

# Hospital Resilience Self-Assessment Tool

Based on: Resilient Hospitals - Inter-regional Guidance for Strengthening Resilience to Health Emergencies and Disasters

## Instructions

### Scoring System:

| Status | Score | How to Mark |

|-----|-----|-----|

| **Not Started** | 0 | No action taken, not implemented. Place ✓ in "Not Started" column |

| **Partial** | 0.5 | In progress, partially implemented, or needs improvement. Place ✓ in "Partial" column |

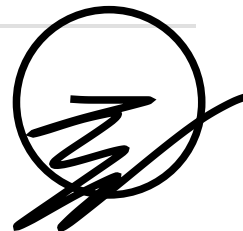
| **Completed** | 1 | Fully implemented and regularly maintained. Place ✓ in "Completed" column |

### How to use this tool:

1. Review each item with your hospital team
2. Place a checkmark (✓) in the appropriate status column
3. Use the "Evidence of Compliance" guidance to verify your assessment
4. Calculate section and total scores
5. Develop action plans for items not marked as "Completed"

## Assessment Summary

Phase	Section	Max Score	Your Score	Percentage
BEFORE	1.1 Strategic Risk Assessment & Planning	6	___	___%
BEFORE	1.2 Risk Reduction - SPACE	8	___	___%
BEFORE	1.3 Risk Reduction - SYSTEMS	8	___	___%
BEFORE	1.4 Risk Reduction - STUFF	6	___	___%
BEFORE	1.5 Risk Reduction - STAFF	6	___	___%
BEFORE	1.6 Preparedness - SPACE	5	___	___%



Phase	Section	Max Score	Your Score	Percentage
BEFORE	1.7 Preparedness - STRATEGIES	12	___	___%
BEFORE	1.8 Preparedness - SYSTEMS	6	___	___%
BEFORE	1.9 Preparedness - STUFF	8	___	___%
BEFORE	1.10 Preparedness - STAFF	8	___	___%
DURING	2.1 Response - SPACE	4	___	___%
DURING	2.2 Response - STRATEGIES	8	___	___%
DURING	2.3 Response - SYSTEMS	8	___	___%
DURING	2.4 Response - STUFF	6	___	___%
DURING	2.5 Response - STAFF	6	___	___%
AFTER	3.1 Recovery - SPACE	4	___	___%
AFTER	3.2 Recovery - STRATEGIES	8	___	___%
AFTER	3.3 Recovery - SYSTEMS	6	___	___%
AFTER	3.4 Recovery - STUFF	4	___	___%
AFTER	3.5 Recovery - STAFF	6	___	___%
AFTER	3.6 After Action Review	8	___	___%
<b>TOTAL</b>		<b>127</b>	___	___%

## PHASE 1: BEFORE (Routine Hospital Operations)

### 1.1 Strategic Risk Assessment and Planning

#	Component	Not Started	Partial	Completed	Evidence of Compliance
1.1.1	Hospital has conducted a comprehensive hazard identification and risk assessment (HIRA)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Documented HIRA report; risk register; hazard maps; vulnerability assessment dated within last 2 years
1.1.2	Risk assessment is based on historical data, community risks,	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Historical incident records; community risk profile; demographic

#	Component	Not Started	Partial	Completed	Evidence of Compliance
	and hospital vulnerability analysis				data analysis; local government hazard data
1.1.3	Hospital has a documented risk profile covering natural, technological, biological, and societal hazards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comprehensive risk profile document addressing all four hazard categories; risk matrix showing likelihood and impact
1.1.4	Risk assessment is updated at least annually or after significant events	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Dated revision history; annual review meeting minutes; post-incident update records
1.1.5	Risk assessment findings are communicated to hospital leadership and relevant departments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Leadership briefing records; department head meeting minutes; risk communication memos; training attendance
1.1.6	Strategic plans incorporate risk-informed decision making	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Strategic plan with risk considerations; budget allocations for risk mitigation; risk-based prioritization documents
	<b>Section Total (count Completed×1 + Partial×0.5)</b>			___/6	

## 1.2 Risk Reduction - SPACE (Structural & Non-Structural Elements)

#	Component	Not Started	Partial	Completed	Evidence of Compliance
1.2.1	Hospital has completed the Hospital Safety Index (HSI) assessment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Completed HSI evaluation form; HSI score report; action plan based on HSI findings

#	Component	Not Started	Partial	Completed	Evidence of Compliance
1.2.2	Structural mitigation measures are implemented based on building vulnerability assessment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Structural engineering report; seismic/wind retrofitting records; building reinforcement documentation
1.2.3	Non-structural elements (equipment, utilities, architectural) are secured against hazards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Equipment anchoring records; utility protection measures; ceiling/partition securing; furniture fastening logs
1.2.4	Hospital meets accessibility standards for persons with disabilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Accessibility audit report; ramps and elevators functional; accessible signage; assistive devices available
1.2.5	Critical infrastructure (power, water, HVAC, medical gases) has redundancy/backup systems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Backup generator test logs; water storage capacity records; UPS systems documentation; fuel reserves inventory
1.2.6	Hospital has implemented green/sustainable infrastructure measures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Solar/renewable energy installations; water recycling systems; energy efficiency measures; SMART hospital assessment
1.2.7	Fire safety systems are installed, maintained, and regularly tested	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fire alarm test records; sprinkler inspection logs; fire extinguisher maintenance; fire department inspection certificates
1.2.8	Evacuation routes are clearly marked and accessible	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Evacuation route maps posted; illuminated exit signs; unobstructed pathways; evacuation drill records

#	Component	Not Started	Partial	Completed	Evidence of Compliance
	Section Total			___/8	

### 1.3 Risk Reduction - SYSTEMS (Leadership, Coordination, Information)

#	Component	Not Started	Partial	Completed	Evidence of Compliance
1.3.1	Multi-disciplinary disaster management committee is established and functional	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Committee charter; membership list; meeting minutes (quarterly minimum); committee terms of reference
1.3.2	Hospital accreditation system includes emergency management standards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Accreditation certificate; emergency management compliance checklist; accreditation body reports
1.3.3	Hospital Information Management System (HIMS) is operational and can support emergency operations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HIMS documentation; backup/recovery procedures; real-time data access capability; system uptime reports
1.3.4	Risk communication and community engagement (RCCE) is integrated into routine operations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	RCCE strategy document; community outreach records; public awareness materials; feedback mechanisms
1.3.5	Hospital has linkages with local emergency management authorities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	MOUs with local authorities; joint meeting minutes; contact lists; participation in local emergency exercises
1.3.6	Business development plans include continuity and	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Business continuity section in development plan; resilience budget

#	Component	Not Started	Partial	Completed	Evidence of Compliance
	resilience considerations				allocation; risk mitigation project approvals
1.3.7	Routine emergency and support services are documented and standardized	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Standard operating procedures (SOPs); emergency service protocols; support service guidelines
1.3.8	Capacity development plans include HEDRM competencies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Training curriculum with HEDRM modules; competency framework; capacity development budget
	<b>Section Total</b>			___/8	

## 1.4 Risk Reduction - STUFF (Finance, Logistics, Supply Chain)

#	Component	Not Started	Partial	Completed	Evidence of Compliance
1.4.1	Preventive maintenance program is established for all critical equipment and infrastructure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Maintenance schedule; equipment inspection logs; preventive maintenance software/system; technician reports
1.4.2	Supply chain management system is robust and can track inventory in real-time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Inventory management software; real-time tracking capability; stock level reports; reorder point alerts
1.4.3	Procurement logistics system supports emergency purchasing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Emergency procurement policy; expedited purchase procedures; pre-approved vendor list for emergencies
1.4.4	Healthcare financial management includes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Emergency fund allocation in budget;

#	Component	Not Started	Partial	Completed	Evidence of Compliance
	reserves for emergency response				reserve fund balance sheet; financial contingency policy
1.4.5	Centralized purchasing system is in place for inventory control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Central procurement office; purchase order system; inventory control procedures; audit reports
1.4.6	Digital inventory management system with barcode/tracking is operational	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Barcode/Rfid system; digital tracking software; inventory accuracy reports; system training records
	<b>Section Total</b>			___/6	

## 1.5 Risk Reduction - STAFF (Human Resources)

#	Component	Not Started	Partial	Completed	Evidence of Compliance
1.5.1	HEDRM is integrated into routine HR development strategies and plans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HR strategic plan with HEDRM section; training budget for HEDRM; HR policy incorporating emergency roles
1.5.2	Staff competency assessment for HEDRM has been conducted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Competency assessment results; skills gap analysis; individual training needs identified
1.5.3	HEDRM training programs are developed and implemented	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Training curriculum; training calendar; attendance records; course evaluation results
1.5.4	Job descriptions include HEDRM-related competencies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Updated job descriptions; HEDRM responsibilities listed; performance evaluation criteria
1.5.5	Staff contacts directory is	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Current contact database; quarterly update records;

#	Component	Not Started	Partial	Completed	Evidence of Compliance
	maintained and regularly updated				emergency contact verification logs
1.5.6	New staff orientation includes HEDRM roles and responsibilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Orientation checklist with HEDRM items; orientation presentation materials; new staff acknowledgment forms
	<b>Section Total</b>			____/6	

## 1.6 Preparedness - SPACE

#	Component	Not Started	Partial	Completed	Evidence of Compliance
1.6.1	Critical operational areas are pre-identified in hospital plans (triage, decon, EOC, evacuation areas)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility maps with marked areas; area designation documents; signage in place; floor plans in emergency plan
1.6.2	Signage and color markings identify operational areas for mass casualty response	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Color-coded signs installed; triage area markings; directional signs; patient flow indicators
1.6.3	Spaces that can be converted for surge capacity are identified (corridors, auditorium, gymnasium)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Surge space inventory list; conversion protocols; utility access points identified; equipment staging plans
1.6.4	Step-down facilities are identified with necessary provisions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	List of step-down facilities; MOUs with facilities; equipment/supply lists; staffing plans for step-down sites
1.6.5	Patient cohorting areas are	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Isolation ward designation; negative pressure room

#	Component	Not Started	Partial	Completed	Evidence of Compliance
	designated for infectious disease outbreaks				availability; cohort area protocols; PPE stations identified
	<b>Section Total</b>			___/5	

## 1.7 Preparedness - STRATEGIES (Policies, Plans, Coordination)

#	Component	Not Started	Partial	Completed	Evidence of Compliance
1.7.1	Emergency Preparedness Program is established with workplan, budget, and dedicated personnel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Program charter; annual workplan; dedicated budget line; emergency manager job description/appointment
1.7.2	Service Continuity Plan identifies critical services and alternative care sites	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Service continuity plan document; critical services list prioritized; alternative site agreements; activation criteria
1.7.3	All-Hazards Hospital Emergency Response Plan is developed and approved	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Approved ERP document; management sign-off; distribution list; plan accessible to all staff
1.7.4	Hospital Incident Management Team (HIMT) is established with defined roles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HIMT organizational chart; role assignments; Job Action Sheets; alternate personnel identified
1.7.5	Hospital Command Center/EOC is designated with	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EOC location designated; equipment inventory; communication systems;

#	Component	Not Started	Partial	Completed	Evidence of Compliance
	required equipment and protocols				activation checklist; backup EOC identified
1.7.6	Mass Casualty Management Plan is developed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	MCI plan document; triage protocols (START/JumpSTART); surge capacity calculations; resource lists
1.7.7	Mass Fatality Management Plan is developed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fatality management plan; temporary morgue procedures; body identification protocols; family notification procedures
1.7.8	Communicable Disease Outbreak Plan is developed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Outbreak plan document; isolation protocols; PPE guidelines; surveillance procedures; staff protection measures
1.7.9	Evacuation Plan is developed and tested	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Evacuation plan document; evacuation routes; patient transport procedures; receiving facility agreements; drill records
1.7.10	Hospital plans are linked with local/national emergency management plans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Coordination agreements; plan alignment documentation; joint planning meetings; local EOC contact information
1.7.11	Memoranda of Understanding (MOUs) with partner hospitals are established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Signed MOUs; resource sharing agreements; mutual aid protocols; contact lists for partner facilities
1.7.12	Plans are reviewed and updated at least annually	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plan revision history; annual review meeting minutes; update documentation; version control records
	<b>Section Total</b>			___/12	

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## 1.8 Preparedness - SYSTEMS

#	Component	Not Started	Partial	Completed	Evidence of Compliance
1.8.1	Community engagement mechanisms are established for preparedness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Community advisory board; public meetings records; community partner list; feedback collection system
1.8.2	Risk communication protocols are developed for various hazard scenarios	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Risk communication plan; message templates; spokesperson designation; media contact list
1.8.3	Early warning systems are linked to hospital operations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Early warning subscription/registration; alert notification system; staff alert procedures; monitoring protocols
1.8.4	Emergency communication systems (internal/external) are established and tested	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Communication equipment inventory; backup systems (radio, satellite); test logs; communication tree
1.8.5	Drills and exercises are conducted regularly (at least annually)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Exercise schedule; drill reports; participation records; corrective action documentation
1.8.6	Tabletop, functional, and full-scale exercises are conducted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Exercise variety documentation; scenario development; evaluation reports; improvement plans
	<b>Section Total</b>			___/6	

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## 1.9 Preparedness - STUFF

#	Component	Not Started	Partial	Completed	Evidence of Compliance
1.9.1	Emergency stockpile of medicines and supplies is maintained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Stockpile inventory list; expiration tracking; storage conditions monitoring; minimum stock levels defined
1.9.2	Stock and inventory management system for emergency supplies is operational	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Inventory management system; stock reports; reorder alerts; supply chain tracking
1.9.3	Procurement system for emergency medicines and supplies is established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Emergency procurement SOP; pre-approved supplier list; expedited ordering process; budget authorization
1.9.4	Vendor and service agreements for emergency supplies are in place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Signed vendor agreements; emergency supply contracts; service level agreements; vendor contact list
1.9.5	Emergency flexible and sustainable finance mechanisms are established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Emergency fund policy; petty cash/imprest account; credit arrangements; financial authorization procedures
1.9.6	Personal Protective Equipment (PPE) stockpile is maintained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PPE inventory list; storage conditions; expiration dates tracked; usage protocols; burn rate calculations
1.9.7	Emergency communication equipment is available and tested	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Radio equipment inventory; satellite phones; backup phones; test logs; charging stations
1.9.8	Triage supplies (tags, ribbons, stretchers) are stocked	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Triage tag inventory; stretcher/gurney count; first aid supplies; equipment location maps
	<b>Section Total</b>			___/8	

## 1.10 Preparedness - STAFF

#	Component	Not Started	Partial	Completed	Evidence of Compliance
1.10.1	Staff competencies for emergency response protocols are developed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Competency framework document; skill requirements by role; certification requirements
1.10.2	Training on response plans and roles is conducted regularly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Training schedule; attendance records; training evaluations; refresher training documentation
1.10.3	Human resource mobilization system for emergencies is established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff recall policy; notification system; transportation arrangements; reporting procedures
1.10.4	Staff recall/call-tree system is tested regularly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Call-tree documentation; test records with response times; contact verification; alternate contacts
1.10.5	Volunteer management program is established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Volunteer policy; registration system; training requirements; credential verification; liability coverage
1.10.6	Emergency Medical Teams (EMT) coordination mechanisms are in place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EMT coordination protocols; registration with EMT system; interoperability procedures; joint training
1.10.7	Just-in-time training resources are available	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Quick reference guides; video training modules; pocket cards; online training access

#	Component	Not Started	Partial	Completed	Evidence of Compliance
1.10.8	Psychological first aid training is provided to staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PFA training curriculum; training attendance; trainer certification; resource materials
	<b>Section Total</b>			___/8	

## PHASE 2: DURING (Response Phase)

### 2.1 Response - SPACE

#	Component	Not Started	Partial	Completed	Evidence of Compliance
2.1.1	Rapid structural damage assessment protocol is in place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Damage assessment checklist; trained assessors; assessment form templates; reporting protocols
2.1.2	Protocol for repurposing hospital spaces during surge is established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Space conversion SOPs; utility hookup procedures; equipment staging plans; signage kits ready
2.1.3	Infection prevention and control spatial arrangements are implementable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IPC zone maps; airflow management; isolation area setup guides; PPE donning/doffing stations
2.1.4	Alternative care site activation protocol is established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Activation criteria; site setup checklists; staffing assignments; supply staging; patient transfer protocols
	<b>Section Total</b>			___/4	

### 2.2 Response - STRATEGIES

#	Component	Not Started	Partial	Completed	Evidence of Compliance
2.2.1	Protocol for activating All-Hazards Response Plan is established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Activation criteria matrix; notification procedures; authority levels; activation checklist
2.2.2	Hospital Incident Management System activation criteria are defined	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HIMS activation levels; trigger criteria; scalability procedures; de-escalation criteria
2.2.3	Incident Action Planning (IAP) process is established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IAP templates; planning cycle schedule; objective setting procedures; resource allocation process
2.2.4	Hospital Command Center activation protocol is in place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EOC activation checklist; staffing roster; equipment check; communication verification
2.2.5	Internal and external coordination mechanisms are established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Coordination protocols; liaison assignments; meeting schedules; reporting formats
2.2.6	Patient surge protocols are established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Surge capacity plan; trigger levels; bed expansion procedures; discharge protocols; diversion criteria
2.2.7	Crisis standards of care protocols are developed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Crisis standards document; ethical framework; resource allocation criteria; documentation requirements
2.2.8	Patient transfer/referral protocols are established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Transfer protocols; receiving facility agreements; transportation arrangements; medical record transfer
	<b>Section Total</b>			___/8	

## 2.3 Response - SYSTEMS

#	Component	Not Started	Partial	Completed	Evidence of Compliance
2.3.1	Early warning monitoring protocols are established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Monitoring procedures; information sources identified; alert interpretation guides; escalation triggers
2.3.2	Rapid needs assessment protocol is in place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Assessment forms; data collection procedures; analysis templates; reporting timelines
2.3.3	Internal communication protocols during response are established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Communication SOPs; backup systems; message formats; update frequency; briefing schedules
2.3.4	External communication protocols (media, public, authorities) are established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Media policy; spokesperson designation; press release templates; social media guidelines; authority reporting
2.3.5	Situational awareness and information management systems are operational	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Information display systems; status boards; data collection forms; reporting dashboards
2.3.6	Patient tracking system is operational	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Patient tracking software/forms; wristband system; family reunification process; missing persons protocol
2.3.7	Infection prevention and control protocols are implementable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IPC guidelines; PPE protocols; hand hygiene stations; isolation procedures; waste management

#	Component	Not Started	Partial	Completed	Evidence of Compliance
2.3.8	Needs-based and risk-adjusted standards are defined	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Standards documentation; adaptation criteria; resource allocation guidelines; ethical framework
	<b>Section Total</b>			___/8	

## 2.4 Response - STUFF

#	Component	Not Started	Partial	Completed	Evidence of Compliance
2.4.1	Timely and flexible resource mobilization protocols are established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Resource request forms; authorization levels; expedited procedures; tracking system
2.4.2	Emergency procurement protocols are in place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Emergency procurement policy; pre-approved vendors; spending limits; documentation requirements
2.4.3	Resource tracking and accountability systems are operational	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tracking forms/software; check-in/out procedures; inventory counts; loss documentation
2.4.4	Pharmaceutical and medical supply surge protocols are established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Surge supply plans; vendor agreements; substitution protocols; conservation measures
2.4.5	Blood bank surge capacity protocols are in place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Blood bank surge plan; donor call procedures; blood center agreements; storage capacity
2.4.6	Equipment sharing agreements with partner facilities are established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sharing agreements; equipment lists; transfer procedures; maintenance responsibilities

#	Component	Not Started	Partial	Completed	Evidence of Compliance
	Section Total			____/6	

## 2.5 Response - STAFF

#	Component	Not Started	Partial	Completed	Evidence of Compliance
2.5.1	Staff safety and security protocols during response are established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Safety protocols; security procedures; check-in system; buddy system; evacuation plans for staff
2.5.2	Staff health monitoring during response is established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Health screening procedures; exposure tracking; symptom monitoring; reporting requirements
2.5.3	Staff welfare support (rest, meals, family support) protocols are in place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Rest area designation; meal provision plans; family communication support; childcare options
2.5.4	Staff surge/augmentation protocols are established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Surge staffing plans; overtime policies; cross-training; temporary staffing agreements
2.5.5	Volunteer integration protocols are in place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Volunteer deployment SOPs; supervision arrangements; scope of practice; credentialing process
2.5.6	Psychological support for staff during response is available	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Mental health support resources; peer support program; counseling services; stress management

#	Component	Not Started	Partial	Completed	Evidence of Compliance
	Section Total			____/6	

## PHASE 3: AFTER (Recovery Phase)

### 3.1 Recovery - SPACE

#	Component	Not Started	Partial	Completed	Evidence of Compliance
3.1.1	Damage and loss assessment protocol for facilities is established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Assessment forms; damage categories; cost estimation procedures; documentation requirements
3.1.2	Step-down facility utilization protocol is in place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utilization criteria; patient selection; staffing plans; transition procedures; closure criteria
3.1.3	Facility rehabilitation and repair protocol is established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Repair prioritization; contractor agreements; permit procedures; quality standards; timeline templates
3.1.4	Return to normal operations protocol for spaces is defined	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Normalization criteria; cleaning/decontamination; equipment return; space reconfiguration; signage removal
	Section Total			____/4	

### 3.2 Recovery - STRATEGIES

#	Component	Not Started	Partial	Completed	Evidence of Compliance
3.2.1	Short-term recovery strategies for service continuity are defined	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Recovery strategy document; priority services; temporary measures; timeline for restoration
3.2.2	Stand-down of response operations protocol is established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Demobilization checklist; phase-down criteria; notification procedures; documentation requirements
3.2.3	Post-disaster recovery planning process is in place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Recovery planning framework; stakeholder involvement; needs assessment; resource identification
3.2.4	Long-term reconstruction planning process is established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Reconstruction plan; funding sources; "build back better" principles; timeline; project management
3.2.5	Security protocols for recovery phase are defined	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Security assessment; access control; asset protection; contractor oversight; incident reporting
3.2.6	Transition from emergency to routine operations is defined	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Transition criteria; communication plan; staff reassignment; equipment return; documentation closure
3.2.7	Build-back-better principles are integrated into recovery	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	BBB assessment; resilience improvements identified; code compliance updates; hazard mitigation measures
3.2.8	Lessons learned are incorporated into plan updates	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lesson learned documentation; plan revision records; improvement tracking; implementation monitoring
	<b>Section Total</b>			___/8	

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## 3.3 Recovery - SYSTEMS

#	Component	Not Started	Partial	Completed	Evidence of Compliance
3.3.1	Information technology and medical records recovery protocols are established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IT recovery plan; data backup verification; system restoration procedures; record reconstruction
3.3.2	Rehabilitation services protocols are in place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Rehabilitation service plan; patient needs assessment; referral pathways; community resources
3.3.3	Surveillance continuation during recovery is planned	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Surveillance protocols; reporting requirements; disease monitoring; trend analysis
3.3.4	IPC measures during recovery phase are defined	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Recovery IPC guidelines; decontamination procedures; ongoing monitoring; supply restoration
3.3.5	Communication protocols for recovery phase are established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Recovery communication plan; stakeholder updates; public information; staff communication
3.3.6	Community engagement for recovery is planned	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Community recovery engagement plan; feedback mechanisms; partnership restoration; public health messaging
	<b>Section Total</b>			___/6	

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## 3.4 Recovery - STUFF

#	Component	Not Started	Partial	Completed	Evidence of Compliance
3.4.1	Inventory update and supplies restocking protocol is established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Inventory reconciliation procedures; restocking priorities; vendor notification; budget allocation
3.4.2	Equipment repair and replacement protocol is in place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Equipment assessment; repair vs. replace criteria; procurement procedures; maintenance backlog
3.4.3	Cost mitigation strategies (direct and indirect) are defined	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Cost tracking; insurance claims; government reimbursement; donation management; budget adjustment
3.4.4	Financial recovery and insurance claim processes are established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Insurance policy documentation; claims procedures; documentation requirements; reimbursement tracking
	<b>Section Total</b>			___/4	

## 3.5 Recovery - STAFF

#	Component	Not Started	Partial	Completed	Evidence of Compliance
3.5.1	Mental Health and Psychosocial Support (MHPSS) program for staff is established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	MHPSS program document; counseling services; peer support; referral pathways; long-term follow-up
3.5.2	Financial and non-financial incentives for recovery phase are defined	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Incentive policy; overtime compensation; recognition programs; time-off provisions; bonus criteria

#	Component	Not Started	Partial	Completed	Evidence of Compliance
3.5.3	Demobilization protocols for staff and volunteers are established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Demobilization procedures; checkout process; equipment return; documentation; exit briefing
3.5.4	Staff recognition and rewards program post-emergency is in place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Recognition criteria; award categories; ceremony planning; documentation; publicity
3.5.5	Return to normal staffing levels protocol is defined	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staffing restoration plan; schedule normalization; backlog management; leave restoration
3.5.6	Staff fatigue management during recovery is addressed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fatigue assessment; mandatory rest periods; workload monitoring; wellness programs
	<b>Section Total</b>			___/6	

### 3.6 After Action Review (AAR) and Lessons Learned

#	Component	Not Started	Partial	Completed	Evidence of Compliance
3.6.1	After Action Review (AAR) process is established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	AAR SOP; facilitator training; template documents; timeline requirements; participation criteria
3.6.2	Background information collection protocol for AAR is in place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Data collection forms; document retention; timeline construction; key informant list
3.6.3	Trigger questions development process is defined	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Question development methodology; customization by event type; participant input; objective alignment

#	Component	Not Started	Partial	Completed	Evidence of Compliance
3.6.4	Identification of strengths, challenges, and new capacities is conducted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Analysis framework; categorization system; root cause analysis; capacity assessment
3.6.5	Consensus building among participants is facilitated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facilitation techniques; voting/ranking methods; conflict resolution; documentation of divergent views
3.6.6	AAR team debriefing process is established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Debriefing schedule; participation requirements; documentation; immediate findings
3.6.7	AAR report writing and dissemination process is in place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Report template; approval process; distribution list; confidentiality provisions; publication timeline
3.6.8	Lessons learned process with corrective action plan is established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lessons learned database; corrective action template; responsibility assignment; tracking system; follow-up
	<b>Section Total</b>			___/8	

## Score Interpretation

Total Score Range	Overall Rating	Interpretation
0-31 (0-25%)	<b>Critical</b>	Hospital is highly vulnerable. Immediate action required on foundational elements.
32-63 (25-50%)	<b>Developing</b>	Basic elements in place. Focus on filling major gaps and strengthening systems.
64-95 (50-75%)	<b>Progressing</b>	Good foundation. Continue to build comprehensive capabilities.

Total Score Range	Overall Rating	Interpretation
96-114 (75-90%)	Advanced	Strong resilience framework. Focus on refinement and sustainability.
115-127 (90-100%)	Exemplary	Comprehensive resilience achieved. Maintain and share best practices.

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## Priority Action Plan

Based on assessment results, list top 5 priority areas for improvement:

Priority	Component #	Description	Target Completion	Responsible Person
1				
2				
3				
4				
5				

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**Assessment Date:** \_\_\_\_\_

**Assessed By:** \_\_\_\_\_

**Hospital Name:** \_\_\_\_\_

**Next Review Date:** \_\_\_\_\_

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*Based on: Resilient Hospitals - Inter-regional Guidance for Strengthening Resilience to Health Emergencies and Disasters in Health Facilities (WHO)*