

Health New Zealand
Te Whatu Ora

WAIROA HOSPITAL

**EMERGENCY
CONTROL PLAN**

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Health NZ Hawke's Bay Emergency Control Plan

The primary function of this plan is to outline the actions required of personnel employed within the hospital in the event of a mass casualty event. This plan is also designed to work within the framework of the Major Incident Plan in the event of a declaration of a Civil Defence or Public Health Emergency.

It is the responsibility of the Wairoa management team (Nurse Manager, Clinical Lead and Hospital Manager) to ensure that all staff are familiar with the content of this plan and are competent to carry out the duties outlined.

The contents of this plan are to be followed as closely as possible but appropriate discretion must also be employed where no specific direction is laid down.

EMERGENCY CONTROL PLAN WAIROA HOSPITAL

Multiple Casualties

arising from localised incident

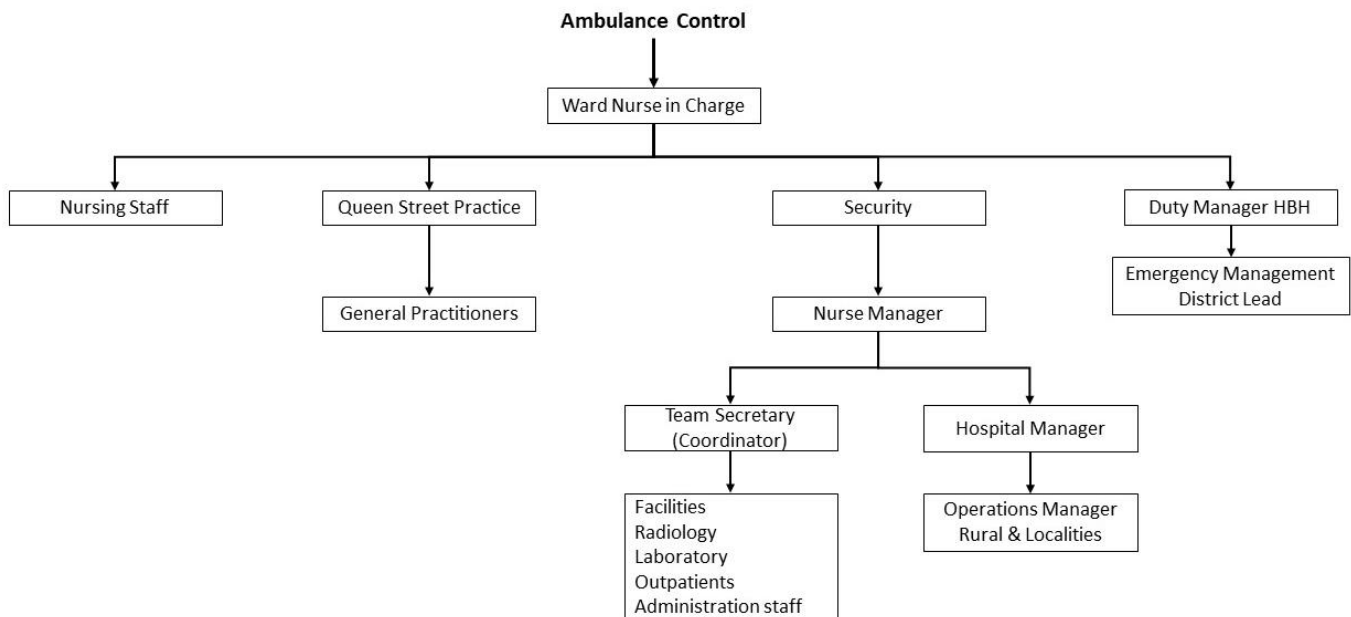
Category Red

arising from civil defence emergency

Patient Classification -

- Status 1 = critical injuries (unstable/receiving CPR)
- Status 2 = serious injuries (unstable)
- Status 3 = moderate injuries (stable)
- Status 4 = minor injuries (no concern/stable)
- Status 0 = fatal / NFR

COMMUNICATION



MULTIPLE CASUALTIES

Communication

Ward

- Nurse in Charge to
- **activate** Nursing Staff Call Back List via etxt
 - **delegate** Co-ordinator
 - **activate** Ancillary Staff Call Back List via etxt
 - **delegate** communication between switchboard (after hours direct to Acute Ward), ambulance R/T and triage area to a suitable staff member (medical receptionist w/h, administrator a/h), situated in Ward Office, use Communication Record and Ambulance Communication Forms
 - **delegate** triage nurse, assistant to set up Triage Area and one nurse to check the treatment areas using provided checklist
 - **allocate** identification shirts to Triage Nurse, Communications Officer, Co-ordinator
 - **allocate** staff to roles using Staff Placement Form (see Appendix 4)

Triage Area – Main reception/foyer

- Delegated triage nurse prepare foyer with help of assistant and transport nurses via Co-ordinator
- Equipment to be sent to area:
 - Triage/emergency trolley and first response pack (behind main reception)
- Dedicated person will deliver other equipment necessary
- Triage Nurse responsible for triage of patients, Red Bracelet application and documentation
- Hand set radios to be used for communication with other areas (OPD, Ward, Front Desk, Mental Health)

Staff

- Triage Nurse** > from Ward: responsible for triage of patients, red bracelet system and documentation
- Nursing Staff x 2** > to transport patients status 1, 2 and 3
- Assistant to Triage** > to assist in preparation of area and where necessary
> to relay messages to and from ward as required to secure helicopter pad and assist with transportation from pad as necessary
- Clerk x 1** > Reception area, to document where patients are transported to

Equipment

extra linen (in Linen Room)
whiteboard
rubbish bags with liners
linen bags
triage / emergency trolley (in Medical Records)
portable suction units
portable oxygen cylinders

Acute Ward

Staff

- Available Ward nurses
- Two medical officers if available
- One Clerk to collect patient details when available

Equipment

- Contact laboratory for extra supplies as required – dedicated person to collect.
- Extra portable suction unit and oxygen regulators to be collected from Ward and PRIME bags from Queen Street Practice to Triage Area
- Two beds from Ward/Outpatients Department to Triage Area

Treatment Areas

Emergency Treatment to be carried out in Ward. Nurse in Charge of Ward to allocate patients to rooms on arrival.

Move current in-patients to Room 9.

**Stand down of staff to be advised by Co-ordinator or
Senior Medical Officer on duty.**

Casualty Flow

Status 1 > from triage direct to Emergency Room, Rooms 1 and 2 in ward
Status 2 > from triage direct to Emergency Room, Rooms 1 and 2 in Ward
Status 3 > from triage direct to Rooms 3-6 in Ward
Status 4 > from triage direct to Queen Street Practice waiting room
Status 0 > direct to Mortuary

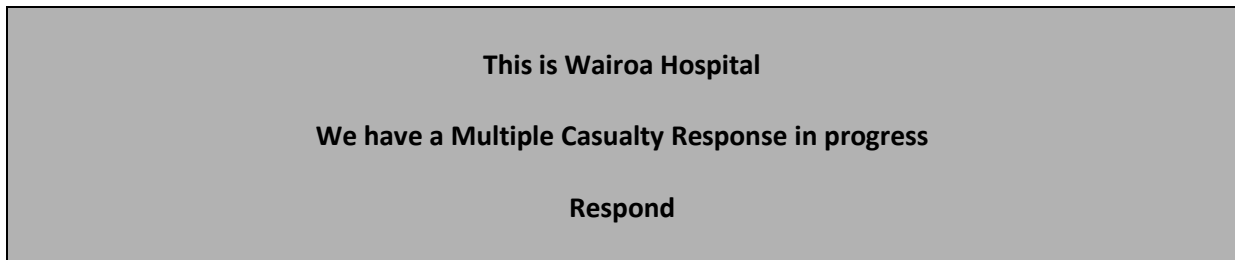
Whānau to be directed to the Cafeteria in the first instance while patients are being triaged and transported to areas for treatment. Volunteers could be utilised in this area for support.

COMMUNICATIONS OFFICER

On advice of an emergency from Ward Nurse in Charge, complete call out of Medical and ancillary staff using etxt groups:

1. General Practitioners
2. Radiographer
3. Laboratory
4. Facilities and Maintenance Team
5. Hospital Manager
6. Queen Street Practice Manager
7. Health Records
10. Mental Health Co-ordinator or D.A.O.

Message



Record all communication on Communication Emergency Log.

Procedures and General Information

- A. All media calls to be referred to the Communications Manager at Hawke's Bay Hospital.
- B. Maintain essential phone numbers list.

CATEGORY RED

(30 plus casualties from civil disaster)

It is not possible to detail contingency plans for such an event because:

- the hospital may not be habitable
- access to the hospital may be blocked
- many staff may be unable to get away from personal responsibilities

NEVERTHELESS, initial responses should be:

- A)** Listen to local radio for special instructions
- B** Automatic reporting to hospital of all staff as able
- C)** If hospital still habitable:
- staff with multiple casualty duties set up for response
 - all other staff report at the Hospital Control Centre situated in the Main Reception of the Wairoa hospital
- D)** If hospital evacuated or uninhabitable, report to front car park.
- The senior person per area will be expected to take charge of the area and staff.
- E)** Alternatively, a temporary hospital may need to be established. If such is announced on the radio (or by other official channel) then proceed to this place as soon as possible.

Health NZ Hawke's Bay is the prime facilitator for all health responses and resources within the Hawke's Bay region during a state of Civil Defence or Public Health Emergency.

The Co-ordination of a Civil Defence or Public Health Emergency Declaration, regionally, will be carried out through the Health Incident Controller situated in the Emergency Operations Centre in the Clinical Skills Laboratory at Hawke's Bay Hospital.

Civil Defence Emergency Management (CDEM) is responsible for logistic support of health services during a declared emergency.

In the event of the Wairoa CDEM Emergency Operations Centre (EOC) becoming non functional, the EOC will be relocated to the Basement Room (purple room) at Wairoa Hospital.

RESPONSE

All off duty staff will ensure the safety of themselves and their families and properties and then report to their place of work. Those staff involved in a multiple casualty response will carry out their duties under the current hospital plan including staffing the triage area in the main foyer. Personnel not involved directly in the plan should report to the Hospital Coordinator and will be deployed appropriately. The placement of volunteers must consider the skill mix required in responding areas.

CONTROL

Overall control of the event will be managed by the Emergency Operations Centre at Hawke's Bay Hospital using a coordinated incident management structure (CIMS). The Wairoa Hospital Coordinator will be responsible for managing the facility and reporting to the Bed Unit of the CIMS Operations Section. Rapid decision-making in an environment where the accuracy of information cannot always be verified is required to allow response. An understanding of the Incident Controller's intent in response is essential. The control team should wear identification vests and must include individuals responsible for:

- Operations
- Planning
- Information gathering (intelligence)
- Logistics
- Welfare
- Administration of the centre
- A runner to ensure information carriage

Consideration must be given to the following:

- Who is on site and are there any missing staff (missing staff to be reported to Emergency Services)
- Actions required to support clinical care – this may include the reorganisation of capacity
- Management of BAU
- Infrastructure assessment – damage to buildings, power and internet capacity
- The potential novel use of facilities and staff working outside of their comfort zone
- The completion of a Status Report to the EOC at Hawke's Bay Hospital every 4 hours following each Control Centre briefing
- Preparation for incident progression – anticipated injuries, resources required potential longer-term issues etc
- Communications to include the EOC at Hawke's Bay Hospital, Queen Street Practice, Wairoa Pharmacy, CDEM and staff; a generic email should be used for all incoming email and incoming calls may need to be diverted to a single telephone line
- The coordination of volunteers
- Requests for additional staff made to the EOC (to include a sonographer)
- Staff rostering to allow rest breaks
- Essential worker status documentation to allow health workers access to fuel and movement through cordons

CIVIL DEFENCE EMERGENCY MANAGEMENT LIAISON OFFICERS

Regional Civil Defence Emergency Management liaison will be undertaken by a member of the Incident Management Team sited at the Group Emergency Operations Centre.

If required a staff member may be transported to the Wairoa Civil Defence Emergency Management EOC to act in the role of liaison between the hospital and Civil Defence Emergency Management. Essentially this role is one of information carrier between the hospital and Civil Defence Emergency Management. Responsible for supplying information to the hospital centre on at least a two hourly basis.

The CDEM primary means of communication during an event is the local council social media page (Facebook).

SERVICES

All services are expected to continue to operate within their particular area of expertise, co-ordinating all efforts with their Control Centre. A Damage Assessment Form should be completed for each area and returned to the Hospital Control Centre as soon as possible after the event.

Patients and staff may need to be reorganised to enhance preparation for response. Patient tracking and reconciliation is essential.

Public Health, Community Health and Mental Health Services continue to operate following individual service plans.

UNOCCUPIED AREAS

Any unoccupied areas in the hospital centre will be utilized by the Control Centre as necessary.

BED CENSUS

Each area is responsible for providing the Control Centre with an updated patient census every four hours for the first 24 hours and eight hourly thereafter.

Casualties are to be reviewed every eight hours with placement and/or readiness for discharge being assessed provided that community care provision is available.

STAFF WELFARE

Both physical and emotional support for staff and their families is essential. This is particularly true for those staff necessarily staying on site. Basic needs for food, water and shelter must be taken care of, the Welfare Van and the St John MIST team can support this. The potential for day care and school closures will add an additional burden for staff and should be factored in to the welfare response.

MORTUARY FACILITIES

Temporary mortuary facilities may be provided in the form of cool storage containers. This will be actioned by the Emergency Operations Centre at Hawke's Bay Hospital if required.

BACK-UP FACILITIES

In the event of the hospital facilities becoming overloaded a back-up facility for casualty overflow has been earmarked at Memorial Hall

PUBLIC RESPONSE

All existing outside direct lines to be manned by Administration personnel. Telephone numbers to be broadcast via radio stations in liaison with the Emergency Operations Centre at Hawke's Bay Hospital.

SECURITY

Existing security arrangements in the hospital plan and for community providers to continue to operate. Additional staff may be required to manage access to the hospital grounds and carpark areas.

ALTERNATIVE ACCOMMODATION

If hospitals and other buildings become untenable as the result of a major disaster such as an earthquake, it is most likely that the majority of buildings in the disaster area will also be in a similar condition. The extent of planning for alternative hospital accommodation must be made with this premise in mind.

The eventual locations for temporary hospitals can only be determined after the disaster has occurred, although possible suitable locations are as follows:

Napier	-	EIT, McLean Park
Hastings	-	Royston Hospital, HB Racecourse, Nelson Park
Wairoa	-	Wairoa College
Waipukurau	-	Central Hawkes Bay College

It will be the task of Health NZ Hawke's Bay, in consultation with Civil Defence Emergency Management to decide upon the most suitable premises for the temporary hospitals, dependent upon the condition of existing hospitals in the first instance and alternative accommodation in the second instance.

Evacuation procedures to be followed as for fire; relocation of patients to be carried out using hospital vehicles with additional resources being requested from Civil Defence Emergency Management as necessary.

DECONTAMINATION

Decontamination of casualties, when necessary, is to be carried out in the car park area alongside the entrance to the Triage Area of the hospital. Casualties are to be washed down (portable showers may be obtained from the Fire Service) and contaminated clothing removed, placed in plastic bags and tagged. Until decontamination procedures have been completed contaminated casualties should be separated from non contaminated casualties.

CONSERVATION OF ESSENTIAL RESOURCES

Careful utilisation of existing supplies/resources is essential.

The conservation of water is particularly important. The following general rules should be followed:

- Do not use sinks, showers/bath tubs, ice machines
- Do not flush toilets after each use
- Use paper products where possible for the serving of food/drink
- Use alcohol based solutions for washing hands

SUPPORT SERVICES

Building and Engineering Service

This service will provide a complete and Organisation wide assessment and control facility along with recovery and restoration procedures which will help ensure continuity of services for essential areas.

The Facilities Manager will appoint an individual to assume the responsibilities of the Damage Assessment Co-ordinator in co-ordinating damage assessment and recovery procedures, reporting directly to the Facilities Unit in the Logistics Section at the Emergency Operations Centre at Hawke's Bay Hospital. Staff will assess damage using provided checklists. Priority would be given to the restoration of the following:

Electricity supply via emergency generators (self contained units diesel powered with 5 days running time) - power supply to critical areas only. Generator consumes 50L per hour at full power to emergency supply of hospital.

Water Supply	Ward 10,000L tank D Block 500L tank Kitchen 250L tank Francis Kimble Hostel 1500L tank External 30,000L tank (cold water only)
Diesel	10,000L tank on service road 5000L tank on helipad
Sewage	Patient Areas
Medical Gases	Emergency Room, Acute Ward (additional supplies to be obtained from BOC Gases (NZ) Ltd) Volume stored on site: Oxygen 28 size G cylinders Entonox Medical air
Refrigeration	Kitchen, Mortuary

The buildings will be checked and/or repaired to ensure safety with top priority being given to the clearance of entrances and exits and the prevention of fire and hazardous materials risks.

Building maintenance supplies/resources are housed in the services workshop at the hospital.

To ensure restoration of essential services existing personnel will be utilized where available with assistance being sought through usual channels, if necessary. The Civil Defence Emergency Management Group Controller will be informed by the Health Incident Controller should additional assistance be required.

Transport Services

All transport resources available shall only be used for emergency purposes and will be under the control of the Health Incident Controller. Any request for additional transport will be made via the Emergency Operations Centre at Hawke's Bay Hospital to Civil Defence Emergency Management.

Resources will be utilized to:

- (a) Evacuate patients and staff from an affected area.
- (b) Deliver essential resources into an area.
- (c) Move personnel and supplies through or around a disaster area.

(d) Move patients to other facilities as necessary.

Procurement and Supply Services

The Procurement Service will continue to operate, they will navigate the supply chains that are not operational and track supplies currently held in the organisation's warehouse. Requests for additional resource should be made to the Supply Unit of the CIMS structure.

Linen Services

Linen is to be regarded as an essential commodity. Wairoa linen supply is through Gisborne Laundry Services. If this supply route is compromised there are a small number of washing machines in Francis Kimble Hostel that may be utilised as a short-term option. Requests for supplies which cannot be obtained locally will be made through the Supply Unit in the Logistics Section at the Emergency Operations Centre at Hawke's Bay Hospital.

Domestic Services

Cleaning and associated services are to be regarded as an essential activity and there will be a substantial increase in the workload during an emergency. Private contractors may, should the situation demand, be co-opted to assist.

Nutrition and Food Services

Food and its preparation are to be regarded as an essential commodity. The first priority therefore is to provide continuity of service of its preparation and delivery. Resources should be obtained from local suppliers using normal purchasing systems.

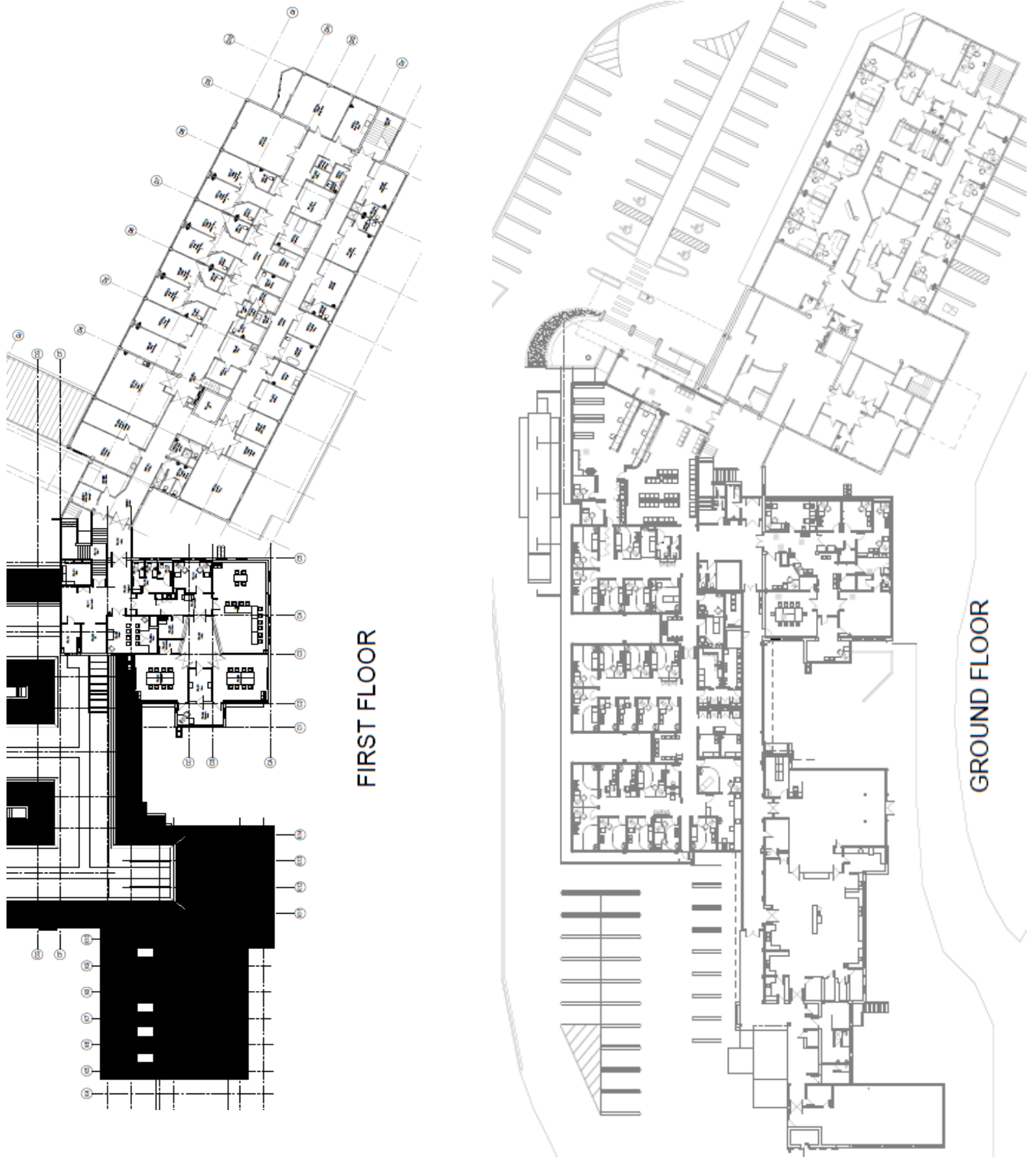
Waste Disposal

Waste may have to be stockpiled in the event that BAU disposal is not possible. Identification of an area to manage this is essential.

TELEPHONE LIST OF ESSENTIAL NUMBERS

TITLE & NAME	HOSPITAL EXTENSION	ALTERNATIVE NUMBER	
Hospital Manager – Pete Whalley	4849	027 290 5791	
Facility Maintenance & Support Staff – Graham Hughes	4804	027 464 9570	
Nurse Manager – Anne Bruce	5866	027 256 2838	
ACNM	4866	027 224 6199	
Team Secretary – Elise Hagen	4974	027 367 6950	
Practice Manager – Francis Grover		06 838 8333	027 276 1699
Acute Ward	4820 / 4821	06 838 9714	027 214 4512
Ambulance Station	4847	06 838 9716	
Wairoa St Johns Manager – Dan Bottrill		06 838 6662	027 238 7525
Radiology	4831		
Radiology Reception – Sharleen Manning	4842	06 838 7099	
Laboratory	4859		
Triage Area / Radiology Office	4809		
Kitchen	4846		
Maternity Office	4841	027 454 5380	
Medical Records – Geneva Hawkins-Hokianga	4844	06 838 7118	
OPD Nurse – Evelyn Carpenter	4819	06 838 6614	
Undertaker – M Pickering		06 838 7606 work 06 838 8560 home	027 313 5235
Police		06 838 8345	
Hawkes Bay Hospital	*7318	06 878 8109	
Civil Defence Emergency Management		06 838 7309	
Mental Health Team	4875	027 234 4890	

SITE MAP



DISTRIBUTION LIST

Duty Manager Hawke's Bay Hospital

Emergency Management District Lead – Sandra Bee

Acute Ward

Nurse Manager

Front Desk Reception

Clinical Lead

Community Health

Queen Street Practice

Kitchen

Laboratory Department – Wairoa and Hastings

Wairoa Hospital Centre Manager

Facility Maintenance Team and Hastings

Maternity Ward

Outpatients Department

Radiology Department

Mental Health

Team Secretary

Francis Kimble

Civil Defence Emergency Management – Wairoa

Police

St John's Ambulance

Distribution:

- Copies responsibility of Emergency Management District Lead
- Copies responsibility of Team Secretary, Wairoa Hospital

CALL BACK CHECKLIST

Description of Event _____

	Call Time	Response Time
General Practitioners		
Nursing staff etxt		
Ancillary staff etxt		
Management staff etxt		
Practice Manager QSP		

Equipment

Triage / Emergency Trolley

Trolley list

BVMs single use x 6
Airways x 2 each size 1, 2, 3, 4; 2 x O; 1 x OO; 1 x OOO
LMA's x 1 each size 2, 3, 4, 5
Syringe 30mL x 2
Adult oxygen masks with tubing x 2
Child oxygen masks with tubing x 2
Oxygen bottle
Res-q-vac x 2
Yankeur suction handles x 2
CAT tourniquet
Gamgee x 20 large, x 15 small
Crepe bandages 10cm + 15cm x 6 each
Micropore tape x 2
Triangular slings x 2
Stethoscopes x 2
Clothing scissors x 2
Thermoblankets x 2
Penlight x 1
Tourniquet
IV cannulas x 2 each size 16g, 18g, 20g, 22g
Alcohol wipes x 12
IV access device x 8
IV tegaderm x 6 each size adult, paediatric
Syringe x 5 each size 5mL, 10mL
Needles x 6 each size 22g, 25g
Sodium chloride 10mL x 12
Sharps box
Adrenaline 1:1000 x 6
Thermoblankets x 2
Normal saline for irrigation x 2
Sphygmomanometer x 1
Vomit bowls
Plastic aprons
Gloves medium + large x 1 box each
Protective eyewear x 2
Face masks x 1 box
Box of red bracelet packs
Clipboards x 4 with message pads and pens
Whiteboard pen
Yellow biohazard bags x 2
Hand gel x 1
Identification vests

Forms

- request for assistance
- damage assessment
- triage reconciliation
- emergency communication

Preparation of Work Areas

Ward – (equipment that may be needed and is located on Acute Ward)

- gloves
- sodium chloride 1L x 1 box
- 12 x blood sets
- IV cannula 6 x each size
- red top blood tubes x 20
- purple top blood tubes x 15
- airways x 2 each size
- suture packs x 2
- property bags
- tetanus toxoid – from medication fridge
- burns sheets x 2
- arm splints
- blankets
- plastic bags
- gamgee and crepe bandages
- vomit bowls
- disposable bag mask devices x 6

Restock linen

Resuscitation trolley

Collect other equipment as required

AMBULANCE COMMUNICATION

Time of Call

ETA

Number and Status of Casualties:

Status 1 Status 2 Status 3 Status 4 Status 0

Message to Triage Area Time

Comments:

Time of Call

ETA

Number and Status of Casualties:

Status 1 Status 2 Status 3 Status 4 Status 0

Message to Triage Area Time

Comments:

Time of Call

ETA

Number and Status of Casualties:

Status 1 Status 2 Status 3 Status 4 Status 0

Message to Triage Area Time

Comments:

MEDICAL/NURSING STAFF PLACEMENT FORM WAIROA

	Name	Contact
Medical Officer - Ward		
Medical Officer - Ward		
Communications Officer		
Triage Nurse		
Triage Assistant		
Transport Nurse		
Transport Nurse		
Co-ordinator		
Receptionist		

RECORD OF EVENTS

Date _____

Time of advice from ward _____

Category _____

No. of casualties _____ Status _____

Time of activating emergency etxt group calls _____

WARD NURSE IN CHARGE

Activate nursing staff call back via etxt	
Delegate Ward Co-ordinator	
Ensure activation of ancillary staff call back via etxt	
Delegate Triage Nurse and Communications Officer and explain roles	
Hand out action cards	
ID shirts - Triage Nurse, Communications Officer, Co-ordinator	
Allocate areas of responsibility to incoming staff	
Initiate inpatient transfers to Room 9 if necessary	
Delegate staff to prepare Ward to accept casualties	
Delegate Nurses x 2 to Emergency Room	

ADMINISTRATION STAFF MEMBER

Notification by Ward Nurse in Charge.

Complete call back of staff as requested via etxt	
Refer media calls to Communications Manager at Hawke's Bay Hospital	

CO-ORDINATOR

Collect identification shirt from Ward	
Notify on-call Intensivist and request medical team	
Utilize community volunteers where required	
Update Hospital Manager or Duty Manager every 30 minutes	
Arrange for extra linen supplies as necessary	
Assess need for domestic services once treatment areas are cleared	

WARD STAFF

Report to Nurse in Charge for briefing	
Prepare ward to receive casualties	
IV/blood trolley fully stocked	
Adequate analgesia	
Adequate linen	
Beds prepared to receive casualties	
Adequate paperwork (labels, stationery, folders)	
Prepare in-patients for transfer if necessary	
Prepare Health Centre to receive minor injuries	

DESIGNATED PERSON

Clear Ward if necessary	
Collect wheelchairs and deliver to Triage Area	
Place 2 ward beds along corridor from Radiology	
Collect Triage Trolley from Medical Records	
Clear car park if necessary	
Collect portable oxygen cylinders and suctions from Ward, deliver to Triage Area	
Secure helicopter pad	