

It is important to identify the effects of a disaster as well as the types of external disasters that are more likely to occur. This helps in planning the strategies that are needed in the event that a disaster occurs. For example, what is the likelihood that a natural disaster, such as rain floods, will affect water and power.

To respond effectively, the hospital developed a program to manage such emergencies. The program provides processes for:

- a) determining the type, likelihood, and consequences of hazards, threats, and events;
- b) determining the hospital's role in such events;
- c) communication strategies for events;
- d) the managing of resources during events, including alternative sources;
- f) the identification and assignment of staff roles and responsibilities during an event.

FMS.17 The hospital ensures preparedness for internal disasters.

FMS.17.1 The hospital has a plan to deal with potential internal disasters. The plan includes:

FMS.17.1.1 Names and titles of all staff to be called in case of internal disaster, their contact numbers, and action cards.

FMS.17.1.2 The control room location and the position of the individual in charge.

FMS.17.1.3 The duties and responsibilities of hospital leaders.

FMS.17.1.4 The procedure for relocation of patients.

FMS.17.1.5 The individual responsible for announcing the emergency state and contacting local authority.

FMS.17.1.6 Individual(s) authorized to deal with the electricity supply and medical gas system and to shut them off as needed in case of fire or explosions in the hospital.

FMS.17.1.7 The meeting point for the staff in case of horizontal evacuations (assembly points) inside the building.

FMS.17.1.8 The meeting point for the full evacuation (holding area) outside the building.

FMS.17.1.9 The evacuation procedure for patients, visitors, and employees.

FMS.17.2 Every department has a specific internal disaster plan that addresses departmental actions in case internal disasters.

FMS.17.3 There are evacuation maps posted hospital wide indicating locations of:

- FMS.17.3.1 You are here.
- FMS.17.3.2 Fire extinguishers.
- FMS.17.3.3 Fire hose reel/cabinets.
- FMS.17.3.4 Fire blankets.
- FMS.17.3.5 Escape routes.
- FMS.17.3.6 Assembly points.
- FMS.17.3.7 Fire exits.
- FMS.17.3.8 Call points break glass/pull station.
- FMS.17.3.9 Medical gas isolation valves.

Standard Intent:

Hospitals need to assess the type of internal disasters it is more likely subjected to and determine the type of actions needed to be taken in order to ensure patient and staff safety and continue the medical services provided.

Such disasters might include: fire emergencies, emergencies of hazardous materials spills, and any other emergencies that require evacuation of patients and/or staff.

There must be a clear internal disaster plan with roles and responsibilities for leaders and staff to refer to when needed.

As unique actions need to be considered for certain departments (such as Operating Rooms and Intensive Care Units) due to nature of it occupancy, a department-specific internal disaster plan needs to be created.

FMS.18 The hospital has a system for scheduling and conducting fire drills regularly.

FMS.18.1 Fire drills are scheduled and conducted regularly in all departments.

FMS.18.2 Fire drills are conducted during different shifts to test:

- FMS.18.2.1 Using Rescue, Alarm, Confine, Extinguish/Evacuate (RACE) procedure.
- FMS.18.2.2 Using Pull, Aim, Squeeze, Sweep (PASS) procedure.
- FMS.18.2.3 The ability to contain the fire when it starts.
- FMS.18.2.4 Staff performance in the event of fire.
- FMS.18.2.5 Evacuation procedures.
- FMS.18.2.6 Whether the oxygen and electricity supplies were shut off at the right time.