

Leading role of the health sector in safer construction

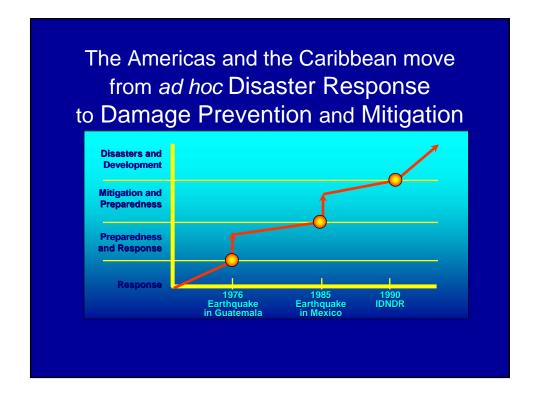
CUBiC - Ministers of Health

18 years ago PAHO promoted vulnerability assessments of existing health-care facilities.

PAHO: Emergency Preparedness and Disaster Relief Coordination Program

The Ministries of Health and PAHO:

- vulnerability surveys
- retrofitting of existing facilities
- reconstruction with mitigation
- independent reviews of designs of new facilities
- workshops for the construction industry



Histor	y
1979	– First Caribbean Disaster Preparedness
	Conference (St Lucia)
1980	 Caribbean Disaster Preparedness Seminar
	(Dominican Republic)
1980s	– PCDPPP
1990s	– IDNDR
1996	 International Conference on Disaster
	Mitigation in Health Facilities (Mexico)
1997-98	 Two meetings of Expert Committee
	(Mexico & ??)
1999-2000	– DIPECHO-I
2002-3	– DIPECHO-III
2003	 First meeting of new Expert Committee,
	DiMAG GAMiD (Sint Maarten)

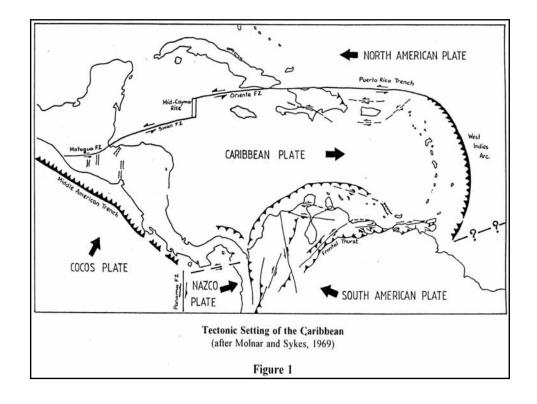


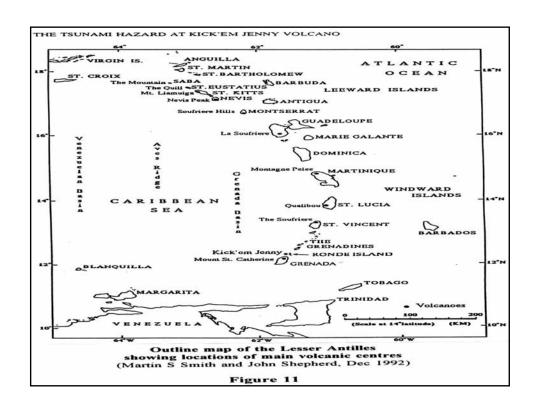
PAHO Expert Committee

- O Addressing Natural hazards
- O Geographic area: Bermuda, Caribbean islands, Belize, Guyana, Suriname
- O Advising ministries of health at the preconception stage of projects on the design team, the design criteria, standards for design
- O Advising ministries of health on vulnerability analyses and monitoring the implementation of recommendations

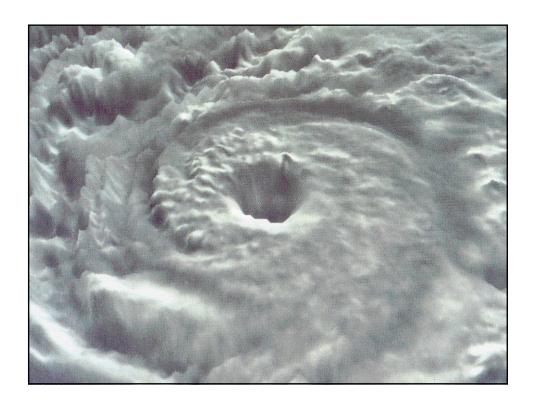


Caribbean Natural Hazards Earthquakes Volcanic activity Tsunamis Hurricanes Storm surge and wave action Torrential rains Since these are most of the natural hazards which affect the whole world, the Caribbean is a suitable test location for systems related to natural-hazard risk reduction programmes.

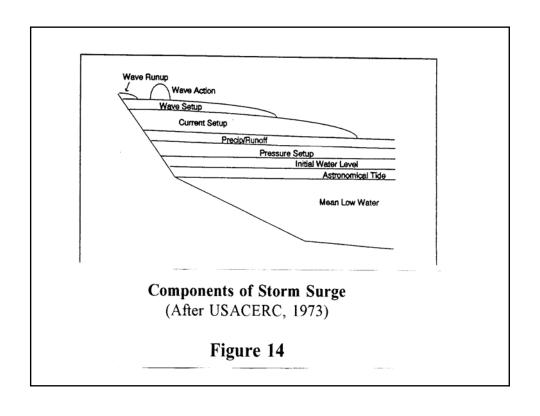




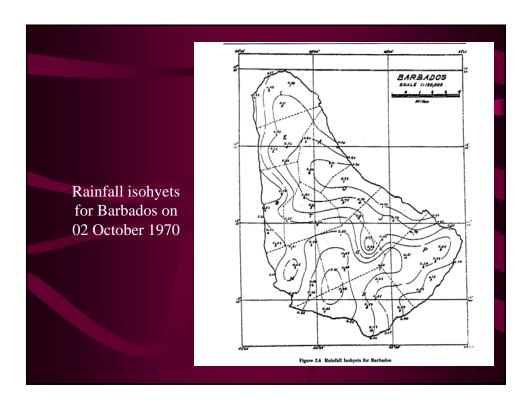


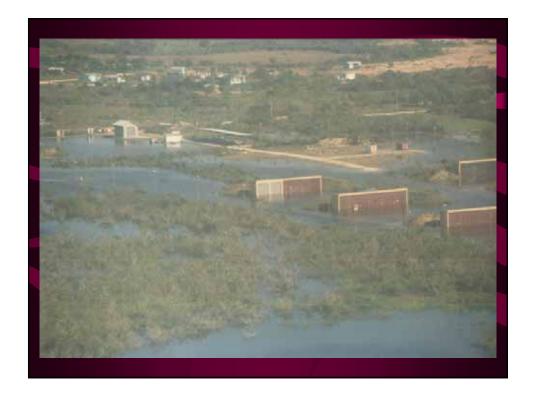


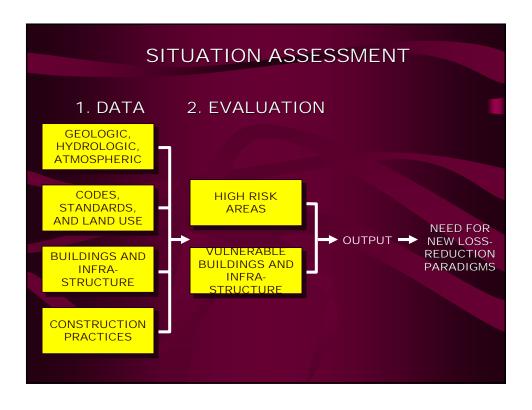












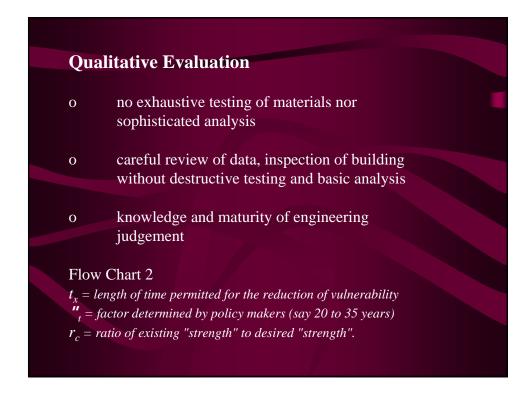
The Overall, Long-term Plan

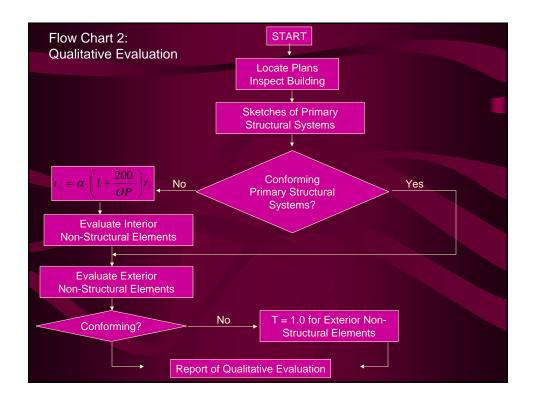
- 1 **List** those buildings and facilities which are important.
- Carry out *qualitative assessments* of the facilities listed in 1.
- 3 Carry out **analytical evaluations** of buildings scheduled for early action.
- 4 Embark on a programme of *reduction of vulnerability* where this is shown to exist. Such a programme would follow a *priority listing* of facilities requiring improvement.

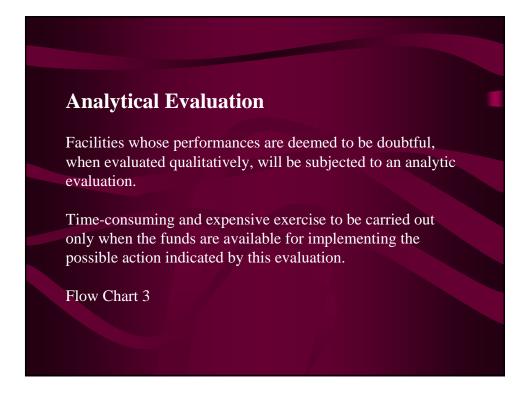
Qualitative Assessments and

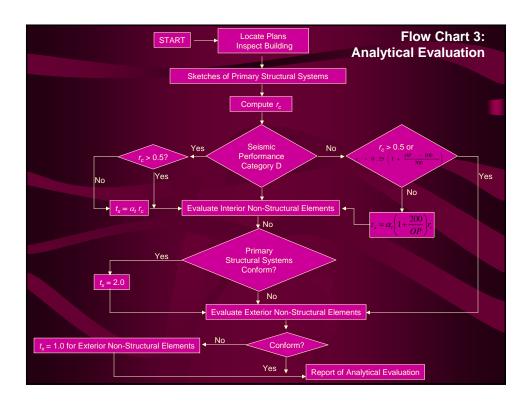
Analytical Evaluations

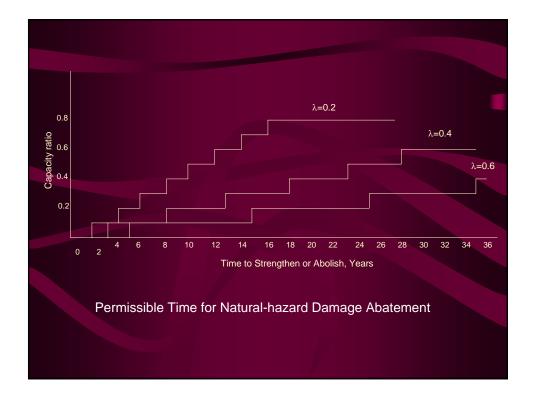
- a) structure
 - earthquake
 - wind
- b) non-structure
 - earthquake
 - wind

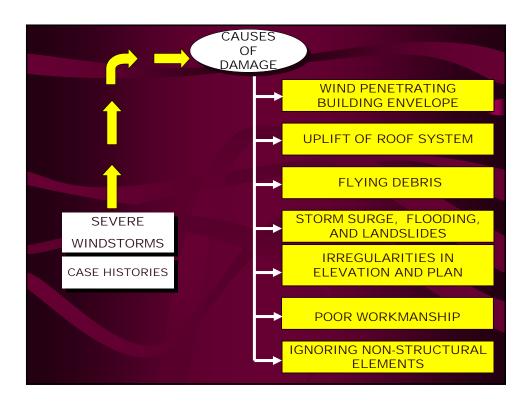


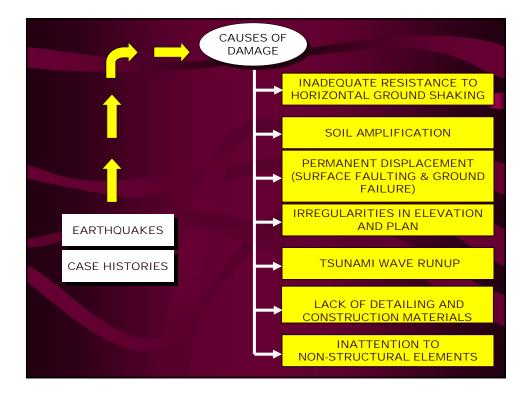












The Hospital Safety Index is a tool for the Qualitative Assessment of the facility. It also assists in determining a Priority Listing of facilities requiring improvement.

The Hospital Safety Index is divided into the following sections:

- 1- Elements relating to the geographic location of the health facility;
- 2- Structural safety of the building;
- 3- Elements related to nonstructural safety;
- 4- Hospital organisation, preparedness and operational safety.

Elements relating to the geographic location of the health facility is divided into the following sub-sections:

- 1.1 Hospital location (including Geological phenomena, Hydro-meteorological phenomena, Social and organizational phenomena, Environmental phenomena, Chemical and/or technological phenomena);
- 1.2 Geotechnical properties of the soil

Structural safety of the building is divided into the following subsections:

- 2.1 Safety taking into account history of facility;
- 2.2 Safety of the structural system and type of materials used in the building

Elements related to nonstructural safety is divided into the following sub-sections:

- 3.1 Critical systems (including Electrical system, Telecommunications system, Water supply system, Fuel storage gas and diesel, Medical gases oxygen, nitrous oxide, etc);
- 3.2 Heating, ventilation, and air-conditioning systems in critical areas;
- 3.3 Office and storeroom furnishings and equipment (fixed and movable) including computers, printers, etc;
- 3.4 Medical and laboratory equipment and supplies used for diagnosis and treatment;
- 3.5 Architectural elements.

Hospital organisation, preparedness and safety is divided into the following sub-sections:

- 4.1 Organization of the Hospital Disaster Committee and the Emergency Operations Centre;
- 4.2 Operational plan for internal or external disasters;
- 4.3 Contingency plans for medical treatment during different types of disasters;
- 4.4 Plans for the operation, preventive maintenance, and restoration of critical services;
- 4.5 Availability of medicines, supplies, instruments, and other equipment for disasters.



SAFE HOSPITALS CHECKLIST

1. Elements relating to the geographic location of the health facility to be evaluated [mark with an (X) where applicable].

1.1 Hospital location Pefer to be a red many Request the bespital team to provide the	Safety Level The following elements indicate the level of SAFE NOT of risk.			
Refer to hazard maps. Request the hospital team to provide the map(s) showing hazards at the site of the building.	NO		YES	
map(s) showing nazards at the site of the building.	HAZ ARD	LOW	AVERAGE	HIGH
Geological phenomena				
• Earthquakes Rate the safety level of the hospital in terms of geological and soil analyses.				
• Volcanic eruptions Refer to hazard maps to rate the safety level of the hospital in terms of its proximity to volcanoes and volcanic activity, lava and pyroclastic flow, and ash fall.				
• Landslides Refer to hazard maps to rate the safety level of the hospital in terms of landslides caused by unstable soils (among other causes).				
• Tsunamis Refer to hazard maps to rate the safety level of the hospital in terms of previous tsunami events caused by submarine volcanic or seismic activity.				
• Others (specify) Refer to hazard maps to identify other geological phenomena not listed above. Specify the hazard and rate the corresponding safety level of the hospital.				
Hydro-meteorological phenomena				
• Hurricanes Refer to hazard maps to rate the safety level of the hospital in terms of hurricanes.				
• Torrential Rains Rate the safety level of the hospital in relation to flooding due to rainfall and location based on observation and the history of such events.				
• Storm surge Identify previous events that did or did not cause flooding in or around the hospital. Rate the safety level of the hospital in terms of such events.				
Landslides Refer to geological maps to rate the level of safety of the hospital in relation to landslides caused by saturated soils.				

Others (specify) Refer to the hazard maps to identify other hydro-meteorological phenomena not listed above. Specify the hazard and rate the corresponding safety level of the hospital.			
Social and organizational phenomena		 	
Population centres Rate the safety level of the hospital taking into account its location, the type of population it serves, and its proximity to population centres.			
Displaced populations Rate the safety level of the hospital considering people who have been displaced as a result of war, socio-political circumstances, or due to immigration and emigration.			
Others (specify) If other social phenomena affect the safety of the hospital, specify them and rate the safety of the hospital accordingly.			
Environmental phenomena	l	l	
Epidemics With reference to any past incidents at the hospital and specific pathogens, rate the safety level of the hospital in terms of epidemics.			
Contamination (systems) With reference to any past incidents involving contamination and specific pathogens, rate the safety level of the hospital in terms of contamination of its systems.			
• Infestations With reference to the location and past incidents at the hospital, rate the safety level in terms of infestations (flies, fleas, rodents, etc.).			
Others (specify) With reference to any past incidents at the hospital, specify any other environmental phenomena not included above that might compromise the level of safety of the hospital.			
Chemical and/or technological phenomena			
• Explosions Refer to maps showing the hospital's location as well as the			

Safety I evel			
NO	LOW	AVERAGE	HIGH
•			
	NO CONTRACTOR TO THE SPA	Safe NO LOW Characteristics The space below to th	Safety Level

2. Structural safety of the building Columns, beams, walls, floor slabs, etc., are structural elements that form part of the load-bearing system of the building. When possible, these elements should be evaluated by structural engineers.

2.1 Safety taking into account history of facility		Safety Level		
2.1 Safety taking into account history of facility	LOW	AVERAGE	HIGH	
There has been prior structural damage to the hospital as a result of natural phenomena Determine whether structural reports indicate that the level of safety has been				
compromised.				
Low = Major damage; Average = Average/moderate damage; High = Minor damage.				
 Was the hospital repaired or reconstructed using current safety standards? 				
Verify whether the building was repaired, the date of repairs, and whether repairs were				
carried out using current standards for safe buildings. Low = Standards not applied; Average = Standards partially applied; High = Standards fully				
applied;				
Has the hospital been remodelled or modified?				
Verify whether modifications were carried out using current standards for safe buildings				
Low = Standards not applied; Average =Standards partially applied; High = Standards fully				
applied.				
2.2 Safety of the structural system and type of materials used in the		Safety Leve		
building	LOW	AVERAGE	HIGH	
Construction quality				
Low = Deterioration caused by weathering; cracks on the first floor and irregular elevation				
of buildings; Average = Deterioration caused only by weathering; High = Good; no				
deterioration or cracks observed.				
Condition of building materials				
Low = Rust with flaking; cracks larger than 3mm; Average = Cracks between 1 and 3 mm;				
rust powder present; High = Cracks less than 1 mm; no rust.				
Interaction of nonstructural elements with the structure Separation is less than 0.5% of the height of the charter buildings Average				
Low = Separation is less than 0.5% of the height of the shorter building; Average = Separation is 0.5%–1.5% of the height of the shorter building. High = Separation is more				
than 1.5% of the height of the shorter building.				
Proximity of buildings (hazards of pounding, wind tunnel effects,				
fires, etc.)				
Low = Separation is less than 0.5% of the height of the shorter of two adjacent buildings;				
Average = Separation is between 0.5% and 1.5% of the height of the shorter of two				
adjacent buildings; High = Separation is more than 1.5% of the height of the shorter of two				
adjacent buildings.				
Structural redundancy				
Low = Less than three lines of resistance in each direction; Average = Three lines of				
resistance in each direction or lines without orthogonal orientation; High = More than three lines of resistance in each orthogonal direction of the building.				
Structural detailing including connections				
Low = Built before the 1970s; Average = Built in the 1970s or 1980s; High = Built in the				
1990s or later				
Safety of foundations				
Low = Information is lacking; foundation depth is less than 1.5 m; Average = Plans and				
soil analysis are lacking; foundation donth is more than 1.5 m; High - Plans, soil studies]		1	

are available; foundation depth is more than 1.5 m.	
• Irregularities in the plan (rigidity, mass, and resistance) Low = Shapes are irregular and structure is not uniform; Average = Shapes are irregular but structure is uniform; Average = Shapes are regular and structure has uniform plan.	
• Irregularities in elevation (rigidity, mass, and resistance) Low = Stories with different heights, discontinuous, irregular elements; Average = Stories with similar heights (they do not differ by more than 20%); there are no discontinuous or irregular elements. High = Stories of similar height (they do not differ by more than 20%); there are no discontinuous or irregular elements.	
Structural adaptation to various phenomena (meteorological, geological, among others) The evaluation will be similar but focused on given events (for example, hurricanes and floods).	
Comments regarding results of section 2:	
Name/signature of evaluator	

3. Elements related to nonstructural safety
These elements do not form part of the load-bearing system of the building. They include architectural elements, equipment, and necessary systems for the operation of the building.

3.1 Critical systems		Safety Leve	el
Electrical system	LOW	AVERAGE	HIGH
• Generator has capacity to meet 100% of demand. Verify that the generator begins to operate within seconds of the hospital losing power, covering power demands in the emergency department, intensive care unit, disinfection and sterilization unit, surgery, etc. Low =0-30%; Average = 31-70%; High = 71-100%			
 Regular tests of generator performance are carried out in critical areas. Low = > 3 months; Average = 1-3 months; High = < 1 month. 			
Generator protected from damage due to natural phenomena Low = No; Average = Partially; High = Yes.			
Safety of electrical cables Low = No; Average = Partially; High = Yes.			
• Redundancy in main power supply Low = No; Average = Partially; High = Yes.			
Protection for control panel, overload breaker switch, and cable Check the accessibility as well as condition and operation of the electrical control panel. Low = No; Average = Partially; High = Yes.			
• Lighting system for critical areas of the hospital Review lighting for emergency unit, intensive care unit, sterilization and disinfection unit, surgery, etc., testing the level of lighting and function of lighting fixtures. Low = No; Average = Partially; High = Yes.			
External electrical systems installed on hospital grounds Determine whether there are electrical substations or transformers that might jeopardise the safety level of the hospital. Low =No electrical substation installed in hospitals grounds; Average = Substations installed but does not provide enough power to hospital; High = Electrical substation installed and provides enough power to the hospital.			
Telecommunications system			
• Condition of antennas and antenna bracing Verify that antennas and lightning rods have bracing/supports that increase the safety level of the hospital. Low = Poor; Average = Satisfactory; High = Good.			
Condition of low current systems (Internet connections/cables) Verify that cables are properly connected in strategic areas to avoid system overload. Low = Poor; Average = Satisfactory; High = Good.			
Condition of alternative communication system Low = Poor; Average = Satisfactory; High = Good.			
Condition of anchors and braces for equipment and cables			

Verify that telecommunications equipment are anchored for increased security. Low = Poor; Average = Satisfactory; High = Good.		
Condition of external telecommunications systems installed		
on hospital grounds		
Verify that no exterior telecommunications systems interfere with the safety level of		
the hospital.		
Low = No external communication installed; Average = External communication		
installed but not fully operational; High = External communication installed and fully		
operational.		
Site has adequate conditions for telecommunications		
systems.		
Low = Poor; Average = Satisfactory; High = Good.		
Safety of public communications systems.		
Low = Poor; Average = Satisfactory; High = Good.		
Water supply system		
Water tank has sufficient reserve to provide at least 300 litres		
daily per bed for 72 hours		
Verify that water storage is sufficient to satisfy user demand for three days.		
Low = Sufficient for 24 hours or less; Average = Sufficient for more than 24 hours but		
less than 72 hours; High = Guaranteed to cover at least 72 hours.		
Water storage tanks are in protected locations		
Visit the water tanks to determine the safety of the installations and of the site.		
Low = The site is susceptible to structural or nonstructural failure; Average = Failure		
would not cause collapse of structure; High = Low possibility of functional failure.		
Alternative water supply system to major distribution network.		
Identify the agency responsible for timely restoration of water service in case the		
system fails and service is interrupted.		
Low = Provides less than 30% of demand; Average = Provides 30% but less than		
100% of demand; High = There is a source certified to supply 100% of daily demand.		
Safety of water distribution system (valves, pipes, connections)		
Ensure proper function of storage cisterns (free of leaks and harmful agents).		
Low = Less than 60% are in good operational condition; Average = between 60% and		
80% are in good condition; High = Above 80% are in good condition.		
Supplementary pumping system		
Identify the agency responsible for timely restoration of service in case the system		
fails and service is interrupted.		
Low = There is no back-up pump and operational capacity does not meet daily		
demand; Average = All pumps are in satisfactory condition; High = All pumps and		
back-up systems are operational.		
First standard (was dispat)		
Fuel storage (gas, diesel)	I	
Fuel tanks have at least 5-day capacity		
Verify that the hospital has a fuel storage tank of adequate size and safety.		
Low = Less than 3-day capacity; Average = 3- to 5-day capacity; High = Capacity for 5		
or more days.		
Fuel tanks and/or cylinders are anchored and in secure location		
Low = There are no anchors and the tank enclosure is unsafe; Average = Anchors are		
inadequate; High = Anchors are in good condition and the tank enclosure is adequate.		
Fuel storage is accessible and in secure location		
Verify that the tanks containing flammable liquids are accessible but at a safe distance	 	

from the hospital. Low = There is a risk of failure or tanks are not accessible; Average = One of the two conditions have been met; High = The fuel storage tanks are accessible and they are located in a secure site.			
Safety of the fuel distribution system (valves, pipes, and connections) Low = Less than 60% of system is in good operational condition; Average = between 60% and 80% of system is in good operational condition; High = More than 80% of system is in good operational condition.			
Medical gases (oxygen, nitrous oxide, etc.)			
• Sufficient storage for minimum of 15-day supply Low = Less than 10-day capacity; Average = Capacity for between 10 and 15 days; High = Capacity for at least 15 days.			
• Anchors for tanks, cylinders, and related equipment Low = Anchors are lacking; Average = Quality of anchors is inadequate; High = Anchors are of good quality.			
• Availability of alternative sources of medical gases Low = Alternative sources are lacking or are in poor condition; Average = Alternative sources exist but their condition is below standard; High = Alternative sources exist and are in good condition.			
• Secure and appropriate locations for storage of medical gases Low = The locations are unsafe; Average = The locations are moderately safe but hazards exist; High = The locations are safe and there are no hazards			
Safety of medical gas distribution system (valves, pipes, connections) Low = Less than 60% of system is in good working condition; Average = Between 60% and 80% of system is in good working condition; High = More than 80% of system is in good working condition.			
Protection of medical gas tanks and/or cylinders and related equipment High = There are areas used exclusively for this equipment and they are operated by qualified personnel, Average = Areas exclusively for this equipment OR operated by qualified personnel, Low = No exclusives areas AND no qualified personnel to operate them			
Adequate safety in storage areas Verify that tanks and cylinders in storage area are stored safely Low = Tanks and cylinders are loose and unsecured, Average = Some tanks and cylinders are securedand anchored; High = Tanks and cylinders are safely anchored and secured.			
3.2 Heating, ventilation, and air-conditioning (HVAC) systems in		Safety Leve	
critical areas	LOW	AVERAGE	HIGH
 Adequate bracing for ducts and review of flexibility of the ducts and piping that cross expansion joints Low = Poor; Average = Satisfactory; High = Good. 			
Condition of piping, connections, and valves Low = Poor; Average = Satisfactory; High = Good.			
Condition of anchors for central heating and/or hot water equipment Low = Poor; Average = Satisfactory; High = Good.			

Condition of anchors for central air-conditioning equipment Low = Poor; Average = Satisfactory; High = Good.			
Adequate location of enclosures for HVAC equipment Low = Poor; Average = Satisfactory; High = Good.			
Adequate safety of enclosures for HVAC equipment Low = Poor; Average = Satisfactory; High = Good.			
Operational condition of equipment (boiler, air-conditioning systems, exhaust, etc.) Low = Poor; Average = Satisfactory; High = Good.			
3.3 Office and storeroom furnishings and equipment (fixed and		Safety Leve	I
movable) including computers, printers, etc.	LOW	AVERAGE	HIGH
Anchors for shelving and shelf contents secured	_	_	
Verify that shelves are anchored to the walls and/or are braced and that contents are secured.			
Low = Poor; Average = Satisfactory; High = Good.			
Safety of computers and printers Verify that computer tables are secure and table wheels are locked. Low = Poor; Average = Satisfactory; High = Good.			
• Condition of office furnishings and other equipment Check anchors and/or bracing on furnishings in offices. Low = Poor; Average = Satisfactory; High = Good.			
3.4 Medical and laboratory equipment and supplies used for		Safety Leve	I
diagnosis and treatment	LOW	AVERAGE	HIGH
Medical equipment in operating theatres and recovery rooms Verify that lamps, equipment for anaesthesia and surgical tables are secure and that table or cart wheels are locked.			
Low = The equipment is in poor condition or it is not secured; Average = The equipment is in fair condition or not properly secured; High = Equipment is in good condition and is secured.			
Low = The equipment is in poor condition or it is not secured; Average = The equipment is in fair condition or not properly secured; High = Equipment is in good			
 Low = The equipment is in poor condition or it is not secured; Average = The equipment is in fair condition or not properly secured; High = Equipment is in good condition and is secured. Condition and safety of radiology equipment Verify that the X-ray tables are secured and the wheels on X-ray equipment have functional brakes. Low = The equipment is in poor condition or it is not secured; Average = The equipment is in fair condition or not properly secured; High = Equipment is in good 			
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equipment is in fair condition or not properly secured; High = Equipment is in good condition and is secured.			
Condition and safety of medical equipment in the sterilization and disinfection unit Low = The equipment is in poor condition or it is not secured; Average = The equipment is in fair condition or not properly secured; High = Equipment is in good condition and is secured.			
• Condition and safety of medical equipment in neonatal unit Low = The equipment is in poor condition or it is not secured; Average = The equipment is in fair condition or not properly secured; High = Equipment is in good condition and is secured.			
Condition and safety of medical equipment in burn unit Low = The equipment is in poor condition or it is not secured; Average = The equipment is in fair condition or not properly secured; High = Equipment is in good condition and is secured.			
Condition and safety of medical equipment in nuclear medicine and radiation therapy unit Low = The equipment is in poor condition or it is not secured; Average = The equipment is in fair condition or not properly secured; High = Equipment is in good condition and is secured.			
• Condition and safety of medical equipment in other services Low = More than 20% of the essential equipment for a system's operation is at risk of material or functional failure and/or if nonessential equipment puts the entire service's operation at direct or indirect risk; Average = Neither "Low" nor "High"; High = 100% of the essential equipment and at least 80% of the nonessential equipment is secured.			
Anahara far abalying and actaty of madical contents			
• Anchors for shelving and safety of medical contents Low = Shelves are anchored or shelf contents are secured in 0% to 20% of cases; Average = Shelves are anchored or shelf contents are secured in 20% to 80% of cases; High = More than 80% of shelves are anchored and the contents of shelves are secured.			
Low = Shelves are anchored or shelf contents are secured in 0% to 20% of cases; Average = Shelves are anchored or shelf contents are secured in 20% to 80% of cases; High = More than 80% of shelves are anchored and the contents of shelves		Safety Leve	
Low = Shelves are anchored or shelf contents are secured in 0% to 20% of cases; Average = Shelves are anchored or shelf contents are secured in 20% to 80% of cases; High = More than 80% of shelves are anchored and the contents of shelves are secured.	LOW	Safety Leve AVERAGE	I HIGH
Low = Shelves are anchored or shelf contents are secured in 0% to 20% of cases; Average = Shelves are anchored or shelf contents are secured in 20% to 80% of cases; High = More than 80% of shelves are anchored and the contents of shelves are secured. 3.3.5 Architectural elements • Condition and safety of doors and entrances Low = High potential for damage to element(s) that may impede the performance of this and other components, systems, or operations; Average = Moderate potential for damage to element(s) that may impede the performance of this and other components, systems, or operations; High = No potential for damage.to these	LOW		
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Low = High potential for damage to element(s) that may impede the performance of this and other components, systems, or operations; Average = Moderate potential for damage to element(s) that may impede the performance of this and other components, systems, or operations; High = No potential for damage.to these elements.		
• Condition and safety of railings/parapets Low = High potential for damage to element(s) that may impede the performance of this and other components, systems, or operations; Average = Moderate potential for damage to element(s) that may impede the performance of this and other components, systems, or operations; High = No potential for damage.to these elements.		
• Condition and safety of walls Low = High potential for damage to element(s) that may impede the performance of this and other components, systems, or operations; Average = Moderate potential for damage to element(s) that may impede the performance of this and other components, systems, or operations; High = No potential for damage.to these elements.		
Condition and safety of other outside elements (cornices,		
ornaments, etc.) Low = High potential for damage to element(s) that may impede the performance of this and other components, systems, or operations; Average = Moderate potential for damage to element(s) that may impede the performance of this and other components, systems, or operations; High = No potential for damage.to these elements.		
Safe conditions for vehicle and pedestrian circulation outside		
of building .Low = Damages to structure or road and walkways will impede access to buildings or endanger vehicles and pedestrians; Average = Damages to structure or road and walkways will not impede vehicle and pedestrian traffic; High = No or slight damage will not impede vehicle and pedestrian traffic		
Condition and safety of internal circulation		
Low = High potential for damage to element(s) that may impede the performance of this and other components, systems, or operations; Average = Moderate potential for damage to element(s) that may impede the performance of this and other components, systems, or operations; High = No potential for damage.to these elements.		
Condition and safety of internal walls and partitions		
Low = High potential for damage to element(s) that may impede the performance of this and other components, systems, or operations; Average = Moderate potential for damage to element(s) that may impede the performance of this and other components, systems, or operations; High = No potential for damage.to these elements.		
Condition and safety of false or suspended ceilings		
Low = High potential for damage to element(s) that may impede the performance of this and other components, systems, or operations; Average = Moderate potential for damage to element(s) that may impede the performance of this and other components, systems, or operations; High = No potential for damage.to these elements.		
Condition and safety of lighting system		
Low = High potential for damage to element(s) that may impede the performance of this and other components, systems, or operations; Average = Moderate potential for damage to element(s) that may impede the performance of this and other components, systems, or operations; High = No potential for damage.to these		

elements.		
• Condition and safety of fire suppression system Low = High potential for damage to element(s) that may impede the performance of this and other components, systems, or operations; Average = Moderate potential for damage to element(s) that may impede the performance of this and other components, systems, or operations; High = No potential for damage.to these elements.		
Condition and safety of elevator system Low = High potential for damage to element(s) that may impede the performance of this and other components, systems, or operations; Average = Moderate potential for damage to element(s) that may impede the performance of this and other components, systems, or operations; High = No potential for damage.to these elements.		
Condition and safety of stairways Low = High potential for damage to element(s) that may impede the performance of this and other components, systems, or operations; Average = Moderate potential for damage to element(s) that may impede the performance of this and other components, systems, or operations; High = No potential for damage.to these elements.		
• Condition and safety of floor coverings Low = High potential for damage to element(s) that may impede the performance of this and other components, systems, or operations; Average = Moderate potential for damage to element(s) that may impede the performance of this and other components, systems, or operations; High = No potential for damage.to these elements.		
Hospital access Low = High potential for damage to element(s) that may impede the performance of this and other components, systems, or operations; Average = Moderate potential for damage to element(s) that may impede the performance of this and other components, systems, or operations; High = No potential for damage.to these elements.		
Other elements Low = High potential for damage to element(s) that may impede the performance of this and other components, systems, or operations; Average = Moderate potential for damage to element(s) that may impede the performance of this and other components, systems, or operations; High = No potential for damage.to these elements.		
Comments on point 3:		
Name/signature of evaluator		

4. Hospital organisation, preparedness and safety.

This refers to level of preparedness of hospital staff as well as the implementation of the hospital disaster plan.

4.3.1 Organization of the Hospital Disaster Committee and the	Level of Organization		
Emergency Operations Centre	LOW	AVERAGE	HIGH
Assess the level of organisation achieved by the hospital management team.			
 Committee has been formally established to respond to major emergencies or disasters Obtain a copy of the Committee's terms of reference and most recent meeting minutes.and verify that the list of members corresponds to current personnel. Low = Non-existent; Average = Exists; High = Exists and is functioning. 			
• The Committee's membership is multi-disciplinary Verify that the committee's membership is drawn from diverse disciplines. Low = 0— 2 disciplines represented; Average = 3-4 disciplines represented; High = 5 or more disciplines represented (e.g., hospital director, nursing director, maintenance engineer, chief of emergency unit, chief of medicine, chief of surgery, chief of laboratory and support services, among others).			
• Each member has specific responsibilities Verify that members' assigned responsibilities are in writing, describing their specific roles. Low = Responsibilities not assigned; Average = Responsibilities have been officially assigned; High = All members know their responsibilities.			
• The hospital has an Emergency Operations Centre (EOC) Verify that a room has been designated for operational command and that all means of communication are present and functional (telephone, fax, Internet, etc.). Low = Nonexistent; Average = Room has been officially assigned; High = EOC exists and is operational.			
• The EOC is in a protected and safe location Take into account accessibility, safety, and protection when checking the room used for the EOC. Low = The room is not in a safe location; Average = The location is moderately safe and protected; High =The EOC is safe, protected and easily accessible.			
• The EOC has a computer system and computers Verify that equipment is available and cabling etc. installed. Low = Not available; Average =Some available/no cabling; High = The EOC has all computer system requirements.			
 Both internal and external communication systems in the EOC operate correctly. Determine whether there is a paging or a public address system and whether the operators know the emergency codes and how to use it. Low = Does not function/ nonexistent; Average = Partially operational; High = Complete and functional. 			
• The EOC has an alternative communications system Determine whether, besides the switchboard, there is an alternative communications system (e.g. cellular etc.). Low = Nonexistent; Average = Partial; High = Alternative in place and functional.			
• The EOC has adequate equipment and furnishings Verify that there are desks, chairs, power outlets, lighting, water supply, and drainage. Low = Nonet; Average = Some but insufficient; High = Fully furnished and equipped.			

• An up-to-date telephone directory is available in the EOC Request the directory containing numbers of all support services needed in an emergency (randomly confirm telephone numbers). Low = No; Average = Directory exists but is not up-to-date; High = Available and current.			
• "Action Cards" available for key personnel Obtain cards that describe the assigned duties of key members of hospital staff and that specify his/her participation in case of an internal or external disaster. Low = Not available; Average = Insufficient (numbers and quality); High = All key staff have cards.			
4.3.2 Operational plan for internal or external disasters	Level (of Implement AVERAGE	ation HIGH
• Strengthen essential hospital services The plan specifies actions to be taken before, during, and after a disaster in the hospital's essential services (emergency room, intensive care unit, disinfection and sterilization unit, surgery, among others). Low = Plan does not exist or exists only as a document; Average = Plan exists and personnel have been trained; High = Plan exists, personnel have been trained, and resources are in place to carry out the plan.			
• Procedures to activate and deactivate the plan Verify that there are procedures for how, when, and by whom the plan is activated/deactivated. Low = Plan does not exist or exists only as a document; Average = Plan exists and personnel have been trained; High = Plan exists, personnel have been trained, and resources are in place to carry out the plan.			
• Special administrative procedures for disasters Verify that the plan includes procedures for contracting personnel and for procurements in case of disaster. Low = Plan does not exist or exists only as a document; Average = Plan exists and personnel have been trained in procedures; High = Plan exists, personnel have been trained, and resources are in place to carry out the procedures.			
Financial resources for emergencies are budgeted and guaranteed Verify that the hospital has a specific budget for use in disaster situations. Low = Not budgeted; Average = Funds likely to cover less than 72 hours are budgeted; High = Sufficient funds guaranteed for 72 hours or more.			
Procedures for expanding usable space, including the availability of extra beds The plan should identify physical spaces that can be equipped to treat mass casualties or for additional inpatient areas Low = Plan does not exist or exists only as a document; Average = Plan exists and personnel have been trained; High = Plan exists, personnel have been trained, and resources are in place to carry out expansion of space.			
• Procedures for admission to the emergency department The plan should specify the places and personnel responsible for carrying out triage. Low = Plan does not exist or exists only as a document; Average = Plan exists and personnel have been trained; High = Plan exists, personnel have been trained, and resources are in place to carry out triage.			
Procedures to expand emergency department and other critical services The plan should include the approach to and actions needed to increase the capacity of the hospital's critical services.			

Low = Plan does not exist or exists only as a document; Average = Plan exists and personnel have been trained; High = Plan exists, personnel have been trained, and resources are in place to carry out the plan.		
• Procedures to protect patients' medical records. Security and the movement of medical and other critical records are included in the plan Low = Plan does not exist or exists only as a document; Average = Plan exists and personnel have been trained; High = Plan exists, personnel have been trained, and resources are in place to carry out the plan.		
Regular safety inspections are conducted by the appropriate authority During safety inspections, the expiration and/or recharge dates of fire extinguishers and dates of flow tests of fire hydrants should be noted. Logbooks with records of tests on this equipment as well as dates of visits of civil defence personnel should be examined. Low = Inspections do not occur; Average = Partial or outdated inspection; High = Inspections are complete and up-to-date.		
• Procedures for hospital epidemiologic surveillance Verify that the hospital's Epidemiologic Surveillance Committee has specific procedures for disaster incidents or treatment of mass casualties. Low = Plan does not exist or exists only as a document; Average = Plan exists and personnel have been trained; High = Plan exists, personnel have been trained, and resources are in place to carry out the plan.		
Procedures for preparing sites for temporary placement of dead bodies and for forensic medicine Verify that the plan includes specific arrangements for pathology and a site for the placement of multiple cadavers. Low = Plan does not exist or exists only as a document; Average = Plan exists and personnel have been trained; High = Plan exists, personnel have been trained, and resources are in place to carry out the plan.		
Transport and logistic support The plan provides for ambulances and official vehicles for the hospital. Low = Plan does not exist or exists only as a document; Average = Plan exists and personnel have been trained; High = Plan exists, personnel have been trained, and resources are in place to carry out the plan.		
• Food and supplies for hospital staff during the emergency The plan specifies actions to be taken to provide food and other supplies to staff and funds are included in the budget. Low = Nonexistent; Average = Covers less than 72 hours; High = Guaranteed for at least 72 hours.		
Measures to ensure the well-being of additional personnel mobilized during the emergency. The plan sets out the procedures for ensuring the welfare and safety of all staff of the hospital both at work and at home. Low = Nonexistent; Average = Measures cover less than 72 hours. High = Measures are ensured for at least 72 hours.		
Cooperative arrangements with local emergency plans There are written arrangements regarding cooperation between the hospital and community authorities. Low = No arrangements exist: Average = Cooperative		

arrangements exist but are not operational; High = Cooperative arrangements exist and are operational.			
Preparation of a census of admitted patients and those referred to other hospitals The plan has specific forms that facilitate the listing of patients during emergencies. Low = Plan does not exist or exists only as a document; Average = Plan exists and personnel have been trained; High = Plan exists, personnel have been trained, and resources are in place to carry out the plan.			
• Procedures for communicating with the public and media The hospital disaster plan specifies who is responsible for communicating with the public and media in case of disaster (generally the highest person in the chain of command at the time of the event). Low = Plan does not exist or exists only as a document; Average = Plan exists and personnel have been trained; High = Plan exists, personnel have been trained, and resources are in place to carry out the plan.			
Procedures for response during evening, weekend, and holiday shifts Plan includes procedures and contact information to call out staff out of normal working hours. Low = Plan does not exist or exists only as a document; Average = Plan exists and personnel have been trained; High = Plan exists, personnel have been trained, and resources are in place to carry out the plan.			
Simulation exercises and drills			
The plan is tested regularly through simulations and drills, evaluated and amended as appropriate. Low = Plan is not tested; Average = Plan is tested less frequently than annually.; High = Plan is tested at least annually, reviewed and amended.			
The plan is tested regularly through simulations and drills, evaluated and amended as appropriate. Low = Plan is not tested; Average = Plan is tested less frequently than annually.; High = Plan is tested at least annually, reviewed and amended. 4.3.3 Contingency plans for medical treatment during different		of implement	
The plan is tested regularly through simulations and drills, evaluated and amended as appropriate. Low = Plan is not tested; Average = Plan is tested less frequently than annually.; High = Plan is tested at least annually, reviewed and amended. 4.3.3 Contingency plans for medical treatment during different types of disasters	Level of LOW	of implement AVERAGE	ntation HIGH
The plan is tested regularly through simulations and drills, evaluated and amended as appropriate. Low = Plan is not tested; Average = Plan is tested less frequently than annually.; High = Plan is tested at least annually, reviewed and amended. 4.3.3 Contingency plans for medical treatment during different			
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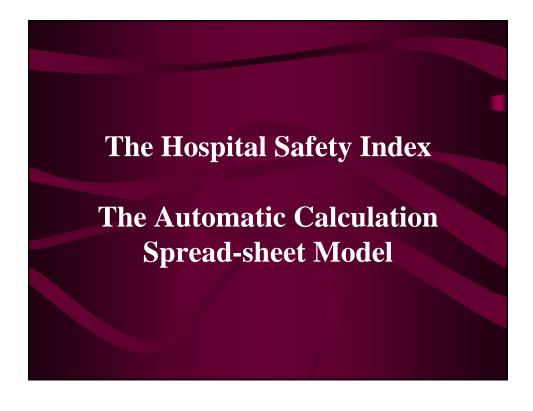
Pathogens with epidemic potential Low = Plan does not exist or exists only as a document; Average = Plan exists and personnel have been trained; High = Plan exists, personnel have been trained, and resources are in place to carry out the plan.				
Psycho-social treatment for patients, families, and health workers Low = Plan does not exist or exists only as a document; Average = Plan exists and personnel have been trained; High = Plan exists, personnel have been trained, and resources are in place to carry out the plan.				
Control of infections acquired during hospitalization Request the corresponding hospital manual and verify whether procedures are in force for controlling infections acquired during hospitalization (nosocomial infections). Low = Manual does not exist or exists only as a document; Average = Manual exists and personnel have been trained; High = Manual exists, personnel have been trained, and resources are available to implement measures.				
12.4 Plans for the energtion proventive maintenance and	Lov	<u> </u>	of Availa	shilits:
4.3.4 Plans for the operation, preventive maintenance, and restoration of critical services	Lev	/61 (Dilley
Measure the accessibility, legitimacy, and availability of those documents that are essential when attending to an emergency	LO	N	AVERA GE	HIGH
• Electric power supply and back-up generators Obtain the operations manual for the back-up electric generator as well as the preventive maintenance records. Low = Documentation does not exist; Average = Documentation exists; High = Documentation exists, personnel have been trained, and resources are in place to restore electric power.				
Drinking water supply Obtain the operations manual for the water supply system as well as the preventive maintenance records. Low = Documentation does not exist; Average = Documentation exists; High = Documentation exists, personnel have been trained, and resources are in place to restore water supply.				
• Fuel reserves Obtain the operations manual for fuel supply, as well as the preventive maintenance records. Low = Documentation does not exist; Average = Documentation exists; High = Documentation exists, personnel have been trained, and resources are in place to restore fuel supplies.	=			
Medical gases Obtain the operations manual for the medical gases supply system, as well as the preventive maintenance records. Low = Documentation does not exist; Average = Documentation exists; High = Documentation exists, personnel have been trained, and resources are in place to restore medical gas systems.				
Standard and back-up communications systems				
Obtain the operations manual for the communications system as well as the preventive maintenance records. Low = Documentation does not exist; Average = Documentation exists; High = Documentation exists, personnel have been trained, and resources are in place to restore communications system.				
Wastewater systems		٦		
Ensure that the hospital wastewater disposal system is appropriate and is regularly		J		

maintained. Low = Unsatisfactory system for wastewater disposal; Average = System satisfactory but little or no evidence of compliance and maintenance; High = Satisfactory disposal system with evidence of compliance and maintenance			
Solid waste management Obtain the manual on solid waste management, as well as the records showing waste collection and subsequent disposal. Low = Documentation does not exist; Average = Documentation exists but incomplete or out of date. High = Documentation exists, personnel have been trained, and resources are in place to restore solid waste management.			
• Maintenance of the fire suppression system Obtain the manual for the fire suppression systems, as well as the records showing preventive maintenance on fire extinguishers and fire hydrants. Low = Documentation does not exist; Average = Documentation exists but incomplete or out of date.; High = Documentation exists, personnel have been trained, and resources are in place to restore the fire suppression system.			
	Level	of Availa	ability
4.3.5 Availability of medicines, supplies, instruments, and other equipment for disasters	LOW	AVERA GE	HIGH
 Medicines Check if inventory of stock of essential drugs is available Low = Nonexistent; Average = Available but not current; High = Available and current 			
• Items for treatment and other supplies Check that the disinfection and sterilization unit has a supply of sterilized materials for use in an emergency (it is recommended that the supplies be rotated the day after sterilization). Low = Nonexistent; Average = Supply covers less than 72 hours; High = Supply guaranteed for at least 72 hours.			
• Instruments Verify the existence and maintenance of specific instruments used in emergencies. Low = Nonexistent; Average = Supply covers less than 72 hours; High = Supply guaranteed for at least 72 hours.			
• Medical gases Verify the arrangements for obtaining medical gases, and ensure in an emergency Low = Nonexistent; Average = Supply covers less than 72 hours; High = Supply guaranteed for at least 72 hours.			
• Mechanical volume ventilators Obtain the operations manual as well as the preventive maintenance records. Low = Documentation does not exist; Average = Documentation exists; High = Documentation exists, personnel have been trained, and resources are in place to maintain the equipment			
Electro-medical equipment Obtain the operations manual as well as the preventive maintenance records. Low = Documentation does not exist; Average = Documentation exists; High = Documentation exists, personnel have been trained, and resources are in place to maintain the equipment			
Life-support equipment Obtain the operations manual as well as the preventive maintenance records. Low = Documentation does not exist; Average = Documentation exists; High = Documentation exists, personnel have been trained, and resources are in place to maintain the equipment			

• Personal protection equipment for epidemics (disposable) Verify the stocks of personal protection equipment for staff working in areas of initial contact. Low = Nonexistent; Average = Supply covers less than 72 hours; High = Supply guaranteed for at least 72 hours.		
Crash cart for cardiopulmonary arrest Verify the locations of crash carts for treatment of cardiopulmonary arrest. Low = Nonexistent; Average = Present but insufficient; High = Sufficient numbers in good condition		
• Triage tags and other supplies for managing mass casualties Verify that the emergency department has a supply of triage tags and other supplies to distribute in case of mass casualties. Low = Nonexistent; Average = Supply covers up to 50 casualties; High = Supply covers more than 50 casualties.		
Comments on section 4:	 	
Name/signature of evaluator	 	

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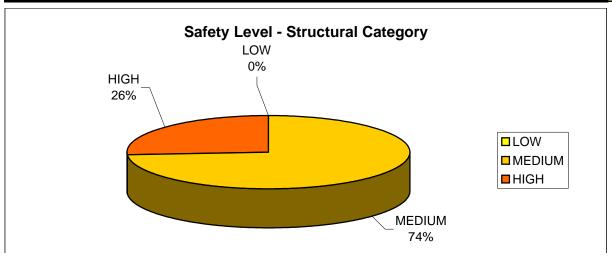




1.3.1 Hospital Location	Safety Level				
Use hazard maps, if available	NO		MEDIUM	HIGH	
Geological Hazards					
Earthquakes		1			
Volcanic Eruptions		1			
Landslides		1			
Tsunamis		1			
Others (specify)					
Hydrometeorological Hazards					
Hurricanes			1		
Torrential rains			1		
Storm surge and waves		1			
Landslides			1		
Social unrest					
Population concentrations			1		
Displaced Persons				1	
Others (specify)					
Sanitary-Ecological Hazards					
Epidemics				1	
Contamination (systems)			1		
Infestation			1		
Others (specify)					
Chemical-Technological Hazards					
Explosions			1		
Fires			1		
Hazardous materials spills				1	
Others (specify)					
1.3.2 Soil Geotechnical Properties					
Liquefaction		1			
Sensitive Clays		1			
Unstable slopes		1			

Step 1: Use only a number "1" when answering questions affirmatively. Do not answer a question if it is not measurable or not relevant for the health facility under evaluation.

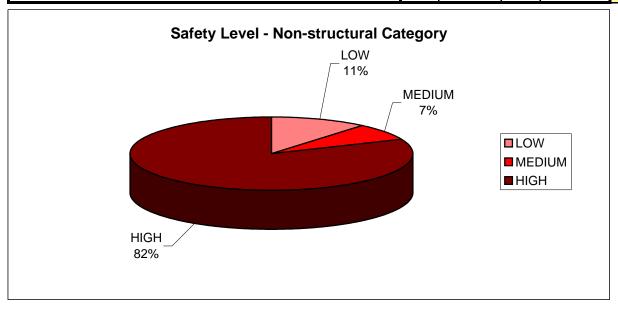
	2.3.1 Safety due to the history of the establishment	Safety Degree				
	Was the hospital exposed to a significant hazardous event in the last 30	LOW	MEDIUM	HIGH	Check	
	years? (If no, go to 2.3.2)	LOW	WIEDICWI	mon		
1	Did the hospital suffer any significant structural damage?		1		YES	
2	Did the hospital suffer any minor structural damage?		1		YES	
3	Was the hospital repaired using appropriate/current standards?		1		YES	
	2.3.2 Safety due to architectural configuration			Degree		
	·	LOW	MEDIUM	HIGH	Check	
4	Separation joints (existence and condition)		1		YES	
5	Proximity of buildings (hammering, funneling of wind, fire, etc.)			1	YES	
6	Plan irregularities		1		YES	
7	Elevation irregularities		1		YES	
8	Road access		1		YES	
9	External circulation within the complex			1	YES	
0	Internal circulation (including stairs and elevators)			1	YES	
1	Remodeling and adaptation of buildings		1		YES	
	2.3.3 Safety due to structural systems and building materials used	Safety Degree				
	2.5.5 Safety due to structural systems and building materials used	LOW	MEDIUM	HIGH	Check	
2	Soil-structure interaction		1		YES	
3	Foundations			1	YES	
4	Short columns		1		YES	
5	Spacing of columns (structural redundancy)		1		YES	
6	Beam column relationship		1		YES	
7	Beam configuration		1		YES	
8	Shear walls		1		YES	
9	Influence of partitions on structures		1		YES	
20	"Soft storeys" (different heights between floors or free space from the					
20	ground floor)		1		YES	
21	Structural irregularities		1		YES	
22	Mass concentration by location: water tanks or heavy equipment on the					
	upper floors of the building			1	YES	
23	Construction materials			1	YES	
	TOTAL STRUCTURAL	0	17	6	23	



	2.2.1 TUPPER (*		G 6 4	D		
	3.3.1 Utilities (installations) Electric system	Safety Degree LOW MEDIUM HIGH Chec.				
	Electric system	LOW	Check			
1	Standby generator can supply 100% of demand and is tested regularly.			1	YES	
2	Redundancy in municipal power supply.	1		-	YES	
3	Systems have a control panel with an overload switch and duly protected					
3	electrical wiring.			1	YES	
4	Lighting system in key hospital locations.			1	YES	
5	Underground external electrical distribution system within the perimeter			1	VEC	
	of the hospital site. Telecommunication system			1	YES	
_	·	1	1		NI- America	
6 7	Condition of antenna and supporting frames. Check paging system and Internet connections/cables.				No Answer	
	Check anchorage of equipment and support of cables.	1			YES	
8	• • • • • • • • • • • • • • • • • • • •	1			IES	
9	Underground communication systems within perimeter of the hospital.				No Answer	
	Water storage system					
10	Onsite water storage capacity for 3 days (2,000 liters per bed per day)			1	VEC	
11	Outdoor tanks are in a secure and protected location.			1	YES YES	
12	Underground storage with protection.			1	No Answer	
	Redundant main water supply.				No Answer	
	Safety of valves and couplings.			1	YES	
• •	Fuel storage (Gas, gasoline or diesel):				125	
15	Capacity of fuel tanks for at least 5 days.	1		1	YES	
16	Bolted and well protected permanent tanks.			1	YES	
17	Location of gas cylinder storage.		1	-	YES	
18	Secure storage for cylinders.		1		YES	
	Medical gases (oxygen, nitrogen, etc.)					
19	Sufficient storage for at least 15 days.			1	YES	
20	Alternative source for medical gases is available.	1		1	YES	
21	Secure storage for cylinders.			1	YES	
22	Appropriate safety valves			1	YES	
	3.3.2 Heating, ventilation and air-conditioning systems for critical area	as				
23	Adequate duct supports and check for accommodation of movement					
23	where ducts and pipes traverse separation joints.			1	YES	
24	Check couplings and water pipes for potential leaks.			1	YES	
25	Check safety valves and medical gas pipes for potential leaks.			1	YES	
26	Check anchorage of central heating and/or hot water equipment			1	YES	
27	Check support for tubes, ducts and cables			1	YES	
28	Check anchorage of central air conditioning equipment	<u> </u>		1	YES	
• -	3.3.3 Furniture and fixed and movable office equipment (Includes com	puters,	printers et	c)		
29	Check anchorage of shelving and restraints for contents				No Answer	
30	Office furniture				No Answer	
31	Computer and printing equipment fixed				No Answer	
22	3.3.4 Medical equipment used for diagnosis and treatment	1		1	VEC	
32	Fixed medical equipment in the Operating Room			1	YES	

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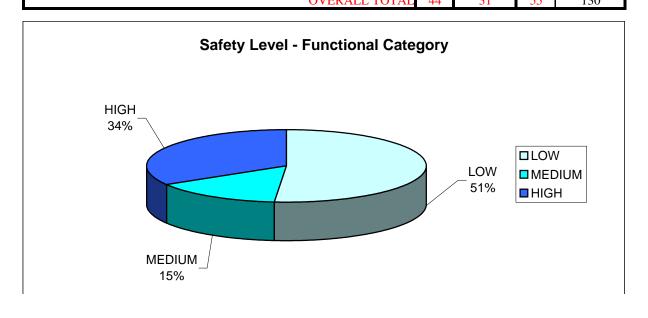
33	Fixed medical equipment of Diagnostic Imaging			1	YES	
34	Fixed medical equipment (others)	1			YES	
35	Movable medical equipment is bolted to walls/floors (e.g. beds, cots, incubators, dialysis equipments, monitors, stretchers, wheelchairs)			1	YES	
	3.3.5 Architectural elements					
36	Check envelope/perimeter of building including external doors, windows and eaves' soffits, for water ingress/leakage and flying debris.				No Answer	
37	Check lamination or poly-carbonation glazing of partitions, windows and doors.				No Answer	
38	Check anchorage of cornices, false ceilings, lighting fixtures.				No Answer	
39	Check anchorage of external finish.	·			No Answer	
40	Check anchorage of appendage.				No Answer	
41	Check stability of partitions.				No Answer	Each Question wei
	TOTAL NON-STRUCTURAL	3	2	22	27	1.11%

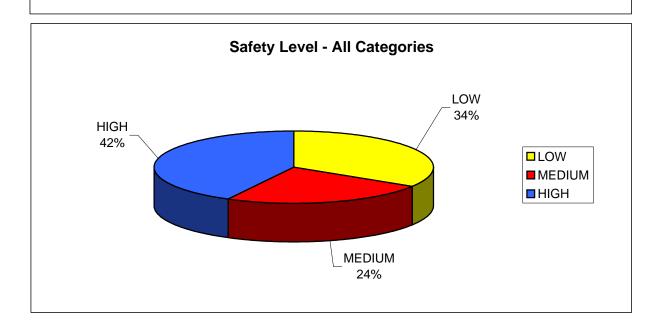


	4.3.1 Internal organization for actions during serious disasters	Level of Organization					
	4.5.1 Internal of gamzation for actions during serious disasters	LOW	MEDIUM	HIGH	Check		
1	Task force to respond to major emergencies and disasters.			1	YES		
2	The committee is multidisciplinary.			1	YES		
3	Each member has specific responsibilities assigned.			1	YES		
4	The hospital has established and staffed a command center.			1	YES		
5	The center is located in a safe and secure location.			1	YES		
6	The center's information systems and computers are operational and have						
O	Internet access.				YES		
7	Internal and external communication systems work properly.	1			YES		
8	Alternate communication system is in place.	1			YES		
9	Center is properly furnished and equipped.	1			YES		
10	Updated telephone contact lists are available.	1			YES		
11	"Action Cards" are available.			1	YES		
	4.3.2 Operational plan for internal/external serious hazardous events		Implemen	tation I	Level		
			MEDIUM	HIGH	Check		
12	Strengthening of the institution's essential services.		1		YES		

13	Procedures for plan's activation and de-activation.		1		YES
14	Emergency administrative procedures.		1		YES
15	Emergency financial resources budgeted and guaranteed.	1	1		YES
16	Space identified for emergency uses including bed capacity.	-		1	YES
17	Procedures to implement emergency admissions policies.	1		-	YES
18	Procedures to imprehent emergency room and other critical areas.	•	1		YES
19	Procedures for securing medical records.	1	1		YES
20	Regular inspections by the fire authorities.	1			YES
21	Regular inspections by the national emergency authorities.	1			YES
22	Procedures for epidemiological surveillance (in hospital).	-		1	YES
	Procedures for temporary body storage sites and forensic medicine			1	TLS
23	locations.			1	YES
24	Procedures for management of hazardous or infectious materials.	1		-	YES
25	Transportation and logistics support.			1	YES
26	Dietary rations for staff during emergency situations.			1	YES
27	Emergency accommodations for staff.		1		YES
28	Contingency plan covers measures to ensure well being of staff.			1	YES
29	Operational plan is linked to community emergency plan.	1			YES
20	Plan includes measures to keep track of admitted patients and those				
30	referred to other hospitals.			1	YES
31	Plan includes steps to hire additional personnel during disasters.			1	YES
	4.3.3 Specific guidelines and procedures for contingency cases		Implemen	tation I	evel
	including triage, stabilization and treatment.	LOW	MEDIUM		Check
32	Casualty management during geological disasters.	1			YES
33	Casualty management during hydrometeorological disasters.	1			YES
34	Casualty management during public health emergencies.	1			YES
35	Casualty management during social unrest or terrorism.	1			YES
36	Casualty management during chemical or technological disasters.	1			YES
37	Management of burn victims.	1			YES
38	Management and care of ionizing radiation victims.	1			YES
39	Casualty management of infectious agents in epidemics and/or potential				
39	pandemic.	1			YES
40	Psychological support for disaster victims and hospital staff.	1			YES
41					
41	Space equipment and procedures for decontamination and disinfection.	1			YES
42	Emergency Resuscitation Room.		1		YES
	4.3.4 Guidelines and manuals for planned preventive maintenance		Available		olied
	and repair of vital services	LOW	MEDIUM	HIGH	Check
43	Electric power supply and auxiliary energy plants.	1			YES
44	Potable water supply.	1			YES
45	Fuel reserves.		1		YES
46	Medical gases.			1	YES
47	Regular and alternate communication systems.	1			YES
48	Common radio frequency with response agencies (police, fire).	1			YES
49	Buildings, equipment and grounds.		1		YES
50	Sewerage systems.	1			YES
51	Waste disposal.			1	YES
52	System maintenance against fires (extinguishers, sprinkler and alarm				
32	systems).	1			YES
	4.3.5 Emergency medicines, medical supplies and equipment		Availabil		
~~		LOW	MEDIUM	_	Check
53	Essential drugs are inventoried and updated regularly.			1	YES

54	Medical supplies/materials are inventoried and updated regularly.			1	YES	٦			
55	Basic equipment for handling emergencies.		1		YES	١			
56	Medical gases.			1	YES	-			
57	Mechanical ventilation equipment (volumetric type).		1		YES				
58	Electro-medical equipment.			1	YES				
59	Life-support equipment.			1	YES				
	Protective equipment for epidemics (disposable materials).			1	YES	_		1	1
61	Cardiac arrest trolley (crash cart).			1	YES				
62	Triage tags and other mass casualty supplies.			1	YES				
	4.3.6 Staff education and training programs for emergency and		Developn	nent Deg	gree	_			
	disaster management	LOW	MEDIUM	HIGH	Check	Ī			
63	Education and training programs are provided regularly.	1			YES	_			
64	Programs are accredited by the appropriate entities.	1			YES				
65	Simulations and drills (at least once a year).	1			YES			1]
66	Staff is trained in using fire response systems.	1			YES				
67	Team development trainings.	1			YES				
68	Emergency maintenance teams for medical gases and utilities.	1			YES				
69	Fire fighting teams	1			YES				
70	Security teams.	1			YES				
71	Evacuation support team.	1			YES				
72	Basic life-support teams.	1			YES				
	Psycho-social support team.	1			YES				
71	Personnel trained in advanced courses (cardiac, trauma, pediatric and pre-								
/4	hospital life support courses).	1			YES				
	4.3.7 Security and Safety Plan		Implement		egree				
	4.5.7 Security and Saicty Flan	LOW	MEDIUM	HIGH	Check				
75	Staff identification (including for emergency teams) procedures are in								1
13	place.	1			YES				
	Building's surveillance and security systems.		1		YES				
	Procedures for public and press communications.			1	YES				
	Specific action plan in case of a fire.			1	YES				
	Hospital evacuation routes are marked, lighted and unobstructed.		1		YES				
80	Assembly area is safe and previously identified.			1	YES		Е	Each (Each Ques
	TOTAL FUNCTIONAL	41	12	27	80				0.3
	OVERALL TOTAL	44	31	55	130	1			





Step 2: Before moving on to the next step in the Safety Index (black tab found below), ensure that there are no "ERROR" messages in the Check column. In case an "ERROR" message is shown, refer back to that specific question and answer it according to Step 1. Charts and formulas will not calculate

Step 3: Tabulate responses according to category.

Category	Unlike func	•		ely to action	Highly likely to function		Total
Structural	0	0%	17	74%	6	26%	23
Non-structural	3	11%	2	7%	22	81%	27
Functional	41	51%	12	15%	27	34%	80

Step 4: Input vertical weights to be used. Below are figures agreed upon by DIMAG.

Vertical Weight								
Structural	0.5							
Non-structural	0.3							
Functional	0.2							

Category	Unlike func	•		ely to action	Highly likely to function		Total
Structural	0	0%	17	37%	6	13%	50%
Non-structural	3	3%	2	2%	22	24%	30%
Functional	41	10%	12	3%	27	7%	20%
Total		14%		42%		44%	100%

Step 5: Input horizontal weights to be used. Below are figures agreed upon by DIMAG.

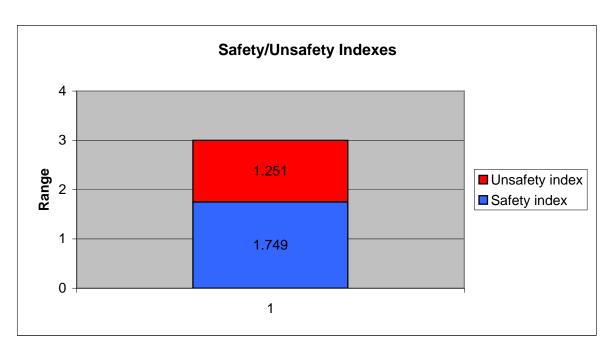
Horizontal weight		Safety factors	
Unlikely to function	1 -	0.136	Lower horizontal weight fac
Likely to function	2	0.844	
Highly likely to function	4 _	1.770	Upper horizontal factor
Overall safety I	Factor	2.749	

Step 6: Calculate range to be used in safety/unsafety index formulas (see comment)

Range = Upper horizontal weight factor - lower horizontal factor = 4 - 1 = 3

Step 7: Calculate safety index and unsafety index.

Safety index	1.749	58%		
Unsafety index	1.251	42%		



Step 8: Compare safety index with base recommendations.

Safety index	Category Type	What should be done?	
0 – 0.35	Category C	Urgent measures are required immediately, as the health facility's current safety levels are not sufficient to protect patients and staff during and after a disaster event.	
0.36 – 0.65	Category B	Necessary measures are required at some point, as the health facility's current safety levels can potentially put at risk patients and staff during and after a disaster event.	
0.66 – 1 Category A leve		Preventative measures are suggested at some point, as the health facility's current safety levels can cause acceptable damages, which nevertheless reduce the overall safety level of the installation.	

Health Facility Status Category B

1. NAME OF HOSPITAL: XYZ Hospital

2. CITY: ABC City

3. COUNTRY: DEF Country

4. DATE OF ASSESSMENT: day – month – year

5. NAMES OF ASSESSORS: A N Other and colleague

6. ASSESSMENT RATINGS AND COMMENTS:

6.1. SUMMARY:

	Low Safety	Medium Safety	High safety
Structural:	0%	74%	28%
Non-structural:	11%	7%	82%
Functional capacity:	51%	15%	34%
Overall:	34%	24%	42%

- **6.2. LOCATION:** Generally the site was identified as vulnerable to geological hazards such as earthquakes, volcanic eruptions, landslides, tsunamis and also to storm surge and waves. Risks from soil properties such as liquefaction, sensitive clays and unstable slopes were also identified.
- **6.3. STRUCTURAL SAFETY:** The structure of the buildings was rated as generally safe particularly in relation to the layout and circulation within and between buildings and the foundations and construction materials.
- **6.4. NON-STRUCTURAL SAFETY:** With the exception of redundancy in the mains water supply, electrical, water and medical gas systems were rated as safe. Anchorage of telecommunication equipment, the location and secure storage of gas cylinders and fixed medical equipment were also identified as requiring measures to improve safety.
- 6.5. FUNCTIONAL CAPACITY: Attention is required to basic aspects of emergency planning including the information and communication systems for the emergency operations centre and to specific aspects of the emergency operations plan particularly procedures to access financial resources and implement emergency admissions policy and securing medical records.

The plan needs to address the management of hazardous materials and be linked with the community. Guidelines for all aspects of mass casualty management need to be developed and also for planned preventive maintenance of essential services.

Major safety concerns were identified in the areas of staff education and training programmes for emergency and disaster management.

7. SAFETY INDEX AND COMMENTS: The overall safety Index for the Hospital was calculated at 0.58 placing the facility in the range 0.36-0.65 as a Category B institution. This indicates that the facility's current safety levels can potentially put patients and staff at risk.

The detailed analysis above indicates that the safety of the institution would be improved significantly by attention to some non-structural but mainly functional aspects. These are addressed in the specific recommendations below.

8. SPECIFIC RECOMMENDATIONS:

- **8.1.** Review the arrangements for the emergency operations centre with particular attention to information and communication systems and furniture and equipment.
- **8.2.** Review and document procedures to access funds in an emergency, an emergency admissions policy and security of medical records.
- **8.3.** Invite regular inspections of the buildings by the fire authorities and implement their recommendations as a matter of priority.
- **8.4.** Review procedures for the management of hazardous or infectious materials.
- **8.5.** Review and update emergency and security plans paying special attention to mass casualty management and the items identified as "Low safety" in the assessment instrument.
- **8.6.** Review procedures for the planned preventive maintenance of essential services and implement new measures as required.
- **8.7.** Provide staff training programmes and test the plans with simulations and drills.