



HOSPITALS SAFE FROM DISASTERS



Making Hospitals Safe from Disasters: The New Normal

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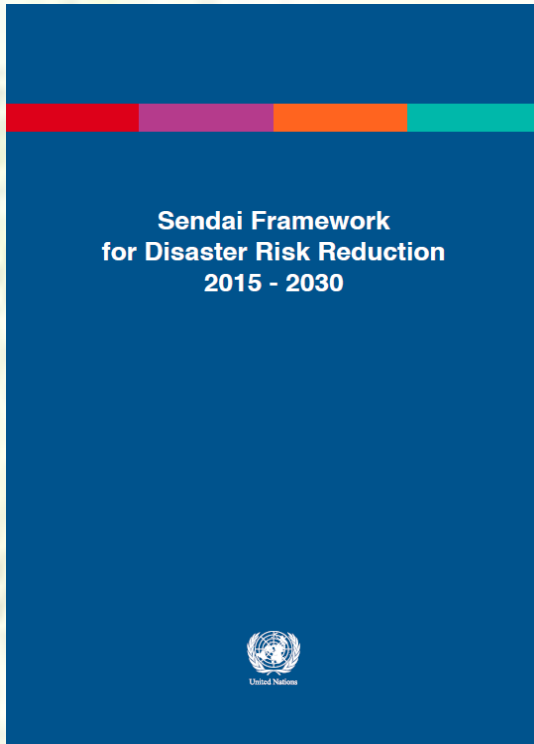
Outline

- “ Why disaster risk reduction in hospitals?
- “ What are components of a Safe Hospital?
- “ What are roles of hospitals in disaster risk reduction?

Background

- “ Context of disasters in light of normal
- “ Important roles of hospitals
- “ Value of disaster risk reduction in hospitals

The New Global DRR Framework



Substantial reduction of disaster risk and losses in lives, livelihoods and HEALTH and in the economic, physical, social, cultural and environmental assets of persons, businesses, communities and countries.

Sendai Framework and Safe Hospitals

- “ To strengthen disaster resilient public and private investments, through structural, non-structural and functional disaster risk prevention and reduction measures in critical facilities in particular schools, hospitals, and physical infrastructures..
- “ To promote resilience of new and existing critical infrastructures including hospitals to ensure that they remain safe, effective and operational during and after disasters in order to provide saving and essential services.

Disaster Risks to Hospitals: Philippine Experience



BRTTH, Bicol
TY Reming, 2006



ARMMC, Marikina
TS Ondoy, 2009



UERMMMC, Quezon
City
Habagat, 2010



Eastern Visayas
Regional Medical
Center
Tacloban, Leyte
Typhoon Yolanda
2013



Cateel District Hospital,
Davao Oriental
TY Pablo,
2012



Celestino Gallares Memorial Hospital
Bohol
Central Visayas Earthquake
2013



Zamboanga City Medical Center
Zamboanga Siege
2013

EARTHQUAKE CENTERED IN SAGBAYAN, BOHOL (Oct. 15, 2013)



IMPACT

- ❑ Affected 2 regions, 6 provinces, 6 cities, 60 municipalities, 1,527 barangays, 671,103 families, 3,221,248 individuals
- ❑ Damaged 211 health facilities
- ❑ 68,902 houses, 41 bridges, 18 roads were damaged
- ❑ 222 deaths and 975 injured



ACTIONS TAKEN

- ❑ A total of 18 medical teams (117 personnel), 14 technical teams (66 personnel) and 10 composite teams (88 personnel) were deployed in 20 municipalities affected
- ❑ A total of Php 16,343,339.98 worth of assorted drugs and medicines, Reproductive Health kits, tents, WASH materials, IEC materials were provided to CHD VII, VSMMC, GCGMH
- ❑ Activated SPEED in 86 facilities in Region VII
- ❑ Surveillance of and prevention of possible outbreak of diseases
- ❑ Provision of vaccines and prophylaxis medicines (e.g., Doxycycline for leptospirosis)
- ❑ Provided Mental health and psychosocial support
- ❑ Provided WASH Services
- ❑ Provided Nutrition Services

TYPHOON "YOLANDA" (Nov. 8, 2013)



IMPACT

- ❑ Affected 7 regions, 22 provinces, 73 municipalities, 33 cities, 26,675 families, 125,604 persons
- ❑ 6,134 deaths and 28,981 injured
- ❑ 819 damaged health facilities in

ACTIONS TAKEN

- ❑ A total of Php 221,338,277.73 worth of logistics augmented to all CHDs affected
- ❑ A total of 278 teams/ 2,876 personnel (DOH teams, local teams, foreign teams) were deployed to Region VIII
- ❑ Augmentation of manpower at the OPCEN, Hospitals and Local Health Offices
- ❑ Deployed START team to CHD VIII to provide technical assistance to the Operation Center as well as to intensify SPEED in all provinces of Leyte and Samar.
- ❑ Surveillance of and prevention of possible outbreak of diseases
- ❑ Provision of vaccines and prophylaxis medicines (e.g., Doxycycline for leptospirosis)
- ❑ Provided Mental health and psychosocial support
- ❑ Provided WASH Services
- ❑ Provided Nutrition Services

Important roles of hospitals

- “ Delivery of health services
 - . Receiving end of victims
 - . Responders to emergencies/disasters
 - . Host to laboratories, ancillary services
 - . Public health functions
- “ Symbol of social progress
- “ Prerequisite for economic stability

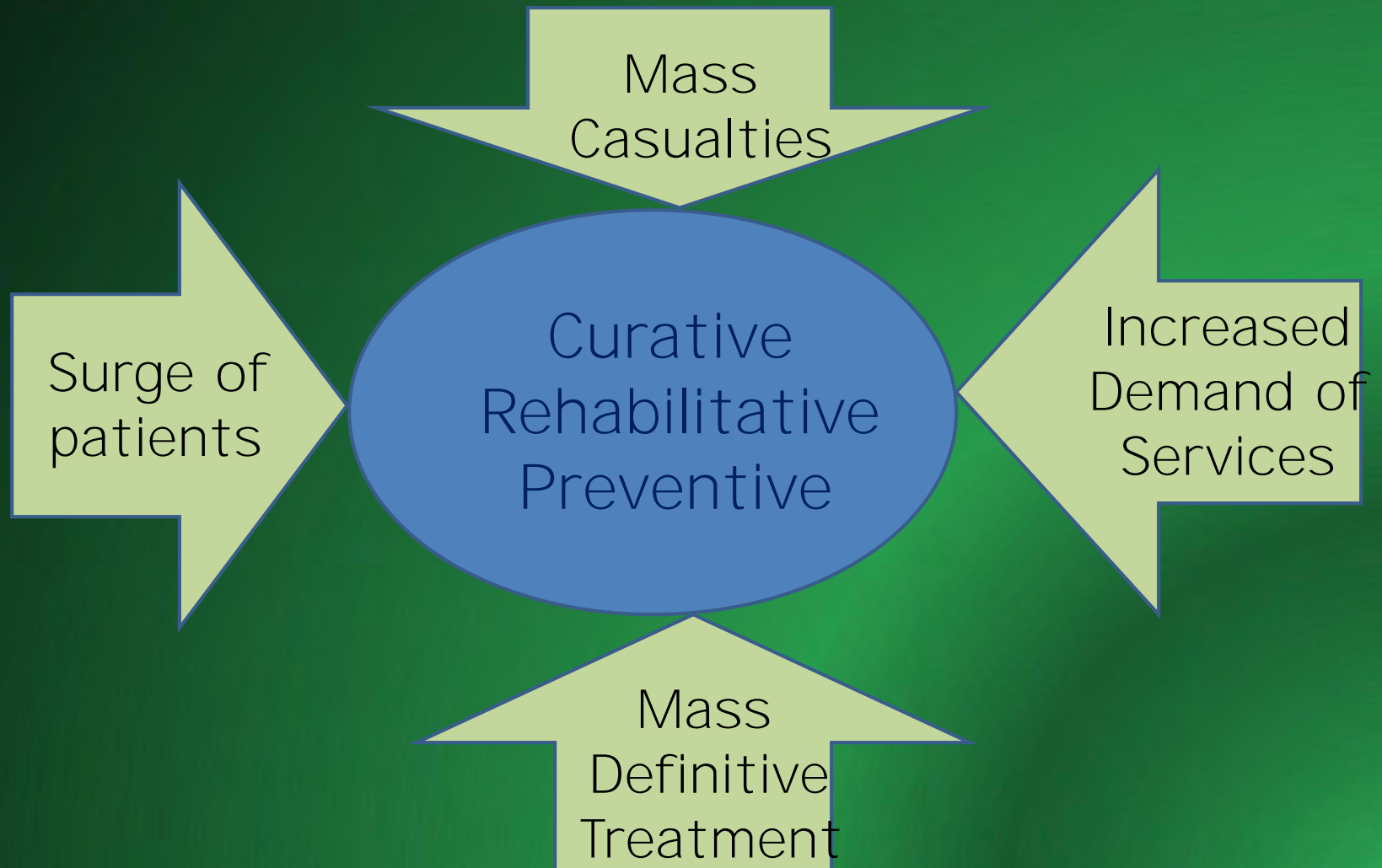
Value of DRR in hospitals

- “ Directly translates to lives saved and morbidities prevented the health imperative
- “ Responds to community and social concern on burden of disaster the social imperative
- “ Hospital resilience contributes to financial viability and lucrativeness of business and impacts on reputation the economic imperative

Safe Hospitals

- “ Safe Hospitals concepts
- “ Components of Hospital Disaster Preparedness
- “ Surge Capacity

Factors affecting hospital services in emergencies and disasters



Safe Hospitals Concepts

Hospitals Safe from Disasters

REDUCE RISKS

PROTECT FACILITIES

SAVE LIVES



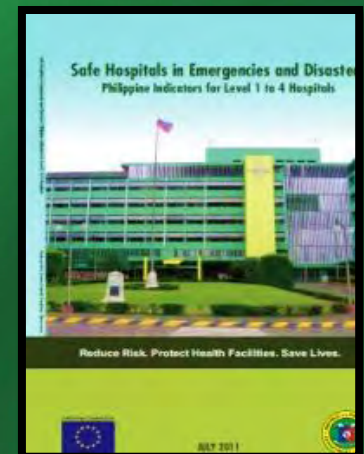
STRUCTURAL

NON-
STRUCTURAL

FUNCTIONAL

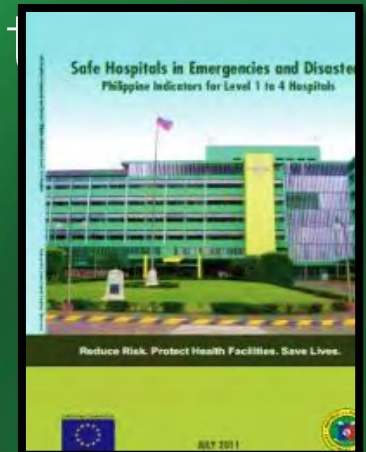
Structural Parts of Safe Hospital

- “ Those that resist gravity, earthquakes, wind and other types of loads
- “ Loadbearing components that make a hospital stand
- “ Include columns, beams, walls
- “ Product of structural engineers, masons, laborers, and contractors



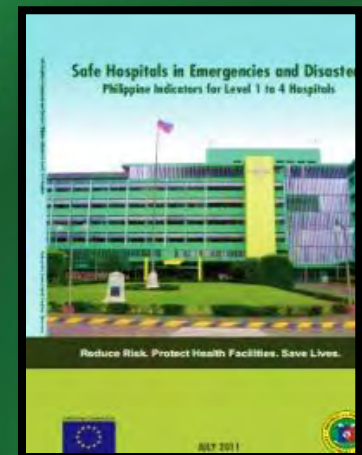
Non-structural Parts of Safe Hospital

- “ All non-load bearing parts including content of the building or attached to the structure
- “ Includes ceilings, windows, equipment, HVAC (heating, ventilating, air conditioning), lights, etc.
- “ Done by architects, interior designers, mechanical and electrical engineers
- “ Purchased by owners after construction



Functional elements of Safe Hospital

- “ Ensures hospital has health services that remain accessible and available when needed most
- “ Capability and capacity to remain functional and operational
- “ Composed of plans, workforce, other resources and systems



Components of Hospital Disaster Preparedness

- £ Responsive hospital policies and plans
- £ Trained health manpower and response teams
- £ Adequate and sufficient logistics and administrative support
- £ Clear command, reporting and information management system
- £ Complete essential hospital services in emergency and disasters

Surge Capacity

£ Staff

£ Space

£ Stuff (logistics)

£ Special provisions

Hospital Roles in DRR

- “ Prevention/Mitigation
- “ Preparedness
- “ Response and Recovery

Prevention/Mitigation

- “ Assessment of hazards and vulnerabilities
- “ Protection of facilities and investments

Preparedness

- “ Planning
- “ Training and Exercises
- “ Stocking and equipping
- “ Networking
- “ Monitoring and evaluation

Response and Recovery

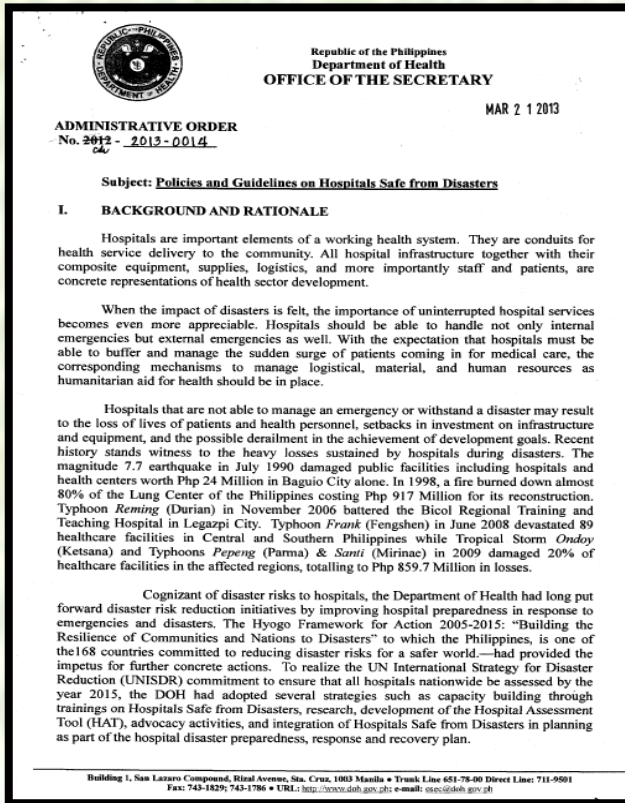
“ Response

- . Delivery of health services
- . Deployment of response teams
- . Coordination

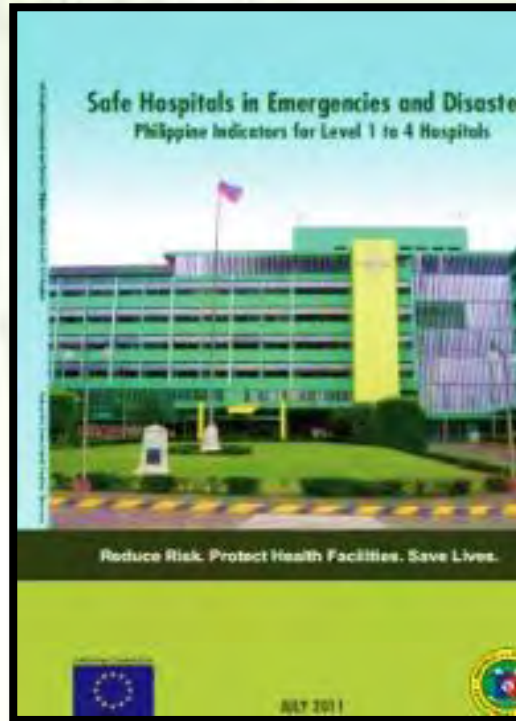
“ Recovery

- . “
- . Continuity of operations

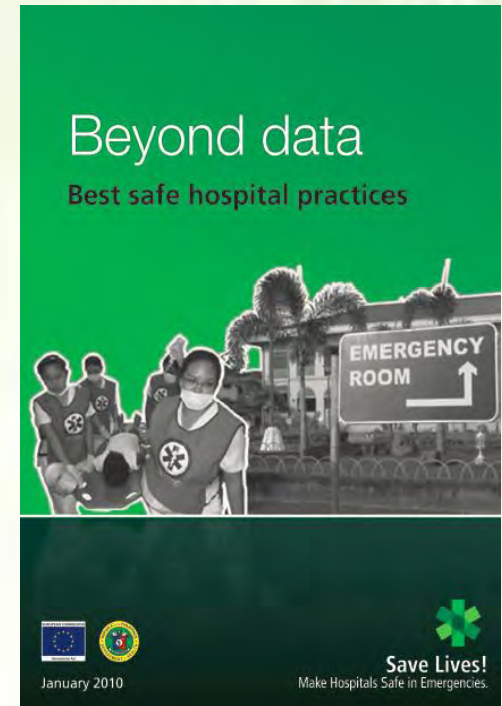
Safe Hospitals Tools



Policy



Assessment Tool



Best Practices

Current Thrusts

- “ Advocacy
- “ Development of standards
- “ Trainings
- “ Assessments
- “ Monitoring and evaluation
- “ Research
- “ Networking with partners



**Our Hospitals, the last building standing
in emergencies and disasters!**