies, furniture and utility services)
- III. Operational Protection (facility's capacity to provide health care).

Hospital Safety Index

Safe Hospitals
 Checklist

- Mathematic
 Model (Safety
 Index Calculator)
- Hospital Safety
 Index



Creating a National Safe Hospitals Program

Hospitals Safe from Disasters

A Goal within our Reach

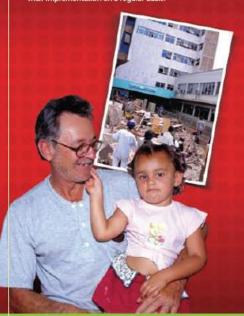


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¬Creating a National Safe Hospitals Program

Objectives

- Develop policies and norms for hospitals safe from disasters.
- Protect the lives of all occupants, the investment in the infrastructure, and the functionality of new health facilities and those identified as priority facilities in the health services network.
- Make existing national and international policies and norms on safe hospitals widely known and follow up their implementation on a regular basis.



Strategies and Activities

National and international policy agreements

- Promote political and legislative decisions to establish a safe hospitals program in the Ministry of Health, other health sector institutions and regional organizations.
- Make a wide variety of national disaster prevention and response agencies key partners in achieving this goal, which was

in achieving this goal, which was set forth in the Hyogo Framework for Action 2005 - 2015: Building the Resilience of Nations and Communities to Disasters.



- Develop a national legal framework on safe hospitals.
- Prepare building codes, norms and procedures, technical manuals, protocols and regulations that support the implementation of a national program on hospitals safe from disasters.

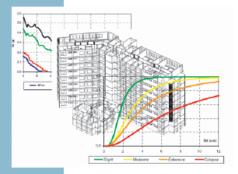


Europe

Fable 4.2 Non-structural mitigation measures (ref: [4,12])

Table 4.2 Non-structural mitigation measures (ref: [4,12])									
Existing hazard	Mitigados messure	Photo							
Glasz (partitions, windows)	Utilization of sufity glass (expensive option). Covering with plastic transparent foil in order to prevent								
ons granta, rasses,	glass distincting.								
Suspended Ceilings	Adequately mounted to fixor structure with restrainers (lateral bracking).	MICHAEL PROF							
Lighting	Properly protected and mounted to ceilings.								
Unfastened cabinets and abelyes	Cabinete and shalose properly ascured to the wall using augle brackets in order to avoid dislocation or overturning. Free standing tasks flattened with continuous augles to floor. The overturning of existing items secured by means of secure hip, restal wire or destic straps. Install mechanical drawer intohes and mechanical cubinet catches.	SHELF LIP WITH ON BLANCE STADE							
Monitors, computers or similar equipment	To be fusioned to table with adhesive tape or connecting straps.	TAPE							





Seismic Vulnerability
Assessment of a Key
Health Facility in The
former Yugoslav Republic
of Macedonia

- a handbook -









International Day for Disaster Reduction

Hospitals Safe from Disasters

14 October 2009 - London

South East Asia



Regional Consultation of SEAR Member Countries on

Keeping Health Facilities
Safe from Disasters

New Delhi, India 15-17 April 2008



Checklist for Hospital Safety

Quick evaluation to asses building safety caused by earthquake

KAJIAN CARA CEPAT KEAMANAN BANGUNAN TEMBOKAN SEDERHANA SATU ATAU DUA LANTAI YANG RUSAK AKIBAT GEMPA

Teddy Boen (tedboen@cbn.net.id)

adpc

Asian Disaster Preparedness Center



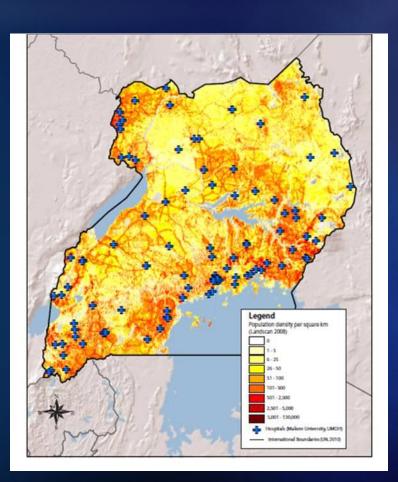
Safe Hospital: The Key to deliver effective Emergency Medical Services

CATATAN

Walaupun telah banyak waktu dan usaha yang dicurahkan untuk menyusuh daftar kapan cara cepat untuk bangunan sederhana yang rusak akibat gempa <u>ini, tanggung j</u>awab hasil pemakaian daftar kajian ini berada pada pihak yang memakai

Africa Uganda experience

Health facilities / services



Vulnerability / Capacity

- Missing health facility
 Vulnerability / capacity information
 - Hospital Safety Index

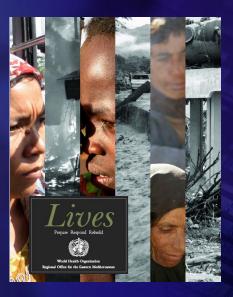


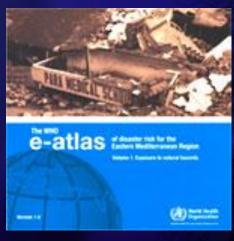
- Health Information System
 - Health facility registry

East Mediterranean

المستشفيات المأمونة من الكوارث الطبيعية

- The 2005 Pakistan Earthquake destroyed 388 of the 796 health facilities.
- A Group of Experts was created to validate safe hospital assessment tools and to elaborate a Regional Implementation Framework.
- Electronic Disaster Risk Atlas
- At least 5 countries are implementing a safe hospitals initiative.





Western Pacific



Priority Actions:

- Hospital vulnerability assessment.
- Human resources for disaster management
- Capacity building for preparedness and respones.
- Technical cooperation to improve structural safety.
- Workshops, training activities and tools to promote safe hospitals policy.



Protect hospitals and health facilities in emergencies and disasters



Advocacy Manual for Safe Hospitals



Bệnh viện an toàn trong tình huống khẩn cấp

Các chỉ số về kết cấu, phi kết cấu và chức năng

Tổ chức Y tế Thế giới Văn phỏng khu vực Tây Thái Bình Dương



Americas

- Regional Plan of Action on Safe Hospitals 2010-2015
- 28 countries have included DRR as a component of their HDP
- 32 countries and territories in the Region are applying the Hospital Safety Index.
- 20 Countries have a National Policy on Safe Hospitals and 17 have a Safe Hospitals Program.
- Almost all hospitals in category "C" and 40% of category "B" are implementing measures.

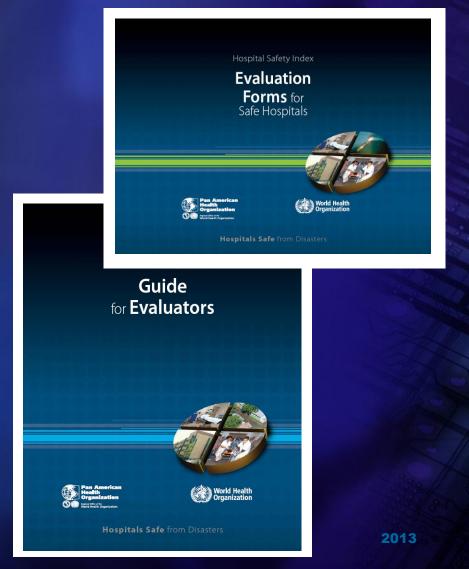




Hospital Safety Index for Small and Medium Hospitals

Safe Hospitals
 Checklist

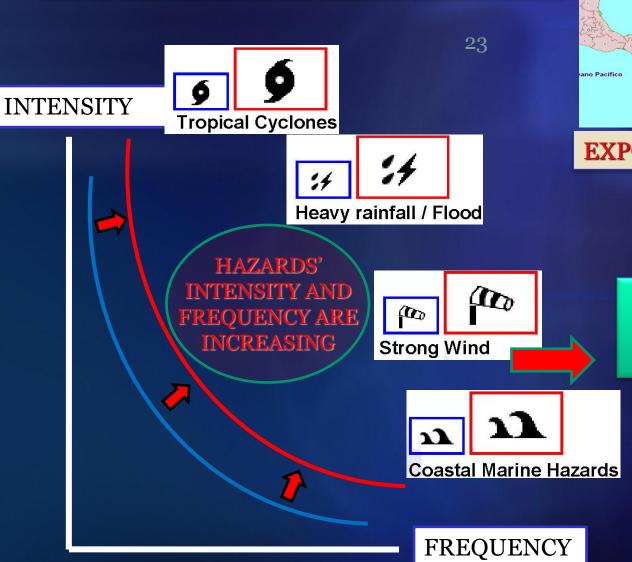
- Mathematic
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Smart Hospitals Initiative



Consider Climate change as a hazard





EXPOSURE IS INCREASING!

Do not wait for the right answer!

Climate change impact on hospitals

Sea rise: location

60% world population lives close to the sea

Extreme events: design

a 10% increase of wind speed

Reduce the carbon foot print: greening hospitals

- Brazil Hospitals use 10% of country's energy
- NHS/UK carbon footprint is 25% of total public sector emissions

Smart Hospitals are green and safe

- Improving the structural safety of health care facilities;
- Reducing energy and water use;
- Boosting energy security with low carbon, renewable sources;
- Improving air quality and reducing harmful emissions;
- Strengthening disease surveillance and control;
- Equipping structures with efficient and environmentally friendly appliances and fixtures.

Baseline Assessment Tool

- Criteria for selecting a health care facility for green retrofitting
- 2. Patient/Administrator Occupant Satisfaction Survey
- **3.** Baseline Information Requisition Checklist
- 4. Property Condition Evaluation.

The Green Checklist and Discussion Guide

- 1. Green Checklist
- 2. Discussion Guide Renovations
 - Water; Energy and Atmosphere; Materials and Resources; Indoor Environmental Quality
- 3. Discussion Guide Operations
 - Chemical Management; Solid Waste Management;
 Environmental Services; Food Services;
 Environmentally-Preferable Purchasing

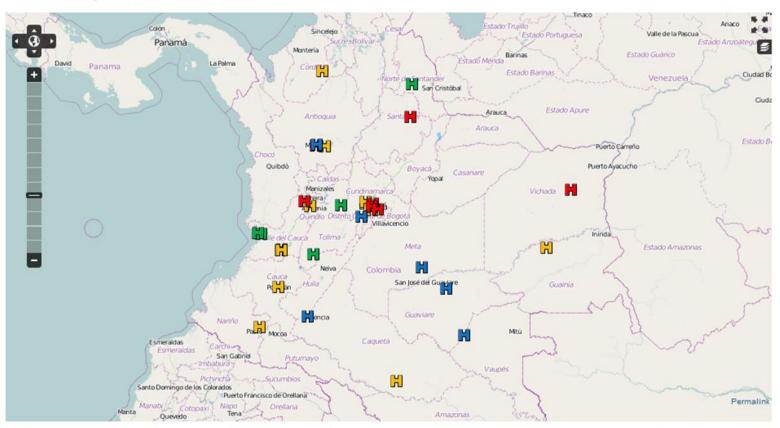


LOGOUT

Home » Query the database

Safe Hospitals Interactive Map

You can use the map to browse all the facilities in the database:



The colors correspond to the different categories in the Safe Hospitals classification: GREEN is category A, YELLOW is category B, and RED is category C. Facilities with a BLUE icon are those not evaluated yet.

Plan of Action Monitoring

© S	afe H	Hospitals in the Americas DEC 2	012.xls [Com	patibility Mod	lel - Microsoft	Excel											_
	Α	В	F	G	Н		J	K	L	М	0	Р	Q	R	S	Т	U
1				PROGRESS REPORT ON THE IMPLEMENTATION OF SAFE HOSPITALS IN THE AMERICAS													
2			AS OF DECEMBER 2012														
3		ACCUMENT OF TERRITORY	NATIONAL SAFE SAFE HEALTH HEALTH HOSPITAL CIVIL BUDGET ACREDITATION COUNTRIES EVALUATORS INDEPENDENT COUNTRIES NUMBER OF TOTAL NUMBER OF														
		COUNTRY OR TERRITORY	POLICY ON	HOSPITALS	SAFE HEALTH FACILITIES	HEALTH FACILITIES	HOSPITAL DISASTER	PROTECTION	BUDGET FOR SAFE	ACREDITATION INCLUDES	COUNTRIES THAT APPLY	TEAM	ASSESSMENT	COUNTRIES	EVALUATORS	NUMBER OF	HOSPITALS
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20	•	BRITISH VIRGIN ISLANDS			1		1								1	2	
21	1	CANADA												1			
22	1	CAYMAN ISLANDS	1		1	1	1	1								3	
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24	1	COLOMBIA	1	1	1	1	1	1	1		1	1		1	171	1053	5
25	1	COSTA RICA	1	1	1	1		1		1	1	1			6	33	23
26	1	CUBA	1	1	1	1	1	1	1	1	1	1			4	243	7
27	1	DOMINICA									1	1			3	1	1
28	1	DOMINICAN REPUBLIC	1	1	1						1	1	1	1	155	213	31
29	1	ECUADOR	1	1			1	1			1	1	1	1	14	299	25
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From Theory to Practice in the Health Sector

 In theory, the health sector should be able to ensure that all health facilities are safe from disasters.

 In practice, it is necessary to begin ensuring the safety of those health services that are located in high risk areas and provide essential life-saving health care services.



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