

# **HeBE Major Emergency Planning Project**

## **A Survey of Major Emergency Planning in Health Boards and ERHA**

Oct 2003

## **Background**

In November 1984 the Irish Government issued a Guidance Document on Major Emergency Planning entitled *Emergency Planning: Framework for Co-ordinated Response to Major Emergency* and since then Major Emergency Planning in Ireland has been organised on the basis of the principles and arrangements set out in that Framework. The Framework allocated prime responsibility for Major Emergency Planning to the three statutory emergency bodies, i.e. the Gardaí, the Health Boards and the Local Authorities. The Framework set out common arrangements for planning and responding to Major Emergencies and required each Health Board to prepare a Major Emergency Plan which was co-ordinated with the Plans of the other emergency services in its region.

In September 2001 the Health Board CEOs nominated a small group to advise on a national approach to Major Emergency planning for the Irish health services. The report of that group, entitled “A National Health Services Approach to Major Emergency Planning” and dated March 2002, made a number of recommendations in respect of the Major Emergency Planning (MEP) process.

One of these recommendations was that a Major Emergency Planning Project should be established under the auspices of HeBE. That recommendation was accepted and acted upon and the first meeting of the HeBE Major Emergency Planning project group took place in Dublin on March 20<sup>th</sup>, 2003.

In order to assist the work of the project this survey has been developed, with a view to gathering data on the state of Major Emergency Planning within Health Boards and the ERHA. The intention is that each Health Board and ERHA should complete the survey on a self-assessment basis and return the completed document to the HeBE Major Emergency Planning Project Office. This process complements the assessment of standards for Disaster and Emergency Planning (Environmental Management Standards) under the National Hospitals Accreditation Scheme.

The Framework should also assist Health Boards and ERHA to critically review and assess their own activities in this area, to highlight key weaknesses and deficiencies and to develop quality improvement plans to address any areas of vulnerability. **It should be noted that it is proposed to repeat this survey at appropriate intervals in the future as part of a continuous quality improvement programme for Major Emergency Planning.**

## **The Survey Instrument**

The survey instrument consists of a series of statements against which the organisation assesses its own performance and/or state of preparedness. The survey instrument is divided into five main sections and at the end of each section is a comments box where any extra information can be inserted. Reference to the relevant statement number should

be made when using the comments box. There are three appendices at the end of the Document which are referred to during the course of the survey.

The five main sections of the survey instrument are:

- A. Major Emergency Planning at Board/Authority Level**
- B. Co-Ordination of MEP with the other Emergency Services**
- C. Health Services Co-Ordination within the Board/Authority Area**
- D. Major Emergency Planning in the Acute and General Hospitals\***
- E. General Level of Preparedness of the Health Services in the Board/Authority Area \*\***

\* Please note that a separate copy of Part D of the Survey should be completed for each Acute and General Hospital in the Board/Authority Area

\*\*The individual with responsibility for the survey within each Health Board and ERHA should complete this section only when the remainder of the survey has been completed.

The three appendices are:

**Appendix 1: Hazard Identification\*\*\***

**Appendix 2: Top Tier Seveso Sites**

**Appendix 3: Other Sites with Site Specific Plans**

\*\*\*The Table in this Appendix is based on a similar Table in the document *Assessment Framework for Major Emergency Preparedness (6-5-2003)* issued by the Department of Environment and Local Government.

### **Completion of the Survey**

The person with responsibility for the survey in each Board/Authority should complete Section E, sign it and return completed copies of the survey instrument to Mr P O’Riordan, HeBE Major Emergency Planning Project, St Camillus Hospital, Shelbourne Road, Limerick, not later than Friday 21<sup>st</sup> November 2003.

Any questions related to the completion of the survey should also be addressed to Mr. O’Riordan, Phone 061 483300 or email: poriordan@mwhb.ie.

## A. Major Emergency Planning at Board/Authority Level

- |    |   |                                 |                                |
|----|---|---------------------------------|--------------------------------|
| 1. | The Board/Authority has a Major Emergency Plan which complies with the 1984 Major Emergency Framework document. | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
|    | If this is a Joint Plan with the other local emergency services please indicate here:                           | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
|    | If the Board/Authority has more than one plan, please indicate the number of plans here: .....                  |                                 |                                |
| 2. | The current Plan (version) was issued within the past 3 years.  | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
|    | Please give date when present Plan (version) was issued: .....  |                                 |                                |
| 3. | The Plan includes provision for an Alert Phase.   | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 4. | The Plan lists the persons within the Board/Authority who are authorised to Activate the Plan.                  | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 5. | There are clear procedures in place for the notification of the Activation of the Plan to:                      |                                 |                                |
|    | a) The Ambulance Service  | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
|    | b) All Relevant Acute & General Hospitals   | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
|    | c) Senior Board/Authority Management  | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
|    | d) The Board/Authority Communications Department  | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |

- |     |   |                          |                          |
|-----|---|--------------------------|--------------------------|
|     |   | Yes                      | No                       |
| 6.  | The Plan includes a clear strategy for the distribution of casualties to local (Receiving) Hospitals.   | <input type="checkbox"/> | <input type="checkbox"/> |
|     |   | Yes                      | No                       |
| 7.  | The Plan details the role of senior Board/Authority management in the response (i.e. it makes provision for some form of Crisis Management Team (CMT)). | <input type="checkbox"/> | <input type="checkbox"/> |
|     |   | Yes                      | No                       |
| 8.  | There are clear arrangements during normal office hours for:  |                          |                          |
|     | a) Mobilising relevant senior managers (the CMT)  | <input type="checkbox"/> | <input type="checkbox"/> |
|     |   | Yes                      | No                       |
|     | b) Mobilising their support staff.  | <input type="checkbox"/> | <input type="checkbox"/> |
|     |   | Yes                      | No                       |
| 9.  | There are clear arrangements outside normal office hours for:   |                          |                          |
|     | c) Mobilising relevant senior managers (the CMT)  | <input type="checkbox"/> | <input type="checkbox"/> |
|     |   | Yes                      | No                       |
|     | d) Mobilising their support staff.  | <input type="checkbox"/> | <input type="checkbox"/> |
|     |   | Yes                      | No                       |
| 10. | An exercise (or exercises) has been run for senior management (the CMT) during the past two years   | <input type="checkbox"/> | <input type="checkbox"/> |
|     |   | Yes                      | No                       |
| 11. | There are detailed arrangements in place for the Board/Authority to deal with the media during a Major Emergency.                                       | <input type="checkbox"/> | <input type="checkbox"/> |
|     |   | Yes                      | No                       |
| 12. | It is clear who leads the media response at management level  | <input type="checkbox"/> | <input type="checkbox"/> |
|     | If so please give post of the person involved.  |                          |                          |

.....

13. Responsibility for MEP including the development, maintenance and circulation of the plan has been assigned to a specific senior manager. Yes    No

If so please give post of the person involved.

.....

14. The Board/Authority has a Major Emergency Planning Group, which has met regularly (more than 4 times) during the past year and which organises the process at Board/Authority level. Yes    No

15. The Board/Authority has in place an Emergency Planning Officer Yes    No

If so please indicate here the % of her/his time allocated to MEP: .....

16. The Emergency Planning Officer is provided with adequate resources and has the support of top management. Yes    No

17. The principal hazards (Hazardous substance sites, Airports, Flooding risk locations, etc.) in the Board/Authority area have been identified. Yes    No

Please list the principal hazards identified on the Hazard List in Appendix 2.

18. An assessment has been made of the risks associated with all of the identified hazards. Yes    No

19. The Board/Authority plan addresses each of these hazards. Yes    No

20. Where there are industrial and/or storage installations in the Board/Authority area to which the “Top Tier” requirements of the Seveso 11 Regulations apply the Board/Authority has a site-specific plan in place in respect of each such installation.
- Yes  No

Please give the number of such sites here and detail their names and locations in Appendix 2: .....

21. The Board/Authority has site-specific plans in place in respect of all other high risk facilities in its area, such as airports, major stadia, etc
- Yes  No

Please give the number of such plans here and their names and locations in Appendix 2: .....

22. The Board/Authority MEP process has been audited during the past three years?
- Yes  No

If so please indicate when and by whom the audit was conducted

.....

*Section A Comment Box:*

## B. Co-Ordination of MEP with the Other Emergency Services

1. The 1984 National Framework document on Major Emergency Planning assigned responsibility for inter-service co-ordination of Major Emergency Planning in each area to the local Co-ordinating Group (ie the Local Authority Manager, the Health Board CEO and the Garda Chief Superintendent).

A meeting of this Group has been held within the past year.

Yes No

If the Board/Authority is involved in more than one Co-ordinating Group, please indicate:-

- a) The number of such groups .....
- b) The number of groups which have met within the past year .....

Yes No

2. Under the direction of the Co-ordinating Group(s) the Board/Authority participates with the Gardaí and the Local Authorities in an active Local/Regional Major Emergency Planning Group/s and regular (4 or more) inter-service Major Emergency Planning meetings between the three services have been held at Operational level during the past year, (ie. meetings which would typically involve the Chief Ambulance Officer, the Emergency Planning Officer, the Chief Fire Officer, a Garda Superintendent or Inspector, etc).

If more than one group has met regularly please indicate the number here: .....

3. At these Operational level meetings the following topics have been discussed and significant progress has been achieved:

- a) Hazard Identification and Risk Assessment

Yes No



- b) Coordination of Planning Yes  No
- c) Dealing with the Media Yes  No
- d) Joint Training Yes  No
- e) Joint Exercises. Yes  No
- f) Decontamination of Casualties Yes  No
4. There are clear arrangements in place for the notification of a Major Emergency between the Board/Authority and
- a) Each local Garda Division in the area Yes  No
- b) Each Local Authority in the area Yes  No
5. The Board/Authority has agreed arrangements in place for inter-agency communication and the co-ordination of activities at the site with:-
- a) Each local Garda Division in the area Yes  No
- b) Each Local Authority in the area. Yes  No
6. Clear arrangements have been agreed with the local Garda Divisions and the Local Authorities on:
- a) The collection, sharing and issue of Casualty Information Yes  No
- b) The Decontamination of Casualties Yes  No

Yes No

7. In the aftermath of a Major Emergency the Off-Site Co-ordinating Group may meet to deal with high level interagency issues. Locations have been identified where meetings of the off-site Co-ordinating Group will take place during a Major Emergency.

Please indicate how many such locations have been identified in the Board/Authority area: .....

8. The Board/Authority has participated during the past two years with the other two emergency services in a series of inter-service Major Emergency Planning

Yes No

- a) Training sessions

No: .....

Yes No

- b) Seminars

No: .....

Please give number in each case

9. The Board/Authority has participated during the past 2 two years with the other two emergency services in a number of:

Yes No

- a) Full Scale inter-service exercises

No: .....

Yes No

- b) Table Top inter-service exercises

No: .....

Please give number in each case.

Yes No

10. The members of Co-ordinating Group(s) have played an active role in these exercises.

11. The quality of the ongoing liaison and cooperation of the Health Board/Authority on Major Emergency Planning issues with the following organizations is best described as:

	Very Good	Good	Fair	Poor
a) An Garda Siochana	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Local Authorities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Relevant Voluntary Organisations (Red Cross, St Johns Ambulance, Order of Malta)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Section B Comment Box :*

### C. Health Services Co-Ordination within the Board/Authority Area

1. In the Board/Authority area sub-plans are in place for the following Services which have been co-ordinated with the Board/Authority Plan and with one another:
- |  |                          |                          |
|--|--------------------------|--------------------------|
|  | Yes                      | No                       |
| a) The Ambulance Service                               | <input type="checkbox"/> | <input type="checkbox"/> |
|  | Yes                      | No                       |
| b) Each Acute and General Hospital                     | <input type="checkbox"/> | <input type="checkbox"/> |
| Give the no of such plans: .....                       |                          |                          |
|  | Yes                      | No                       |
| c) The Primary, Community and Continuing Care Services | <input type="checkbox"/> | <input type="checkbox"/> |
2. The Board/Authority Major Emergency Planning Group has active participation by representatives from:
- |   |                          |                          |
|---|--------------------------|--------------------------|
|   | Yes                      | No                       |
| a) Board/Authority management                           | <input type="checkbox"/> | <input type="checkbox"/> |
|   | Yes                      | No                       |
| b) The Ambulance Service                                | <input type="checkbox"/> | <input type="checkbox"/> |
|   | Yes                      | No                       |
| c) The Acute/General Hospital Service                   | <input type="checkbox"/> | <input type="checkbox"/> |
|   | Yes                      | No                       |
| d) The Primary, Community and Continuing Care Services. | <input type="checkbox"/> | <input type="checkbox"/> |
|   | Yes                      | No                       |
| e) The Department of Public Health                      | <input type="checkbox"/> | <input type="checkbox"/> |
|   | Yes                      | No                       |
| f) The Communications Department                        | <input type="checkbox"/> | <input type="checkbox"/> |

3. There are clear arrangements in place for the activation of the relevant sub-plans and the mobilisation of resources in the event of a Major Emergency for:
- |   |                                 |                                |
|---|---------------------------------|--------------------------------|
|   | Yes                             | No                             |
| a) The Ambulance Service                                | <input type="checkbox"/>        | <input type="checkbox"/>       |
| b) Each Acute and General Hospital                      | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| c) The Primary, Community and Continuing Care Services. | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
- 
4. Ambulance Control will play a vital role in the activation and coordination of the Board/Authority response to a Major Emergency. There are clear arrangements and protocols in place in Ambulance Control for Major Emergencies.
- |  |                                 |                                |
|--|---------------------------------|--------------------------------|
|  | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
|--|---------------------------------|--------------------------------|
- 
5. Training for major Emergencies has been provided for the all relevant staff members in Ambulance Control.
- |  |                                 |                                |
|--|---------------------------------|--------------------------------|
|  | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
|--|---------------------------------|--------------------------------|
- 
6. Ambulance Control arrangements and protocols for Major Emergencies have been exercised and tested within the past six months.
- |  |                                 |                                |
|--|---------------------------------|--------------------------------|
|  | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
|--|---------------------------------|--------------------------------|
- 
7. The 1984 National Framework document on MEP designated the Health Board Controller of Operations as the manager of all health services at the site of a Major Emergency. The Board/Authority Controller of Operations, and alternates, have been clearly designated.
- |  |                                 |                                |
|--|---------------------------------|--------------------------------|
|  | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
|--|---------------------------------|--------------------------------|
- 
8. Training has been provided for the designated Controller of Operations.
- |  |                                 |                                |
|--|---------------------------------|--------------------------------|
|  | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
|--|---------------------------------|--------------------------------|

Please indicate here the form of training  
eg MIMMS

.....

9. Ambulance Service Officers will play a key role at the site of a Major Emergency in areas such as Communications, Casualty Clearing, Ambulance Loading and Safety. All relevant officers are aware of the roles which they may be expected to play.
- Yes  No
10. Training has been provided for all Ambulance Service Officers who may have a key role to play at the site of a Major Emergency
- Yes  No
11. The Board/Authority has clear arrangements in place for:
- a) The despatch of ambulances to the site
- Yes  No
- b) The organisation of health services at the site
- Yes  No
- c) The Triage of casualties at the site
- Yes  No
- d) The treatment of casualties at the site
- Yes  No
- e) The movement of casualties from the site.
- Yes  No
12. The following arrangements have been exercised and tested within the last two years.
- a) The despatch of ambulances to the site
- Yes  No
- b) The organisation of health services at the site
- Yes  No
- c) The Triage of casualties at the site
- Yes  No
- d) The treatment of casualties at the site
- Yes  No
- e) The movement of casualties from the site.
- Yes  No

13. The Board/Authority has clear arrangements in place for:
- |  |                          |                          |
|--|--------------------------|--------------------------|
| a) The mobilisation of the Site Medical Officer                | Yes                      | No                       |
|  | <input type="checkbox"/> | <input type="checkbox"/> |
| b) The mobilisation of the Site Medical Team                   | Yes                      | No                       |
|  | <input type="checkbox"/> | <input type="checkbox"/> |
| c) Their transport to the Major Emergency site.                | Yes                      | No                       |
|  | <input type="checkbox"/> | <input type="checkbox"/> |
| d) Providing them with appropriate PPE and training in its use | Yes                      | No                       |
|  | <input type="checkbox"/> | <input type="checkbox"/> |
14. The following arrangements have been exercised and tested within the last two years.
- |   |                          |                          |
|---|--------------------------|--------------------------|
| c) The mobilisation of the Site Medical Officer | Yes                      | No                       |
|   | <input type="checkbox"/> | <input type="checkbox"/> |
| d) The mobilisation of the Site Medical Team    | Yes                      | No                       |
|   | <input type="checkbox"/> | <input type="checkbox"/> |
| c) Their transport to the Major Emergency site. | Yes                      | No                       |
|   | <input type="checkbox"/> | <input type="checkbox"/> |
| e) Their use of appropriate PPE                 | Yes                      | No                       |
|   | <input type="checkbox"/> | <input type="checkbox"/> |
15. There is a clear understanding of the strategy for the allocation of casualties from the site to different Hospitals by:
- |  |                          |                          |
|--|--------------------------|--------------------------|
| a) The designated Site Medical Officers    | Yes                      | No                       |
|  | <input type="checkbox"/> | <input type="checkbox"/> |
| b) The designated Controller of Operations | Yes                      | No                       |
|  | <input type="checkbox"/> | <input type="checkbox"/> |
16. The Board/Authority has in place the following equipment,

which is robust and fit for its purpose.

- |  |                          |                          |
|--|--------------------------|--------------------------|
|  | Yes                      | No                       |
| b) A Board/Authority wide radio communication infrastructure   | <input type="checkbox"/> | <input type="checkbox"/> |
|  | Yes                      | No                       |
| b) A Mobile Control Vehicle  | <input type="checkbox"/> | <input type="checkbox"/> |
|  | Yes                      | No                       |
| c) Dedicated Major Emergency response equipment<br>eg. Mobile lights, generators, stretchers               | <input type="checkbox"/> | <input type="checkbox"/> |
|  | Yes                      | No                       |
| d) Decontamination Unit(s)   | <input type="checkbox"/> | <input type="checkbox"/> |
|  | Yes                      | No                       |
| e) Appropriate Personal Protective Equipment for all staff who<br>may have to work in hazardous conditions | <input type="checkbox"/> | <input type="checkbox"/> |

17. The use of the following equipment by staff who have received appropriate training in its use is regularly exercised and tested.

- |  |                          |                          |
|--|--------------------------|--------------------------|
|  | Yes                      | No                       |
| c) A Board/Authority wide radio communication infrastructure   | <input type="checkbox"/> | <input type="checkbox"/> |
|  | Yes                      | No                       |
| c) A Mobile Control Vehicle  | <input type="checkbox"/> | <input type="checkbox"/> |
|  | Yes                      | No                       |
| c) Dedicated Major Emergency response equipment<br>eg. Mobile lights, generators, stretchers               | <input type="checkbox"/> | <input type="checkbox"/> |
|  | Yes                      | No                       |
| d) Decontamination Unit(s)   | <input type="checkbox"/> | <input type="checkbox"/> |
|  | Yes                      | No                       |
| e) Appropriate Personal Protective Equipment for all staff who<br>may have to work in hazardous conditions | <input type="checkbox"/> | <input type="checkbox"/> |

18. The Board/Authority has in place procedures and protocols to respond effectively at the site of:-

- |  |                          |                          |
|--|--------------------------|--------------------------|
|  | Yes                      | No                       |
| b) A Major Casualty Incident eg. a plane crash | <input type="checkbox"/> | <input type="checkbox"/> |
|  | Yes                      | No                       |



- c) A Major Chemical Incident
- Yes    No
- d) A Major Bio-Terrorist/Biological Type Incident
- Yes    No
- e) A Major Nuclear or Radiological Incident
- Yes    No
- f) A Major Dispersed Incident eg. Flooding.

19. The Board/Authority has in place appropriate numbers of staff from all of the key disciplines with the requisite awareness, skills and equipment to respond effectively at the site of:-

- a) A Major Casualty Incident eg. a plane crash
- Yes    No
- b) A Major Chemical Incident
- Yes    No
- c) A Major Bio-Terrorist/Biological Type Incident
- Yes    No
- d) A Major Nuclear or Radiological Incident
- Yes    No
- e) A Major Dispersed Incident eg. Flooding.

20. There are clear arrangements in place to support employees who may be affected by stress (ie Critical Incident Stress - CIS) arising from their involvement with the incident.

Please indicate briefly how this is to be organized and who will take a lead role.

.....

.....

.....

21. The arrangements in place to support employees who may be affected by stress have been exercised and tested within the last two years. Yes No
22. The roles of the following health related Voluntary Organisations during a Major Emergency been agreed with them and that fact is reflected in the Board/Authority Plan.
- a) Red Cross Yes No
- b) St Johns Ambulance Yes No
- c) Order of Malta Yes No
23. Each of the local health related Voluntary Organisations has been included in an exercise (or exercises) within the past three years. Yes No
24. The role of General Practitioners during a Major Emergency has been defined and is reflected in the Board/Authority Plan. Yes No
25. There are clearly defined communication protocols and mechanisms in place for the transfer of vital information between key players in the Board/Authority in the event of a Major Emergency. Yes No
25. These communication protocols and mechanisms have been exercised and tested within the last two years. Yes No

*Section C Comment Box:*

### D. Major Emergency Planning (MEP) in Acute/General Hospitals

<b>Hospital:</b>	<b>No of Adult In-Patient Beds:</b>  (Excluding Day beds & Acute Psychiatric beds)
<b>Survey completed by:</b>	<b>Position:</b>
<b>Contact Details:</b> Ph:  Email:	<b>Date of Survey:</b>

1. There is a Hospital Major Emergency Plan in place, which is co-ordinated with the main Board/Authority plan. Yes No

2. The current Plan (version) was issued within the past 3 years? Yes No

Give the date when present Plan was issued: .....

3. The Plan includes provision for an Alert Phase. Yes No

4. Responsibility for MEP within the hospital has been assigned to a specific senior manager. Yes No

If so please give post of the person involved.

.....

5. There is a Major Emergency Planning Group within the hospital which has met regularly (at least 4 times) during the past year and which organises the process at hospital level. Yes No

6. There are clear and unambiguous protocols in place for:-
- a) The Notification to the hospital of the Activation of the Board/Authority Major Emergency Plan
- Yes No

- b) The Activation of the Hospital Plan
- Yes No

Please indicate how the hospital is notified of the Activation of the Board/Authority Plan: .....

7. These notification protocols have been exercised and tested within the past six months.
- Yes No

Please give date when protocols were last tested.

.....

8. The Plan details the flow of casualties within the hospital, eg from Casualty Reception through Triage, Resuscitation, Stabilisation, Primary Treatment, etc.
- Yes No

9. There are special procedures (ie departmental plans and/or Action Cards) in place for the following key departments:

- a) Emergency (A&E)
- Yes No

- b) Theatre
- Yes No

- c) Pathology
- Yes No

- d) Radiology
- Yes No

e) Sterile Supplies  Yes  No

f) Pharmacy  Yes  No

g) Switchboard  Yes  No

h) Reception  Yes  No

10. There is clear designation of the medical staff who will fill the following critical roles.

a) Site Medical Officer  Yes  No

b) Site Medial Team  Yes  No

c) Hospital Triage Officer  Yes  No

d) Hospital Resuscitation Officer  Yes  No

11. Appropriate awareness/training sessions have been held for staff who will fill the following roles:

e) Site Medical Officer  Yes  No

f) Site Medial Team  Yes  No

g) Hospital Triage Officer  Yes  No

h) Hospital Resuscitation Officer  Yes  No

12. There are clear arrangements in place for:-
- |   |                          |                          |
|---|--------------------------|--------------------------|
|   | Yes                      | No                       |
| a) The freeing up of occupied beds                                      | <input type="checkbox"/> | <input type="checkbox"/> |
|   | Yes                      | No                       |
| b) The movement of existing patients to other areas within the hospital | <input type="checkbox"/> | <input type="checkbox"/> |
|   | Yes                      | No                       |
| c) The transfer or discharge of existing patients                       | <input type="checkbox"/> | <input type="checkbox"/> |
13. There are agreed protocols in place to allow a clinician to transfer or discharge the patients of another clinician during a Major Emergency.
- |  |                          |                          |
|--|--------------------------|--------------------------|
|  | Yes                      | No                       |
|  | <input type="checkbox"/> | <input type="checkbox"/> |
14. There are clear arrangements in place for the collection of information on casualties and the provision of that information to the Gardaí.
- |  |                          |                          |
|--|--------------------------|--------------------------|
|  | Yes                      | No                       |
|  | <input type="checkbox"/> | <input type="checkbox"/> |
15. There are clear arrangements, protocols and equipment in place to deal with the decontamination of casualties who may be contaminated with chemical, biological or radioactive material
- |  |                          |                          |
|--|--------------------------|--------------------------|
|  | Yes                      | No                       |
|  | <input type="checkbox"/> | <input type="checkbox"/> |
16. These arrangements have been exercised and tested within the past two years
- |  |                          |                          |
|--|--------------------------|--------------------------|
|  | Yes                      | No                       |
|  | <input type="checkbox"/> | <input type="checkbox"/> |
17. There are clear arrangements in place for the provision of Support and Counselling to victims.
- |  |                          |                          |
|--|--------------------------|--------------------------|
|  | Yes                      | No                       |
|  | <input type="checkbox"/> | <input type="checkbox"/> |

(Please indicate briefly which departments (eg. Mental Health, Chaplaincy) are to be involved and who will take a lead role.)

.....  
 .....

18. Most Emergency Plans include arrangements for an Emergency Control Team (ECT) which assembles when an emergency occurs and manages the response. The hospital plan includes provision for a hospital ECT.
- Yes No
19. In the event that an Emergency Control Team (ECT) is included in the plan.
- a) There is a dedicated location for its meetings, ie. the Emergency Control Centre (ECC)
- Yes No
- b) There are appropriate support arrangements in place for the Emergency Control Centre such as communications equipment, etc.
- Yes No
20. There are clear arrangements in place to allow the Emergency Control Team to communicate with the following critical Departments within the hospital.
- a) Emergency (A&E)
- Yes No
- b) Theatre
- Yes No
- c) Pathology
- Yes No
- d) Radiology
- Yes No
21. There are clear arrangements in place to allow the Emergency Control Team to communicate with the following key external agencies
- a) The Ambulance Service
- Yes No
- b) The Gardaí
- Yes No



c) Other Hospitals

Yes No

d) Senior Board/Authority management (the CMT)

Yes No

22. Locations have been designated for the following support functions:

a) Minor Injuries Clinic

Yes No

b) Friends and Relatives Waiting Area

Yes No

c) The Media Centre

Yes No

23. Appropriate equipment and protocols are in place in these areas which have been exercised and tested during the past two years:

a) Minor Injuries Clinic

Yes No

b) Friends and Relatives Waiting Area

Yes No

c) The Media Centre

Yes No

24. There are detailed protocols and procedures in place for the hospital to deal with the media during a Major Emergency

Yes No

25. These media protocols and procedures have been exercised and tested within the past two years.

Yes No

26. It is clear who is responsible for the hospital media response during a Major Emergency.

Yes No

Please give the post of the person involved: .....

- |     |   |                                 |                                |
|-----|---|---------------------------------|--------------------------------|
| 27. | The hospital media arrangements are co-ordinated with the Board/Authority Major Emergency media arrangements. | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 28. | Adequate numbers of trained staff have been designated to man:-   |                                 |                                |
|     | a) The Friends and Relatives Waiting area   | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
|     | b) The Media Centre.  | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 29. | There are clear arrangements in place during normal working hours for:  |                                 |                                |
|     | a) calling in extra staff   | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
|     | b) dealing with the extra volume of telephone traffic   | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
|     | c) providing extra Mortuary facilities, if required.  | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
|     | d) providing extra security   | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
|     | e) securing extra clinical and general supplies   | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
|     | f) providing extra technical/engineering support  | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
|     | g) organising extra resources in the general services areas such as Security, Portering, Catering, etc.       | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 30. | There are clear arrangements in place outside of normal working hours for:                                    |                                 |                                |
|     | a) calling in extra staff   | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |

- |   |                          |                          |
|---|--------------------------|--------------------------|
|   | Yes                      | No                       |
| b) dealing with the extra volume of telephone traffic   | <input type="checkbox"/> | <input type="checkbox"/> |
|   | Yes                      | No                       |
| c) providing extra Mortuary facilities, if required   | <input type="checkbox"/> | <input type="checkbox"/> |
|   | Yes                      | No                       |
| d) providing extra security   | <input type="checkbox"/> | <input type="checkbox"/> |
|   | Yes                      | No                       |
| e) securing extra clinical and general supplies   | <input type="checkbox"/> | <input type="checkbox"/> |
|   | Yes                      | No                       |
| f) providing extra technical/engineering support  | <input type="checkbox"/> | <input type="checkbox"/> |
|   | Yes                      | No                       |
| g) organising extra resources in the general services areas such as Security, Portering, Catering, etc. | <input type="checkbox"/> | <input type="checkbox"/> |

31. The following arrangements have been exercised and tested in the past two years:

- |   |                          |                          |
|---|--------------------------|--------------------------|
|   | Yes                      | No                       |
| a) calling in extra staff   | <input type="checkbox"/> | <input type="checkbox"/> |
|   | Yes                      | No                       |
| b) dealing with the extra volume of telephone traffic   | <input type="checkbox"/> | <input type="checkbox"/> |
|   | Yes                      | No                       |
| c) providing extra Mortuary facilities  | <input type="checkbox"/> | <input type="checkbox"/> |
|   | Yes                      | No                       |
| d) providing extra security   | <input type="checkbox"/> | <input type="checkbox"/> |
|   | Yes                      | No                       |
| e) securing extra clinical and general supplies   | <input type="checkbox"/> | <input type="checkbox"/> |
|   | Yes                      | No                       |
| f) providing extra technical/engineering support  | <input type="checkbox"/> | <input type="checkbox"/> |
|   | Yes                      | No                       |
| g) organising extra resources in the general services areas such as Security, Portering, Catering, etc. | <input type="checkbox"/> | <input type="checkbox"/> |

32. Action Cards have been prepared and distributed and appropriate awareness and training sessions have been held for the following categories of staff:

- |                                |                                 |                                |
|--------------------------------|---------------------------------|--------------------------------|
| a) Consultants                 | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| b) NCHDs                       | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| c) Paramedical                 | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| d) Nurses                      | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| e) Management & Administration | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| f) General Services            | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |

Please indicate here the approximate number of Action Cards currently in use in the Hospital: .....

33.	There are clear arrangements in place to support staff members who may be affected by stress (ie Critical Incident Stress - CIS) arising from their involvement with the incident.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
-----	--	---------------------------------	--------------------------------

Please indicate briefly how this is to be organized and who will take a lead role.

.....

.....

.....

34.	There are clear arrangements and protocols in place for contacting, briefing and working with the Board/Authority Primary, Community and Continuing Care Services, including the Public Health Department and the Mental Health Services.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
-----	---	---------------------------------	--------------------------------

35. There are clear arrangements in place for the management of an emergency which occurs within the hospital, such as a fire, explosion, contamination, etc. Yes  No
36. These arrangements have been exercised and tested within the past two years Yes  No
37. Awareness sessions on the Hospital Major Emergency Plan are included in the induction process for all staff. Yes  No
38. Based on the information collected as part of this survey and other relevant knowledge the level of preparedness of this Hospital to deal with casualties from the following types of Major Emergency is best described as:
- |   | Well<br>Prepared         | Mainly<br>Prepared       | Partially<br>Prepared    | Not<br>Prepared          |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| a) A Mass Casualty Incident eg. a plane crash     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b) A Major Chemical Incident                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c) A Major Bio-Terrorist/Biological Type Incident | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d) A Major Nuclear or Radiological Incident       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e) A Major Dispersed Incident eg. Flooding.       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Section D Comment Box:*

A large, empty rectangular box with a thin black border, intended for providing comments on Section D. The box occupies most of the page below the header.

## E. General Level of Preparedness of the Health Services in the Board/Authority Area

**Health Board/Authority** .....

1. Based on the information collected as part of this survey and other relevant knowledge, the level of preparedness of the health services in this Health Board/Authority area to respond to each of the following types of Major Emergency is best described as :-

	Well Prepared	Mainly Prepared	Partially Prepared	Not Prepared
a) A Major Casualty Incident eg. a plane crash	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) A Major Chemical Incident	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) A Major Bio-Terrorist/Biological Type Incident	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) A Major Nuclear or Radiological Incident	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) A Major Dispersed Incident eg. Flooding.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Based on the above assessment, the main areas which need to be addressed by the health services in this Board/Authority area, so as to increase their level of preparedness to deal with possible Major Emergencies, are listed here in order of priority.

i) .....

.....

ii) .....  
.....

iii) .....  
.....

iv) .....  
.....

v) .....  
.....

**Survey Completed by:** ..... **Date:** .....

**Title:** ..... **Phone:** .....

*Section E Comment Box:*



### Appendix 1: Hazard Identification\*

Principal Hazard Types Identified		Tick	List Any Exceptional Individual Hazards
Transportation	Rail		
	Road		
	Aviation		
	Shipping/Marine		
	Tunnel		
Natural Hazards	Blizzards, storms		
	Flooding		
Fire, Explosion			
Industrial	<i>Seveso II</i>		<i>(ref Appendix 2)</i>
	Other Industrial		
Hazardous Materials	Storage		
	Transport		
	Biohazards		
	Radiological		
Nuclear			
Crowds			
Water Supply			
Other – Please specify:			

\*This Table is based on a similar Table in the *Assessment Framework for Major Emergency Preparedness (6-5-2003)* issued by the Department of Environment and Local Government.

### Appendix 2: Top Tier Seveso Sites in the Board/Authority Area

Facility	Address	OSEP*

\*Please indicate with a tick if the Board/Authority has an Off Site Emergency Plan in Place (OSEP)

### Appendix 3: Other Sites with Site Specific Plans

Site	Address