# **Attachment A**

# **Existing Emergency Response Plan and Flood Standing Operating Procedure Plan**

2672-1051

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# **EMERGENCY RESPONSE PLAN**

MACKSVILLE HEALTH CAMPUS – INCLUDING SURROUNDING BUILDINGS ON SITE

SECTION 9: CODE BROWN – External Disaster Plan

# **Authorisation**

The Macksville Health Campus Code Brown has been prepared in consultation with the Coffs Clinical NETWORK Disaster Committee, MNC Health Emergency Management Committee. The plan is a support plan to the MNC Health Services Functional Area Supporting Plan (MNC HEALTHPLAN) and the MNC Disaster Plan (EMPLAN). It details the necessary management arrangements to coordinate all health resources in the event of emergencies.

The Plan is authorised in accordance with the provisions of the State Emergency and Rescue Management Act 1989(as amended)

RECOMMENDED	
	Facility Disaster Controller
	Dated:
APPROVED	
	NETWORK Disaster Controller
	Dated:
ENDORSED	
Mid North Co	east Health Service Functional Area Coordinator
	Dated:

MACKSVILLE HEALTH CAMPUS EMERGENCY RESPONSE PLAN – SECTION 8 CODE BROWN DISASTER PLAN

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# **Policy Statement**

There shall be clear and adequate procedures to follow that cover any event that is defined as a disaster/major incident.

A **disaster** is defined as an event or catastrophe that overwhelms the health service's resources requiring external assistance.

A **major incident** is defined as an event or catastrophe that utilises maximally the health service's resources without need for external support from other areas or regions.

The hospital response will be the responsibility of the Hospital Disaster Controller who has full authority to control, direct and coordinate resources as required. The Hospital Disaster Controller is the Executive Manager on – call and in his/her; absence will be the most senior designated person in the hospital until the arrival of the on-call executive.

The Macksville Health Campus Healthplan will interface with the Local Emplan developed pursuant to the State Emergency and Rescue Management Act 1989 (as amended)

# Legislation

The following Legislation Acts and their respective Regulations and NSW Health policy are also applicable to this Plan:

- a. State Emergency and Rescue Management Act, 1989 (as amended)
- b. Ambulance Services Act 1990
- c. Health Administration Act 1982
- d. Health Records Privacy and Information Act 2002
- e. Health Services Act 1997
- f. Local Government Act 1993
- g. Mental Health Act 1990
- h. Work Health and Safety Act 2011
- i. Privacy and Personal Information Protection Act 1998
- i. Poisons and Therapeutic Goods Act 1996
- k. Public Health Act 2010
- I. Protection of Environment Operations Act 1997
- m. Private Health Facilities Regulation 2010

# **Policy**

This plan is to be implemented in conjunction with the following NSW policy directives:

- PD\_2005-247, NSW Infection Control Policy
- PD2007\_006, Occupational Assessment, Screening & Vaccination Against Specified Infectious Diseases

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PD 2005-359, Notification of Infectious Disease under the Public Health Act 1991

# 1. Introduction

The Macksville Health Campus (MHC) recognises and accepts the need for a positive interface between all agencies involved in planning for, and responding to an emergency or defined disaster.

It is always possible that this hospital might suddenly be called upon to admit casualties considerably beyond the capacity of the immediate available resources

In the event that Macksville Health Campus MHC will be the receiving hospital for casualties the deployment of a medical strike team (Appendix 1) will not be possible.

The following plan is designed to cover ordinary peacetime disasters. Possible occurrences that might have to be met are:

# **Transport Accidents:**

- ♦ Railway
- ♦ Bus
- Multiple casualties from traffic accidents
- ♦ Aircraft

#### **Industrial Hazards:**

- ♦ Explosion
- ♦ Fire (or combination)
- Gassing by industrial gases

# **Multiple Casualty Presentations:**

- Fire in Public Buildings etc:
- Multiple Immersion from Surf Beaches, Waterways, etc
- ♦ Health emergencies e.g. Pandemic

#### **Natural Disasters:**

- ♦ Floods
- Bushfires
- ♦ Earthquake
- ◆ Tsunami

**NOTE:** All staff should thoroughly familiarise themselves with the contents of this Plan.

#### **Activation**

The Macksville Health Campus Healthplan - Counter Disaster Plan is invoked by notification from:

- LHD Health Service Functional Area Coordinator (HSFAC) to the NETWORK Disaster Controller who notifies the Hospital Disaster Controller.
- o To the Emergency Department from the Ambulance Control Centre.

The activation of the () HC or LHD Healthplan (A Counter Disaster Plan) may occur in either of the following instances:

 An emergency involving a large number of casualties, and/or potential for large number of casualties. As a general guideline, an emergency that involves 2 critical or 6 stretcher casualties should be considered an impending disaster situation and the Executive Officer notified. The Executive Officer will determine whether a disaster

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situation exists and be responsible for the implementation of the Disaster Plan to the extent considered necessary. Once implemented the Executive Officer takes on the role of Hospital Disaster Controller. The Hospital Disaster Controller will consult with the LHD HSFAC and the NETWORK Coordinator and decide to which extent a disaster exists.

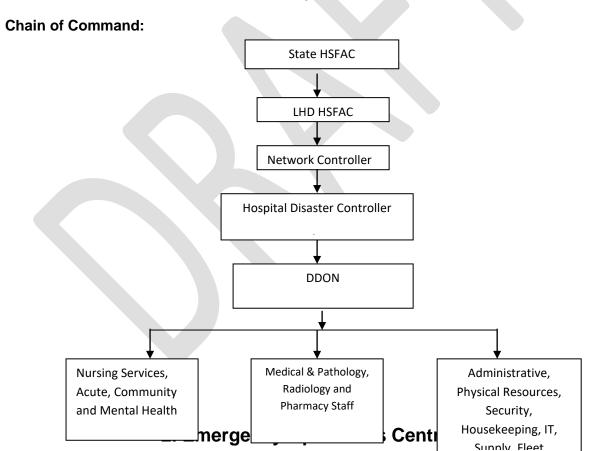
However 2 or more critically injured casualties would stretch hospital resources and early implementation of this plan would improve outcomes.

A threat to the health of the community i.e. public health disaster.

If the incident exceeds the capability of the Macksville Health Campus escalation to a NETWORK response will ensue and *Coffs Harbour* NETWORK Controller will take over incident management and establishment of the Coffs Harbour NETWORK HEOC. Escalation to an area response will occur if the incident exceeds the capability of the NETWORK.

The () HC Counter Disaster Plan dovetails with the, MNC HEALTHPLAN – A Counter Disaster Plan that is consistent with the State Counter Disaster Plan (NSW HEALTHPLAN).

When HEALTHPLAN is activated, the following will be enacted:

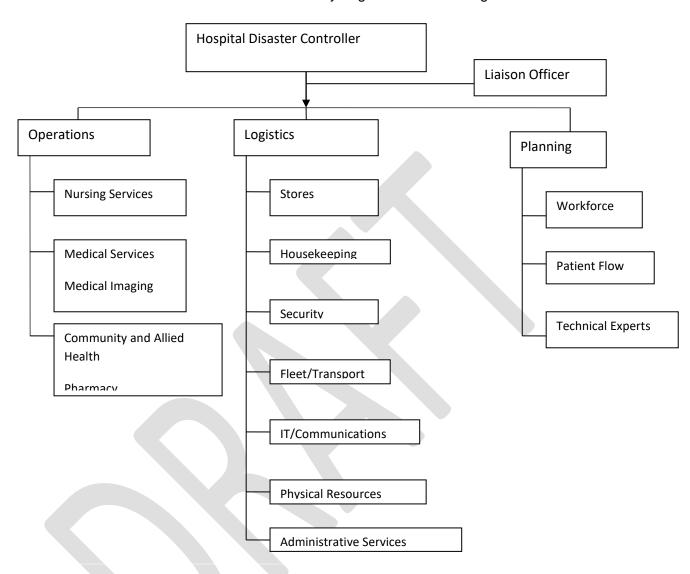


The Health Emergency Operations Centre (HEOC) will be the Executive Officer Office. The Hospital Disaster Controller will be located in the HEOC.

The management structure in the HEOC will follow the Incident Command System (ICS). ICS will enable consistency of designated functions with other agencies, can be expanded dependent on the impact of the incident, and demonstrates command and control pathways.

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ICS allows for the activation of functions as the incident develops. In the beginning the Hospital Disaster Controller may fill all functions, as the incident escalates Operations would be the first function to be made active followed by Logistics and Planning.



The HEOC is the operations centre for the response and as such will have sufficient designated external telephone lines and facsimile available to facilitate communication both internally and externally.

Documentation of resources requested, received and deployed, patient movement and staff attendance will be documented on designated paperwork. All documentation will be kept from the incident.

A system will be established to relay casualty data from the Emergency Department to the Health Emergency Operations Centre. This maybe by runner the switchboard will refer all incoming calls to the appropriate persons e.g. Nurse Unit Manager

## 3. Notification of a Disaster and Initial Action

Notification of an external disaster must originate from:

ASNSW or the LHD HSFAC through the NETWORK Controller.

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 Notification of a disaster impacting a facility will be declared by the Hospital Disaster Controller to the NETWORK Controller i.e. fire, building collapse, inpatient surge as detailed in "1. Introduction."

#### **Documentation of Critical Information**

- time of notification
- who is notifying
- Exact location of incident
- <u>T</u>ype of incident
- <u>H</u>azards present
- Accessibility of site
- Number of casualties
- Emergency Services present......Required......
- type of injuries
- expected time of arrival of casualties at hospital

# 3.1 Phases of Disaster Response

The MHC Disaster Plan has 5 phases:

- **3.1.1 Alert** disaster situation possible, there is an increased level of preparedness.
  - The first person to be informed of an impending or actual disaster should notify the Nurse Manger on duty
  - The Hospital Disaster Controller, in conjunction with other key personnel, shall decide whether a disaster situation exists and will be responsible for the declaration of a disaster,
  - Communication with staff will be by the chain of command
  - The NETWORK Controller and LHD HSFAC should be notified and he/she should notify the LHD CE and State HSFAC.
- **3.1.2 Stand-By** disaster situation probable.
  - Staff will be called in, to be available within the campus or as members of the Medical Response Team, if required.
  - Staff will report to Staff dining room
- 3.1.3 Call Out disaster situation exists.
  - Staff will be deployed using the chain of command from the Hospital Controller.
  - Facility Code Brown implemented
- **3.1.4 Stand Down** disaster situation is contained.

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The stand down phase will be ordered by the Hospital Disaster Controller when in possession of intelligence that the Health Service can cope with the situation using the normal resources available to it.

# **3.1.5 Recovery** – return of services to the normal state of readiness.

- An organisational debrief will be held at the stand down order.
- Reports will be completed by all services and departments and forwarded to the Hospital Controller within 4 days of the incident.
- Facility report will be compiled by the Hospital Disaster Controller/NETWORK
   Controller and be submitted to the LHD HSFAC within 7 days of the activation
- Group and individual counselling services will be made available for staff at any time after the incident.
- The Employee Assistance Program is available to all involved staff
- After each exercise or actual disaster, the Heads of each department will collate a report on their involvement for discussion and recommendation to the Counter Disaster Committee.

An operational debrief will be conducted via the Disaster Committee several weeks after the exercise or incident and recommendations made as to amendments to this Disaster Plan.

# 4. Roles and Responsibilities

# **4.1 Hospital Disaster Controller**

This position will be filled by the Executive Officer

**Responsibility:** for the overall (internal and external) direction for hospital operations and if required authorise evacuation.

- Will receive notification from the LHD HSFAC or the Coffs Harbour NETWORK Controller that the hospital is or could be required to contribute to the response to a disaster.
- Will notify other key position holders and appoint admin support to the HEOC.
- Will assume overall command of the hospital resources and management of its response.
- Will arrange action plan meeting with all position holders to gain status report and discuss initial action plan arrange for further briefings during the incident
- Designate MHC Liaison Officer if required for local EOC
- Determine bed availability for admission of casualties. Relay information to Coffs Harbour NETWORK Controller.
- Monitor the overall hospital response to the situation, use log sheet to document all actions and decisions throughout the incident.
- Liaison with the Coffs Harbour NETWORK Controller re hospital admission capabilities, arrange medical retrievals of patients and deployment of Health Strike Teams

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- Will relay regular situation reports to the Coffs Harbour NETWORK Controller/LHD HSFAC.
- Submit written report to Coffs Harbour NETWORK Controller and LHD HSFAC within 7 days after stand down.
- Manage all media inquiries, following consultation with LHD Media Liaison Officer.
- Ensure welfare of all staff.

# 4.1.2 Operations Manager

This position will be filled by the Deputy Director of Nursing.

**Responsibility:** Organise and direct all aspects relating to the operations of the incident. Carry out directives of the Hospital Disaster Controller. Coordinate and supervises the Nursing, Medical, Community and Allied Health, Mental Health services and patient flow during the incident.

- Receive briefing from Hospital Disaster Controller
- Notifies designated managers of operations functions i.e. Nursing, Medical, Community and Allied health, and Mental Health
- Calls briefing of function managers and identifies operational actions and arranges further briefing times
- Maintains operational log at all times documenting actions and decisions.
- Ascertain bed availability at hospital appoint bed manager to manage patient flow and maintain patient census
- If in hours, cancel elective admissions in progress and pending.
- If in hours notify GP surgeries of emergency situation and need to re direct non urgent patients
- Ensure staff are able to access breaks and be relieved at regular intervals.
- Ensure all operational areas are adequately staffed and supplied
- Ensure Hospital Disaster Controller routinely briefed on the status of operations

#### 4.1.3 Logistics Manager

This position will be filled by the Deputy Director of Nursing.

**Responsibility:** Organise and direct those operations associated with the maintenance of the physical environment and adequate levels of food shelter and supplies to support the medical objectives

- Receive briefing from Hospital Disaster Controller
- Notifies administrative services, purchasing, housekeeping, transport, security, physical resources, and IT communications of activation status if not already done.
- Brief managers and receives status report of supply and resources, arrange timeframe for further briefings
- Ensure traffic flow of staff reporting to work and arriving relatives/patients

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- Notify local funeral directors to decant bodies from mortuary
- Ensure facility ready to accept incoming ambulances and helicopters.
- Document all requests for deployment of resources liaise with Operations Manager re priority of deployment
- Document all actions and decisions on log sheet
- Ensure staff are able to access adequate breaks
- Liaise closely with Operations and Planning Manager
- Ensure all operational areas are adequately staffed and supplied

#### 4.1.4 Planning Manager

This position will be filled jointly by the Executive Officer and the Deputy Director of Nursing.

**Responsibility:** Organise and direct all aspects of Planning operations. Ensure the distribution of critical information data. Compile scenario/resource projections from all areas and effect long range planning. Document and distribute facility Action Plan.

- Receive briefing from Hospital Disaster Controller
- Provide briefing for managers on status of operations and resource usage. Arrange for regular briefings
- Develop Incident Action Plan
- Maintain information on the current and forecast situation
- Maintain information on the status of resources allocated and to where.
- Analyse intelligence and provide hospital –wide projection reports for 4, 8, 24 and 48 hours from incident time onset
- Development of alternative future strategies
- Distribute updated facility Action Plan and Situation reports.
- Ensure staff are able to access adequate breaks

## 4.1.5 Liaison Officer

Will be deployed to the local Emergency Operations Centre (EOC) during a multi agency response. This position has the authority to commit resources on behalf of the facility. This position may not be enacted for a hospital response only.

- Briefed by Hospital Disaster Controller
- Advise on the operational capabilities, resources and operation procedures of the facility represented
- Provide operational information and intelligence from the facility
- Convey the directives and priorities to the facility represented for implementation
- Clarify Hospital Disaster Controller intention and points of detail as necessary

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- Obtain the latest information from the agency represented, and accurately report upon their situation and requirements in the disaster area
- Keep all HEOC personnel informed on the agency deployment status, resource availability, any support required, working conditions, agreements to assist arrangements and future intentions
- Maintain communication links between the EOC and the Hospital Disaster Controller
- Maintain log of all decisions and actions
- Prepare report for Hospital Disaster Controller

# 4.2 Operations

## 4.2.1 Nursing:

- Receive briefing from Operations manager
- Ascertain bed availability within the hospital including morgue
- Cancel elective surgery
- Liaise with Community and Allied Health manager to recall community nursing staff from duties external to the hospital
- Liaise with critical care and ward areas re staffing and resource requirements
- Review staffing capability and skills of available staff
- Deploy wards person/HSA as required
- Place staff on standby or call in as required
- Allocate patients requiring admission inpatient beds
- Ensure early discharge patients identified for primary health follow up the following day
- Allocation of beds for casualties requiring admission
- Ensure current numbers and triage categories of casualties at the hospital
- Maintains operational log at all times documenting actions and decisions
- Attend briefings as scheduled
- Ensure staff are able to access adequate breaks

# 4.2.2 Medical Manager

- Notify medical directors of all hospital areas, Pathology, and medical imaging, pharmacy,
- Notify all VMO and GP's of activation status and ascertain their availability to assist
- Liaise with Emergency Department Director re medical staffing requirements
- Deployment of medical officers to surge areas that have been activated
- Coordinates all secondary patient transfers

# 4.2.3 Community and Allied Health Manager

Brief managers of allied health.

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- Recall community nurses from duties external to the hospital
- Request an immediate assessment of each services capabilities, human resources, and needs. Designate a time for follow up meeting
- Receive, coordinate and forward requests for personnel and materials to the appropriate person

#### 4.2.3 Mental Health Manager

- Establish teams to support the psycho-social needs of the staff, patients and visitors
- Coordinates all welfare, counselling and debriefing services
- Liaise with Community and Allied Health Manager re deployment of social services personnel to assist with casualty, relative and hospital personnel welfare requirements
- Designate a secluded area that can be utilised as a debriefing area for individuals or groups
- Ensure availability of mental health professionals by initiating teams visiting patient and non-patient areas on a scheduled routine
- Appoint volunteer coordinator to manage volunteer resources

# 4.3 Logistics

#### **4.3.1 Stores**

- Initiate deployment of supply items to nominated surge areas (orange/green areas)
- Inventory of supplies on hand and estimate usage
- Restock areas as required
- Reguest addition stock and equipment through Logistics Manager

## 4.3.2 Security, wards person and Fleet

- Deploy additional wards persons to surge areas i.e. Emergency Department, surge area
- Deploy personnel to hospital entry, Emergency Department, Triage area, visitor and media area
- Establish and implement vehicular and pedestrian traffic control
- Assist with turnaround of ambulances
- Assist with intra hospital patient transfers
- Arrange inter hospital transport for patients being decanted to other facilities, this maybe via the use of hospital vehicles

# 4.3.3 Housekeeping

- Brief staff in catering and cleaning services
- Ascertain available stocks for meal delivery and linen supply
- Ensure additional collection of waste and soiled linen in surge areas
- Monitor levels of all equipment and stocks relevant to this function
- Ensure refreshments available for visitor and media areas

#### 4.3.4 Administrative Service

- Identify additional staffing requirements for admission and discharge of patients
- Deploy appropriate staff to high demand areas e.g. Reception, HEOC, switch, surge areas etc.
- Maintain location of patients at all times
- Request assistance of runners to deliver census information
- Ensure appropriate direction of telephone enquiries. No patient enquires to be transferred to Emergency Department

#### 4.3.5 IT/Communications

- Ensure HEOC equipment ready for operation
- Ensure availability of additional communication devices or the need to use runners (will need to liaise with Volunteer coordinator to arrange the use of runners)
- Establish availability of IT/Communications staff for after-hours
- Ensure all existing core services provided via the IT Service department are to be continued and supported as necessary

## 4.3.6 Physical Resources

- Brief physical resources staff re status of the incident
- Ensure functionality of emergency generator and other equipment
- Coordinate deployment of additional beds and equipment to surge areas
- Assist with erection of barriers to direct vehicular and pedestrian traffic

# 4.4 Planning

#### 4.4.1 Workforce

- Ascertain current workforce status for all areas
- Ascertain availability of additional personnel may involve staff from other NETWORK facilities
- Maintain list of skills of available staff
- Liaise with Operations and Logistics function managers to establish estimated future requirements for 4, 8, 24 and 48 hours
- Establish a registration and credentialing area for volunteers not employed or associated with the hospital
- Develop projected rosters based on information available

#### 4.4.2 Patient Flow

- Ascertain current hospital inpatient bed status
- Maintain location of patients within the hospital care system at all time
- Liaise with NETWORK hospitals to establish bed availability off site
- Liaise with Nursing and Medical Function managers on estimate of inpatient beds required and nature of the bed e.g. critical care, surgical, paediatric etc.
- Develop projected patient census for coming 4, 8, 24 and 48 hours

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#### 4.4.3 Technical Experts

- Will be involved for specific incidents as required e.g. critical infra-structure failure.
   Natural disaster etc.
- NSW Ambulance may be required to be one of the experts in regard to patient transport once the scene is cleared

## 5. All Staff

- All staff called in are to sign on at a central registration point (nominate area)
- Proceed to designated area/department for allocation of duties
- Adhere to WH&S requirements and infection control practices during the performance of their duties
- Use supplied personal protective equipment as required
- Do not provide any information to the media
- Ensure participation in debriefing

# 6. Police

The Police can be requested to assist with the following:

- Identification of casualties at the hospital.
- Contacting and advising relatives regarding consent or deaths
- Contacting urgently required staff and volunteers.
- Providing security and traffic control at the hospital.
- Establishing and maintaining an information service regarding casualty condition reports.
- Contacting the Police Media Unit when requested, or before, if they consider the disaster is likely to attract significant media attention.

# 7. Facilities and Management

# 7.1 Surge Areas

All wards and departments within the facility are to have available current plans/standard operating procedures to rapidly establish their response during a disaster. These will include action cards for managers/senior staff and any changes in the ward/department function. These arrangements are to be included in ward/department orientation of staff and documented to ensure accessibility for reference.

#### 7.1.1 Emergency Department

The Emergency Department will be the initial area for receiving of casualties. Areas will be allocated and staffed for:

- Immediate (Red) patients- Resus and Bed 2
- Urgent (Yellow) Bed 3,4,5 and 6
- Delayed (Green) Waiting Room

When surge areas are made operational:

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- A Triage nurse experienced in disaster triage is to be deployed to the area
- A Medical Officer will be deployed to surge areas by the Medical Manager
- Establishment of these areas will also involve the deployment of supply, equipment, and pharmacy items listed in department plans.

Roles and responsibilities for key Emergency Department personnel are documented in the Emergency Department Plan including Medical Response Team members.

#### 7.1.2 Triage

A Triage area will be setup at the entry to the ED and staffed with experienced ED personnel with an understanding of disaster triage and an experienced ED clerk. All patients will be logged on arrival documentation will include: Disaster Triage card number, Name (if known), Time of arrival, Triage category on arrival, DOB (if known).

All patients will be re triaged on arrival and priority changed according to condition and directed to the appropriate area.

#### 7.1.3 Inpatient Areas

Responsibility of the Nursing Services Manager

Opening of additional beds in Maternity and on General Floor

# 7.1.4 Support Areas

Staff Sign-in & Credentialing area Staff dining room

# 7.1.5 Patient Belongings

All personal effects and clothing (if possible) from casualties will be labelled, recorded, and kept in a secure area, laundry area.

#### 7.1.6 Discharge Area

Responsibility of the Nursing Services Manager

To facilitate unimpeded patient flow patients being discharged from hospital will leave the hospital via *Agnes Grant Centre* Relatives arriving to pick up discharged patients will be advised of these arrangements.

Agnes Grant Centre waiting area that discharge patients can wait to be picked up.

- Ensure staff designated to this area
- All early discharged patients to receive documentation re early discharge due to disaster with information on what to do if condition deteriorates
- All discharge documentation to be completed
- Maintain list of all discharged patients for follow up by Community Health staff in following 24hours

#### 7.1.7 Relatives Waiting Area

Responsibility of Mental Health Manager

- Chapel for relatives away from inpatient areas
- Ensure areas have sufficient seating, access to restrooms, telephone and refreshments
- Deploy administrative staff to register relatives and who they are waiting for

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- Ensure current casualty list available to administrative staff for relative information
- Arrange regular briefings to relatives on casualty arrival situation
- Ensure counselling and welfare services available

#### **7.1.8 Morgue**

Responsibility of the Operations Manager

- Notify local funeral directors to decant bodies
- Will need additional staff deployed when scene fatalities arriving

# 7.2 Information Areas

# 7.2.1 Casualty and Survivor Information

Operations Manager Responsibility

- Ambulance Training Centre for casualty and survivor information, ensure this is away from inpatient areas
- Designated personnel to staff telephone
- Operations Manager to ensure an accurate and current patient list is available

#### **7.2.2 Media**

Responsibility of the Hospital Disaster Controller

- Cancer Institute Building to house external media representatives credentialed media representatives only
- Designate a Media Liaison person
- Media interviews with casualties or staff will not be permitted
- Television cameras, photographers or reporters will not be allowed outside designated areas
- The Hospital Disaster Controller or delegate will be the only staff to brief the media
- Regular media briefings to occur
- Police Media Unit may assist

#### 7.2.3 Welfare and Counselling Information

Responsibility of the Mental Health Functions

- Agnes Grant Centre for accessing these services
- Deploy appropriately trained staff to this area
- Department of Community Services may assist with welfare enquiries

# 7.2.4 Interpreter Services

Responsibility of the Logistics Manager

- Contacts list available for local interpreter personnel
- Availability of phone interpreter service contact numbers

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## 7.3 Evacuation

Responsibility of the Hospital Disaster Controller

In the event the facility is required to be evacuated, evacuation procedures will be followed as for *Code Orange - Evacuation*.

Relatives and patients will be directed to designated Assembly areas and if required alternative shelter as nominated in Evacuation manual.

# 8. Evaluation, Review, and Training.

#### 8.1 Evaluation and Review

This Plan is to be reviewed and / or updated by the *Coffs Clinical Network Emergency Management* Committee on the following occasions:

- on the conclusion of an emergency in which this Plan was or could have been activated;
- recommendations from an annual exercise testing of this plan
- on the introduction of any major structural, organisational or legislative changes which affect Health or key stakeholders; or
- At least every two years.

# 8.2 Training

- The Hospital Disaster Controller will ensure any health service staff, who will be expected to perform duties in relation to an emergency, must have evidence of training to fulfil those duties.
- Training is essential to ensure a coordinated response in the event of plan activation and is to be tailored for each component of the plan in accordance with the minimum competencies as defined by the Counter Disaster Unit.
- Staff who hold positions within the structure of this plan will attend recognised training
   A central register of trained personnel will be maintained by the Hospital

# **Appendix 1**

# CODE BROWN ACTION CARD

## HOSPITAL DISASTER CONTROLLER

**Responsibility:** for the overall (internal and external) direction for hospital operations, and if required, authorise evacuation.

- Receive notification from the MNC HSFAC or the NETWORK Controller that the hospital is or could be required to contribute to the response to a disaster.
- Arrange notification of other key positon holders (as deemed required):
  - Deputy Director of Nursing (Operations, Logistics)
- Set up Executive Officer Office as HEOC and appoint administration support
- Appoint administration Officer as Whiteboard Coordinator

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- Liaise with Logistics Manager to set up Cancer Institute Building as Media Room / Credentialling Area
- Assume overall command of the hospital resources and management of its response.
- Arrange action plan meeting with all position holders to gain status report and discuss initial action plan and arrange for further briefings during the incident
- Designate Liaison Officer (if required) for local EOC
- Determine bed availability for admission of casualties. Relay information to NETWORK Controller.
- Monitor the overall hospital response to the situation, use log sheet to document all actions and decisions throughout the incident.
- Relay regular situtation reports to the MNC HSFAC.
- Submit written report to MNC HSFAC within 7 days after stand down.
- Ensure welfare of all staff.
- Coordinate evacuation of facility (if required)

#### Media

- Manage all media inquiries, following consultation with MNC Media Liaison Officer.
- Designate a Media Liasion person Note:
  - Credentialed media representatives to be housed in the Cancer Institute Building
  - Media interviews with casualties or staff will not be permitted
  - o Television cameras, photographers or reporters will not be allowed outside designated areas
  - The Hospital Disaster Controller or delegate will be the only staff to brief the media
  - Ensure regular media briefings occur
  - Police Media Unit may assist

#### **Evacuation**

- In the event the facility is required to be evacuated, facility evacuation procedures are to be followed as for Code Orange - Evacuation.
- Relatives and patients are to be directed to designated Assembly Areas, and if required, alternative shelter as nominated in Evacuation Manual.

## PLANNING MANAGER

Responsibility: Organise and direct all aspects of Planning operations. Ensure the distribution of critical information data. Compile scenario/resource projections from all areas and effect long range planning. Document and distribute facility Action Plan.

- Gather information
- Provide briefing for managers on current status of operations and resource usage - arrange for regular briefings

MACKSVILLE HEALTH CAMPUS EMERGENCY RESPONSE PLAN - SECTION 8 CODE BROWN DISASTER PLAN

- Analyse current resources to determine effectiveness and future needs
- Project the course of incident events
- Develop incident Action Plan Preferred and Alternate Control Strategies
- Present Action Plan to Hospital Disaster controller for authorisation
- Distribute updated facility Action Plan and Situation reports.
- Maintain operational log at all times documenting actions and decisions
- Maintain information on the current and forecast situation
- Maintain information on the status of resources allocated and to where.
- Provide hospital-wide projection reports for 4, 8, 24 and 48 hours from incident time onset
- Ensure all operational areas are adequtely staffed and supplied
- Ensure staff are able to access adequate breaks

# NOTE:

- □ OPERATIONAL LOGS <u>MUST</u> BE KEPT UP TO DATE
- □ ALL STAFF MOVEMENTS ARE TO BE ON THE DIRECTION OF THE HEOCONLY



# **OPERATIONS LOGISTICS MANAGER**

**Responsibility:** Ensure the internal response of the hospital is adequate and appropriate. Organise and direct all aspects relating to the operations of the incident. Carry out directives of the Hospital Disaster Controller. Coordinate and supervises the Nursing, Medical, Allied Health, Ancillary Services and Patient Flow during the incident.

- Receive briefing from Hospital Disaster Controller
- Operations function:
  - Medical Services & Ancillary
  - Nursing Services / Patient Flow & Patient Transport
  - Mental Health Services
  - o Allied Health & Community Services
  - o Physical Resources
  - Supply
  - Housekeeping & Security Services
  - o Adminstrative Services & Fleet
  - IT / Communications
- Call briefing of managers and identify operational actions
- Arrange further briefing times
- Maintain operational log at all times documenting actions and decisions, and recieves status report of supply and resources
- Acertain bed availability at hospital appoint bed manager to manage patient flow and maintain patient census
- If in hours, cancel elective admissions in progress and pending.
- Ensure lock-down of facility occurs in timely manner
- Allocate HSA's to traffic control (internal/external/vehicular & pedestrian)
- Ensure all operational areas are adequtely supplied
- Set up staff dining room for called-in staff sign-on area
- Set up Media Room / Credentialling Area
- Ensure traffic flow of staff reporting to work and arriving relatives/patients
- Ensure facility ready to accept incoming ambulances and helicopters.
- Notify local funeral directors to decant bodies from mortuary in consultation with Operations Manager
- Document all requests for deployment of resources and liaise with Operations Manager re priority of deployment
- Document all actions and decisions on log sheet
- Ensure staff are able to access adequate breaks
- Liaise closley with
- Hospital Controller
- Ensure all operational areas are adequtely staffed and supplied

MACKSVILLE HEALTH CAMPUS EMERGENCY RESPONSE PLAN – SECTION 8 CODE BROWN DISASTER PLAN

# **Surge Areas**

- Allocate Surge Areas as per Disaster Plan Table attached
- Deploy a Triage Nurse experienced in disaster triage to the area/s
- Ensure the deployment of supply, equipment and pharmacy items to the area/s

# **Emergency Department**

- Ensure Emergency Department ready for the receiving of casualties.
- Ensure key Emergency Department personnel are mobilised and implementing Emergency Department Plan & Medical Response Teams

# Triage

- Ensure Triage area setup at the entry to the ED and staffed with experienced ED personnel with an understanding of disaster triage, and an experienced ED clerk.
- Ensure all patients logged on arrival and documentation includes: Disaster Triage card number, Name (if known), Time of arrival, Triage category on arrival, DOB (if known)
- Ensure all patients are re triaged on arrival and priority changed according to condition and directed to the appropriate area.

## **GREEN AREA**

- Ensure ED Waiting Room is set up to receive Green Label casualties from ED
- Arrange clerical support from Patient Service Office.

## **Discharge Areas**

- Arrange for Agnes Grant Centre to be set-up as Primary Discharge area
- Ensure staff designated to this area and are aware of following:
  - All early discharged patients to receive documentation re early discharge due to disaster with information on what to do if condition deteriorates
  - All discharge documentation to be completed
  - List of all discharged patients to be maintained for follow up by Primary Health staff in following 24hours
- Ensure clerical staff designated to this area and maintain a list of patients, the time they left the facility and contact details for person providing the transport
  - Patients waiting for discharge transport will be accommodated in this area
  - Relatives arriving to pick up discharged patients will be advised of these arrangements

# **Casuality & Survivor Information Centre**

- Ensure set up of Casualty & Survivor Information Centre Ambulance Training Centre
- Designate personnel to staff telephone
- Ensure an accurate and current patient list is available
- Ensure staff are able to access breaks and be relieved at regular intervals.

MACKSVILLE HEALTH CAMPUS EMERGENCY RESPONSE PLAN - SECTION 8 CODE BROWN DISASTER PLAN

- Ensure all operational areas are adequtely staffed and supplied
- Ensure Hopsital Disaster Controller routinely briefed on the status of operations

# **Other Surge Areas**

Location	Patient Type	Number of Beds
Coffs Harbour Hospital	Red, Yellow, Green and White	?
Port Macquarie	Red, Yellow, Green and White	?
Kempsey Hospital	Red, Yellow, Green and White	?

# Morgue

- Notify local funeral directors to decant bodies
- Deploy additional staff when scene fatalities arriving
- Request additional mortuary facilities if required via the Allied Health, Community Services & Ancillary Manager

# **Interpreter Service**

 Ensure contacts list & contact numbers for local interpreter personnel are available to HEOC

#### NOTE:

- □ OPERATIONAL LOGS <u>MUST</u> BE KEPT UP TO DATE
- □ ALL STAFF MOVEMENTS ARE TO BE ON THE DIRECTION OF THE DISASTER CONTROL CENTRE ONLY

## LIAISON OFFICER

 ${\sf MACKSVILLE\ HEALTH\ CAMPUS\ EMERGENCY\ RESPONSE\ PLAN-SECTION\ 8\ CODE\ BROWN\ DISASTER\ PLAN}$ 

**Responsibility:** Will be deployed to the local Emergency Operations Centre (EOC) for a multi agency response. This position has the authority to commit resources on behalf of the facility.

- Receive briefing from Hospital Disaster Controller
- Advise on the operational capabilities, resources and operation procedures of the facility represented
- Provide operational information and intelligence from the facility
- Convey the directives and priorities to the facility represented for implementation
- Clarify Hospital Disaster Controller intention and points of detail as necessary
- Obtain the latest information from the agency represented, and accurately report upon their situation and requirements in the disaster area
- Keep all EOC personnel informed on the agency deployment status, resource availability, any support required, working conditions, agreements to assist arrangements and future intentions
- Maintain communication links between the EOC and the Hospital Disaster Controller
- Maintain log of all decisions and actions
- Prepare report for Hospital Disaster Controller

#### NOTE:

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# **CODE BROWN ACTION CARD**

# OPERATIONS – NURSING SERVICES / PATIENT FLOW & PATIENT TRANSPORT

MACKSVILLE HEALTH CAMPUS EMERGENCY RESPONSE PLAN – SECTION 8 CODE BROWN DISASTER PLAN

# **Responsibilities:**

- Ascertain bed availability within the hospital
- Cancel elective surgery
- Liaise with critical care and ward areas re staffing and resource requirements
- Review staffing capability and skills of available staff
- Place staff on standby or call in as required
- Allocate patients requiring admission inpatient beds
- Ensure early discharge patients identified for primary health followup the following day
- Allocation of beds for casualties requiring admission
- Ensure current numbers and triage categories of casualties at the hospital
- In consultation with the Logistics Manager deploy additional wardspersons to surge areas; traffic control and lockdown
- Assist with turnaround of ambulances
- Assist with intra hospital patient transfers
- Arrange inter hospital transport for patients being decanted to other facilities, this maybe via the use of hospital vehicles

# NOTE:

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MACKSVILLE HEALTH CAMPUS EMERGENCY RESPONSE PLAN - SECTION 8 CODE BROWN DISASTER PLAN

# **OPERATIONS – MENTAL HEALTH**

## **Responsibilities:**

- Receive briefing from Operations Manager
- Establish teams to support the psycho-social needs of the staff, patients and visitors
- Coordinates all welfare, counselling and debriefing services
- Designate a secluded area that can be utilised as a debriefing area for individuals or groups
- Ensure availability of mental health professionals by initiating teams visiting patient and non-patient areas on a scheduled routine
- Schedule debriefing sessions at the completion of each shift during a protracted incident
- Appoint volunteer coordinator to manager volunteer resources
- Maintains operational log at all times documenting actions and decisions
- Attend briefings as scheduled
- Ensure staff are able to access adequate breaks
- Prepare report for Operations Manager

# **Relatives Waiting Area**

- Accomodate relatives in the Chapel
- Ensure areas have sufficient seating, access to restrooms, telephone and refreshments
- Deploy administrative staff to register relatives and who they are waiting for
- Ensure current casualty list available to administrative staff for relative information
- Arrange regular briefings to relatives on casualty arrival situation
- Ensure counselling and welfare services available

## **Welfare & Counseling**

- Arrange location of Welfare & Counselling Services in the Agnes Grant Centre
- Deploy appropriately trained staff to this area
- Request Department of Community Services assistance (if required) with welfare enquiries

#### NOTE:

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MACKSVILLE HEALTH CAMPUS EMERGENCY RESPONSE PLAN - SECTION 8 CODE BROWN DISASTER PLAN

# **OPERATIONS – COMMUNITY & ALLIED HEALTH**

## Responsibilities:

- Receive briefing from Operations Manager
- Recall community nursing staff from duties external to the hospital and place on standby until further advised by Operations manager
- Request an immediate assessment of each services capabilities, human resources and needs. Designate a time for follow up meeting
- Re-prioritise existing workloads to accommodate new referrals for followup of 'rapid discharge' patients
- Direct department managers to identify vulnerable patients/clients who will require access to services over next 72 hours
- Report to Operations Manager any high risk patients/clients that may require evacuation and any issues with patients/clients remaining at home that may require assistance
- Report to Operations Manager any patients/clients requiring assistance for repatriation
- Identify Community Health staff available to act as drivers etc and inform Logistics Manager
- Establish a registration and credentialing area for volunteers not employed or associated with the hospital (PMBH Dining Room)
- Ensure appropriate Human Resources personnel involved
- Request an immediate assessment of each services capabilities, human resources and needs. Designate a time for follow up meeting
- Receive, coordinate and forward requests for personnel and materials to the appropriate person
- Liaise with Mental Health Services regarding availability of social work staff to support with IPTASS, psychosocial first aid, grief counselling
- Maintains operational log at all times documenting actions and decisions
- Attend briefings as scheduled
- Ensure staff are able to access adequate breaks
- Prepare report for Operations Manager

#### NOTE:

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- □ ALL STAFF MOVEMENTS ARE TO BE ON THE DIRECTION OF THE HEOC ONLY

# LOGISTICS - PHYSICAL RESOURCES

## Responsibilities:

- Recieve briefing from Logistics Manager
- Brief physical resources staff re status of the incident
- Ensure functionality of emergency generator and other equipment
- Coordinate deployment of additional beds and equipment to surge areas
- Assist with erection of barriers to direct vehicular and pedestrian traffic
- Allocate staff for vehicular control and directing relatives to waiting area etc
- Arrange for adequate stores of oxygen cylinders & trolleys

## SUPPLY

# Responsibilities:

- Intiaite deployment of supply items to nominated surge areas
- Complete inventory of supplies on hand and estimate usage
- Restock areas as required
- Request additional stock and equipment through Logistics Manager

# **HOUSEKEEPING & SECURITY SERVICES**

## Responsibilities:

- Recieve briefing from Logistics Manager
- Attend to facility lockdown in timely manner (under direction of Logistics manager)
- Attend to facility traffic control in timely manner (under direction of Logistics manager)
- Ascertain available stocks for meal delivery and linen supply
- Ensure additional collection of waste and soiled linen in surge areas
- Monitor levels of all equipment and stocks relevant to this function
- Monitor levels of space availability in Morgue
- Ensure refreshments available for visitor and media areas

# NOTE:

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MACKSVILLE HEALTH CAMPUS EMERGENCY RESPONSE PLAN – SECTION 8 CODE BROWN DISASTER PLAN

## **GENERAL ADMINISTRATION**

## **Responsibilities:**

- Recieve briefing from Logistics Manager
- Remain in Front reception and oversee switchboard & front counter duties
- Attend to sensitive queries, crowd control and communication issues
- Identify additional staffing requirements for admission and discharge of patients
- Ensure 2 switchboard operators on duty until surge period has ended
- Ensure normal front desk activities continue as usual
- Maintain location register of patients at all times
- Request assistance of runners via the Logistics Manager, to deliver census information
- Request assistance of social workers via Manager Mental Health Services
- Ensure appropriate direction of telephone enquiries.
- Ensure NO patient enquires are transferred to Emergency Department
- Ensure Fleet vehicles available

# Waiting List Coordinator / Bookings

Cancel/rebook elective surgey under direction of Operations Manager

# **Switchboard Operators**

- Answer all calls promptly
- Connect normal patient & business calls as usual
- Advise callers to Key Executive Personnel of their unavailability refer to Administration Assistant available in Admin office to take messages
- Record all calls for victims on the 'Call Register for Multiple Enquiries' form and advise the caller that they will be given information as it comes to hand
- Screen all calls and ensure <u>NO</u> routine, general, personal or patient query calls are transferred to Emergency Department

# **Front Counter**

- Carry out normal duties
- Where possible, keep visitors away from Emergency and Xray Departments
- Do not become involved in the visitors / relatives of victims situation maintain normal functioning of the front counter service

# **Patient Belongings**

- Ensure all personal effects and clothing (if possible) from casualties are labeled, recorded and kept in a secure area.
- Ensure Valuables are handled in accordance with local policy and stored in the safe.
- Ensure clothing / luggage etc is recorded, bagged, labelled and stored in the (state location).
- Ensure Personal Protective Equipment (gloves/gown) are worn when handling effects that are obviously blood stained

# FLEET COORDINATOR

MACKSVILLE HEALTH CAMPUS EMERGENCY RESPONSE PLAN - SECTION 8 CODE BROWN DISASTER PLAN

# Responsibilities

- Cancel all non-urgent bookings
- Recall vehicles where possible, by contacting the drivers cost centre manager
- Allocate vehicles under the direction of the Logistics Manager
- Note: Additional drivers may be sourced from Housekeeping, maintenance, catering, community health etc under the direction of the Logistics Manager

# IT/COMMUNICATIONS

# Responsibilities:

- Recieve briefing from Logistics Manager
- Ensure HEOC equipment ready for operation
- Ensure availability of additional communication devices or the need to use runners (will need to liaise with Volunteer coordinator to arrange the use of runners)
- Establish availability of IT/Communications staff for afterhours
- Ensure all existing core services provided via the IT Service Department are continued and supported as neccessary



MACKSVILLE HEALTH CAMPUS EMERGENCY RESPONSE PLAN – SECTION 8 CODE BROWN DISASTER PLAN

# **PLANNING - WORKFORCE**

# **Responsibilities:**

- Receive briefing from Planning Manager (if delegate)
- Ascertain current workforce status for all areas
- Ascertain availability of additional personel may involve staff from other NETWORK facilities
- Maintain list of skills of available staff
- Liaise with Operations and Logistics function managers to establish estimated future requirements for 4, 8, 24 and 48 hours
- Establish a registration and credentialing area for volunteers not employed or associated with the hospital
- Develop projected rosters based on information available

# PATIENT FLOW

# Responsibilities:

- Receive briefing from Planning Manager (if delegate)
- Ascertain current hospital inpatient bed status
- Maintain location of patients within the hospital care system at all time
- Liaise with NETWORK hospitals to establish bed availability off site
- Liaise with Nursing and Medical Function Managers on estimate of inpatient beds required and nature of the bed e.g. critical care, surgical, peadiatric etc
- Develop projected patient census for coming 4, 8, 24 and 48 hours

# **TECHNICAL EXPERTS**

## **Responsibilities:**

Will be involved for specific incidents as required e.g. critical infra structure failure. Natural disaster etc.

NSW Ambulance may be required to be one of the experts in regard to patient transport once the scene is cleared

- Receive briefing from Planning Manager
- Maintains operational log at all times documenting actions and decisions
- Attend briefings as scheduled
- Ensure staff are able to access adequate breaks
- Prepare report for Planning Manager

#### **CODE BROWN ACTION CARD**

MACKSVILLE HEALTH CAMPUS EMERGENCY RESPONSE PLAN - SECTION 8 CODE BROWN DISASTER PLAN

# **EMERGENCY DEPARTMENT NUM**

The ED NUM is responsible for the operational management of the department and for the completion of the ED report including casualty numbers and triage categories. This position will be filled by the nominated in - charge RN until the designated NUM arrives.

STAGE	ACTIONS	
	Upon notification of an incident	
	Information required:	
	Incident type	
	Number of casualties     Coverity and area of casualties	
	Severity and ages of casualties     Expected time of arrival of first casualty	
Alert	<ul> <li>Expected time of arrival of first casualty</li> <li>With assistance of Medical Officer(s), identify potential patients for</li> </ul>	
7	discharge or transfer	
	Ensure contact numbers for Health Emergency Operations Centre available and correct	
	Maintain staff on 'Stand By' (if shift change over)	
	Arrange for staff meal/tea breaks as required	
Stand By	Establish emergency telephone number in ward area - and restrict access	
	Ensure all staff informed.	
	<ul> <li>Advise DDON of actual and potential bed availability.</li> </ul>	
	<ul> <li>Identify RN and MO teams for areas – 1 or 2 MO + 2RN for Category 1</li> </ul>	
	casualties, 1MO+ 1RN Category 2 casualties –identifying which beds	
	these category patients will be allocated	
	Identify RN for triage and deployment to green surge area	
	Assign ED Clerk to Triage nurse to log all casualty arrivals	
	Once notified of incident confirmation commence discharge & transfer of	
	patients	
	<ul> <li>Identified ward admissions to be transferred to inpatient units</li> </ul>	
	Patients for discharge to be sent to Agnes Grant Centre	
	Prioritise patient care requirements.	
	Obtain supplies.	
	Prepare to receive casualties.  Paternsia a staffing a surjustra and for a successful as shifts (so saider protected).	
	Determine staffing requirements for succeeding shifts (consider protracted      and a stiff the staff to	
	emergency and skill mix needs) and notify Health Emergency Operations	
	Centre	
	Prepare surge areas as directed	
	Provide information for Health Emergency Operations Centre.	
	Senior nurse to attend nursing briefing sessions	
	Inform staff of briefing information	
	Maintain log of activities	

MACKSVILLE HEALTH CAMPUS EMERGENCY RESPONSE PLAN – SECTION 8 CODE BROWN DISASTER PLAN

STAGE	ACTIONS
	Upon notification of an incident
	Information required:
	Incident type
	Number of casualties
	Severity and ages of casualties  - Severity and ages of casualties - Severity and ages of casualties - Severity and ages of casualties - Severity and ages of casualties - Severity and ages of casualties - Severity and ages of casualties
Call Out	Expected time of arrival of first casualty  Priorities notice to a requirements  Output  Description of a requirements  Output  De
Call Out	Prioritise patient care requirements
	Setup external triage point
	Notify Bed manager of the need to establish Green surge area
	Liaise with Bed Manager re admission destinations
	<ul> <li>Provide information as requested by Health Emergency Operations Centre</li> </ul>
	Receive casualties
	Maintain list of all casualty arrivals and triage categories
	Monitor staffing levels and advise Health Emergency Operations Centre of
	need for additional staff
	Monitor use of consumables
	Senior nurse to attend nursing briefing sessions
	Inform staff of briefing information
	Introduce staff relief arrangements
	Maintain log of activities
Stand	Resume normal patient care activities, as appropriate
Down	All staff to participate in ward debriefing
	Evaluate response following debrief, review & revise action plan in line with
	debrief recommendations

# NOTE:

- □ OPERATIONAL LOGS <u>MUST</u> BE KEPT UP TO DATE
- □ <u>ALL</u> STAFF MOVEMENTS ARE TO BE ON THE DIRECTION OF THE HEOC ONLY

MACKSVILLE HEALTH CAMPUS EMERGENCY RESPONSE PLAN – SECTION 8 CODE BROWN DISASTER PLAN

# EMERGENCY DEPARTMENT DIRECTOR

# Responsibilities:

The ED Director is responsible for the ED's medical resource responses during the activation of this plan and will be responsible for collating medical team reports for forwarding to the Operations Manager. The most senior Medical Officer in the department will maintain this position until the nominated Director arrives

- Review patients currently in ED advise ED NUM re those for discharge and those for admission.
- Ensure discharged patients have appropriate follow up instructions
- Review staff medical skills/experience and allocate to beds according to expertise
- Allocate triage person. Must have understanding of disaster triage. May be a senior experienced ED nurse
- Liaise with DDON re patients requiring retrieval or transfer
- Review medical staffing numbers required and liaise with Director of Medical Services re need for additional skills / medical staff
- Coordinate and prioritise medical imaging, pathology requests, specialist reviews and treatments and transfers to ward/critical care areas

# NOTE:

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MACKSVILLE HEALTH CAMPUS EMERGENCY RESPONSE PLAN - SECTION 8 CODE BROWN DISASTER PLAN

#### EMERGENCY DEPARTMENT MEDICAL TRIAGE OFFICER

# Responsibilities:

A senior registered medical practitioner experienced in triage and emergency services and preferably having attended EMST course will be allocated by Emergency Department Director to work with the Triage Nurse.

 Re-triage all casualties transported to the hospital as they arrive at the Ambulance Entry to the Emergency Department.

"RED" label patients will be triaged to State location

\*\*Definition:\*\* Require immediate life saving interventions

"YELLOW" label patients will be triaged state location

\*\*Definition:\*\* Require surgical or other interventions in 4 -6 hours

"GREEN" label patients will be triaged to the state location

Definition: Casualties whose treatment can safely be delayed for greater than 6 hours

"White" label patients - deceased victims

- In consultation with Police, establish identification or patient number of all casualties upon arrival.
- Continue to triage patients admitted to the department, in consultation with Triage Nurse.
- Allocate theatre priorities.
- Prepare a report and forward to the Operations Manager following stand down of disaster situation.

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MACKSVILLE HEALTH CAMPUS EMERGENCY RESPONSE PLAN - SECTION 8 CODE BROWN DISASTER PLAN

### **EMERGENCY DEPARTMENT CLERK**

#### **Responsibilities:**

- Call in 2nd for the department.
- Contact medical staff as requested by the Director Emergency Department
- Notify switchboard operator in main reception of the telephone numbers to use (i.e. the two on reception desk). All other numbers are to be kept free for urgent calls.
- Complete admission forms, and record and label patient's valuables & belongings.
   If name unknown, use triage label number. Place front sheet and sticky labels with patient's file.
- Call up medical records if applicable.
- Screen unnecessary telephone calls. Refer all telephone and personal enquiries to Hospital Health Emergency Operations Centre (Boardroom).
- Notify triage nurse of arrival of patients other than disaster casualties.
- List names of clerical staff involved and forward to Operations Manager
- Arrange for setup of external triage point i.e. appropriate registration documentation, table, chairs etc.
- Assist Triage Officer. As casualties arrive, record number on triage label and, if known, patient name and date of birth into Disaster Register and onto patient file.
- Following triage and registration, direct "green" patients to (state identified Green area).
- Send copy of Register containing casualties to Hospital Disaster Controller in the Health Emergency Operations Centre
- Ensure each patient within the department has a file with their label number written in it and name and DOB if known. Log valuables & belongings on patient.
- Assist Clerk 1 to enter all patients into the Information System.
- Place front sheets and labels with each patient's file once they are printed. Keep notes with patients,

MACKSVILLE HEALTH CAMPUS EMERGENCY RESPONSE PLAN - SECTION 8 CODE BROWN DISASTER PLAN

#### PERIOPERATIVE SERVICES MANAGER

In the absence of the NUM the next most senior nurse will take control until the arrival of the identified managers

#### Responsibilities:

- In hours -
  - Notify all theatres of Counter Disaster Plan.
  - Cease elective cases to follow if appropriate.
  - Inform Surgeons and Anesthetists to report availability to DDON in the HEOC
  - Prepare theatres.
  - (In consultation with Operations Manager) call in staff if needed to staff all theatres.
  - Excess staff to be deployed as directed by Operations manager
  - Clear / discharge patients from Peri operative area.
- Out of hours -
  - Discuss needs with Operations Manager
  - Call in staff as required.
  - Prepare theatres.
  - Clear patients from Recovery Unit to the wards.
- Receive advice from Pathology re available blood products.
- Liaise with Executive staff regarding patient's condition and as patients are ready to leave department. Bed allocation is via Operations Manager
- Ensure staff have adequate breaks and meal breaks.
- Prepare report and forward to Operations Manager.

#### NOTE:

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# **GENERAL WARDS - NUM'S**

In the absence of the NUM the next most senior nurse will take control until the arrival of the identified managers

#### Responsibilities:

Responsibili STAGE	ACTIONS
Alert	With assistance of Medical Officer(s), identify potential patients for
	discharge or transfer
	Check ward supplies including pharmaceuticals
	Ensure contact numbers for Health Emergency Operations Centre
	available and correct
	Maintain staff on 'Stand By' (if shift change over)
	Arrange for staff meal/tea breaks as required
Stand By	Establish emergency telephone number in ward area - and restrict
	access
	Ensure all staff informed.
	Advise DDON of actual and potential bed availability.
	Once notified of incident confirmation
	commence discharge & transfer of patients
	Patients for discharge to be sent to (identify here the area to
	designated area for pick up)
	Prioritise patient care requirements.
	Immediately accept patients from the Emergency Department.
	Accept transfers from other wards/departments as directed by Bed
	Manager
	Obtain supplies.
	Prepare to receive casualties.
	Determine staffing requirements for succeeding shifts (consider)
	protracted emergency and skill mix needs) and notify Health Emergency
	Operations Centre
	Prepare overflow beds as directed
	Provide information for Health Emergency Operations Centre.
	Senior nurse to attend nursing briefing sessions
	Inform staff of briefing information
	Maintain log of activities
Call Out	Prioritise patient care requirements
	Introduce relief arrangements
	Provide information as requested by Health Emergency Operations
	Centre
	Receive casualties as directed by Bed Manager

MACKSVILLE HEALTH CAMPUS EMERGENCY RESPONSE PLAN – SECTION 8 CODE BROWN DISASTER PLAN

STAGE	ACTIONS		
	On direction of Bed Manager arrange transfer of inpatients to other wards as required. Assistance can be sought from HSA's / Wardspersons and Housekeeping staff via DDON		
	Notify Bed Manager as transfers are completed.		
	<ul> <li>NUM or most senior nurse on duty will keep an accurate list of all patients discharged/transferred - destination, mode of transport and time of discharge.</li> </ul>		
	Monitor use of consumables		
	Senior nurse to attend nursing briefing sessions		
	Inform staff of briefing information		
	Maintain log of activities		
Stand Down	Resume normal patient care activities, as appropriate		
	All staff to participate in ward debriefing		
<ul> <li>Evaluate response following debrief, review &amp; revise action pla debrief recommendations</li> </ul>			

# NOTE:

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- □ ALL STAFF MOVEMENTS ARE TO BE ON THE DIRECTION OF THE HEOC ONLY

# PRIMARY DISCHARGE AREA

#### **Responsibilities:**

- Prepare department to receive patients from clinical units for discharge
- Set up admissions table adjacent to entrance door inside & staff
- Request a list of current medical teams and contact numbers
- Process admissions to the area and maintain a list of all patients' movements. Information must include:
  - o Patient Name / MRN / Residential Address / Phone Number / Next of Kin
  - Diagnosis / Current Health Status
  - Discharge destination / Mode of transport
  - Movements in and out of the area
- Assist nursing staff with the immediate needs of the patients
- Check all patient belongings (luggage/clothing/valuables) and tag with patient details
- Allocate designated area within Education Department to safely store patients belongings until discharged
- Arrange refreshments where required
- Ensure staff have regular breaks
- Maintain a list of all staff participating in the disaster response and forward to the Hospital Disaster Controller following stand down
- Prepare a report and forward to the Operations Manager
- Request mobility aids where required e.g. pelican belts, walkers, wheelchairs

#### NOTE:

- **OPERATIONAL LOGS MUST BE KEPT UP TO DATE**
- ALL STAFF MOVEMENTS ARE TO BE ON THE DIRECTION OF THE **HEOC ONLY**

#### **CODE BROWN ACTION CARD**

MACKSVILLE HEALTH CAMPUS EMERGENCY RESPONSE PLAN - SECTION 8 CODE BROWN DISASTER PLAN

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#### **HEALTH & SECURITY ASSISTANTS / WARDSPERSONS**

#### **Responsibilities:**

All HSA's / Wardspersons will report to the hospital Main Reception area and take directions from Deputy Director of Nursing

#### **Emergency Department Health & Security Assistant**

- Report to Triage Nurse in ED
- Direct all traffic, other than emergency services vehicles, away from the Emergency Department.
- Clear waiting room of all furniture. Place chairs in covered area outside department.

#### DO NOT OBSTRUCT DOORWAYS OR AMBULANCE TRAFFIC

- Bring additional wheelchairs to the front of the department.
- Obtain necessary cleaning equipment from Cleaners' room to clean trolleys used by casualties. Assist Ambulance staff clean trolleys to ensure quick turnaround.
- Direct all enquiries from the media and families to the main reception area.
- Instruct all bystanders to vacate the area.
- Request additional security, if necessary, from Logistics Manager via Bed Manager.
- Receive further instructions from the most senior nurse on duty in the department.

#### **General Wards HSA / Wardsperson**

- Report to the most senior nurse on duty in wards as directed by Deputy Director of Nursing
- Assist with transfer/discharge of patients.
- Assist with ward preparation for casualties.
- Report to most senior nurse on duty for further instructions.

#### **Operating Room Wardsperson**

- Assist Emergency Department HSA until required in OR.
- Receive instructions from the Triage Nurse on duty in the Emergency Department.
- Once required in OR, receive instruction from the most Senior Nurse in OR.

#### NOTE:

- □ OPERATIONAL LOGS <u>MUST</u> BE KEPT UP TO DATE
- ALL STAFF MOVEMENTS ARE TO BE ON THE DIRECTION OF THE
  HEOCONIV

# PATHOLOGY & MEDICAL IMAGING SENIOR REPRESENTATIVE

#### Responsibilities:

- If called-in, report to the Operations Manager in the hospital Front Reception area and sign register.
- Check current supply of blood products.
- Maintain list of issues and/or record all services provided.
- Call in additional staff as necessary.
- Prepare an organisational report and forward to the Operations Manager

#### NOTE:

- □ OPERATIONAL LOGS <u>MUST</u> BE KEPT UP TO DATE
- ALL STAFF MOVEMENTS ARE TO BE ON THE DIRECTION OF THE

 ${\sf MACKSVILLE\ HEALTH\ CAMPUS\ EMERGENCY\ RESPONSE\ PLAN-SECTION\ 8\ CODE\ BROWN\ DISASTER\ PLAN}$ 

# **HOSPITAL**

# **FLOOD**

**Standing Operating Procedure** 

# **AUTHORISATION**

AUTHORISED:					
EO/DON					
DATE:					
General Manager Netw	General Manager Network				
DATE:					
Review Date	<b>Revision Date</b>	Endorsed			

### 1. INTRODUCTION

During a flood event procedures need to be in place to maintain the services of Macksville Hospital to the community. All staff will adhere to these procedures when implemented. The EO/DON of Macksville Hospital is responsible for the decision to implement these procedures in their absence the most senior nurse in the hospital will take on this role. During this period they will be known as the Hospital Disaster Controller.

### 1.1 Purpose

The purpose of this SOP is to outline the actions necessary to maintain services and the positions responsible.

These SOP's when implemented will ensure OH&S compliance for managers and staff, they will also provide guidance for managers to continue to provide services.

- 1. Triggers
- 2. Roles and Responsibilities
- 3. Documentation Required
- 4. Contact Information

## 1.2 Scope

All services provided by and personnel from the Macksville Hospital

#### 1.3 Communication

The Hospital Controller is the key contact on site all information will be from this position to the staff, hospital inpatients and community. The Hospital, controller will at regular intervals have information sessions with staff re situation.

No staff will communicate with the media.

# 1.4 Staffing

During the implementation of this SOP staffing levels need to be maintained to ensure the safety of inpatients remaining and for the provision of emergency services to the community. Based on previous isolation events from flooding there needs to be approximately enough staff **to cover 48hours**, these staff should be either on site or in close proximity to the hospital. To maximise staff efficiency consider flexible rostering Particular attention needs to be paid to skill mix

- Senior Nurse e.g. Manager
- Nursing staff with ED experience
- Midwife if appropriate
- MO
- Ward staff
- HSA
- Kitchen
- Housekeeping
- Clerical
- Maintenance
- Security

	Flood SOP's				
TRIGGER	ROLES	ACTIONS	DOCUMENTATION		
Pre Flood	EO/DON	<ul> <li>Maintain staff lists especially contact numbers and address</li> <li>Liaise with other hospitals in network re staff that may live in Nambucca Valley that could be utilised if they are unable to get to their usual place of employment</li> <li>Maintain local contact numbers for pharmacy, SES, LEMC</li> </ul>			
	Maintenance Manager	<ul> <li>Regular testing of emergency generator</li> <li>Availability of torches, batteries</li> <li>Inventory of medical gas supplies on site</li> </ul>			
Flood Watch	Disaster Controller	Monitor BOM site <u>www.bom.gov.au</u> for further information			
Minor Flood Town Gauge –  • Nuisance flooding to low lying areas	Disaster Controller	<ul> <li>Review consumables on site – food, medical gases, diesel, staffing, pharmacy (especially authority drugs) and linen</li> <li>Initiate communication with local SES unit</li> <li>Document all actions</li> </ul>	Commence log of all actions Enter ProAct alterations e.g. FACS for staff requiring to go home		
<ul><li>May affect some staff availability</li><li>Consider early delivery of</li></ul>	Maintenance Manager	<ul> <li>Review stocks of diesel, torches, batteries on site</li> <li>Ensure emergency generator operational</li> </ul>			
consumables if due in following days	HSS Manager	Review staffing available, food stocks any special dietary requirements of patients and review supply levels			
•	NUM	Ensure emergency equipment operational			
Moderate Flood Town gauge –  • Will affect staff availability	Disaster Controller	<ul> <li>Notify Network GM and MNCLHD HSFAC of implementation of flood SOP's liaise re vulnerable community patients</li> <li>Cancel day surgery if necessary</li> </ul>	Situation Report to be lodged at MNCdcc@ncahs.health.nsw.gov.au		
<ul> <li>Will affect ability to</li> </ul>		Maintain contact with local SES unit	Maintain log of all actions		

	Flood SOP's			
TRIGGER	ROLES	ACTIONS	DOCUMENTATION	
discharge patients  Will need to consider vulnerable clients in the community  May require staff to remain onsite		<ul> <li>Brief managers of impending activation and receive information on stock levels, essential staff available to remain on site (Medical officer, nursing manager, nursing —ED and Midwifery, HSA, clerical staff, HSS kitchen and cleaning staff, maintenance manager), inpatient numbers and relatives on site</li> <li>Notify incoming staff of the need to bring personal items for possible isolation</li> <li>Notify MO on call to relocate to hospital – if appropriate</li> <li>Review NUM list of available staff ensure adequate skill mix available in hospital for cover ED and midwifery staff are essential</li> <li>Notify non essential staff of the need to go</li> <li>Community health nurses to load car with supplies for patients and take car home so service can continue)</li> <li>Review rosters for flexible practices i.e. 4-6 hour shifts</li> <li>Issue MEMO to all staff to monitor use of consumables especially linen</li> <li>Contact local pharmacy – re Methadone requirements</li> <li>Contact accommodation providers for availability of rooms for staff needing to remain in town</li> <li>Identify times for regular staff briefing</li> </ul>	Distribute MEMO to staff re linen use Update ProAct re roster changes and leave Collate fresh produce purchases Accommodation cost for staff	
	Maintenance Manager	<ul><li> If required purchase additional diesel</li><li> Issue mobile phones to all areas of hospital</li></ul>		
	HSS Manager	Identify staff available to remain on site and report to     Hospital controller	Staff availability Purchase of additional fresh produce	

	Flood SOP's			
TRIGGER	ROLES	ACTIONS	DOCUMENTATION	
		<ul> <li>Review food consumables, purchase additional supplies including milk and bread from the supermarket</li> <li>Ensure special dietary requirements available</li> <li>Liaise with Dietician re alternatives for special dietary patients</li> </ul>	Special dietary requirements	
	NUM	<ul> <li>Identify staff available to remain and notify Disaster controller</li> <li>Take inventory of all relatives and visitors remaining at the hospital and notify to Disaster Controller</li> <li>Monitor usage of ward consumables and linen</li> <li>Keep disaster controller abreast of consumable use</li> </ul>	Staff availability Inpatients and relatives list	
	Clerical	<ul> <li>Maintain switchboard managing incoming calls</li> <li>Assist Hospital controller with staff calls – checking staff have made it home, registering calls of staff that have advised they have arrived home safely</li> <li>Ensure all personnel on site sign out when leaving the hospital</li> <li>Ensure all personnel sign in when entering the hospital</li> <li>Assist hospital controller with ProAct entries</li> </ul>	Any calls regarding staff availability Welfare checks from staff In/Out sign on sheet of people leaving the hospital	
<ul> <li>Major Flood</li> <li>Town Gauge</li> <li>Will affect staff availability</li> <li>Will affect ability to discharge patients</li> <li>Will need to consider</li> </ul>	Disaster Controller	<ul> <li>Ensure regular communication with Network GM and HSFAC</li> <li>Monitor inpatients clinical condition for deterioration</li> <li>Request any additional consumables, staff, linen and pharmacy through HSFAC</li> <li>Review staffing arrangements</li> <li>Consider need for rotation of staff – will need to occur</li> </ul>	Situation Report to be lodged at  MNCdcc@ncahs.health.nsw. gov.au  Maintain log of all actions Update ProAct re roster changes and leave Collate fresh produce	

	Flood SOP's			
TRIGGER	ROLES	ACTIONS	DOCUMENTATION	
vulnerable clients in the community  • Will require staff to remain onsite  • Will impact the ability to retrieve critically ill patients  • Will impact staff's welfare and anxiety levels	KOLES	through HSFAC  Provide staff with the ability to contact family  Monitor staff anxiety levels and welfare  Maintain contact with local SES unit  Maintain regular communication with all personnel on site	purchases Accommodation cost for staff In/Out sign sheet Breeches in building integrity including photos	
	Maintenance Manager	<ul> <li>Ensure emergency generator operational</li> <li>Review building integrity and identify any damage/leaks</li> <li>Enact temporary repairs as required</li> <li>Assist as directed by disaster controller</li> </ul>		
	HSS Manager	<ul> <li>Monitor consumable use</li> <li>Advise Disaster controller of any additional requirements for food</li> <li>Provide services to patients and staff</li> <li>Monitor staff welfare and anxiety</li> <li>Report any concerns to HDC re staff welfare</li> </ul>		
	NUM	<ul> <li>Manage provision of clinical care to inpatients</li> <li>Monitor use of consumables including pharmacy items and linen</li> <li>Advise HDC of any deterioration of inpatient's clinical condition</li> <li>Advise HDC of any additional requirements of consumables</li> </ul>		

Flood SOP's				
TRIGGER	ROLES	ACTIONS	DOCUMENTATION	
		Monitor staff anxiety and welfare		
		Report any staff welfare concerns to HDC		
	Clerical	Maintain switchboard		
		Maintain sig in/out sheet		
		Assist HDC as required		
Recovery	Disaster	Notify GM Network and HSFAC	Complete report on the event	
• Roads open= no longer	Controller	Advise all personnel	Collate costs involved	
isolated		Collate staff rosters and ensure ProAct entries completed		
		Review and restock consumables		
		Thank all staff for assistance		
		Recommence all services as required		
		Complete report		
	Maintenance	Identify and document all breeches in the integrity of the	Complete report on building	
	Manager	buildings	damage	
		Restock diesel and batteries as required		
	HSS Manager	Restock consumables and linen as required		
		Ensure all staff rosters reviewed and variances entered into		
		ProAct		
		Complete report for HDC		
	NUM	Provide clinical care to inpatients		
		Restock consumables used		

# **APPENDIX 1**

**PERSONNEL SIGN IN/OUT SHEET**To be completed by all personnel entering and leaving the facility when isolated

NAME	CONTACT NUMBER	TIME IN	TIME OUT	SIGNATURE

#### **APPENDIX 2**

# INUNDATION CHECKLIST

	TASK	RESPONSIBILITY	COMPLETED
	Identification of areas of possible internal inundation	Physical Resources	
	Prepare for inundation	Manager  Physical Description	
	•	Physical Resources	
0	Request sandbags from SES 132500	Manager	
0	Allocate staff member to meet delivery and advise location to be sandbagged		
0	Relocate/raise any chemicals/hazardous materials from buildings that may be at		
	risk of inundation		
0	Ensure sufficient fuel on site for emergency generator		
	Relocate patients and staff to alternate ward	Bed Manager/NUM	
0	Identify which patients will need assistance e.g. wheelchair, bed transfers		
0	Ensure medical records, patient belongings and medications are transferred with		
	patient		
0	Notify relatives that patient being relocated		
0	Notify hospital reception of patient relocations		
	Raise or relocate equipment and consumables	NUM	
0	Ensure all electrical and electronic equipment raised above expected water level		
	or relocated to a safe area if possible		
0	Ensure all power points turned off and cords removed		
0	Ensure pharmacy or pharmacy items especially S4 and S8 secured		
0	Vaccines need to be relocated to an area where the refrigerator is not at risk of		
	inundation		
	Once ward/department secured	Physical Resources	
0	Disconnect power to affected area	Manager	
0	Disconnect gas to affected area	5	
0	Disconnect medical gasses to affected area		

	TASK	RESPONSIBILITY	COMPLETED
0	Open refrigerators or cool rooms before leaving to prevent mould growth		
0	Ensure any remaining medical records is secured above expected inundation		
	level		
	<b>Notify the Community</b>	General Manager	
0	Media release to the community of relocation of ward/department		
0	Notify ASNSW to divert non urgent cases to other facilities		
0	Notify any scheduled admissions, upcoming outpatient appointments of the need to reschedule appointment/admission		

# RETURN TO OPERATIONAL ACTIVITY

	TASK	RESPONSIBILITY	COMPLETED
	Inundation of Buildings has occurred	Physical Resources	
0	Assessment of damage sustained including written and photographic documents	Manager	
0	An engineering assessment may be required of building integrity		
0	Assessment of electrical, gas and medical gasses supply before reinstatement of		
	services with special attention paid to suction, air conditioning units, dialysis,		
	generators and other specialised health infrastructure		
0	Assessment of cleaning required to enable return of patients advice can be sort		
	from Infection Prevention and Control Practitioner and Public Health unit		
	Once Assessments Completed	<b>Physical Resources</b>	
0	Reconnect electrical, gas and medical gas supplies	Manager, General	
0	Ensure all equipment operational, remove from service any damaged equipment	Manager	
	for repair/replacement		
0	Cleaning crews initiated to perform a thorough clean of affected premises		
0	Once cleaning completed return of all relocated equipment and consumables		
0	Document all costs from damage sustained, equipment needing to be repaired or		
	replaced, costs involved in additional clean up and submit written report		
	including photographs to Treasury Managed Fund (TMF) and an IIM's		
	Repatriation of Patients	<b>Bed Manager/NUM</b>	
0	Identify which patients will need assistance e.g. wheelchair, bed transfers		
0	Ensure medical records, patient belongings and medications are transferred with		
	patient		
0	Notify relatives that patient being relocated		
0	Notify hospital reception of patient relocations		
	Notify the Community	General Manager	

TASK	RESPONSIBILITY	COMPLETED
<ul> <li>Media release to the community of repatriation of ward/department</li> </ul>		
<ul> <li>Notify ASNSW that diversion is lifted</li> </ul>		
<ul> <li>Notify any scheduled admissions, upcoming outpatient appointments of the</li> </ul>		
rescheduled appointment/admission time/date		
Complete report for HSFAC	General Manager	